Self-managed superannuation **2021** fund annual return

Who should complete this annual return? To complete this annual return Only self-managed superannuation funds (SMSFs) can complete ■ Print clearly, using a BLACK pen only. this annual return. All other funds must complete the Fund ■ Use BLOCK LETTERS and print one character per box. income tax return 2021 (NAT 71287). M TH 8 Т S The Self-managed superannuation fund annual return Place $|\mathcal{X}|$ in ALL applicable boxes. instructions 2021 (NAT 71606) (the instructions) can assist you to complete this annual return. Postal address for annual returns: The SMSF annual return cannot be used to notify us of a Australian Taxation Office change in fund membership. You must update fund details GPO Box 9845 via ABR.gov.au or complete the Change of details for [insert the name and postcode superannuation entities form (NAT 3036). of your capital city] For example; Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001 Section A: Fund information To assist processing, write the fund's TFN at 1 Tax file number (TFN) Provided the top of pages 3, 5, 7 and 9. The ATO 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) GC & CM BISHOP SUPERANNUATION FUND 54228726410 Australian business number (ABN) (if applicable) 3 **Current postal address** 4 42b Tuart Street Suburb/town State/territor Postcode WA 6230 Bunbury 5 Annual return status Is this an amendment to the SMSF's 2021 return? Yes Is this the first required return for a newly registered SMSF? B No Yes

6 SMSF auditor

Auditor's name
Title: Mr X Mrs Miss Ms Other
Family name
Super Audits
First given name Other given names
Anthony William Boys
SMSF Auditor Number Auditor's phone number
100014140
Postal address
PO Box 3376
Suburb/town State/territory Postcode Rundle Mall SA 5000
Day Month Year
Date audit was completed A / / /
Was Part A of the audit report qualified? B No X Yes
Was Part B of the audit report qualified? C No X Yes
If Part B of the audit report was qualified, have the reported issues been rectified? D No Yes
 For the second se
This account is used for super contributions and rollovers. Do not provide a tax agent account here.
Fund BSB number 036122 Fund account number 525248
Fund account name
GC & CM BISHOP SUPERANNUATION FUND
I would like my tax refunds made to this account. \Box Go to C.

B Financial institution account details for tax refunds

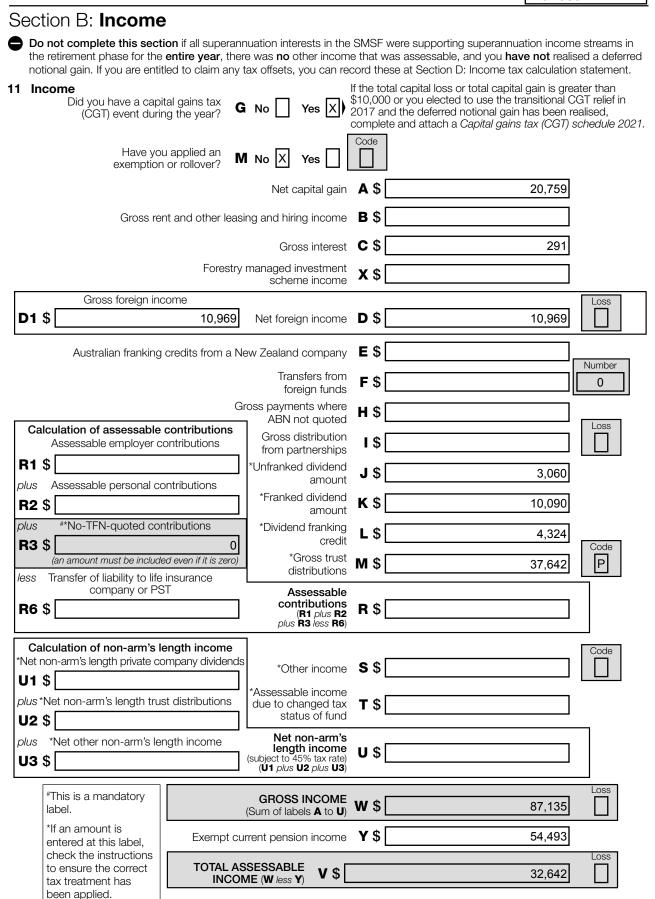
This account is used for tax refunds. You can provide a tax agent account here.

