

**Trust tax return****2019**

Day Month Year

Day Month Year

to

or specify period if part year or approved substitute period

RN: 100017663ET

Notes to help you prepare this tax return are provided in the Trust tax return instructions 2019 (the instructions), available from the website [www.ato.gov.au](http://www.ato.gov.au)

**Tax file number (TFN)**

505 760 331

Have you attached any  
'other attachments'?

No

See the Privacy note in the Taxpayer's declaration.

**Name of trust**

BPP Unit Trust 41

**Australian business number (ABN)**

36 274 499 515

**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 tax 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 lodged.

PO Box 247

EVERTON PARK

QLD

4053

**Postal address on previous tax return**

If the address has changed, print your previous address exactly as shown on the last notice of assessment or the last tax return lodged.

**Full name of the trustee to whom notices should be sent**

- If the trustee is an individual, print details here.

Title-for example, Mr, Mrs, Ms, Miss

Surname or family name

Given names

- If the trustee is a company, print details here including ABN.

Name

ABN

**Daytime contact phone number**

Area code

07

Telephone number

33553990

**Family trust election status**

If the trustee has made, or is making, a family trust election, write the four-digit **income year specified** of the election (for example, for the 2018-19 income year write 2019).

If revoking or varying a family trust election, print **R** for revoke or print **V** for variation and complete and attach the Family trust election, revocation or variation 2019.

**Interposed entity election status**

If the trustee has an existing election, write the earliest income year specified. If the trustee is making one or more elections this year, write the earliest income year being specified and complete an Interposed entity election or revocation 2019 for each election.

If revoking an interposed entity election, print **R** and complete and attach the Interposed entity election or revocation 2019.

**Type of trust**

Print the code representing the type of trust.

Print X if also a charity

If code D, write the date of death.

Day Month Year

**Managed Investment trusts**

If the trust is a managed investment trust, has the trustee made an election into capital account treatment?

Print Y for yes or N for no.

**Is any tax payable by the trustee?**

Print Y for yes or N for no.

**Final tax return****Electronic funds transfer (EFT)**

We need your financial institution details to pay any refund owing to you, even if you have provided them to us before.

Write the BSB number, account number and account name below.

(See relevant instructions.)

BSB number

must be six digits

Account number

Account name

**1 Description of main business activity**

Industry code

**2 Status of business**- print X at label **B1**, **B2** or **B3**, whichever is the first applicable option, or leave blank.

Multiple business

Ceased business

Commenced business

**Consolidation status**- print X at label **Z2** if applicable

Consolidated subsidiary member

**Entity status**- print X at label **G1** if applicable

Significant global entity

**4 Did you sell any goods or services using the internet?**

Print Y for yes or N for no.

**Income** excluding foreign income**5 Business income and expenses****Income**

Primary production

Non-primary production

Totals

Gross payments  
where ABN not quoted**C****D**Gross payments subject to  
foreign resident withholding  
(excluding capital gains)**B**Assessable government  
industry payments**E****F**

Other business income

**G****H****Total business income**

0

0

0

**Expenses**Foreign resident withholding  
expenses (excluding capital gains)**P**

0

Contractor, sub-contractor and  
commission expenses**C**

Superannuation expenses

**D**

Cost of sales

**E**

Bad debts

**F**

Lease expenses

**G**

Rent expenses

**H**

Total interest expenses

**I**

Total royalty expenses

**J**

Depreciation expenses

**K**

Motor vehicle expenses

**L**

Repairs and maintenance

**M**

All other expenses

**N****Total expenses - labels P to N****O**

0

**Reconciliation items****Add:** Income reconciliation  
adjustments**A****Add:** Expense reconciliation  
adjustments**B****Net income or loss  
from business****Q****R****S**

