	2017										
Day Month Year Day Month Year to Day Month Year to Day Month Year to Day Month Year or specify period if part year or approved substitute period.											
 Notes to help you prepare this tax return instructions 2017 (the instructions), available on our website ato.gov.au WHEN COMPLETING THIS RETURN Print clearly, using a black or blue pen. Use BLOCK LETTERS and print one character in each box. Image: Model of the structure of the struct											
Trust information											
Tax file number (TFN) Have you attached any other attachments'? See the Privacy note in the Taxpayer's declaration. Yes	s No										
Australian business number (ABN)											
Previous name of trust If the trust name has changed, print the previous name exactly as shown on the last notice of assessment or the last ta	x return lodged										
Current postal address If the address has not changed, print it exactly as shown on the last notice of assessment or the last tax return lodge	ed.										
Suburb/town State/territory	Postcode										
Country if outside Australia											
Postal address on previous tax return	v ratura ladaad										
If the address has changed, print your previous address exactly as shown on the last notice of assessment or the last ta											
Suburb/town State/territory	Postcode										
Country if outside Australia											

The true of the main true Consolidation status Phone number P	-		
e. wi Mig. Mig. Mig. Mig. Chris. generative is a company, print details here including ABN. """"""""""""""""""""""""""""""""""""			
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pe of trust Print the code or presenting the type of trust. Print X if also a charity If code D, write If de date of death. If de d	ust election, write the four-digit incom ear specified of the election (for exam r the 2016–17 income year write 201 revoking or varying a family trust elect int R for revoke or print V for variation omplete and attach the <i>Family trust ele</i>	e income years nple, more election 7). being specifie ion, election or re and If revoking an ection, complete and	specified. If the trustee is making one or specified. If the trustee is making one or specified and complete an <i>Interposed entity vocation 2017</i> for each election. Interposed entity election, print R and statach the <i>Interposed entity election or</i>
If the trust is a managed investment trust, has the trustee made an election into capital account treatment? Yes No any tax payable by the trustee? Yes No Final tax return Yes No No No Pinal tax return Yes No	/pe of trust Print the code representing the type of trust.	Print X if also a charity	If code D , write 1 / 1 / 1
e need your financial institution details to pay any refund owing to you, even if you have provided them to us before. the BSB number, account number and account name below. The relevant instructions.) B number (must be six digits) Account number (
itte the BSB number, account number and account name below. be relevant instructions.) BB number (must be six digits) Count name Description of main business activity Description of main business activity Status of business – print X at label B1, B2 or B3, whichever is the first applicable option, or leave blank. Multiple business B1 Ceased business B2 Consolidation status – print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity Did you sell any goods or services using the internet?	lectronic funds transfer (EFT) /e need your financial institution detail	s to pay any refund owing to you, even	if you have provided them to us before.
B number (must be six digits) Account number Count name Description of main business activity Bustry code Account number Status of business – print X at label B1, B2 or B3, whichever is the first applicable option, or leave blank. Multiple business B1 Ceased business B2 Consolidation status – print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1		r and account name below.	
Count name Description of main business activity dustry code A Status of business - print X at label B1, B2 or B3, whichever is the first applicable option, or leave blank. Multiple business B1 Ceased business B2 Consolidation status - print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1 Did you sell any goods or services using the internet?	, , , , , , , , , , , , , , , , , , ,	Account number	
A A Status of business - print X at label B1, B2 or B3, whichever is the first applicable option, or leave blank. Multiple business B1 Ceased business B2 Commenced business B3 Consolidation status - print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1 Did you sell any goods or services using the internet? Q Yes No			
A A Status of business - print X at label B1, B2 or B3, whichever is the first applicable option, or leave blank. Multiple business B1 Ceased business B2 Commenced business B3 Consolidation status - print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1 Did you sell any goods or services using the internet? Q Yes No			
Status of business - print X at label B1, B2 or B3, whichever is the first applicable option, or leave blank. Multiple business B1 Ceased business B2 Consolidation status - print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1 Did you sell any goods or services using the internet?	Description of main busines	s activity	
Multiple business B1 Ceased business B2 Commenced business B3 Consolidation status – print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1 Did you sell any goods or services using the internet? Q Yes No	dustry code		
Consolidation status – print X at label Z2 if applicable Consolidated subsidiary member Z2 Significant global entity G1 Did you sell any goods or services using the internet? Q Yes No	Status of business – print X a	at label B1, B2 or B3, whichever is t	he first applicable option, or leave blank.
Significant global entity G1 Did you sell any goods or services using the internet? Q Yes No			
Did you sell any goods or services using the internet? Q Yes No	Consolidation status – print X at	label Z2 if applicable Co	onsolidated subsidiary member Z2
			Significant global entity G1
ae 2 Sensitive (when completed) TRUST TAX BETURN	Did you sell any goods or se	ervices using the internet?	Q Yes No
	age 2	Sensitive (when complet	ted) TRUST TAX RETURN 2