BSB number	Account number	
Account name		

C Electronic service address alias

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

	Tax File Number Provided					
8	Status of SMSF Australian superannuation fund A No Yes Yes Fund benefit structure B A Code Does the fund trust deed allow acceptance of the Government's Super Co-contribution and Low Income Super Amounts? C No Yes Yes X					
9	Was the fund wound up during the income year? No X Yes If yes, provide the date on which the fund was wound up Vo Year 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?					
	 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. No Go to Section B: Income. 					
	Yes X) Exempt current pension income amount A \$ 54,493					
	Which method did you use to calculate your exempt current pension income?					
	Segregated assets method B					
	Unsegregated assets method $\mathbf{C}(\mathbf{X})$ Was an actuarial certificate obtained? \mathbf{D} Yes \mathbf{X}					
	Did the fund have any other income that was assessable?					
	E Yes X) Go to Section B: Income.					
	No (Choosing 'No' means that you do not have any assessable income, including no-TFN quoted contributions. 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.					

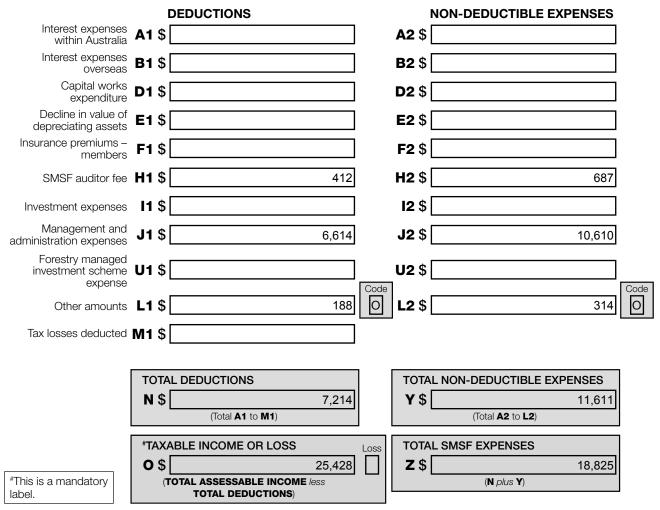


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Section C: Deductions and non-deductible expenses

12 Deductions and non-deductible expenses

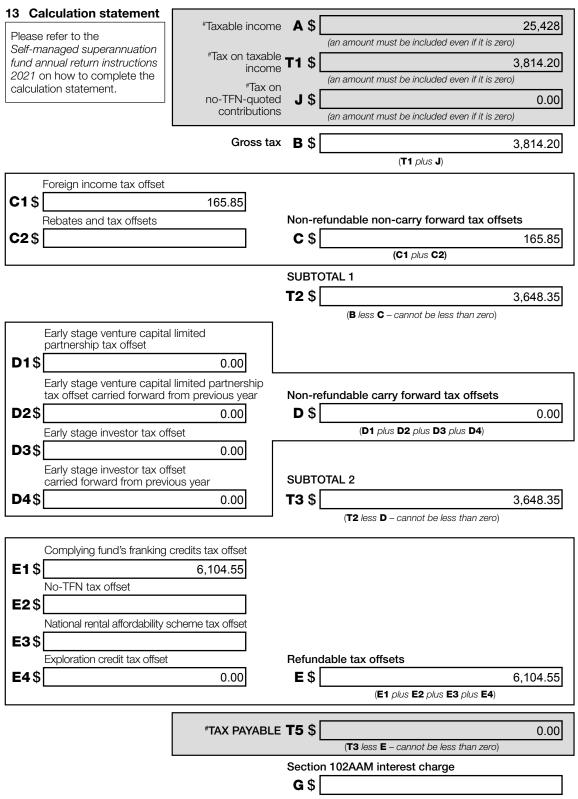
Under 'Deductions' list all expenses and allowances you are entitled to claim a deduction for. Under 'Non-deductible expenses', list all other expenses or normally allowable deductions that you cannot claim as a deduction (for example, all expenses related to exempt current pension income should be recorded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