0

Net small business income

**V****6 Tax withheld**

Tax withheld where ABN not quoted

**T**Credit for tax withheld - foreign resident  
withholding (excluding capital gains)**U**

**7 Credit for interest on early payments** - amount of interest**W** **8 Partnerships and trusts****Primary production**Distribution from partnerships **A**  / Share of net income from trusts **Z**  / Deductions relating to amounts shown **A** and **Z** **S** Net primary production amount  / **Non-primary production**Distribution from partnerships,  
less foreign income **B**  / Share of net income from trusts, less capital  
gains, foreign income and franked distributions **R**  / Deductions relating to amounts shown at **B** and **R** **T** Franked distributions from trusts **F** Deductions relating to franked  
distributions from trusts in label **F** **G** Net non-primary  
production amount  / Capital gains from another trust and net foreign capital gains need to be included at item 21.  
Amounts of foreign income must be included at item 22 or 23.**Share of credits from income**Share of credit for tax withheld  
where ABN not quoted **C** Share of franking credit from  
franked distributions **D** Share of credit for TFN amounts withheld from  
interest, dividends and unit trust distributions **E** Credit for TFN amounts withheld from  
payments from closely held trusts **O** Share of credit for tax withheld  
- foreign resident withholding  
(excluding capital gains) **U** **9 Rent**Gross rent **F**  23,539Interest deductions **G**  35,757Capital works deductions **X**  5,098Other rental deductions **H**  49,136Net rent  66,452 /  L**10 Forestry managed investment scheme income****Q** **11 Gross interest** - including Australian Government loan interest**J**  0TFN amounts withheld from gross interest **I**  0.00**12 Dividends**Unfranked amount **K**  0Franked amount **L**  0Franking credit **M**  0TFN amounts withheld from dividends **N**  0.00

**13 Superannuation lump sums and employment termination payments**

Death benefit superannuation lump sum where the beneficiary is a non-dependant	Taxed element	<b>V</b>	<input type="text"/>
	Untaxed element	<b>W</b>	<input type="text"/>
Death benefit employment termination payment where the beneficiary is a dependant	Taxable component	<b>X</b>	<input type="text"/>
Death benefit employment termination payment where the beneficiary is a non-dependant	Taxable component	<b>Y</b>	<input type="text"/>

**14 Other Australian income - give details**

Type of income	Excepted net income	<input type="text"/>	<b>O</b>	<input type="text"/>	/	<input type="text"/>
----------------	---------------------	----------------------	----------	----------------------	---	----------------------

**15 Total of items 5 to 14**Add the  boxes  66,452 /  L**Deductions****16 Deductions relating to:**Australian investment income **P** 

Deductions relating to franked distributions should not include deductions included at G item 8

Franked distributions **R** **17 Forestry managed investment scheme deduction****D** **18 Other deductions - show only deductions not claimable at any other item****Q** 

Name of each item of deduction	Amount
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**19 Total of items 16 to 18****20 Net Australian income or loss - other than capital gains**Subtract item 19 from item 15 **\$**  66,452 /  L**21 Capital gains**Do you need to complete a *Capital gains tax (CGT) Schedule 2019*?

Did you have a CGT event during the year?

**G**  NAnswer yes at **G** if the trust had an amount of capital gains from another trust.

Have you applied an exemption or rollover?

**M** Type **Y** for yes or **N** for no.

Code

Net capital gain

**A** 

Credit for foreign resident capital gains withholding amounts

**B**

**Foreign 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?

**S**

N

Print Y for yes or N for no.

Listed country

**M**

Unlisted country

**X**

If you answered Yes at label **S** complete and attach an *International dealings schedule 2019*.  
Do you need to complete a *Losses schedule 2019*?

**23 Other assessable foreign source income** - other than income shown at item 22

Also include at label **D** Australian franking credits from a New Zealand franking company that you have received indirectly through a partnership or trust.

Gross

**B**

Net

**V**Foreign income  
tax offset**Z**Australian franking credits from a  
New Zealand franking company**D****24 Total of items 20 to 23**

Add the boxes

66,452

/L

**25 Tax losses deducted****C****26 Total net income or loss**

Subtract item 25 from item 24.