Trust TFN



Income excluding foreign income

5 Business	income and	expenses
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.	Dusiness income and expensi	-3			١	WHOLE DOLLARS ONLY		
	Income		Primary production			Non-primary production		Totals
	Gross payments where ABN not quoted				D			
	Gross payments subject to							[]
	Gross payments subject to foreign resident withholding (excluding capital gains)			CODE	В	CODE		
	Assessable government industry payments	Ε	/	/	F			
		3			н			
		_	/					
	Total business income		/					
	Expenses							
	Foreign resident withholding expenses (excluding capital gains)						Ρ	
	Contractor, sub-contractor and						С	
	commission expenses							
	Superannuation expenses						D	
	Cost of sales			/			Е	
	Bad debts						F	
	Lease expenses						G	
	Rent expenses						H	
	Total interest expenses						ï	
	Total royalty expenses						J	
	Depreciation expenses						K	
	Motor vehicle expenses						L	
	Density and maintenance						Л	
	Repairs and maintenance						Μ	
	All other expenses						Ν	
	Total expenses – labels P to N			/			0	
	Reconciliation items		· · · · · · · · · · · · · · · · · · ·					
	Add: Income reconciliation adjustments		/	/			A	
	Add: Expense reconciliation			/			В	
	adjustments Net income or loss		/					
	from business	2	/		R		S	
	Net small business income	V]•≫•		
6	Tax withheld Tax withheld	d	where ABN not quoted	r k	r [R	
			hheld – foreign residen excluding capital gains		ן [],□□□,□□□·◊	R	
TRU	ST TAX RETURN 2017		Sensitive (wh		con	npleted)		Page 3

Г 7	Credit for interest on early p – amount of interest	ayments	w	,
8	Partnerships and trusts Primary production			
	Distribution from partnerships] , · % ,	
	Share of net income from trusts], •∞,	
	Deductions relating to amounts shown at A and Z		, · ×	
	Non-primary production	Net primary produc	ction amount	_,,,,,
	Distribution from partnerships, less foreign income], 🗌 🖓 📈	
	Share of net income from trusts, less capital gains, foreign income and franked distributions] , ∙∞ ,	
	Deductions relating to amounts shown at B and R	·		
	Franked distributions from trusts		, ×	
	Deductions relating to franked Gistributions from trusts in label F	i _ , ,	, .	
		Net non-primary produc		_,,,,,,
	Capital gains from another trust a Amounts of foreign income must			ed at item 21 .
	Share of credits from income Share of credit for tax withheld			
	Share of franking credits from			
	franked distributions Share of credit for TFN amounts],	
	withheld from interest, dividends and unit trust distributions],	
	dit for TFN amounts withheld from obayments from closely held trusts],•	
	Share of credit for tax withheld – foreign resident withholding (excluding capital gains)], ·∞	
9	Rent Gross ren	t F],∞	
	Interest deduction	s G],∞	
	Capital works deduction	s X],∞	
	Other rental deduction	s H],∞	
			Net rent	
10	Forestry managed investme	nt scheme income	•	Q,,,∞
11	Gross interest – including Aus	tralian Government Ioan	interest	J
	TFN amounts withhel from gross interes			
12	Dividends	Unfi	ranked amount	K
		Fi	ranked amount	
			Franking credit	
	TFN amounts withhele from dividend	s N L, L L , L L	•	
Pag	ge 4	Sensitive (whe	en completed)	TRUST TAX RETURN 2017

