### XXXX XXXXXXXXX

### **PART A** Electronic lodgment declaration (Form P, T, F, SMSF or EX)

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

**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 partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

Taxation law authorises the ATO to collect information and disclose it to other government agencies, including personal information about the person authorised to sign the declaration. For information about privacy go to ato.gov.au/privacy

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information - it outlines our commitment to safeguarding your details.

Electronic funds transfer - direct debit

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

Tax file number	XXX XXX XXX	Year	2020
Name of partnership, trust, fund or entity	OVERSEER SUPERANNUATION FUN	D	

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel.

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements on tax returns

### Declaration: I declare that:

- · the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct, and
- · the agent is authorised to lodge this tax return. Signature of partner, Date trustee or director

# **PART B**

# Electronic funds transfer consent

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic lodgment channel.

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

Agent's reference number 74081009	9		
Account Name D Baker	& Associates Trust Acc		
I authorise the refund to be deposited direct	ctly to the specified account.		
Signature		Date	

Client Ref: WRI40 Agent: 74081-009

# **Self-managed superannuation** fund annual return

2020

2020

XXXX XXXXXXXXX

Return year

Who should complete this annual return?

Only self-managed superannuation funds (SMSFs) can complete this annual return. All other funds must complete the Fund income tax return 2020 (NAT 71287)

The Self-managed superannuation fund annual return instructions 2020 (NAT 71606) (the instructions) can assist you to complete this annual return.

The SMSF annual return cannot be used to notify us of a

vi	ange in fund membership. You must upda a ABR.gov.au or complete the Change of d perannuation entities form (NAT3036).							
Se	ction A: Fund information							
1	Tax file number (TFN)	XXX XXX XXX						
	The Tax Office is authorised by law to requ	r annual return. See the Privacy note in the Declaration.	lest your TFN. You are not obliged to quote your TFN but not quoting it could increase the rannual return. See the Privacy note in the Declaration.					
2	Name of self-managed superannuat	ion fund (SMSF)						
		OVERSEER SUPERANNUATION FUND						
3	Australian business number (ABN)	NN NNN NNN NNN						
4	Current postal address	C/- D BAKER & ASSOCIATES PTY LTD						
		PO Box 310						
		MIDLAND	WA	6936				
	Is this an amendment to the SMSF's 2020 r Is this the first required return for a newly							
6	SMSF auditor							
	Auditor's name Title	MR						
	Family name	BOYS						
	First given name	ANTHONY						
	Other given names							
	SMSF Auditor Number	100 014 140						
	Auditor's phone number	041 0712708						
	Use Agent address details? Postal address	PO Box 3376						
		RUNDLE MALL	SA	5000				
		Date audit was completed A 29/04/2021						
		Was Part A of the audit report qualified ?	N					
		Was Part B of the audit report qualified ?	N					
		If Part B of the audit report was qualified, have the reported issues been rectified?						

7

8

/ISF	F Return 2020	OVERSEER SUPERANNUA	ATION FUND	XXXX	(XXXXXXXXX	Page 2
	Electronic funds transfer (EFT) We need your self-managed super fu	nd's financial institution details to	o pay any super pa	ayments and tax	refunds owing to y	ou.
	A Fund's financial institution ac This account is used for super cor		provide a tax agen	t account here.		
	Fund BSB number (must be six digits)	Fund account numl	per 96660208	8		
	Fund account name (for example, of Overseer Superfund	J&Q Citizen ATF J&Q Family SF)				
	I would like my tax refunds made	to this account. N Print Y for or N for no		o C.		
	B Financial institution account	details for tax refunds		Use	Agent Trust Acco	ount? Y
	This account is used for tax refund	ds. You can provide a tax agent	account here.			
	BSB number 066115	Account numl	per 10334994			
	Fund account name (for example,	J&Q Citizen ATF J&Q Family SF)				
	D Baker & Associates	Trust Acc				
	Provide the electronic service add (For example, SMSFdataESAAlias	ress (ESA) issued by your SMS ). See instructions for more infor	F messaging provide mation.	der		
			vv	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	x xxxxxx xxxx	*
	Status of SMSF Australian	superannuation fund A	Y	Fund benefit si		A Code
		ow acceptance of the r Co-contribution and e Super Contribution?	N			
	Was the fund wound up during	the income year?	Voor	Have all tax lo	odament	
	IIN	ovide the date on d was wound up	Teal		payment	
)	Exempt current pension income Did the fund pay retirement phase sup in the income year?		efits to one or more	e members	N Print Y for ye or N for no.	es
	To claim a tax exemption for current the law. Record exempt current pens		least the minimum	benefit payment	under	
	If No, Go to Section B: Income					
	If Yes Exempt current pension incor	me amount A				
	Which method did you use to	calculate your exempt current po	ension income?			
		to an afficial B				