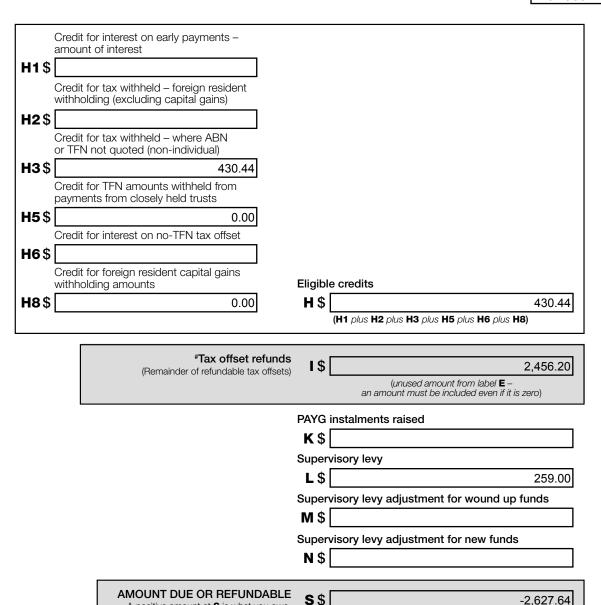


Section D: Income tax calculation statement

#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.





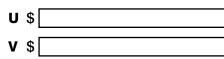
"This is a mandatory label.

Section E: Losses

If total loss is greater than \$100,000, complete and attach a Losses schedule 2021.

A positive amount at **S** is what you owe, while a negative amount is refundable to you.

Tax losses carried forward to later income years Net capital losses carried forward to later income years



(T5 plus G less H less I less K plus L less M plus N)

	Tax File Number Provided
Section F: Member informat	tion
MEMBER 1	
Title: Mr Mrs X Miss Ms Other	
Williamson	
First given name	Other given names
Catherine Mima	
Member's TFN	
ervided	d Date of birth Provided
Contributions OPENING ACCO	DUNT BALANCE \$ 1,734,862.38
Refer to instructions for completing these lab	bels. Proceeds from primary residence disposal H \$
Employer contributions	Dessint data
A \$	Receipt date Day Month Year
ABN of principal employer A1	Assessable foreign superannuation fund amount
Personal contributions	
B \$	Non-assessable foreign superannuation fund amount
CGT small business retirement exemption	J \$
C \$	
CGT small business 15-year exemption an	
D \$	Individual information with a second block and and
Personal injury election	
E \$	Contributions from non-complying funds and previously non-complying funds
Spouse and child contributions	T \$
F \$	Any other contributions
Other third party contributions	(including Super Co-contributions and Low Income Super Amounts)
G \$	M \$
• •	
TOTAL CONTRIBUTION	IS N\$
	(Sum of labels A to M)
	Loss
Other transactions All	located earnings
Accumulation phase account balance	rollovers and P\$
S1 \$ 735,521.19	transfora
	Outward rollovers and Q\$
Retirement phase account balance – Non CDBIS	transfers
S2 \$ 1,203,444.29	Lump Solta R1 \$
	payments RI 5
Retirement phase account balance – CDBIS	
S3 \$ 0.00	stream R2 \$ 71,581.50 M
	payments
0 TRIS Count CLOSING ACCO	OUNT BALANCE \$ \$ 1,938,965.48
	(S1 plus S2 plus S3)
Accumula	tion phase value X1 \$
Retirem	nent phase value X2 \$
borrowing arran	Igement amount
Page 8 OFFI	ICIAL: Sensitive (when completed)

A	ustralian managed investments	Listed trusts	A \$	245,066
	usualian managed investments			
		Unlisted trusts	B \$	164,437
		Insurance policy	C \$	
	0	ther managed investments	D \$	651,303
b A	ustralian direct investments	Cash and term deposits	E \$	438,738
	Limited recourse borrowing arrangemen	ts Debt securities	F \$	
	Australian residential real property J1 \$	Loans	G \$	
/	Australian non-residential real property	Listed shares		385,980
	J2 \$	Unlisted shares	I \$	
	J3 \$	Limited recourse borrowing arrangements	J \$	
	J4 \$	Non-residential real property	К\$	
	Overseas shares J5 \$	Residential real property	L \$	
	Other J6 \$	Collectables and personal use assets	M \$	50.400
	Property count	Other assets	0 ֆ	53,438
c 0	ther investments	Crypto-Currency	N \$	
d O	verseas direct investments	Overseas shares	Р\$	
	Overseas n	on-residential real property	Q \$	
	Overse	eas residential real property	R \$	
	Overs	seas managed investments	S \$	
		Other overseas assets	т \$	
		ND OVERSEAS ASSETS	U \$	1,938,962

