

Use this form to change the following details for a

Change of details for superannuation entities

For information on other ways you can change or update your

	perannuation entity;	details, see page 2 of the Instructions.				
	entity type ^A ustralian Prudential Regulation Authority (APRA) fund type	In this form, 'entity' and 'entities' are terms used to refer to				
	structure	the superannuation fund or trust that is changing its details.				
	Australian superannuation fund status	We will only process this form if you are recorded with us as				
	entity name / other name address	being authorised to update details on behalf of the entity.				
= 6 = 8	authorised contact person associates (trustees, members, directors of corporate rustees, legal personal representatives).	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.				
= 6	is form can also be used by superannuation entities to: elect to be regulated under the Superannuation Industry Supervision) Act 1993	Place X in all applicable boxes.Do not use correction fluid or covering stickers.				
	pecome a self-managed superannuation fund, or					
	pecome an APRA regulated superannuation fund.					
S	ection A: Entity information					
1	_	APPAN				
		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.				
		acy on page 8 of the instructions.				
	ABN 618 672 7198 2116					
	TFN DDD DDD					
2	What is the entity's legal name as it appears on the	What is the entity's legal name as it appears on the Australian Business Register?				
	THE TRUSTEE FOR JW & M	IC MOTT SUPER FUND				
3	From what date do you want the changes to take	officet?				
	Day Month Year	enectr				
	03/10/0000					
9	notion P: Do you went to share all	h				
Ot	ection B: Do you want to change tl	ne entity type?				
	No 🔀 Go to section C.					
	Yes Ocmplete this section.					
4	What is the new entity type? (Place X in one box only.)					
	See Instructions page 2.					
	An ATO regulated self-managed	tion D				
	superannuation fund Go to sec	IION D.				
	An Australian Prudential Regulation Authority (APRA) regulated superannuation fund	tion C.				

Se	ection 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
1	
Se	ection 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 O Go to section E.
	Yes Complete this section.
6	What is the entity's new structure? (Place X in one box only.)
6	What is the entity's new structure? (Place X in one box only.) See Instructions page 4.
6	
6	See Instructions page 4. Accumulation fund Defined benefit fund It the entity is an APRA regulated superannuation fund
6	See Instructions page 4. Accumulation fund Defined benefit fund If the entity is an APRA regulated superannuation fund, how many defined benefit members does the entity have?
6	See Instructions page 4. Accumulation fund Defined benefit fund If the entity is an APPA regulated superannuation fund,
6	See Instructions page 4. Accumulation fund Defined benefit fund If the entity is an APRA regulated superannuation fund, how many defined benefit members does the entity have?
	Accumulation fund Defined benefit fund Both accumulation and defined benefit fund Do not include accumulation members in this total.
	See Instructions page 4. Accumulation fund Defined benefit fund If the entity is an APRA regulated superannuation fund, how many defined benefit members does the entity have?
	Accumulation fund Defined benefit fund Both accumulation and defined benefit fund Do not include accumulation members in this total. Cotion E: Do you want to change the entity's residency status?
	Accumulation fund Defined benefit fund Both accumulation and defined benefit fund Do not include accumulation members in this total. Ction 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.)
	Accumulation fund Defined benefit fund Now many defined benefit members does the entity have? Do not include accumulation members in this total. Cotion 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.
Se	Accumulation fund Defined benefit fund Do not include accumulation members in this total. Defined benefit fund Defined benefit fund Do not include accumulation members in this total. Defined benefit fund Defined benefit fund Do not include accumulation members in this total. Defined benefit fund Defined benefit fund Defined benefit fund Do not include accumulation members in this total. Defined benefit fund Defined benefit
Se	Accumulation fund Defined benefit fund Defined benefit fund Defined benefit fund Defined benefit fund Now many defined benefit members does the entity have? Do not include accumulation members in this total. Ction 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. What is the new residency status of the entity?
Se	Accumulation fund Defined benefit fund Defined benefit fund Defined benefit fund Both accumulation and defined benefit fund Do not include accumulation members in this total. Cotion 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. What is the new residency status of the entity? See Instructions page 4.

Se	ection F	Do you want to change the entity's name?
		No (A) Go to section G.
		Yes Complete this section.
3		the entity's new name? Id 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 2. It is an additional name that the entity may be commonly known by. For example, a name that is used in advertising.
		No O 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 v	want to add a name?
	No O	Go to question 10.
	Yes	What name do you want to add?
	l,	f you want to add more than one name, provide the details on a separate sheet of paper and include with this form. nclude 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 v	want to remove a name?
	No O	Go to section H.
	Yes V	What name do you want to remove?
	-	
	L H	f you want to remove more than one name, provide the details on a separate sheet of paper and include with this
	f	orm. 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'.