# 10

Segregated assets method

Unsegregated assets method C Was an actuarial certificate obtained? Print Y for yes

Print Y for yes or N for no. If Yes, go to Section B: Income Did the fund have any other income that was assessable?

> Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. If No - Go to Section C: Deductions and non-deductible expenses. (Do not complete Section B: Income.)

If you are entitled to claim any tax offsets, you can list these at Section D: Income tax calculation statement

# Section B: Income

Do not complete this section if all superannuation interests in the SMSF were supporting superannuation income streams in the retirement phase for the entire year, there was no other income that was assessable, and you have not realised a deferred notional gain. If you are entitled to claim any tax offsets, you can record these at Section D: Income tax calculation statement.

Income	Did you have a capital gains tax	\$10,000 or you e	I loss or total capital gain is greater that elected to use the CGT relief in 2017 ar conal gain has been realised, complete				
	(CGT) event during the year?  Have you applied an	——— and attach a Cap	oital Gains Tax (CGT) schedule 2020				
	exemption or rollover?	M Print Y for yes or N for no.					
		Net capital gain	<b>A</b> 1,442				
	Gross rent and other leasing and hiring income						
		Gross interest	<b>C</b> 97				
		Forestry managed investment scheme income					
Gross fo	oreign income			Loss			
D1	6,143	Net foreign income		_033			
	Austral	an franking credits from a New Zealand company					
		Transfers from foreign funds		Num			
		Gross payments where ABN not quoted					
	of assessable contributions able employer contributions	Gross distribution from partnerships		Loss			
R1	18,321	* Unfranked dividend amount	J				
plus Assess	sable personal contributions	* Franked dividend amount	K				
	N-quoted contributions	* Dividend franking					
(an amount m	ust be included even if it is zero)	credit * Gross trust		Code			
less Transf	er of liability to life	distributions		_			
R6	0	Assessable contributions (R1 plus R2 plus R3 less R6)					
	of non-arm's length income n-arm's length private						
	npany dividends	* Other income		Code R			
plus * Net no	on-arm's length trust distributions	*Assessable income					
U2		due to changed tax status of fund					
plus * Net ot	her non-arm's length income	Net non-arm's length income					
U3		(subject to 45% tax rate) (U1 plus U2 plus U3)	0				
#This is a ma	andatory label at is entered at this label, check the	GROSS INCOME	36,712	Loss			
instructions to	o ensure the correct tax s been applied.	(Sum of labels A to U)	30,712	_			
		Exempt current pension income	<b>Y</b> 0				
		TOTAL ASSESSABLE INCOME (W less Y)	V 36,712	Loss			

Fund's tax file number (TFN)

XXX XXX XXX

XXXX XXX XXXXXXX

# Section C: Deductions and non-deductible expenses

# **Deductions and non-deductible expenses**

Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded in the 'Non-deductible expenses' column).

	DEDUCTIONS	NON-DEDUCTIBLE EXPENSES
Interest expenses within Australia	A1	A2
Interest expenses overseas	B1	B2
Capital works expenditure	D1	D2
Decline in value of depreciating assets	E1	E2
Insurance premiums - members	F1	F2
SMSF auditor fee	H1	H2
Investment expenses		12
Management and administration expenses	<b>J1</b> 4,646	J2
Forestry managed investment scheme expense	U1	U2
Other amounts	L1 Code	e Code
Tax losses deducted	M1	
	TOTAL DEDUCTIONS  4,646	TOTAL NON-DEDUCTIBLE EXPENSES
	(Total A1 to M1)	(Total A2 to L2)
	#TAXABLE INCOME OR LOSS 32,066  (TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)	Z 4,646
#This is a mandatory label.	TOTAL DEDUCTIONS)	

