

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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 Year Name of partnership, trust, fund or entity

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

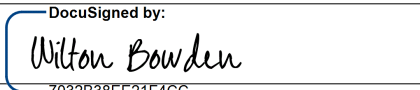
Important

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, trustee or director

DocuSigned by:

 7032B38EE21F4CC

Date

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.

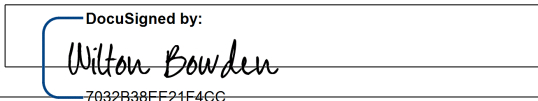
This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

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 Account Name

I authorise the refund to be deposited directly to the specified account.

Signature

DocuSigned by:

 7032B38EE21F4CC...

Date

**Self-managed superannuation
fund annual return****2020****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)

Return year

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 change in fund membership. You must update fund details via ABR.gov.au or complete the Change of details for superannuation entities form (NAT3036).

Section A: Fund information**1 Tax file number (TFN)**

The Tax Office is authorised by law to request your TFN. You are not obliged to quote your TFN but not quoting it could increase the chance of delay or error in processing your annual return. See the Privacy note in the Declaration.

2 Name of self-managed superannuation fund (SMSF)**3 Australian business number (ABN)****4 Current postal address****5 Annual return status**

Is this an amendment to the SMSF's 2020 return?

 A N

Is this the first required return for a newly registered SMSF?

 B N**6 SMSF auditor**

Auditor's name

Title Family name First given name Other given names SMSF Auditor Number Auditor's phone number Use Agent
address details? Postal address

Date audit was completed

 A

Was Part A of the audit report qualified ?

 B

Was Part B of the audit report qualified ?

 C If Part B of the audit report was qualified,
have the reported issues been rectified? D

7 Electronic funds transfer (EFT)

We need your self-managed super fund's financial institution details to pay any super payments and tax refunds owing to you.

A Fund's financial institution account details

This account is used for super contributions and rollovers. Do not provide a tax agent account here.

Fund BSB number (must be six digits) Fund account number

Fund account name (for example, J&Q Citizen ATF J&Q Family SF)

I would like my tax refunds made to this account. Y Print Y for yes or N for no. If Yes, Go to C.

B Financial institution account details for tax refunds

Use Agent Trust Account? N

This account is used for tax refunds. You can provide a tax agent account here.

BSB number Account number

Fund account name (for example, J&Q Citizen ATF J&Q Family SF)

C Electronic service address alias

Provide the electronic service address (ESA) issued by your SMSF messaging provider (For example, SMSFdataESAAlias). See instructions for more information.

8 Status of SMSF

Australian superannuation fund

A Y

Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Contribution?

C Y

Fund's tax file number (TFN) 97 844 414

Fund benefit structure B A Code

9 Was the fund wound up during the income year?

N Print Y for yes or N for no.

If yes, provide the date on which fund was wound up

Have all tax lodgment and payment obligations been met?

10 Exempt current pension income

Did the fund pay retirement phase superannuation income stream benefits to one or more members in the income year?

Y Print Y for yes or N for no.

To claim a tax exemption for current pension income, you must pay at least the minimum benefit payment under the law. Record exempt current pension income at Label A

If No, Go to Section B: Income

If Yes Exempt current pension income amount A

Which method did you use to calculate your exempt current pension income?

Segregated assets method B X

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

Did the fund have any other income that was assessable? E N Print Y for yes or N for no.

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.

11 Income

Did you have a capital gains tax (CGT) event during the year? **G** **N** Print **Y** for yes or **N** for no.

Have you applied an exemption or rollover? **M** Print **Y** for yes or **N** for no. Code

If the total capital loss or total capital gain is greater than \$10,000 or you elected to use the CGT relief in 2017 and the deferred notional gain has been realised, complete and attach a Capital Gains Tax (CGT) schedule 2020

Net capital gain **A**

Gross rent and other leasing and hiring income **B**

Gross interest **C**

Forestry managed investment scheme income **X**

Gross foreign income **D1** Net foreign income **D** Loss

Australian franking credits from a New Zealand company **E**

Transfers from foreign funds **F** Number

Gross payments where ABN not quoted **H**

Gross distribution from partnerships **I** Loss

* Unfranked dividend amount **J**

* Franked dividend amount **K**

* Dividend franking credit **L**

* Gross trust distributions **M** Code

Calculation of assessable contributions
 Assessable employer contributions **R1** 0
 plus Assessable personal contributions **R2** 0
 plus *No-TFN-quoted contributions **R3** 0
 (an amount must be included even if it is zero)
 less Transfer of liability to life insurance company or PST **R6** 0

