



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:

- elect to be regulated under the *Superannuation Industry (Supervision) Act 1993*
- 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.

## Section 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

or

TFN

### 2 What is the entity's legal name as it appears on the Australian Business Register?

### 3 From what date do you want the changes to take effect?

Day Month Year  
 /  /

## Section B: Do you want to change the entity type?

No  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 (APRA) regulated superannuation fund  Go to section C.

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## Section C: Are you electing to become an APRA fund or changing your APRA fund type?

No  Go to section D.

Yes  Complete this section.

### 5 What is the new APRA fund type? (Place X in one box only.)

➤ See Instructions page 3.

Public offer fund

Small APRA fund

Non-public offer fund

Approved deposit fund

Public sector fund

Pooled superannuation trust

Public sector superannuation scheme

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## Section D: Do you want to change the entity's structure?

This question must be answered if you have notified a change of entity type in section B or you are adding or removing a member for self-managed funds.

No  Go to section E.

Yes  Complete 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

If the entity is an APRA regulated superannuation fund, how many defined benefit members does the entity have?

ⓘ Do not include accumulation members in this total.

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## Section E: Do you want to change the entity's residency status?

(That is, the entity became or ceased to be an Australian superannuation fund for tax purposes.)

No  Go to section F.

Yes  Complete this section.

### 7 What is the new residency status of the entity?

➤ See Instructions page 4.

Australian superannuation fund

Foreign superannuation fund

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## Section F: **Do you want to change the entity's name?**

No  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.


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## Section 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 2. It is an additional name that the entity may be commonly known by. For example, a name that is used in advertising.

No  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?


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'.

### 10 **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'.

## Section H: Do you want to update the entity's address details?

This section should be used to change the main business address, postal address or email address of the entity. Only provide address details for those addresses that need updating.

No  Go to section I.

Yes  Complete this section.

### 11 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

  

Suburb/town/locality

State/territory

(Australia only)

Postcode

(Australia only)

Country if outside Australia

### 12 What is the entity's new postal address for service of notices and correspondence?

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 [superfundlookup.gov.au](http://superfundlookup.gov.au)

➤ See Instructions page 5.

As above  If the entity's new postal address is the same as the new main business address, cross this box.

  

Suburb/town/locality

State/territory

(Australia only)

Postcode

(Australia only)

Country if outside Australia

### 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.

### 14 Which matters should the entity's new address apply to? (place X in all applicable boxes)

ABN

Income tax

Goods and services tax (GST)

Superannuation accounts

Pay as you go (PAYG) withholding

## Section I: Do you want to update the entity's contact person?

No  Go to section J.

Yes  Complete this section.

### 15 Who is the new authorised contact person for the entity?

Provide details of a person who may be contacted for further information. They must be authorised to make changes or 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](http://ato.gov.au/primarycontact)

Title: Mr  Mrs  Miss  Ms  Other

Family name

WARD

Preferred name

JEAN

Position held

TRUSTEE

Business hours phone number (a contact number must be provided)

07 33497164

Mobile phone number

After hours phone number

07 33497164

Fax number

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.

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  Go to section J.

Yes  Which authorised contact do you want to remove?

Title: Mr  Mrs  Miss  Ms  Other

Family name

Preferred name

**19 Do you want to remove more than one authorised contact person?**

No  Go to section J.

Yes  Provide these details on a separate sheet of paper:

- title each page with 'Remove authorised contacts'
- the ABN and legal name of the entity
- all information we request at question 18.

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**Section J: Do you want to update the entity's associate details?**

This section is used to add or remove associates of the entity.

① 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  Complete this section.

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**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  Go to question 21.

**21 Is the new associate a corporate trustee?**

No  Go to question 22.

Yes  Provide corporate trustee details below.

Full name of the corporate trustee

[Empty text box for full name of the corporate trustee]

Australian Company Number (ACN) or Australian Registered Body Number (ARBN)

**i** The corporate trustee's ACN or ARBN must be provided.

[ACN/ARBN input boxes]

Tax file number

**e** Refer to the 'Tax file number disclosure' on page 6 of this form.

[Tax file number input boxes]

**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.

**i** State and Territory laws can restrict the number of trustees a trust can have. A self-managed superannuation fund (SMSF) is a type of trust. If your SMSF has more than four trustees, you should seek professional advice to understand if your SMSF is impacted by these restrictions. To avoid this issue, SMSFs can have a corporate trustee and each member is a Director of that corporate trustee.

**i** 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 trustee  Director of the corporate trustee  Member of self-managed superannuation fund  Legal personal representative

**Name**

Title: Mr  Mrs  Miss  Ms  Other [ ]

Family name

HANSEN

First given name

SUELLEN

Other given names

JEAN

**e** Tax file number [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**e** Refer to the 'Tax file number disclosure' on page 6 of this form.

Date of birth Day: 24 / Month: 09 / Year: 1965

Gender Male  Female  Indeterminate

**INDIVIDUAL TWO**

All position/s held (place X in all applicable boxes)

Individual trustee  Director of the corporate trustee  Member of self-managed superannuation fund  Legal personal representative

**Name**

Title: Mr  Mrs  Miss  Ms  Other

Family name

First given name

Other given names

Tax file number  Refer to the 'Tax file number disclosure' on page 6 of this form.