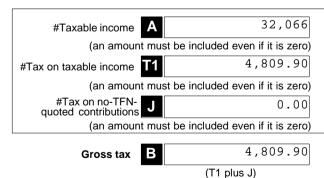
# Section D: Income tax calculation statement

## #Important:

Section B label R3, Section C label O and Section D labels A,T1, J, T5 and I are mandatory. If you leave these labels blank you will have specified a zero amount

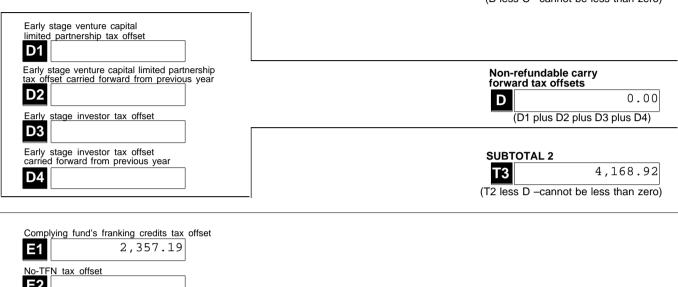
### **Calculation statement** 13

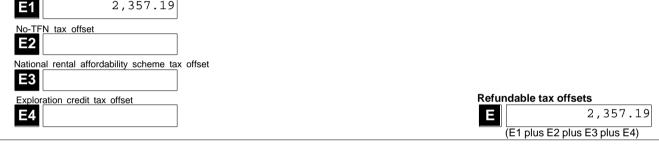
Please refer to the Self-managed superannuation fund annual return instructions 2020 on how to complete the calculation statement.



VVVV VVV VVV VVV

Neturi 2020	OVERSEER SOI ERANNOATION FOND	//////////////////// I age 3 of
Foreign income tax offset  C1 640.98  Rebates and tax offsets  C2		Non-refundable non-carry forward tax offsets  C 640.98 (C1 plus C2)
		SUBTOTAL 1  T2  4,168.92  (B less C –cannot be less than zero)





#TAX PAYABLE T5 1,811.73 (T3 less E - cannot be less than zero)

Section 102AAM interest charge

Fund's tax file number (TFN) XXX XXX XXX

Credit for interest on early payments – amount of interest	
H1	
Credit for tax withheld – foreign resident withholding (excluding capital gains)	
H2	
Credit for tax withheld – where ABN or TFN not quoted (non-individual)	
9,073.00	
Credit for TFN amounts withheld from payments from closely held trusts	
H5	
Credit for interest on no-TFN tax offset	
Н6	
Credit for foreign resident capital gains withholding amounts	Eligible credits
H8	H 9,073.00
	(H1 plus H2 plus H3 plus H5 plus H6 plus H8)
	#Tax offset refunds
	(Remainder of refundable tax offsets).
	(unused amount from label E- an amount must be included even if it is zero)
	PAYG instalments raised
	K 0.00
	Supervisory levy
	Supervisory levy adjustment
	for wound up funds
	M
	Supervisory levy adjustment for new funds
	N
	Total amount of tax refundable S 7,002.27
#This is a mandatory label.	(T5 plus G less H less I less K plus L less M plus N)
Section E: Losses	
14 Losses	Tax losses carried forward
If total loss is greater than \$100,000, complete and attach a Losses	to later income years
schedule 2020.	Net capital losses carried forward to later income years
Net capital losses brought forward	Net capital losses carried forward
from prior years	to later income years
Non-Collectables	
Collectables	