Г	Trust TFN
13	Superannuation lump sums and employment termination payment Death benefit superannuation lump sum where the beneficiary is a non-dependant Death benefit employment termination payment where the beneficiary is a dependant Death benefit employment termination payment where the beneficiary is a non-dependant Taxable component Y Taxable component Y Y
14	Other Australian income – give details Type of income Excepted net income Image: Strength of the strengt of the strength of the strength of the strength of the strength
15	Total of items 5 to 14 Add the boxes.
	eductions Deductions relating to: Australian investment income P
16	Franked distributions R , , , , , , , , , , , , , , , , , ,
	Forestry managed investment scheme deduction D , , , , , , , , , , , , , , , , , ,
18	Other deductions – show only deductions not claimable at any other item Name of each item of deduction Amount Image: Amount
19	Total of items 16 to 18
20	Net Australian income or loss Subtract item 19
21	- other than capital gains from item 15. Capital gains Do you need to complete a Capital gains tax (CGT) schedule 2017? Did you have a CGT G Yes No Answer Yes at G if the trust had an amount of capital gains from another trust. Have you applied an M Yes No No Oredit for foreign resident capital gains B D D B D
TRU	ST TAX RETURN 2017 Sensitive (when completed) Page 5

Fc	oreign income
22	Attributed foreign income Did you have overseas branch operations or a direct or indirect interest in a foreign trust, foreign company, controlled foreign entity or transferor trust? If you answered Yes at label S, complete and attach an International dealings schedule 2017. Do you need to complete a Losses schedule 2017?
23	Other assessable foreign source income
	- other than income shown at item 22 Gross B , D , D , D , N et V , D , D , D , W /
	Foreign income tax offset Z , , . . Also include at label D Australian franking credits from a New Zealand franking company that you have received indirectly through a partnership or trust. Australian franking credits from a New Zealand franking company D , . .
24	Total of items 20 to 23 Add the boxes
25	Tax losses deducted C , , , , , , , , , , , , , , , , , ,
26	Total net income or loss Subtract item 25 from item 24. Image: Comparison of the state
27	Losses information
	A Losses schedule 2017 must also be completed and attached if the sum of labels U and V is greater than \$100,000 or if the trust is a listed widely held trust and failed the majority ownership test for a loss. Tax losses carried forward to later income years Net capital losses carried forward to later income years
28	Landcare and water facility tax offset brought forward from prior years G
O \ 29	verseas transactions / thin capitalisation Overseas transactions Was the aggregate amount of your transactions or dealings with international related parties (including the value of any property/service transferred or the balance of any loans) greater than \$2 million? W Yes No
	Did the thin capitalisation provisions affect you? O Yes No
	Royalty expenses overseas E, , , , , , , , , , , , , , , , , , ,
	If you answered Yes at label W or O or completed D or E , complete and attach the International dealings schedule 2017.
	Was any beneficiary who was not a resident of Australia at any time during the income year, 'presently entitled' to a share of the income of the trust?

