

## Change of details for superannuation entities

Use this form to change the following details for a superannuation entity:

- entity type
- Australian Prudential Regulation Authority (APRA) fund type structure
- Australian superannuation fund status entity name / other name
- address
- authorised contact person
- associates (trustees, members, directors of corporate trustees, legal personal representatives).

This form can also be used by superannuation entities to:

- m become a self-managed superannuation fund, or
- ≥ become an APRA regulated superannuation fund.

For information on other ways you can change or update your details, see page 2 of the Instructions.

In this form, 'entity' and 'entities' are terms used to refer to the superannuation fund or trust that is changing its details.

We will only process this form if you are recorded with us as being authorised to update details on behalf of the entity.

Refer to the instructions to help you complete this form.

- Print clearly using a black or dark blue pen.
- Use BLOCK LETTERS and print one character per box.
- Place X in all applicable boxes.
- Do not use correction fluid or covering stickers.

S	ection A: Entity information	
1	What is the entity's Australian business number (ABN) or tax file number (TFN)?	
	Refer to 'The Australian Business Register and your privacy' on page 8 of the Instructions.	
	ABN D DD DD DD	
	TFN 509 846 270	
2	What is the entity's legal name as it appears on the Australian Business Register?	
	The Trustee for ADLEY SUPER FUND	
3	From what date do you want the changes to take effect?	
	2 3 / 0 9 / 2 0 2 1	
S	ection B: Do you want to change the entity type?	_
	No X Go to section C.	
	Yes Complete this section.	
4	What is the new entity type? (Place X in one box only.)	
	See Instructions page 2.	
	An ATO regulated self-managed superannuation fund Go to section D.	
	An Australian Prudential Regulation Authority Go to section C.  (APRA) regulated superannuation fund	

Se	ection C: Are you electing to be changing your APRA	
	No X) Go to section D.	
	Yes Complete this section.	
5	What is the new APRA fund type? (Place X in See Instructions page 3.	one box only.)
	Public offer fund	Small APRA fund
	Non-public offer fund	Approved deposit fund
	Public sector fund Poole	ed superannuation trust
	Public sector superannuation scheme	
 Se	ection D: <b>Do you want to chan</b>	ge the entity's structure?
		have notified a change of entity type in section B
	No X) Go to section E.	
	Yes Oomplete this section.	
6	What is the entity's new structure? (Place X	in one box only.)
	See Instructions page 4.	
	Accumulation fund	
	Defined benefit fund Both accumulation and defined benefit fund	the entity is an APRA regulated superannuation fund, ow many defined benefit members does the entity have?  Do not include accumulation members in this total.
7		ge the entity's residency status?  to be an Australian superannuation fund for tax purposes.)

,0	oction F. B.
0	ection F: Do you want to change the entity's name?
	No X Go to section G.
	Yes Complete this section.
_	
8	What is the entity's new name?
	This should be the new name of the entity that appears in the trust deed or governing rules.
_	
Se	ection G: If the entity is known by another name, do you
	want to add or remove other names?
	This 'other name' is not the name referred to at question 0. It is
	The state of the s
)	No X Go to section H.
	Yes Complete this section.
	If you are changing the other name of the entity, provide the new name at question 9 and
	the old name at question 10.
9	Do you want to add a name?
	No Go to question 10.
	Yes What name do you want to add?
	What have do you want to add?
	If you want to add more than one name, provide the details on a separate sheet of paper and include with this form.
	Include the name (provided at question 2) and ABN of the entity on each sheet. Title the additional sheets of paper with the heading, 'Other names to be added'.
0	Do you want to remove a name?
	No Go to section H.
,	Yes What name do you want to remove?
	If you want to remove more than one name, provide the details on a separate sheet of paper and include with this
	form. Include the name (provided at question 2) and ABN of the entity on each sheet. Title the additional sheets of paper with the heading, 'Other names to be removed'.