66,452

/L

**27 Losses information**

A *Losses Schedule 2019* 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**U**

66,452

Net capital losses carried  
forward to later income years**V****28 Landcare and water facility tax offset**Landcare and water facility tax offset  
brought forward from prior years**G****Overseas transactions / thin capitalisation****29 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**

N

Print Y for yes or N for no.

Did the thin capitalisation provisions affect you?

**O**

N

Print Y for yes or N for no.

Interest expenses overseas

**D**

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 2019*

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?

**A**

N

Print Y for yes or N for no.

If you answered Yes at label A, attach the information requested in the instructions.

**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?

**C****N**Print Y for yes  
or N for no.**30 Personal services income**

Does your income include an individual's personal services income? **N** **N** Print Y for yes  
or N for no.

Total amount of PSI included  
at item 5 income labels **A**

Total amount of deductions against  
PSI included at item 5 expense labels **B**

Did you satisfy the results test in respect of any individual? **C** Print Y for yes  
or N for no.

Do you hold a personal services business (PSB)  
determination in respect of any individual? **D** Print Y for yes  
or N for 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**☐**Taxation of financial arrangements****31 Taxation of financial arrangements (TOFA)**Total TOFA gains **M****N**Total TOFA losses **N****N****Key financial information****32 All current assets****F**

39,616

**33 Total assets****G**

1,913,531

**34 All current liabilities****I**

700

**35 Total liabilities****J**

930,700

**Business and professional items****36 Business name of main business**


**37 Business address of main business**

	A

<b>38 Opening stock</b> <span style="background-color: black; color: white; padding: 2px 5px;">C</span> <input style="width: 100px;" type="text"/>	<b>43 Total salary and wage expenses</b> <span style="background-color: black; color: white; padding: 2px 5px;">L</span> <input style="width: 100px;" type="text"/> <small>CODE</small>
<b>39 Purchases and other costs</b> <span style="background-color: black; color: white; padding: 2px 5px;">B</span> <input style="width: 100px;" type="text"/>	<b>44 Payments to associated persons</b> <span style="background-color: black; color: white; padding: 2px 5px;">M</span> <input style="width: 100px;" type="text"/>
<b>40 Closing stock</b> <span style="background-color: black; color: white; padding: 2px 5px;">D</span> <input style="width: 100px;" type="text"/> <small>CODE</small>	<b>45 Fringe benefit employee contributions</b> <span style="background-color: black; color: white; padding: 2px 5px;">T</span> <input style="width: 100px;" type="text"/>
<b>41 Trade debtors</b> <span style="background-color: black; color: white; padding: 2px 5px;">E</span> <input style="width: 100px;" type="text"/>	<b>46 Unpaid present entitlement to a private company</b> <span style="background-color: black; color: white; padding: 2px 5px;">Y</span> <input style="width: 100px;" type="text"/> <small>CODE</small>
<b>42 Trade creditors</b> <span style="background-color: black; color: white; padding: 2px 5px;">H</span> <input style="width: 100px;" type="text"/>	<b>47 Trading stock election</b> <span style="background-color: black; color: white; padding: 2px 5px;"></span> <input style="width: 30px;" type="text"/> <small>Print Y for yes or leave blank.</small>

**48 Capital allowances****Depreciating assets first deducted in this income year**

Intangible depreciating assets first deducted A

Other depreciating assets first deducted B

Have you self-assessed the effective life of any of these assets? C  Print Y for yes or N for no.

**For all depreciating assets**

Did you recalculate the effective life for any of your assets this income year? D  Print Y for yes or N for no.

