



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), 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*
- 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 90 293 206 033
or
TFN 977 648 897

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

D e K W A R N E R S U P E R F U N D

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

Day / Month / Year
21 / 11 / 2016

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

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

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.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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▲ Detach form here ▲

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

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

Grid of boxes for email address input.

14 Which matters should the entity's new address apply to? (place 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 www.ato.gov.au/authorisedperson

Title: Mr Mrs Miss Ms Other

Family 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 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 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.

▲ Detach form here ▲

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

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 Complete this section

Trustee disclosure

The trustee disclosure questions at Section N 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, sex 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

R D W N O M I N E E S P T Y L T D

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

Tax file number

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

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

1 1 6 5 5 6 9 7 3

8 3 3 5 2 2 4 9 8

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 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 Sex Male Female

INDIVIDUAL TWO

All position/s held (place 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 Sex Male Female

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 Go to Section L

Yes Complete this section

27 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.

ⓘ not show the account type, such as cheque, savings or mortgage offset.

Is the account held by: The entity

A registered tax or BAS agent for the entity

The entity jointly with others

A legal practitioner acting as trustee or executor for the entity

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 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.

BSB code (must be 6 digits)

Account number

Full account name – for example, ABC Superannuation Fund.

Do not show the account type, such as cheque, savings or mortgage offset.

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.

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

No Go to Section O

Yes Complete 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?

No

Yes Go to question 33

32 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 Go to question 33

i 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?

e See Instructions page 7

No

Yes

Trustee disclosure supplementary questions

i 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 O: Declaration

i 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 www.ato.gov.au/authorisedperson

34 Who is the authorised person signing this declaration?

(Complete all of the fields below)

Name of signatory

DES WARNER

Position held

DIRECTOR OF TRUSTEE

Business hours phone number

0417956923

If the person completing this form is the nominated registered tax or BAS agent, provide your registration number

Before you sign this form

It is important that you have answered all the relevant questions correctly before you sign and date this page.

An incomplete form may delay processing and we may ask you to complete a new application.

i We may impose penalties for giving false or misleading information.

Privacy

We are authorised by taxation laws, including the *Income Tax Assessment Act 1936*, *A New Tax System (Australian Business Number) Act 1999* and *A New Tax System (Goods and Services Tax) Act 1999* to collect the information requested on this form. We need this information to help us administer these Acts and to help us maintain the details relating to you that are recorded in the Australian Business Register (ABR) and other ATO systems.

Where authorised by law to do so, we may give this information to other government agencies including law enforcement and assistance agencies. Selected ABR information may be made publicly available and some may be passed to Commonwealth, state, territory and local agencies, authorised by law to receive it.

You can find a list of these agencies at www.abr.gov.au

I declare that the information given on this form is true and correct.

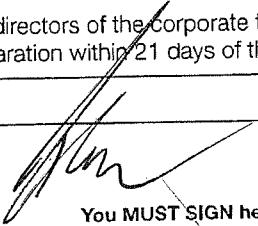
OR

I declare that:

- this document has been prepared in accordance with information supplied by the entity
- I have received a declaration from the entity authorising me to complete this form and that the information provided to me is true and correct.

i 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 within 21 days of their appointment (see page 3 of the Instructions).

Signature


You MUST SIGN here

Date

Day: 20 / Month: 11 / Year: 2016

Lodging this form

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

Australian Business Register
PO Box 3373
PENRITH NSW 2740