Sec	ction H: Do you want to update the entity's address details?
	This section should be used to change the main pusiness address, postal address or email address of the entity.
	Only provide address details for those addresses that need updating.
	No X Go to section I.
	Yes Complete this section.
	Where is the entity's new main business location or address?
	This must be a street address, for example, 123 Smith St.  It cannot be a post office box number, roadside mail bag, roadside delivery or other delivery point address.
	Street address
	Street address
	Suburb/town/locality State/territory Postcode
	Country if outside Australia only) (Australia only) (Australia only)
40	What is the entity's new postal address for service of notices and correspondence?
12	This is the address where government departments and agencies will send notices and correspondence.
	The address will also be made publicly available on Super Fund Lookup at www.business.gov.au
	See Instructions page 5.
	The second state of the se
	As above If the entity's new postal address is the same as the new main business address, cross this box.
	State/territory Postcode
	Suburb/town/locality States terms y states terms y
	Country if outside Australia (Australia only) (Australia only)
	Country in outside Adatrona
13	What is the entity's new email address for service of notices and correspondence?
	This is the address where government departments and agencies may send notices and correspondence.  Use BLOCK LETTERS and print one character per box. Provide only one email address.
	See Instructions page 5.
11	Which matters should the entity's new address apply to? (place X in all applicable boxes)
17	
	ABN income tax
	Goods and services tax (GST) Superannuation accounts
	Pay as you go (PAYG) withholding

. (	Section I: De version
	Section I: Do you want to update the entity's contact person?
	No Go to section J.
	Yes X Complete this section.
1	5 Who is the new authorised contact person for the entity?
	Provide details of a person who may be contacted for further leformation. The
	update information on behalf of the entity, for example, a registered tax or BAS agent.  For more information about what an authorised contact can do on your behalf, visit ato.gov.au/primarycontact
	Title: Mr Mrs Miss Ms Other
	Family name
	Preferred name
	Preferred name
	Position held
	Business hours phone number (a contact number must be provided)  Mobile phone number
	After hours phone number  Fax number
	Email address of a set as
	Email address of contact person (use BLOCK LETTERS)
	Preferred language, if other than English. We may not be able to speak to the contact person in their preferred language at all times.
	all times.
	If you have nominated a registered tax or BAS agent as the new authorised contact person, provide their registration number
16	Which matters is the new authorised contact person permitted to deal with on behalf of the entity?
	(place X in all applicable boxes)
	ABN Income tax
	GST Superannuation accounts
,	PAYG withholding
17	Do you want to add more than one authorised contact person?
	No Go to question 18.
	Yes Provide these details on a separate sheet of paper:
	title each page with 'Add authorised contacts'
	■ the ABN and legal name of the entity ■ all information we request at questions 15 and 16.
	If additional contact people are registered tax or BAS agents, provide their registration number.

18	Do you want to remove an authorised contact?
	Provide details of the person who was previously authorised as a contact person but who may no longer be contacted in relation to the entity.
	No O to section J.
	Yes X Which authorised contact do you want to remove?
	Title: Mr Mrs X Miss Ms Other
	Family name
	ADLEY
	Preferred name  EMMA
19	Do you want to remove more than one authorised contact person?
	No X Go to section J.
	Yes Provide these details on a separate sheet of paper:  **Etitle each page with "Remove authorised contacts"
	m the ABN and legal name of the entity
	all information we request at question 18.
Se	ection J: Do you want to update the entity's associate details?
00	This section is used to add or remove associates of the entity.
	All entities must provide details of their corporate or individual trustees. Self-managed superannuation funds must also
	provide details of their members and the directors of their corporate trustees.
	See Instructions page 5.
	No Go to section K.
	Yes X Complete this section.
	Trustee disclosure The trustee disclosure questions at section M must be completed if a self-managed superannuation fund adds and/or
	removes associates.
	Tax file number (TFN) disclosure  We are authorised by the Taxation Administration Act 1953 to ask for tax file numbers. You do not have to provide a TFN. However, not providing a TFN may increase the risk of an administrative error and/or delay the processing of this form. If we cannot identify an associate from the information you provide, you may be contacted for more information.
	If an individual who is a trustee, member or director chooses not to disclose their TFN, they must provide their full name, residential address, gender and date of birth on a separate sheet of paper with the form. Title the separate sheet of paper with the heading 'Individual details'.
	If a corporate trustee chooses not to disclose its TFN, it must provide its business address and the date it commenced, registered or became incorporated on a separate sheet of paper. Title the separate sheet of paper with the heading 'Corporate trustee details' and include with this form. Ensure that any additional sheets of paper include the name (provided at question 2) and ABN of the entity.
20	Do you want to add new individuals associated with the entity?
	No Go to question 24.
	Yes X Go to question 21.