Assessable contributions (R1 plus R2 plus R3 less R6) **R** 0

Calculation of non-arm's length income
 * Net non-arm's length private company dividends **U1**
 plus * Net non-arm's length trust distributions **U2**
 plus * Net other non-arm's length income **U3**

* Other income **S** Code

*Assessable income due to changed tax status of fund **T**

Net non-arm's length income (subject to 45% tax rate) **U**
 (U1 plus U2 plus U3)

#This is a mandatory label
 * If an amount is entered at this label, check the instructions to ensure the correct tax treatment has been applied.

GROSS INCOME **W** Loss
 (Sum of labels A to U)

Exempt current pension income **Y**

TOTAL ASSESSABLE INCOME **V** 0 Loss
 (W less Y)

Section C: Deductions and non-deductible expenses**12 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	<input type="text"/>	A2	<input type="text"/>
Interest expenses overseas	B1	<input type="text"/>	B2	<input type="text"/>
Capital works expenditure	D1	<input type="text"/>	D2	<input type="text"/>
Decline in value of depreciating assets	E1	<input type="text"/>	E2	<input type="text"/>
Insurance premiums – members	F1	<input type="text"/>	F2	<input type="text"/>
SMSF auditor fee	H1	<input type="text"/>	H2	<input type="text" value="330"/>
Investment expenses	I1	<input type="text"/>	I2	<input type="text"/>
Management and administration expenses	J1	<input type="text"/>	J2	<input type="text" value="9,627"/>
Forestry managed investment scheme expense	U1	<input type="text"/>	U2	<input type="text"/>
Other amounts	L1	<input type="text"/> Code <input type="text"/>	L2	<input type="text"/> Code <input type="text"/>
Tax losses deducted	M1	<input type="text"/>		
TOTAL DEDUCTIONS		N	<input type="text" value="0"/>	
		(Total A1 to M1)		
TOTAL NON-DEDUCTIBLE EXPENSES		Y	<input type="text" value="9,957"/>	
		(Total A2 to L2)		
#TAXABLE INCOME OR LOSS		O	<input type="text" value="0"/> Loss <input type="text"/>	
		(TOTAL ASSESSABLE INCOME less TOTAL DEDUCTIONS)		
TOTAL SMSF EXPENSES		Z	<input type="text" value="9,957"/>	
		(N plus Y)		

#This is a mandatory label.

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

13 Calculation statement

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

#Taxable income	A	<input type="text" value="0"/>	
(an amount must be included even if it is zero)			
#Tax on taxable income	T1	<input type="text" value="0.00"/>	
(an amount must be included even if it is zero)			
#Tax on no-TFN-quoted contributions	J	<input type="text" value="0.00"/>	
(an amount must be included even if it is zero)			
Gross tax	B	<input type="text" value="0.00"/>	
(T1 plus J)			

Foreign income tax offset C1 <input type="text"/>	Non-refundable non-carry forward tax offsets C <input type="text" value="0.00"/> (C1 plus C2)
Rebates and tax offsets C2 <input type="text"/>	

SUBTOTAL 1
T2
 (B less C –cannot be less than zero)

Early stage venture capital limited partnership tax offset D1 <input type="text"/>	Non-refundable carry forward tax offsets D <input type="text" value="0.00"/> (D1 plus D2 plus D3 plus D4)
Early stage venture capital limited partnership tax offset carried forward from previous year D2 <input type="text"/>	
Early stage investor tax offset D3 <input type="text"/>	
Early stage investor tax offset carried forward from previous year D4 <input type="text"/>	

SUBTOTAL 2
T3
 (T2 less D –cannot be less than zero)

Complying fund's franking credits tax offset E1 <input type="text" value="3,416.25"/>	Refundable tax offsets E <input type="text" value="3,416.25"/> (E1 plus E2 plus E3 plus E4)
No-TFN tax offset E2 <input type="text"/>	
National rental affordability scheme tax offset E3 <input type="text"/>	
Exploration credit tax offset E4 <input type="text"/>	