				Tax File Nur	nber	Provided
15f	Limited recourse borrowing arrangements If the fund had an LRBA were the LRBA borrowings from a licensed financial institution?	A No Yes]			
	Did the members or related parties of the fund use personal guarantees or other security for the LRBA?	B No Yes]			
16	LIABILITIES					
	Borrowings for limited recourse borrowing arrangements					
	V1 \$					
	Permissible temporary borrowings					
	V2 \$					
	Other borrowings					
	V3 \$	Borrowings	V	\$		
	Total member clos (total of all CLOSING ACCOUNT BALANCEs fro	ing account balances om Sections F and G)	w	\$		1,938,962
		Reserve accounts	X	\$		
		Other liabilities	Y	\$		
		TOTAL LIABILITIES	_			1,938,962

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

Total TOFA gains	Н\$
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 2020–21 income year, write 2021).	A
If revoking or varying a family trust election, print R for revoke or print V for variation, and complete and attach the <i>Family trust election, revocation or variation 2021.</i>	в
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 <i>Interposed entity election or revocation 2021</i> for each election.	c
If revoking an interposed entity election, print R , and complete and attach the <i>Interposed entity election or revocation 2021</i> .	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 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

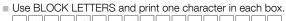
	Day Month Year
	Date / /
Preferred trustee or director contact details:	
Title: Mr X Miss Ms Other	
Family name	
Williamson	
First given name Other given names	
Catherine Mima	
Phone number	
Email address	
Non-individual trustee name (if applicable)	
Woodview Smsf Pty Ltd	
ABN of non-individual trustee	
Time taken to prepare and complete this annual return	Hrs
The Commissioner of Taxation, as Registrar of the Australian Business Register, ma provide on this annual return to maintain the integrity of the register. For further infor	
TAX AGENT'S DECLARATION: I declare that the Self-managed superannuation fund annual return 2021 has been pr provided by the trustees, that the trustees have given me a declaration stating that th correct, and that the trustees have authorised me to lodge this annual return.	
Tax agent's signature	_
	Day Month Year
Tax agent's contact details	
Title: Mr X Mrs Miss Ms Other	
Family name	
Carter	
First given name Other given names	
Lindsay Raymond	
Tax agent's practice	
Carter Woodgate Pty Ltd	
Tax agent's phone number Reference number	Tax agent number
0892502144 BISHOP	64104000

202%

Capital gains tax (CGT) schedule

When completing this form

Print clearly, using a black or dark blue pen only.



- M S 1 T H S
- Do not use correction fluid or covering stickers.
- Sign next to any corrections with your full signature (not initials).
- Use in conjunction with company, trust, fund income tax return or the self-managed superannuation fund annual return.
- Refer to the Guide to capital gains tax 202F available on our website at ato.gov.au for instructions on how to complete this schedule.

Tax file number (TFN) |Provided

We are authorised by law to request your TFN. You do not have to quote your TFN. However, if you don't it could increase the chance of delay or error in processing your form.

