ADELAIDE COACHLINES TRAVEL SUPER

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

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 However, you cannot lodge your tax return electronically if you do not quote your TFN.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.

97 271 568 2022 Tax file number Name of partnership, ADELAIDE COACHLINES TRAVEL SUPER FUND 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

La Quinse

SIGN

31. 1.2023

TEN: 97 271 568

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.

| Agents | number | 7461800 |)2 | | | | | | | |
|------------------|--------------|-----------------|-----------------------------|--------|-------|------|------|-----|-------|---|
| Acco | unt Name | ADELAID | E COACHLINES | TRAVEL | SUPER | | | | | |
| authorise the re | fund to be o | deposited direc | ctly to the specified accou | unt. | | | | | | |
| Signature | L | . a .c | Tuinsey | 1 | | SIGN | Date | 31. | 1.202 | 3 |
| | | | [] | | | | | | | |

PART D

Tax agent's certificate (shared facilities only)

| CRASE | CONSULTING | GROUP | PTY | LTD |
|-------|------------|-------|-----|-----|
| | | | | |

I declare that:

- · I have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public officer
- · I have received a declaration gade by the entity that the information provided to me for the preparation of this tax return is true and

| | · I am authorised by the partner trustee, director or pub | ic officer to lodge this tax return, including any applicable scho | edules. | |
|-------------------|---|--|------------------|--|
| Agent's signature | | Date 10.2.2623 Client re | ference QUINO003 | |
| Contact name | MR DAVID IAN CRASE | | | |
| Agent's phone | e number 08 82311888 | Agent's reference number 74618002 | | |
| | | | | |