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

Section 102AAM interest charge
G

Credit for interest on early payments – amount of interest	H1 <input type="text"/>	
Credit for tax withheld – foreign resident withholding (excluding capital gains)	H2 <input type="text"/>	
Credit for tax withheld – where ABN or TFN not quoted (non-individual)	H3 <input type="text"/>	
Credit for TFN amounts withheld from payments from closely held trusts	H5 <input type="text"/>	
Credit for interest on no-TFN tax offset	H6 <input type="text"/>	
Credit for foreign resident capital gains withholding amounts	H8 <input type="text"/>	
	Eligible credits	H <input type="text" value="0.00"/>
	(H1 plus H2 plus H3 plus H5 plus H6 plus H8)	

#Tax offset refunds **I**
 (Remainder of refundable tax offsets).
 (unused amount from label E- an amount must be included even if it is zero)

PAYG instalments raised
K

Supervisory levy
L

Supervisory levy adjustment for wound up funds
M

Supervisory levy adjustment for new funds
N

Total amount of tax refundable **S**
 (T5 plus G less H less I less K plus L less M plus N)

#This is a mandatory label.

Section E: Losses

14 Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2020.

Tax losses carried forward to later income years **U**

Net capital losses carried forward to later income years **V**

	Net capital losses brought forward from prior years	Net capital losses carried forward to later income years
Non-Collectables	<input type="text" value="25,412"/>	<input type="text" value="25,412"/>
Collectables	<input type="text" value="0"/>	<input type="text" value="0"/>

Section F / Section G: **Member Information**

In Section F / G report all current members in the fund at 30 June.
Use Section F / G to report any former members or deceased members who held an interest in the fund at any time during the income year.

		See the Privacy note in the Declaration.	Member Number
Title	Mr	Member'sTFN	475 835 903
Familyname	Bowden		1
First given name	Wilton		Account status
Other given names	John		0 Code
Date of birth	22/09/1942	If deceased, date of death	

Contributions

OPENING ACCOUNT BALANCE 1,293,973.00

Refer to instructions for completing these labels	Proceeds from primary residence disposal
Employer contributions	H
A	Receipt date
ABN of principal employer	H
A1	Assessable foreign superannuation fund amount
Personal contributions	I
B	Non-assessable foreign superannuation fund amount
CGT small business retirement exemption	J
C	Transfer from reserve: assessable amount
CGT small business 15-year exemption amount	K
D	Transfer from reserve: non-assessable amount
Personal injury election	L
E	Contributions from non-complying funds and previously non-complying funds
Spouse and child contributions	T
F	Any other contributions (including Super Co-contributions and low Income Super Contributions)
Other third party contributions	M
G	
TOTAL CONTRIBUTIONS	N 0.00
	(Sum of labels A to M)

Other transactions

Accumulation phase account balance	Allocated earnings or losses	O	21,379.61	Loss
S1 0.00	Inward rollovers and transfers	P		
Retirement phase account balance - Non CDBIS	Outward rollovers and transfers	Q		Code
S2 1,276,502.61	Lump Sum payment	R1		
Retirement phase account balance - CDBIS	Income stream payment	R2	38,850.00	Code M
S3 0.00				
0 TRISCount	CLOSING ACCOUNT BALANCE	S	1,276,502.61	
			S1 plus S2 plus S3	
	Accumulation phase value	X1		
	Retirement phase value	X2		
	Outstanding limited recourse borrowing arrangement amount	Y		

Section H: Assets and liabilities

15 ASSETS

15a Australian managed investments

Listed trusts	A	<input type="text" value="944"/>
Unlisted trusts	B	<input type="text" value="336,745"/>
Insurance policy	C	<input type="text"/>
Other managed investments	D	<input type="text" value="533,988"/>

15b Australian direct investments

Cash and term deposits	E	<input type="text" value="178,061"/>
Debt securities	F	<input type="text"/>
Loans	G	<input type="text"/>
Listed shares	H	<input type="text" value="199,837"/>
Unlisted shares	I	<input type="text"/>

Limited recourse borrowing arrangements

Australian residential real property

J1

Australian non-residential real property

J2

Overseas real property

J3

Australian shares

J4

Overseas shares

J5

Other

J6

Property count

J7 Limited recourse borrowing arrangements **J** Non-residential real property **K** Residential real property **L** Collectables and personal use assets **M** Other assets **O**