Г		
•	Transactions with specified countries	
	Did you directly or indirectly send to, or receive from, one of the countries specified in the instructions, any funds or property or	
	Do you have the ability or expectation to control, whether directly or indirectly, the disposition of any	
	funds, property, assets or investments located in, or located elsewhere but controlled or managed from one of those countries?	
30	Personal services income	
	Does your income include an individual's N Yes No personal services income (PSI)?	
	Total amount of PSI included at item 5 income labels	
	Total amount of deductions against PSI B, , , , , , , , , , , , , , , , , , ,	
	Did you satisfy the results test in respect of any individual?	
Do	ou hold a personal services business (PSB) determination in respect of any individual? D Yes No	
	For any individual for whom you did not satisfy the results test or hold a PSB determination, and each source of their PSI income yielded less than 80% of their total PSI, indicate if you satisfied any of the	
	following personal services business tests – print X in the appropriate box(es).	
	Unrelated clients test E1 Employment test E2 Business premises test E3	
Ta	xation of financial arrangements	
	Taxation of financial arrangements (TOFA)	
	Total TOFA gains M	· %
		-84
		~
K	ey financial information	
32	All current assets F	
33	Total assets G G , C , C , C , C , C , C , C , C , C	
34	All current liabilities	
0.5		
35	Total liabilities J	

Business and professional items

Г

36	Business name	e of main	business												
37	Business addre	ess of mai	in husiness][][][][
															_
Subi	urb/town										State/ter	ritory	Post		
20	Opening stock	С		· 🕅	<u>a</u>	43	Total	salary	and					•%	
00	opening stock				×			exper							/ L
39	Purchases and other costs	B		• %	4	44		nents to ciated		ns I				•90	
		г				_E 45	Fring emple	e bene	fit		т			•%	
40	Closing stock	D		•>	<		contr	ibutior			•				
41	Trade debtors	E		•>	4	46		id pres ement			(-90	
		L			_	47	- T	te com							
42	Trade creditors	• H		•8	2	47	electi	ng sto on	СК		Y	es	No		
48	48 Capital allowances														
	Depreciating ass		ducted in this g assets first d		year A \$.	R			
	-					_ ,∟		,∟_∟∟	,						
	Other of		g assets first d		B \$,		_,	,			R			
	efi		you self-asses of any of these		C Ye	es	No								
	For all depreciati	ng assets													
	Did y any	ou recalcula of your as	ate the effectiv sets this incon	ve life for ne year?	D Ye	es	No								
	Total adjusta	able values	at end of inco	me year	E \$.	R			
	Assessa	Ible balancir	ng adjustment ble depreciatin	s on the	F \$.	R			
			ng adjustment		G \$, 			Ø			
	disposa	l of intangib	e depreciatin	g assets		_ ,∟		╶┘,└──╎└	_∟∟,						
	Termination value	e of intangib	le depreciatin	g assets	H \$ _	,_		,L	,		¢	Ø			
	Termination	value of oth	er depreciating	g assets	I \$,_		_,	\square		J-0	Ø			
		Ded	luction for proj	ect pool	J \$.	R			
		Sect	tion 40-880 de	eduction	K \$						-	R			
	Landcare ope	erations and	deduction for	r decline	L \$			╶┙┑└══╜┖ ╶┨╶┎═╢┖	,][].r	R			
	in value o	of water fac	ility, fencing as fodder stora		-Ψ_	,			,						

F		
• 49	Small business entity simplified depreciation	
	Deduction for certain assets	A,,×
	Deduction for general small business pool	B,,∞
50	National rental affordability schemeNational rental affordability scheme tax offset entitlement	F,,
51	Other refundable tax offsets	G , , , , , , , , , , , , , , , , , , ,
52	Non-refundable carry forward tax offsets	
53	Medicare levy reduction or exemption	CODE
	Spouse's 2016–17 taxable income – if nil write '0'	Full Medicare levy exemption – number of days
	Number of dependent children and students	Half Medicare levy exemption – number of days
	Medicare levy surcharge and private health insurance tax off If the trust is liable for the Medicare levy surcharge or entitled to the	
54	Income of the trust estate A	

Statement of distribution

55 Statement of distribution

Distribution details

Complete the distribution details on the following pages for **BENEFICIARY 1** to **5** if required, and for **Income to which no beneficiary is presently entitled and in which no beneficiary has an indefeasible vested interest, and the trustee's share of credit for tax deducted, if it applies.**

If there are more than five beneficiaries see the instructions for more information.