Total adjustable values at end of income year E

Assessable balancing adjustments on the disposal of intangible depreciating assets F

Deductible balancing adjustments on the disposal of intangible depreciating assets G

Termination value of intangible depreciating assets H

Termination value of other depreciating assets I

Deduction for project pool J

Section 40-880 deduction K

Landcare operations and deduction for decline in value of water facility, fencing asset and fodder storage asset L



**49 Small business entity simplified depreciation**Deduction for certain assets **A** Deduction for general  
small business pool **B** **50 National rental  
affordability scheme**National rental affordability  
scheme tax offset entitlement **F** **51 Other refundable tax offsets****G**  **52 Non-refundable carry forward tax offsets**Early stage venture capital limited partnership tax offset **H** Early stage investor tax offset **I** **53 Medicare levy reduction or exemption**Spouse's 2018-19 taxable  
income - if nil write '0' **A** Number of dependent  
children and students **B** Full Medicare levy exemption  
- number of days **C**   CODEHalf Medicare levy exemption  
- number of days **D** **Medicare levy surcharge and private health insurance tax offset**

If the trust is liable for the Medicare levy surcharge or entitled to the private health insurance tax offset, refer to the instructions.

**54 Income of the trust estate****A**  0**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 Tax 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)**

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.

Assessment calculation code	<b>V</b>	<input type="text"/>	Capital gains	<b>F</b>	<input type="text"/>
Share of income of the trust estate	<b>W</b>	<input type="text"/>	Share of credit for foreign resident capital gains withholding amounts	<b>Z</b>	<input type="text"/>
Share of credit for tax withheld – foreign resident withholding (excluding capital gains)	<b>L</b>	<input type="text"/>	Attributed foreign income	<b>G</b>	<input type="text"/>
Australian franking credits from a New Zealand franking company	<b>N</b>	<input type="text"/>	Other assessable foreign source income	<b>H</b>	<input type="text"/>
			Foreign income tax offset	<b>I</b>	<input type="text"/>
Share of income			Share of National rental affordability scheme tax offset	<b>R</b>	<input type="text"/>
Primary production	<b>A</b>	<input type="text"/>	Share of other refundable tax offsets	<b>X</b>	<input type="text"/>
Non-primary production	<b>B</b>	<input type="text"/>	Early stage venture capital limited partnership tax offset	<b>T</b>	<input type="text"/>
Credit for tax withheld where ABN not quoted	<b>C</b>	<input type="text"/>	Early stage venture capital limited partnership tax offset carried forward from previous year	<b>K</b>	<input type="text"/>
Franked distributions	<b>U</b>	<input type="text"/>	Early stage investor tax offset	<b>J</b>	<input type="text"/>
Franking credit	<b>D</b>	<input type="text"/>	Early stage investor tax offset carried forward from previous year	<b>M</b>	<input type="text"/>
TFN amounts withheld	<b>E</b>	<input type="text"/>			
Share of credit for TFN amounts withheld from payments from closely held trusts	<b>O</b>	<input type="text"/>			

If you completed labels T, K, J or M, attach the information requested in the instructions.

**56 Choice for resident trustee to be assessed to capital gains on behalf of beneficiaries**

Assessment calculation code **X**

Amount of capital gains on which the trustee has chosen to be assessed on behalf of beneficiaries **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 2019, also presently entitled to a share of the income of another trust?

**N**

Print Y for yes or N for no.

If yes, or the answer is not known, furnish the information requested in the instructions.

**58 Non-resident trust**

Is the trust a non-resident trust? **N**  Print Y for yes or N for no.

If yes, state the amount of income derived outside Australia to which 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](http://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

Date 

Day Month Year

Hours taken to prepare and complete this tax return **TAX AGENT'S DECLARATION**I, 

declare that this tax return has been prepared in accordance with information supplied by the taxpayer, that the taxpayer has given me a declaration stating that the information provided to me is true and correct and that the taxpayer has authorised me to lodge the tax return.

Agent's signature

Client's reference

Contact name

Date 

Day Month Year

Agent's phone number (include area code)

Area code

Telephone number

Agent's reference number

Office use only