Section F / Sec	ction G: <b>Member Info</b>	rmation		_
In Section F / G re Use Section F / G	port all current members in the to report any former member	ne fund at 30 June. rs or deceased members who held an interest	in the fund at any	time during the income year.
		See the Privacy note in the De	claration	Member Number
Title	MR	Member'sTFN XXX XXX		
Familyname	WRIGHT			A account atatus
First given name	MALCOLM			Account status O Code
Other given names	WAYNE			Code
outer given mannee	Date of birth 29/01/19	74 If deceased, date of death		
Contributions		OPENING ACCOUNT BALANCE	735,	943.08
			eds from primary r	esidence disposal
	ons for completing these labe	H		
Employer contrib	utions 14,285.45	Receip	ot date	
Α		H	abla faraign auna	rannuation
ABN of principal	employer	Assess fund a	able foreign supe mount	erannuation
A1				
Personal contribu	utions	Non-a fund a	ssessable foreign mount	superannuation
		J		
CGT small busine	ess retirement exemption		er from reserve:	
CGT small busin	ness 15-vear	K	sable amount	
exemption amou			er from reserve:	
D		non-a:	ssessable amount	
Personal injury el	lection	Conduith		and the state of
E		and pr	outions from non-c eviously non-comp	omplying tunds olying funds
Spouse and child	d contributions			
F		Any ot Super	her contributions ( Co-contributions a Super Contributio	including nd low
Other third party	contributions		Super Contribution	ns)
G		М		
	TOTAL CONTRI	BUTIONS N 14,285.45		
		(Sum of labels A to M)		
Other transaction	ns			
Accumulation ph	nase account balance	Allocated earnings or losses	<u> </u>	009.52 Loss
S1	745,219.01			
Retirement phas	se account balance	Inward rollovers and transfers		
- Non CDBIS	0.00	Outward rollovers and transfers Q		Code
	se account balance	Lump Sum payment R1		Code
-CDBIS	0.00	Income stream payment R2		Code
0 TR	RISCount	CLOSING ACCOUNT BALANCE S	745,	219.01
			1 plus S2 plus S3	
		Accumulation phase value X1	745,	219.01

Outstanding limited recourse borrowing arrangement amount

Retirement phase value

					Fund's tax fil	e number (TFN)	XXX XXX XXX
			See the Privacy			Member Nu	ımber
Title	Mrs		Member'sTFN	XXX XX	X XXX	2	
Family name	Wright					Account st	tatus
First given name	Jennif					O <sub>Code</sub>	
Other given names	Michelle						
	Date of birth 15/10/1	970	If decease date of dea				
Contributions		OPENI	NG ACCOUNT BA	LANCE		0.00	
Refer to instruction	ons for completing these la	bels		Prod	eeds from prim	ary residence disp	posal
Employer contribu	utions				eipt date		
Α	4,034.99			Н	'		
ABN of principal	employer			Asse	ssable foreign l amount	superannuation	
A1				Turio	amount		
Personal contribu	utions			Non	-assessable for	reign superannuat	tion
В					amount		
CGT small busine	ess retirement exemption			J	sfer from rese	nve:	
С				asse	essable amount		
CGT small busin exemption amou				K			
D					nsfer from rese -assessable am		
Personal injury el	ection			L			
E				Cont	ributions from n	non-complying fund complying funds	ds
Spouse and child	I contributions				providuoly non	zempiying randa	
Ē				Any	other contribution or Co-contribution	ons (including	
Other third party	contributions			Incor	er Co-contribution me Super Contri	ons and low ibutions)	
G				M			
				1 024 0	20		
	TOTAL CONT	RIBUTIONS	(Sum of labels	4,034.9	99		
Other transaction	ne		(Sum or labels	S A (O IVI)			
	nase account balance						Loss
S1	3,414.32	Allo	cated earnings or lo	sses O		620.67	L
	e account balance	Inward	d rollovers and trans	sfers P			
- Non CDBIS	0.00	Outward	f rollovers and trans	sfers Q			
S2			Lump Sum payr	ment R1			Code
-CDBIS	e account balance						Code
<b>S</b> 3	0.00		Income stream payr	ment R2		[	
0 TR	RISCount	CLOSIN	G ACCOUNT BALA	NCE S		3,414.32	
					S1 plus S2 plus	S S3	
		Ac	cumulation phase va	alue X1		3,414.32	
			Retirement phase v	alue X2			
		Outs borrowi	tanding limited recorng arrangement amo	urse Y			
		- 5	J				