Note: It is not an offence not to quote a TFN for a beneficiary. However, TFNs help the ATO to correctly identify each beneficiary's tax records. The ATO is authorised by the *Income Tax Assessment Act 1936* and the *Income Tax Assessment Act 1997* to ask for information in this tax return. We need this information to help administer the tax laws. To make a correct Trustee Beneficiary (TB) statement you must quote the TFN of a resident trustee beneficiary of a closely held trust.

Note: If the trust needs to provide annual reports under the Trustee Beneficiary Rules or the TFN withholding rules you will be able to do so by completing the information in the statement of distribution.

55 Statement of distribution – continued																														
BENEFICIARY 1 Tax file number (TFN)																														
		E			1		1	Se	e the	e Pri	vacy	y not	e in	the	Тахр	ayer	's de	eclara	ition.						1					
Title: Mr	Mrs		Miss		M	s	Othe	er																						
Surname or fa	imily han																													
First given nan	ne ne						IL	JL][」]]	Oth	l ner gi l	iven	nan	nes][_][_	IL 	/L] 		7	I)r][
]																				
OR NON-INDIVIDUAL NAME (company, partnership, trust etc.)																														
Residential	addre	ss fo	or in	divi	dua	als o	r bus	ine	ss a	ddi	res	s fo	r no	on i	ndiv	vidu	als									7][]	
Suburb/town																							St	ate/	territo) pry		Postco	de	
Country if outs																									ia only)		[(Austr	alia or]] ly)
																														.,
Date of birth	h] /	Mc	onth	/		Year																							
C	Asse alculati	essm on c	nent ode	V											Т	FN	am	ount	s w	ithh	neld	Е						•		
of	Share o [:] f the tru	f inco st es	ome tate	W								•0	Q	Sha wit	re of thhe	cre Id fr	dit f om	or TF payr	N ar nent	mol ts fr	unts rom	0								
Share	of cred thheld -	lit for	tax									-					clo	sely	helc	d tru	usts	F						•>×	-	
	lent with	hholo	ding	Ľ	·L							•>	Q		Sh	are	of	redit	ipita for	-										
Australian		g cre	dits	N	[×				Un	re	side	nt ca olding	apita	al ga	ains	Z						-		
	nking c	omp	any		_								oss				At	ribut			eign Ime	G						-94	1	
Share of	pro	Prin oduc	tion	Α						-0	×]/[OSS					ner a	asse	ssa	able	н						•94		
income		-prin oduc								-0	×]/[f	orei	-	sour ⁻ oreig				Ξ.							<u>)</u> /	
Credit where A	for tax	with	held	С	; [-(×]			c				tax	< of	fset	1						-		
	ed distr	÷									×]		affo		bility	/ SC	f Nat heme	e tax	x of	fset	R						-		
				-]							distr	ribu	ited	Μ						•04		CODE
	Frankir	ng cr	edit	D						•								non- vard				т						•]/	
Small busi						set i	nforn	nati	on																					
	Sha bus	re of sines	net ss in	sma com	all ne	Y						۰Þ	٩																	
Non-reside		n <mark>efic</mark> (3) as					l info	orm	atio	n		-						0	28(4		ssess	abl	0							
	590	(0) a		nou		J						•0	٩					55	90(4	-) ac		IOUN		K					-	80
TB stateme For each tru					dica	te w	hethe	er yc	bu w	/ill b	e m	nakii	ng a	a TE	3 sta	iten	nen	t:			тв	sta	ten	nen	t?	,	res		No	
Та	ax prefe	erred	am	oun	ts	P [•0	٩					sha	Unt re o	taxe of ne	ed pa et inc	art c	of e	Q					-	8
Annual Tru						t info	orma	tior	ו																					
Distribu	ution fro atutory	om o inco	rdin	ary durir	or ng	S						•Ø	٩				witł				amc baym			T [-	80
Page 10									S	Sen	siti	ve	(wł	nen	cor	npl	ete	d)							т	RUS	Τ ΤΑΧ	RETU	IRN :	2017