Date of birth Day  / Month  / Year

Gender Male  Female  Indeterminate

**INDIVIDUAL THREE**

All position/s held (place X in all applicable boxes)

Individual trustee  Director of the corporate trustee  Member of self-managed superannuation fund  Legal personal representative

**Name**

Title: Mr  Mrs  Miss  Ms  Other

Family name

First given name

Other given names

Tax file number  Refer to the 'Tax file number disclosure' on page 6 of this form.

Date of birth Day  / Month  / Year

Gender Male  Female  Indeterminate

**INDIVIDUAL FOUR**

All position/s held (place X in all applicable boxes)

Individual trustee  Director of the corporate trustee  Member of self-managed superannuation fund  Legal personal representative

**Name**

Title: Mr  Mrs  Miss  Ms  Other

Family name

First given name

Other given names

Tax file number  Refer to the 'Tax file number disclosure' on page 6 of this form.

Date of birth Day  / Month  / Year

Gender Male  Female  Indeterminate

**INDIVIDUAL FIVE**

All position/s held (place X in all applicable boxes)

Individual trustee  Director of the corporate trustee  Member of self-managed superannuation fund  Legal personal representative

**Name**

Title: Mr  Mrs  Miss  Ms  Other

Family name

First given name

Other given names

Tax file number  Refer to the 'Tax file number disclosure' on page 6 of this form.

Date of birth Day  / Month  / Year  Gender Male  Female  Indeterminate

**23 Do you want to add more individuals associated with the entity?**

No  Go to question 24

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  Go to question 25.

Yes  Provide details below of the corporate trustee you want to remove.

Full name of the corporate trustee

Australian Company Number (ACN) or Australian Registered Body Number (ARBN)  
The corporate trustee's ACN or ARBN must be provided.

Tax file number  
Refer to the 'Tax file number disclosure' on page 6 of this form.

**25 Do you want to remove an individual associated with the entity?**

No  Go to section K.

Yes  Provide details below of the individual associate you want to remove.

All position/s held (place X in all applicable boxes)

Individual trustee  Director of the corporate trustee  Member of self-managed superannuation fund  Legal personal representative

**Name**

Title: Mr  Mrs  Miss  Ms  Other

Family name

First given name

Other given names

Tax file number  Refer to the 'Tax file number disclosure' on page 6 of this form.

Date of birth Day  / Month  / Year  Gender Male  Female  Indeterminate



## Section L: Notice of election

**1** 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.

### 28 Is the entity electing to be regulated under the *Superannuation Industry (Supervision) Act 1993*?

**2** See Instructions **page 6**

No  Go to section M.

Yes  Complete this section.

I/We, the trustee/s or director/s or secretary of the corporate trustee of *(insert full name of entity as shown on the trust deed)*

Name of entity


elect that the *Superannuation Industry (Supervision) Act 1993* is to apply in relation to the superannuation entity, and understand that the election is irrevocable.

Indicate the basis on which the entity is regulated (place **X** in one or both boxes as appropriate)

Pensions power  The governing rules provide that the sole or primary purpose of the entity is the provision of age pensions.  
**and/or**

Corporations power  The entity trustee is a constitutional corporation pursuant to a requirement contained in the governing rules.

#### Individual trustees

Each individual trustee must sign and date below.

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Date   /   /

--

Date   /   /

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Date   /   /

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Date   /   /

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Date   /   /

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Date   /   /

#### Corporate trustees

Signed by, or on behalf of, the body corporate in a way that is effective in law, and that binds the body corporate.

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Date   /   /

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Date   /   /

Common seal of corporation

**2** See 'Corporate trustees' on **page 6** of the Instructions.

## Section M: Self-managed superannuation fund trustee disclosure

### Privacy

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 Securities & Investments Commission.

### 29 Is the entity a self-managed superannuation fund or electing to become a self-managed superannuation fund?

No  Go to section N.

Yes  Complete 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

### 31 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

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?

No  Yes

Has a civil penalty order ever been made in relation to any of the trustees?

No  Yes

Are any of the trustees an undischarged bankrupt?

No  Yes

Have any of the trustees been notified that they are a disqualified person by a Regulator (APRA or the Commissioner of Taxation)?

No  Yes

#### 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?

No  Yes

Has a receiver, or a receiver and manager of the company been appointed?

No  Yes

Has the company been placed under official management?

No  Yes

Has a provisional liquidator of the company been appointed?

No  Yes

Is the company being wound-up?

No  Yes

## Section N: Declaration

- ❗ Only a person currently on our records as having authority to make changes or update registration details on behalf of the entity can sign this declaration. For more information visit [ato.gov.au/primarycontact](http://ato.gov.au/primarycontact)

### 33 Who is the authorised person signing this declaration?

(Complete all of the fields below)

Name of signatory

JEAN WARD

Position held

TRUSTEE

Business hours phone number

07 33497164

If the person completing this form is the nominated 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](http://abr.gov.au/general-information/privacy)

I 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

I 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

X. J. J.

Date

Day Month Year  
12 / 10 / 2021

## 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