Australian business number (ABN) 54228726410

Taxpayer's name

GC & CM BISHOP SUPERANNUATION FUND

Current year capital gains and capital losses 1

Shares in companies	Capital gain	Capital loss
listed on an Australian securities exchange	A \$	К\$
Other shares	в\$	L \$
Units in unit trusts listed on an Australian securities exchange	C \$ 4,272	M\$ 1,4
Other units	D \$ 14,172	N \$
Real estate situated in Australia	E \$	O \$
Other real estate	F \$	Р\$
Amount of capital gains from a trust (including a managed fund)	G \$ 18,452	
Collectables	Н\$	Q \$
Other CGT assets and any other CGT events	I \$	R \$
Amount of capital gain previously deferred under transitional CGT relief for superannuation funds	S \$ 0	Add the amounts at labels K to R and write the total in item 2 label A – Total current year capital losses .
Total current year capital gains	J \$36,896	

1,455

100017996BW

		Tax File Number	Provided
2	Capital losses		
	Total current year capital losses	A \$	1,455
	Total current year capital losses applied	в\$	1,455
	Total prior year net capital losses applied	С\$	14,621
	Total capital losses transferred in applied (only for transfers involving a foreign bank branch or permanent establishment of a foreign financial entity)	D\$	
	Total capital losses applied	E \$	16,076
		Add amounts at B , C and	d D .
3	Unapplied net capital losses carried forward		
	Net capital losses from collectables carried forward to later income years	A \$	
	Other net capital losses carried forward to later income years	В\$	
		Add amounts at A and B to label V – Net capital I to later income years o	osses carried forward
4	CGT discount		
	Total CGT discount applied	A \$	61
5	CGT concessions for small business		
	Small business active asset reduction	A \$	
	Small business retirement exemption	в\$	
	Small business rollover	C \$	
	Total small business concessions applied	D \$	
	Net capital gain		
6			00.750
	Net capital gain	A \$ 1J less 2E less 4A less 5	20,759 iD (cannot be less than
		zero). Transfer the amour capital gain on your tax	nt at A to label A – Net

100017996BW

	Tax File Number Pro	vided
7	7 Earnout arrangements	
	Are you a party to an earnout arrangement? A Yes, as a buyer Yes, as a seller (Print χ in the appropriate box.)	No
	If you are a party to more than one earnout arrangement, copy and attach a separate sheet to this sch details requested here for each additional earnout arrangement.	edule providing the
	How many years does the earnout arrangement run for?	
	What year of that arrangement are you in?	
	If you are the seller, what is the total estimated capital proceeds from the earnout arrangement?	
	Amount of any capital gain or loss you made under E	
	Request for amendment	
	If you received or provided a financial benefit under a look-through earnout right created in an earlier income to seek an amendment to that earlier income year, complete the following:	e year and you wish
	Income year earnout right created F	
	Amended net capital gain or capital losses carried forward G	/ [/
8	8 Other CGT information required (if applicable)	CODE
	Small business 15 year exemption – exempt capital gains A \$	/
	Capital gains disregarded by a foreign resident B \$	
	Capital gains disregarded as a result of a scrip for scrip rollover C\$	
	Capital gains disregarded as a result of an inter-company asset rollover D\$	
	Capital gains disregarded by a demerging entity E\$	

Provided

Taxpayer's declaration

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 information about your privacy go to ato.gov.au/privacy

I declare that the information on this form is true and correct.	
Signature	_
	Date Day Month Year / / /
Contact name	
Catherine Mima Williamson	
Daytime contact number (include area code)	

100017996BP

202%

Losses schedule

Companies and trusts that do not join consolidated groups should complete and attach this schedule to their 202F tax return. Superannuation funds should complete and attach this schedule to their 202F tax return. Print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter or number in each box. Do not use correction fluid or tape. Place χ in all applicable boxes. Refer to *Losses schedule instructions 202F*, available on our website **ato.gov.au** for instructions on how to complete this schedule. Tax file number (TFN) Provided Name of entity GC & CM BISHOP SUPERANNUATION FUND

Australian business number

54228726410

Part A – Losses carried forward to the 202%-2& income year - excludes film losses

1 Tax losses carried forward to later income years Year of loss 20G€–2F **B** 201J–G€ **C** 201Ì –1J **D** 201ï –1Ì 🛛 🖪 201Î –1Ï F 2011 –11 and earlier income years G Total U Transfer the amount at U to the Tax losses carried forward to later income years label on your tax return.

2 Net capital losses carried forward to later income years

fear of loss				
2020–21	н			
2019–20	I			
201Ì –19	J			
201ï –1Ì	К			
201Î –1Ï	L			
201Í –1Î and earlier income years	Μ			
Total	V			
Transfer the amount at V to the Net capital losses carried forward to later income years label on your tax return.				

