

# Change of details for superannuation entities

Use this 1	form to	change	the	following	ıg de	etails	for	а
superann	nuation (	entity:						

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

This form can also be used by superannuation entities to:

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

**WELLOCK LETTERS and print one character per box.** 

 $\blacksquare$  Place X in all applicable boxes.

Do not use correction fluid or covering stickers.

## Section A: Entity information

1 Wh	at is the entit	y's Australian	business	number	(ABN)	or tax	file no	umber (	(TFN)	?
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0	Refer to	'The Australian I	Business Regi	ster and your privacy'	on page 8 of the	Instructions
			-			

ABN 90 593 206 033 or TFN 9777 648 8977

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

Day Month / POIL C

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

No 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 Go to Section D superannuation fund

An Australian Prudential Regulation Authority (APRA) regulated superannuation fund

S	section C: <b>Are you electing to become an APRA fund or</b> <b>changing your APRA fund type?</b>
	No Oo to Section D
	Yes Complete this section
	Tes
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
$\overline{}$	ection D: <b>Do you want to change the entity's structure?</b>
	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 If the entity is an APRA regulated superannuation fund,
	Both accumulation and defined benefit fund how many defined benefit members does the entity have?
	Do not include accumulation members in this total.
S	ection 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

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'.

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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  in all applicable boxes)  ABN  Income tax  Superannuation accounts  Pay as you go (PAYG) withholding
14 Which matters should the entity's new address apply to? (place X in all applicable boxes)  ABN X Income tax   Goods and services tax (GST) Superannuation accounts
ABN X Income tax Superannuation accounts
ABN X Income tax Superannuation accounts
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
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 www.ato.gov.au/authorisedperson  Title: Mr
Business hours phone number (a contact number must be provided)  If hours phone number  Fax number  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)
GST Superannuation accounts PAYG withholding

21 Is the new associate a corporate trustee?
No O to question 22
Yes Provide corporate trustee details below
Full name of the corporate trustee
Australian Company Number (ACN) or Australian Registered Body Number (ARBN)  Tax file number  Refer to the 'Tax file number
The corporate trustee's ACN or ARBN must be provided.  disclosure' on page 6 of this form.
1116 556 913 838 588 498
22 Do you want to add individuals associated with the entity?
No No Go to question 24
Yes Provide details below of the individual associates you want to add.
Individuals include:
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 Member of self-managed Legal personal
Individual Director of the Member of self-managed Legal personal trustee corporate trustee superannuation fund representative
Name  Title: Mr Mrs Miss Ms Other Other
Family name
it given name Other given names
Tax file number
Date of birth Day / Month / Year Sex Male Female
INDIVIDUAL TWO
All position/s held (place X in all applicable boxes)  Individual Director of the Member of self-managed Legal personal
Individual Director of the Member of self-managed Legal personal trustee corporate trustee superannuation fund representative
Name  Title: Mr Mrs Miss Ms Other Other
Family name  Family name
Cither given names  Other given names
Tax file number Refer to the 'Tax file number disclosure' on page 6 of this form.
Date of birth / Month / Sex Male Female
IN-CONFIDENCE – when completed Page

	23 Do you want to add more individuals associated with the entity?
	No Go to question 24
	Provide these details on a separate sheet of paper:    The state of the second page with 'Add associates'     The ABN and legal name of the entity     The state of the second page with 'Add associates'     The state of the second p
	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
and the same	
	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.
	25 Do you want to remove an individual associated with the entity?
	No Go to Section K
	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
?	NE amily name  TIDION E COMPONICIONE DE LA COMPONICIONE DELICIONE DELICION
1. S. S. S.	First given names  Other given names
	Tax file number 000 PRefer to the 'Tax file number disclosure' on page 6 of this form.
	Date of birth Day / Month / Sex Male Female
	26 Do you want to remove more than one individual associated with the entity?
	No Oo to Section K
	Yes Provide these details on a separate sheet of paper:  ## title each page with 'Remove associates'
	m the ABN and legal name of the entity
	all information we request at question 25.

#### **REMOVE ASSOCIATES:**

## DO YOU WANT TO REMOVE AN INDIVIDUAL ASSOCIATED WITH THE ENTITY:

YES

#### **ALL POSITIONS HELD:**

INDIVIDUAL TRUSTEE MEMBER OF SELF-MANAGED SUPERANNUATION FUND

NAME:

MRS KERRI SUSAN WARNER

**TAX FILE NUMBER:**  341 568 189

**DATE OF BIRTH:** 06/07/1971

SEX:

**FEMALE** 

Section K: Do you want to update the entity's financial institution
account details for activity statement refunds?  If you want to receive activity statement refunds and superannuation monies via electronic funds transfer, you must complete both Sections K and L even if the details are the same.
No Section L
Yes Complete this section
What are the entity's new financial institution account details for activity statement refunds?  Refunds will only be paid directly into a recognised financial institution account located in Australia. The account details provided must be held by:  the entity (solely or jointly)  the entity's registered tax or BAS agent, or  a legal practitioner acting as trustee or executor for the entity.  If you do not provide these details we cannot refund money owed.
BSB code (must be 6 digits)  Account number
Full account name – for example, ABC Superannuation Fund.  o not show the account type, such as cheque, savings or mortgage offset.
Is the account held by:  A registered tax or BAS  agent for the entity
A legal practitioner acting as
The entity jointly with others trustee or executor for the entity trustee or executor for executor for executor for the entity trustee or executor for execu
If the account you wish to nominate for refunds is not one of the four complying account options presented above, you can request the Commissioner of Taxation to exercise his discretion to pay electronic funds into the account of a third party. For more information phone 13 28 66 between 8.00am and 6.00pm, Monday to Friday.
Section L: Do you want to update the entity's financial institution
account details to receive payments of superannuation
monies by electronic funds transfer?
No O Go to Section M
Yes Complete this section
28 What are the entity's new financial institution account details to receive payments of superannuation monies?
See Instructions page 6
Refunds will only be paid directly into a recognised financial institution account located in Australia.  The account details provided must be held by:  the entity (solely or jointly)  the entity's registered tax or BAS agent, or  a legal practitioner acting as a trustee or executor for the entity.
Payment of superannuation monies will be made to the nominated bank account until notified otherwise.  Account number
Full account name – for example, ABC Superannuation Fund.  Do not show the account type, such as cheque, savings or mortgage offset.
IN-CONFIDENCE – when completed  Page 9

# Section M: Notice of 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 N.

29	Is th	ne en	tity	ele	ectir	ıg t	to t	oe r	eg	ula	ted	l ui	nde	r ti	he	Su	pe	ran	nu	atio	on	Inc	lus	tr	v (	Su	pe	rv	isi	or	1) /	lct	19	993	3?			
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# Section N: 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. Is the entity a self-managed superannuation fund or electing to become a self-managed superannuation fund? Go to Section O Compete this section 31 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? Go to guestion 33 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? Go to question 33 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. 33 Does the fund intend to be a self-managed superannuation fund for 12 months or longer? See Instructions page 7

### Trustee disclosure supplementary questions

Is the company being wound-up?

These questions must be answered on behalf of all individual trustees, a corporate trustee and responsible officers of a corporate trustee.

Have any of the trustees been convicted of an offence in respect of dishonest

## Individual trustees of a self-managed superannuation fund

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
	K-1.	

Yes

No

(Complete all of the fields below)  me of signatory  IS MARNER OF TRUESTEE OF	Section O: <b>Declaration</b>	
(Complete all of the fields below)  me of signatory  IS MARNER OF TRUESTEE OF	Only a person currently on our records as having authority to make changes or update registration details on behaving entity can sign this declaration. For more information visit www.ato.gov.au/authorisedperson	alf of
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If Recipies hours phone number  In 1956 1938  The person completing this form is the nominated registered tax or BAS agent, provide your registration number sefere you sign this form is the nominated registered tax or BAS agent, provide your registration number is important that you have answered all the relevant questions correctly before you sign and date this page.  In 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.  Fivacy  If a read this information to help us administer these Acts and to help us maintain the details relating to you that are recorded in e need this information to help us administer these Acts and to help us maintain the details relating to you that are recorded in a Australian Business Register (ABR) and other ATO systems. Here subtroised by law to do so, we may give this information to other government agencies including law enforcement and sistance agencies. Selected ABR information may be made publicly available and some may be passed to Commonwealth, ate, territory and local agencies, authorised by law to receive it. The proposed of these agencies at www.abr.gov.au  If a list of these agencies at www.abr.gov.au  If a list of these agencies at www.abr.gov.au  If a list of these agencies are not a coordance with information supplied by the entity this document has been prepared in accordance with information supplied by the entity this document has been prepared in accordance with information supplied by the entity this document has been prepared in accordance with information supplied by the entity this form and that the information provided to me is true and correct.  All new trustees or directors of the corporate trustee, of a self-managed superannuation fund appointed after 30 June 2007 must sign a trustee declaration with 21 days of their appointment (see page 3 of the Instructions).	Name of signatory  DESWARNER OF SIGNATURE OF	
If Recipies hours phone number  In 1956 1938  The person completing this form is the nominated registered tax or BAS agent, provide your registration number sefere you sign this form is the nominated registered tax or BAS agent, provide your registration number is important that you have answered all the relevant questions correctly before you sign and date this page.  In 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.  Fivacy  If a read this information to help us administer these Acts and to help us maintain the details relating to you that are recorded in e need this information to help us administer these Acts and to help us maintain the details relating to you that are recorded in a Australian Business Register (ABR) and other ATO systems. Here subtroised by law to do so, we may give this information to other government agencies including law enforcement and sistance agencies. Selected ABR information may be made publicly available and some may be passed to Commonwealth, ate, territory and local agencies, authorised by law to receive it. The proposed of these agencies at www.abr.gov.au  If a list of these agencies at www.abr.gov.au  If a list of these agencies at www.abr.gov.au  If a list of these agencies are not a coordance with information supplied by the entity this document has been prepared in accordance with information supplied by the entity this document has been prepared in accordance with information supplied by the entity this document has been prepared in accordance with information supplied by the entity this form and that the information provided to me is true and correct.  All new trustees or directors of the corporate trustee, of a self-managed superannuation fund appointed after 30 June 2007 must sign a trustee declaration with 21 days of their appointment (see page 3 of the Instructions).	Position held	
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