,21	Is the new associate a corporate trustee?					
	No X Go to question 22.					
	Yes Provide corporate trustee details below.					
	Full name of the corporate trustee					
	/					
	Australian Company Number (ACN) or Tax file number Australian Registered Body Number (ARBN)					
	The corporate trustee's ACN or ARBN must be provided.  Refer to the 'Tax file number disclosure' on page 6 of this form.					
22	Do you want to add individuals associated with the entity?					
	No Go to question 24.					
	Yes Provide details below of the individual associates you want to add.					
	Individuals include;  ## trustees					
	members of the self-managed superannuation fund directors of the corporate trustee (for self-managed superannuation funds only), and					
	legal personal representatives.					
	You may be contacted to provide further evidence to confirm the appointment of a legal personal representative.					
	INDIVIDUAL ONE					
	All position/s held (place X in all applicable boxes)					
	Individual Director of the corporate trustee Member of self-managed Legal personal representative					
	Name					
	Title: Mr Mrs Miss Ms X Other					
	Family name ADLEY					
	First given name Other given names					
	NICHOLE JUNE					
	Tax file number 3 4 0 8 7 3 7 3 5 Refer to the 'Tax file number disclosure' on page 6 of this form.  Day Month Year					
	Date of birth 0 9 / 0 4 / 1 9 7 9 Gender Male Female X Indeterminate					
	INDIVIDUAL TWO All position/s held (place X in all applicable boxes)					
	Individual Director of the Corporate trustee Member of self-managed Legal personal representative					
	Name					
	Title: Mr Mrs Miss Ms Other					
	Family name					
	First given name Other given names					
	Tax file number Day Month Year Refer to the 'Tax file number disclosure' on page 6 of this form.					
	Date of birth / Gender Male Female Indeterminate					

20	bo you want to add more individuals associated with the entity?
	No X Go to question 24
	v
	Yes Provide these details on a separate sheet of paper:  ## title each page with 'Add associates'
	# the ABN and legal name of the entity
	all information we request at question 22.
24	Do you want to remove a corporate trustee of the entity?
	No X Go to question 25.
	Van Die German der Ger
	Yes Provide details below of the corporate trustee you want to remove.
	Full name of the corporate trustee
	Australian Company Number (ACN) or Tax file number
	Australian Registered Body Number (ARBN)  Refer to the 'Tax file number'
	The corporate trustee's ACN or ARBN must be provided. disclosure' on page 6 of this form.
05	Programme in the desired control of the second state of the second
25	Do you want to remove an individual associated with the entity?
	No Go to section K.
	Yes X Provide details below of the individual associate you want to remove.
	All position/s held (place X in all applicable boxes)
	Individual Director of the Member of self-managed Legal personal
	trustee corporate trustee superannuation fund representative
	Name
	Title: Mr Mrs Miss Ms Other Family name
	ADLEY
	First given name Other given names
	EMMA LOUISE
	Tax file number 3 9 4 2 1 8 2 9 7 Refer to the 'Tax file number disclosure' on page 6 of this form.
	Tax file number 3 9 4 2 1 8 2 9 7 Refer to the 'Tax file number disclosure' on page 6 of this form.
	Date of birth 0 6 / 0 9 / 1 9 8 7 Gender Male Female X Indeterminate
	Date of birth 0 6 / 0 9 / 1 9 8 7 Gender Male Female X Indeterminate
26	Do you want to remove more than one individual associated with the entity?
	No X) Go to section K.
	Yes Provide these details on a separate sheet of paper:
	It it is each page with 'Remove associates'      It is each page with 'Remove associates'  I it is each page with 'Remove associates'  I it is each page with 'Remove associates'
	■ the ABN and legal name of the entity
	■ all information we request at question 25.

.56	ection K: Electronic service address
27	Do you want to update the entity's Electronic service address?
	No X Go to section L.
	Yes Complete this section.
	What is the entity's new Electronic service address?  See Instructions page 5.
	Record the Electronic service address alias (ESA) details identical to that Issued by the SMSF messaging provider. An ESA is case sensitive. For example, SMSFdataESAAlias

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Section	Notice	e of e	election

This notice of election must be made if entities are electing to be regulated under the Superannuation Industry (Supervision) Act 1993 and be eligible for tax concessions. Entities already regulated under this Act should go to section M.