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		-	Tax File Number Provided
Part B – Ownership and b	usiness continuity	/ to	est – company and listed widely held trust only
Complete item 3 of Part B if a loss is being ca	arried forward to later income ye	ears	and the business continuity test has to be
satis ied in relation to that loss. Do not complete items 1 or 2 of Part B if, in the	he 2020–21 income vear. no los	s ha	as been claimed as a deduction, applied
against a net capital gain or, in the case of co			
4 Milester continuity of moiority	Year of loss		
1 Whether continuity of majority ownership test passed		-	Yes No
Note: If the entity has deducted, applied,	2020–21	A	
transferred in or transferred out (as applicable) in the 2020–21 income year a loss incurred in	2019–20	В	Yes No
any of the listed years, print X in the Yes or No	2018–19	С	Yes No
box to indicate whether the entity has satisfied the continuity of majority ownership test in	2010 10	Ū	
respect of that loss.	2017–18	D	Yes No
	2016–17	Ε	Yes No
	2015–16 and earlier	-	
	income years	F	Yes No
2 Amount of losses deducted/applied for	r which the continuity of maj	orit	y ownership test is not passed but the
business continuity test is satisfied - ex			
	Tax losses	G	
	Net capital losses	н	
	Net capital losses	п	
3 Losses carried forward for which the b applied in later years – excludes film losses		t be	satisfied before they can be deducted/
	Tax losses	I	
	Net capital losses	J	
4 Do current year loss provisions apply?			
Is the company required to calculate its taxab	ble income or tax loss for	V	
the year under Subdivision 165-B or its net capi for the year under Subdivision 165-CB of the <i>Inc</i>	come Tax Assessment Act	ĸ	Yes No
<i>1997</i> (ITAA 1997)?			
Part C – Unrealised losses – col	mpany only		
Note: These questions relate to the operation of S			
Has a changeover time occurred in relation to th after 1.00pm by legal time in the Australian Cap 11 November 1999?		L	Yes No
If you printed X in the No box at L , do not comple	te M , N or O .		
At the changeover time did the company satisfy net asset value test under section 152-15 of ITA		М	Yes No
If you printed X in the No box at M , has the com it had an unrealised net loss at the changeover t		N	Yes No
If you printed X in the Yes box at N , what was the unrealised net loss calculated under section 165		0	

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	Та	x File Number	Provided
Part D – Life insurance companies			
Complying superannuation class tax losses carried forward to later income years	Ρ		
Complying superannuation net capital losses carried forward to later income years	Q		
Part E – Controlled foreign company losses			
Current year CFC losses	м		
CFC losses deducted	Ν		
CFC losses carried forward	0		
Part F – Tax losses reconciliation statement			
Balance of tax losses brought forward from the prior income year	Α		
ADD Uplift of tax losses of designated infrastructure project entities	в		
SUBTRACT Net forgiven amount of debt	_		
	_		
ADD Tax loss incurred (if any) during current year	D		
ADD Tax loss amount from conversion of excess franking offsets	Ε		
SUBTRACT Net exempt income	F		
SUBTRACT Tax losses forgone	G		
SUBTRACT Tax losses deducted	Н		
SUBTRACT Tax losses transferred out under Subdivision 170-A (only for transfers involving a foreign bank branch or a PE of a foreign financial entity)	I		
Total tax losses carried forward to later income years	J		
Transfer the amount at J to the Tax losses carried for	ward	to later income years	s label on your tax return.

	Tax File Number Provide	d
If the schedule is not lodged with the income tax return you are require	ed to sign and date the schedule.	
Important Before making this declaration check to ensure that all the information requ to this form, and that the information provided is true and correct in every d place all the facts before the ATO. The income tax law imposes heavy pena	letail. If you are in doubt about any aspect	,
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 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

		_				
		Date	Day	Month]/[Year
Contact person	Dayt	- ime contact	number	(include a	area c	ode)
Catherine Mima Williamson						

Tax file No Provided

Taxpayer name GC & CM BISHOP SUPERANNUATION FUND

Signature.....

SENSITIVE (when completed) -