Sensitive (when completed)

55 Statement of distribution – continued										
BENEFICIARY 2 Tax file number (TFN)										
	See the Privacy note in the Taxpayer's declaration.									
Title: Mr Mrs Miss Ms	Other									
Surname or family name										
	Other given names									
OR										
NON-INDIVIDUAL NAME (company, p	partnership, trust etc.)									
Residential address for individuals or	business address for non individuals									
Suburb/town		State/territory Postcode								
Country if outside Australia		(Australia only) (Australia only)								
Date of birth	Year									
Assessment V	TFN amounts withheld	E								
Share of income of the trust estate	• Share of credit for TFN amounts withheld from payments from	0 ·								
Share of credit for tax withheld – foreign	closely held trusts Capital gains	F ·%								
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Share of production A	Loss foreign source income	H								
	• Foreign income tax offset	· ·								
Credit for tax withheld C	Share of National rental	R ·								
Franked distributions	Affordability scheme tax offset Exploration credits	M ·%								
Franking credit D	distributed Share of non-refundable carry forward tax offsets	T · /								
Small business income tax offset in										
Share of net small business income Y	•%									
Non-resident beneficiary additional s98(3) assessable amount J	s98(4) asses	sable K								
TB statement information For each trustee beneficiary, indicate wh	ether you will be making a TB statement: TB	statement? Yes No								
Tax preferred amounts	->>> Untaxed p share of net in	art of come Q ·%								
Annual Trustee Payment report info										
Distribution from ordinary or statutory income during	• Total TFN am withheld from payr									
income year TRUST TAX RETURN 2017	Sensitive (when completed)	Page 11								

55 Stater	ment of	dis	trib	utio	n –	con	tinu	ed																				
BENEFICI	ARY 3	Tax	k file	nur	nbe	r (TF	N)]]					Enti	ty cc	de	U						
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Share of income	prod Non-p	luctio	on 4							×]/[]/[oss		f	orei	Otl an	her a sour	assi rce	essa incc	able ome	н						-90]/[]
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Page 12								5	Sen	siti	ve	(wł	nen	cor	nple	ete	d)							TR	UST	TAX F	ETUR	N 2017

Sensitive (when completed)

55 Statement of distribution – continued											
BENEFICIARY 4 Tax file number (T	FN) Entity ca	ode U									
	See the Privacy note in the Taxpayer's declaration.										
	Dther										
Surname or family name											
OR											
NON-INDIVIDUAL NAME (company, pa	rtnership, trust etc.)										
Residential address for individuals or b	business address for non individuals										
Suburb/town		State/territory Postcode									
Country if outside Australia		(Australia only) (Australia only)									
Date of birth											
Assessment V	TFN amounts withheld	E·									
Share of income W	Share of credit for TFN amounts withheld from payments from	0 ·									
Share of credit for tax withheld – foreign	closely held trusts Capital gains	F ·X									
resident withholding (excluding capital gains)	Share of credit for foreign	Ζ ·									
Australian franking credits from a New Zealand	• X resident capital gains withholding amounts										
franking company	Loss Attributed foreign income	G ·X									
Share of production	Loss foreign source income	H ·% /									
production B	Foreign income tax offset	· ·									
Credit for tax withheld C where ABN not quoted	Share of National rental	R ·									
Franked distributions	Affordability scheme tax offset Exploration credits										
Franking credit D	distributed Share of non-refundable										
	carry forward tax offsets										
Small business income tax offset info	ormation •%										
business income											
Non-resident beneficiary additional in s98(3) assessable amount J	s98(4) asses	nount K									
TB statement information For each trustee beneficiary, indicate whe	ther you will be making a TB statement: TE	statement? Yes No									
Tax preferred amounts	• Untaxed p share of net in	part of Q ·%									
Annual Trustee Payment report inform											
Distribution from ordinary or statutory income during	• M Total TFN am withheld from payr										
income year TRUST TAX RETURN 2017	Sensitive (when completed)	e (when completed) Page 13									