15c Other investments

Crypto-Currency **N**

15d Overseas direct investments

Overseas shares **P** Overseas non-residential real property **Q** Overseas residential real property **R** Overseas managed investments **S** Other overseas assets **T** **TOTAL AUSTRALIAN AND OVERSEAS ASSETS** **U**
(Sum of labels A to T)

15e In-house assets

Did the fund have a loan to, lease to or investment in,
related parties (known as in-house assets)
at the end of the income year**N**

15f Limited recourse borrowing arrangements

If the fund had an LRBA were the LRBA
borrowings from a licensed
financial institution?**A** Print **Y** for yes
or **N** for no.Did the members or related parties of the
fund use personal guarantees or other
security for the LRBA?**B** Print **Y** for yes
or **N** for no.

16 LIABILITIES

Borrowings for limited recourse borrowing arrangements	V1 <input type="text"/>	
Permissible temporary borrowings	V2 <input type="text"/>	
Other borrowings	V3 <input type="text"/>	
		Borrowings V <input type="text" value="0"/>

Total member closing account balances (total of all CLOSING ACCOUNT BALANCES from Sections F and G) **W**

Reserve accounts **X**

Other liabilities **Y**

TOTAL LIABILITIES Z

Section I: Taxation of financial arrangements**17 Taxation of financial arrangements (TOFA)**

Total TOFA gains **H**

Total TOFA losses **I**

Section J: Other information**Family trust election status**

If the trust or fund has made, or is making, a family trust election, write the four-digit income year specified of the election (for example, for the 2019–20 income year, write 2020). **A**

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 2020. **B**

Interposed entity election status

If the trust or fund has an existing election, write the earliest income year specified. If the trust or fund is making one or more elections this year, write the earliest income year being specified and complete an Interposed entity election or revocation 2020 for each election **C**

If revoking an interposed entity election, print R, and complete and attach the Interposed entity election or revocation 2020. **D**

Section K:Declarations

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

Important

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.

Privacy

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 public officer's signature

DocuSigned by:
Wilton Bowden
Date 14/12/2020

Preferred trustee or director contact details: 7032B38EE21F4CC...

Title Mr

Family name Bowden

First given name Wilton

Other given names John

Area code Number
Phone number 07 55618800

Email address

Non-individual trustee name (if applicable) W J Bowden Pty Ltd

ABN of non-individual trustee

Time taken to prepare and complete this annual return Hrs

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

TAX AGENT'S DECLARATION:

I, SIMMONS LIVINGSTONE & ASSOCIATES PTY LTD

declare that the Self-managed superannuation fund annual return 2020 has been prepared in accordance with information provided by the trustees, that the trustees have given me a declaration stating that the information provided to me is true and correct, and that the trustees have authorised me to lodge this annual return.

Tax agent's signature Date 14/12/2020

Tax agent's contact details

Title Mr

Family name Livingstone

First given name Simon

Other given names

Tax agent's practice SIMMONS LIVINGSTONE & ASSOCIATES PTY LTD

Area code Number
Tax agent's phone number 07 55618800

Tax agent number 24659936 Reference number BOWDWS1

Fund

Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 2020 tax return.

Superannuation funds should complete and attach this schedule to their 2020 tax return.

2020

Refer to *Losses schedule instructions 2020*, available on our website www.ato.gov.au for instructions on how to complete this schedule.

Tax file number (TFN)

97 844 414

Name of entity

Denbow Transport Pty Ltd

Superannuation Fund

Australian business number (ABN)

68 482 304 301

2 Net capital losses carried forward to later income years

Year of loss		
2019–20	H	
2018–19	I	
2017–18	J	
2016–17	K	
2015–16	L	
2014–15 and earlier income years	M	25,412
Total	V	25,412

Transfer the amount at label **V** to the Net capital losses carried forward to later income years label on your tax return.

If the schedule is not lodged with the income tax return you are required to sign and date the schedule.

Important

Before making this declaration check to ensure that all the information required has been provided on this form and any attachments to this form, and that the information provided 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 ATO. The income tax law imposes heavy penalties for false or misleading statements.

Privacy

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

Taxpayer's declaration

I declare that the information on this form is true and correct.

Signature

DocuSigned by:
Wilton Bowden
7032B38EE21F4CC...

Contact person

Wilton Bowden

Date

27-12-2020

Daytime contact number

Area code

07

Number

55618800