# XXXXXXXXXXXXX

Sect	ion H: 🖊	Assets	and	liabi	lities
15	ASSETS	3			

	ASSETS		
15a	Australian managed investments	Listed trusts	A 725,642
		Unlisted trusts	В
		Insurance policy	C
		Other managed investments	D
15b	Australian direct investments	Cash and term deposits	E 13,657
		Debt securities	F
	Limited recourse borrowing arrangements	Loans	G
	Australian residential real property  J1	Listed shares	H
	Australian non-residential real property	Unlisted shares	
	J2		
	Overseas real property  J3	Limited recourse borrowing arrangements	<b>J</b> 0
	Australian shares	Non-residential real property	K
	J4 Overseas shares	Residential real property	L
	J5	Collectables and personal use assets	М
	Other J6	Other assets	9,334
	Property count		
	J7		
15c	Other investments	Crypto-Currency	N
15d	Overseas direct investments	Overseas shares	Р
		Overseas non-residential real property	Q
		Overseas residential real property	R
		Overseas managed investments	S
		Other overseas assets	T
		TOTAL AUSTRALIAN AND OVERSEAS ASSETS (Sum of labels A to T)	748,633
15e	In-house assets		
		nd have a loan to, lease to or investment in, elated parties (known as in-house assets) at the end of the income year	
15f	Limited recourse borrowing arrangemen	nts	
		If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	Print <b>Y</b> for yes or <b>N</b> for no.
		Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	Print Y for yes or N for no.

# XXXXXXXXXXXXX

# 16 LIABILITIES

Borrowings for limited recourse borrowing arrangements  V1  Permissible temporary borrowings  V2  Other borrowings		
V3	Borrowings	V
(total of all	Total member closing account balances CLOSING ACCOUNT BALANCEs from Sections F and G)	<b>W</b> 748,633
	Reserve accounts	X
	Other liabilities	Υ
	TOTAL LIABILITIES	748,633
Section I: Taxation of financial arra 17 Taxation of financial arrangements (To		
		Н
	OFA)	H
	Total TOFA gains	H
17 Taxation of financial arrangements (TO  Section J: Other information  Family trust election status  If the trust or fund has made, or is making	Total TOFA gains  Total TOFA losses  ag, a family trust election, write the four-digit income year	H
17 Taxation of financial arrangements (TO  Section J: Other information  Family trust election status  If the trust or fund has made, or is making specified of the election  If revoking or varying a famile.	Total TOFA gains Total TOFA losses	H

# XXXXXXXXXXXX

# Section K: Declarations

Penalties may be imposed for false or misleading information in addition to penalties relating to any tax shortfalls.

Before making this declaration check to ensure that all income has been disclosed and the annual return, all attached schedules and any additional documents are true and correct in every detail. If you leave labels blank, you will have specified a zero amount or the label was not applicable to you. If you are in doubt about any aspect of the annual return, place all the facts before the ATO.

The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

Taxation law authorises the ATO to collect information and disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy.

# TRUSTEE'S OR DIRECTOR'S DECLARATION:

I declare that, the current trustees and directors have authorised this annual return and it is documented as such in the SMSF's records. I have received a copy of the audit report (if required) and are aware of any matters raised therein. The information on this annual return, including any attached schedules and additional documentation is true and correct.

Authorised trustee's, director's or pub	lic officer's	signature				
						Day Month Year
					Date	e 29/04/2021
Preferred trustee or director con	tact detail	ls:				
	Title	MR				
	Title					
Fa	amily name	WRIGHT				
First g	iven name	MALCOLM				
Other given names		WRIGHT				
		Area code	Number			
Pho	ne number	0474	699148			
Ema	ail address					
Non-individual trustee name (if a	applicable)	OVERSEER	INVESTMEN	TS PTY LTD		
ABN of non-individe	ial trustaa					
ABIV OF HOT HAIVIA	uai trustee					
						Hrs
		Time taken	to prepare an	d complete this a	nnual return	
which you provide on this annual  AX AGENT'S DECLARATION:	return to n	naintain the int	egrity of the r	egister. For furthe	r informatior	ı, refer to the instru
, D BAKER & ASSOCIATI	ES PTY 1	LTD				
declare that the Self-managed super by the trustees, that the trustees have authorised me to the trustees have a trustee have	ave given r	ne a declaration	eturn 2020 has stating that the	been prepared in ac information provide	ccordance with d to me is tru	h information provide e and correct, and th Day Month Year 29/04/2021
ax agent's contact details						
Title						
Family name	MOSBACI	Н				
First given name	FARREL	Ĺ				
Other given names						
Tax agent's practice	D BAKEI	R & ASSOCI	ATES PTY	LTD		
	Area code	Number				
Tax agent's phone number	08	927466	37			
Tax agent number	7408100	09		Reference number	er WRI40	