55 Stater	nent of	dis	strik	outi	on	1 – C	ontin	uec	d																					
BENEFICI	ARY 5	Та	x fil	e n	um	ber	(TFN)]									Enti	ity cc	ode	U							
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NON-INDIV			IE (d	com	ipa	ny, p	bartn	ersh	nip,	tru	ist (etc.)][][
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Date of birth	Day	/[Mon	ith	/ [Year								-															
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Page 14									S	en	siti	ive	(wł	nen	cor	npl	ete	d)							TF	RUST	Γ ΤΑΧ	RETU	RN 2	017

Sensitive (when completed)

Income to which no beneficiary is presently entitled and in which no beneficiary has an indefeasible vested interest, and the trustee's share of credit for tax deducted.

Assessmer calculation coc		'		TFN amounts withheld	Е	•			
Share of incom of the trust estat	e W	·	•90	Share of credit for TFN amounts withheld from payments from	0	•			
Share of credit for ta withheld – foreig resident withholdin	n L] ∙ ⊠	closely held trusts Capital gains	F	×.			
excluding capital gain) Australian franking credit from a New Zealan	·	بهر.		Share of credit for foreign resident capital gains withholding amounts	Z	•			
franking compar	у У л	- 1	- LOS:	s Attributed foreign income	G	·%	LOSS		
Share of productic income Non-prima	n 🦰		/ [LOS:] /[s Other assessable foreign source income	H	·%			
Credit for tax withhe	n 🗖] / []	Foreign income tax offset	1	•			
where ABN not quote Franked distributior	u -]]	Share of National rental affordability scheme tax offset	R	•			
Franked distribution]	Share of other refundable tax offsets	X	•	CODE		
Franking Crec]	Share of non-refundable carry forward tax offsets	Т	· ·			
56 Choice for resident trustee to be assessed to capital gains on behalf of beneficiaries									
As	sess	ment calculation code \mathbf{X}							
Amount of capital gain	ns on d on	which the trustee has Y				⋈ •			

Items 57 and 58 must be answered for all trusts - if you answer yes to any of these questions, answer Yes to the 'other attachments' question on page 1 of this tax return.

57 Beneficiary under legal disability who is presently entitled to income from another trust

Was any beneficiary in this trust, who was under a legal disability on 30 June 2017, also presently entitled to a share of the income of another trust? If yes, or the answer is not known, furnish the information requested in the instructions.

Yes No	
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58 Non-resident trust	If yes, state the amount of in	
Is the trust a	No derived outside Australia to v no beneficiary is presently er	which titled.

non-resident trust?

res |

no beneficiary is presently entitled. Print NIL if applicable.

DECLARATIONS

TAXPAYER'S DECLARATION

Important

Before making this declaration check to ensure that all income has been disclosed and the tax return, all attached schedules and any additional documents are true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the ATO. The income tax law imposes heavy penalties for false or misleading statements in tax returns. **This declaration must be signed by a trustee or public officer**.

Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each beneficiary in our records. It is not an offence not to provide the TFNs. However, if the TFNs are not provided, it could increase the chance of delay or error in each beneficiary's assessment.

Taxation law authorises the ATO to collect information including personal information about the person authorised to sign the declaration. For information about your privacy go to **ato.gov.au/privacy**

DECLARATION:

I declare that the information on this tax return, including any attached schedules and additional documentation is true and correct.

Signature

Olghataro		
		Day Month Year
Hours taken to prepare and complete	this tax return	
TAX AGENT'S DECLARATION		
I,		
given me a declaration stating that the me to lodge the tax return.	repared in accordance with information suppli information provided to me is true and correc	
Agent's signature		Day Month Year
Contact name		
Agent's phone number (include area c	ode) Agent's reference numbe	er Office use only Indics X