See Instructions page 6	and and mudstry (Supervision) Act 1995:
No X) Go to section M.	
es Complete this section.	
We, the trustee/s or director/s or secretary of the corporate tru	ustee of (insert full name of entity as shown on the trust deed)
lame of entity	
lect that the Superannuation Industry (Supervision) Act 1993 is inderstand that the election is irrevocable.	s to apply in relation to the superannuation entity, and
ndicate the basis on which the entity is regulated (place X in o	ne or both boxes as appropriate)
Pensions power  The governing rules provide that the age pensions.	sole or primary purpose of the entity is the provision of
and/or	
Corporations power The entity trustee is a constitutional or governing rules.	orporation pursuant to a requirement contained in the
ndividual trustees each individual trustee must sign and date below.	
Day Month Year	Day Month Year
Date /	Date / / / / / / / / / / / / / / / / / / /
Day Month Year	Date / Month / Year
Corporate trustees	
igned by, or on behalf of, the body corporate in a way that is e	effective in law, and that binds the body corporate.
Day Month Year	Date / Month Year
Sommon seal of corporation See 'Corporate trustees' on page 6 of the Instructions.	
See Corporate trustees on page of the instructions.	

## We are authorised by the Superannuation Industry (Supervision) Act 1993 to collect the information in this section. This information will be used to assess a person's eligibility to be an individual trustee, a corporate trustee or a responsible officer of a corporate trustee of a self-managed superannuation fund. This information will only be disclosed where permitted by law. Agencies we routinely disclose this information to include the Australian Prudential Regulation Authority and the Australian 29 Is the entity a self-managed superannuation fund or electing to become a self-managed superannuation fund? No Go to section N. Compete this section. 30 Is there an individual trustee who is a legal personal representative, or a parent or guardian acting on behalf of a member under a legal disability? No Yes Is there a director of a corporate trustee who is a legal personal representative, or a parent or guardian acting on behalf of a member under a legal disability? No X Yes A legal personal representative does not include a registered tax or BAS agent or accountant unless they meet the definition on page 5 of the Instructions. 32 Trustee disclosure supplementary questions These questions must be answered on behalf of all individual trustees, a corporate trustee and responsible officers of a corporate trustee. Individual trustees of a self-managed superannuation fund Have any of the trustees been convicted of an offence in respect of dishonest conduct in the Commonwealth or any state, territory or foreign country? Has a civil penalty order ever been made in relation to any of the trustees? Yes Are any of the trustees an undischarged bankrupt? Yes Have any of the trustees been notified that they are a disqualified person by a Regulator (APRA or the Commissioner of Taxation)? Vas Corporate trustee of a self-managed superannuation fund Does the company know or have reasonable grounds to suspect, that a person who is, or is acting as, a responsible officer of the body corporate is a disqualified person? Yes Has a receiver, or a receiver and manager of the company been appointed? Yes Has the company been placed under official management? Yes Has a provisional liquidator of the company been appointed? No Yes Is the company being wound-up? Yes

Section M: Self-managed superannuation fund trustee disclosure

Section N: <b>Declaration</b>
Only a person currently on our records as having authority to make changes or update registration details on behalf of the enti- can sign this declaration. For more information visit ato.gov.au/primarycontact
Who is the authorised person signing this declaration?  (Complete all of the fields below)
Name of signatory
PHILIP ADLEY
Design of training
Position held
TRUSTEE
Business hours phone number  4 1 8 3 5 8 8 2 8
The person completing this form is the norminated registered tax or BAS agent, provide your registration number
Before you sign this form  Make sure you have answered all the relevant questions correctly and read the privacy statement below before you sign and date this page. An incomplete form may delay processing and we may ask you to complete a new application.
We may impose penalties for giving false or misleading information.
Privacy  Taxation law authorises the Registrar of the Australian Business Register (ABR) to collect information, including personal information about the person authorised to sign the declaration. For information about your privacy go to abr.gov.au/general-information/privacy
declare that:  the information on this form is true and correct  where the entity is a self-managed superannuation fund, I am aware that all new trustees or directors of the corporate trustee appointed after 30 June 2007 must sign a trustee declaration within 21 days of them becoming a trustee or director of the corporate trustee of the fund (see instructions page 7).
OR
declare that: this document has been prepared in accordance with information supplied by the entity I have received a declaration in writing from the entity stating that the information is true and correct I am authorised by the entity to give this document to the Commissioner of Taxation or Registrar of the Australian Business Register where the entity is a self-managed superannuation fund, the entity is aware that all new trustees or directors of the corporate trustee appointed after 30 June 2007 must sign a trustee declaration within 21 days of them becoming a trustee or director of the corporate trustee of the fund (see instructions page 7).
Signature
Date Day Month Year

## Lodging this form

Make a copy of this application for your own records before you send it to:

Australian Business Register
PO Box 3000

ALBURY NSW 2640