Se	ection 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 (X) 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 Country if outside Australia (Australia only) (Australia only) (Australia only)
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 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 Postcode Country if outside Australia (Australia only) (Australia only)
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 X 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			
	Title: Mr Mrs Miss Ms Other			
	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 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 O 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 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 O 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. 					
	an information we request at question to.					
Se	ection 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 X) Complete this section.					
	Z) 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 <i>Taxation Administration Act 1953</i> 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 O 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)
	Refer to the 'Tax file number disclosure' on page 6 of this form. 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 O 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.
	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.
	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 representative Legal personal representative
	Name
	Title: Mr Mrs Miss Ms Other Family name
	M DTT
	First given name Other given names
	MICHAEL ANDREW
	Tax file number 490 888 751 • Refer to the 'Tax file number disclosure' on page 6 of this form.
	Date of birth Dey / Month / Year Gender Male Female Indeterminate

INDIVIDUAL TWO
All position/s held (place X in all applicable boxes)
Individual Director of the Member of self-managed Legal personal rustee corporate trustee superannuation fund representative
Name
Title: Mr Mrs Miss Ms Other
Tarrily reality
First given name Other given names
Crisi giver maries
Tax file number Sefer to the 'Tax file number disclosure' on page 6 of this form.
Date of birth
INDIVIDUAL THREE
All position/s held (place X in all applicable boxes)
Individual Director of the Member of self-managed Legal personal rustee corporate trustee superannuation fund representative
Name
Title: Mr Mrs Miss Ms Other
Family name
First given name Other given names
First given name Other given names
Tax file number Sefer to the 'Tax file number disclosure' on page 6 of this form.
Tax file number
Tax file number Day Month Year Day Month Year Day Month Year Day Month Day Month Year Day Month Day Month Year Day Month Year Day Month New Year New Year Month New Year New Year
Tax file number

	INDIVIDUAL FIVE
	All position/s held (place X in all applicable boxes) Individual Director of the Superannuation fund representative
	Name
	Title: Mr Mrs Miss Ms Other
	Taking Harris
	First given name Other given names
	Tax file number Day Month Year North Year Seer to the 'Tax file number disclosure' on page 6 of this form.
	Date of birth / Gender Male Female Indeterminate
23	Do you want to add more individuals associated with the entity?
	No So 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 entityall information we request at question 22.
24	Do you want to remove a corporate trustee of the entity?
	No O 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 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 O 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
	Title: Mr Mrs Miss Ms Other
	Family name MOTI
	First given name Other given names
	JOHN WESLEY
	Tax file number
	Date of birth

26	No So to section K.
	Yes Provide these details on a separate sheet of paper: title each page with 'Remove associates' the ABN and legal name of the entity all information we request at question 25.
Se	ection K: Electronic service address
27	Do you want to update the entity's Electronic service address?
	No O 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

Section L: Notice of election	Section		Notice	of	election	n
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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?
	See Instructions page 6
	No O 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.
	Lach individual trustee must sign and date below.
	Day Month Year Day Month Year Day Month Year
	Date Date Date Date Date Date Date Date
	Day Month Year Day Month Year Day Month Year
	Date / / Date / / 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.
	y and the body corporate.
	Day Month Year Day Month Year
	Date/ Date/
	Common seal of corporation
	See 'Corporate trustees' on page 6 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 Securities & Investments Commission. 29 Is the entity a self-managed superannuation fund or electing to become a self-managed superannuation fund? Go to section N. Yes 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 X 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? 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 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? Are any of the trustees an undischarged bankrupt? Have any of the trustees been notified that they are a disqualified person by a Regulator (APRA or the Commissioner of Taxation)? 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? Has a receiver, or a receiver and manager of the company been appointed? Has the company been placed under official management?

Section M: Self-managed superannuation fund trustee disclosure

Privacy

Has a provisional liquidator of the company been appointed?

Is the company being wound-up?

500	tion N: Declaration
(I) C	only a person currently on our records as having authority to make changes or update registration details on behalf of the entit an 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)
N	lame of signatory
-	BRADLEY GROGAN
L	
P	osition held
, L	ACCOUNTANT.
В	usiness hours phone number
If t	the person completing this form is the nominated registered tax or BAS agent, provide your registration number
Make s this pa	re you sign this form sure you have answered all the relevant questions correctly and read the privacy statement below before you sign and date ge. An incomplete form may delay processing and we may ask you to complete a new application.
€ W	e may impose penalties for giving false or misleading information.
ILHOLLIS	on law authorises the Registrar of the Australian Business Register (ABR) to collect information, including personal ation about the person authorised to sign the declaration. For information about your privacy go to v.au/general-information/privacy
l decla	re that:
the in	nformation on this form is true and correct
αμμι	e the entity is a self-managed superannuation fund, I am aware that all new trustees or directors of the corporate trustee pinted after 30 June 2007 must sign a trustee declaration within 21 days of them becoming a trustee or director of the porate trustee of the fund (see instructions page 7).
OR	
■ I hav ■ I am	re that: document has been prepared in accordance with information supplied by the entity e received a declaration in writing from the entity stating that the information is true and correct authorised by the entity to give this document to the Commissioner of Taxation or Registrar of the Australian ness Register
แนงแ	e the entity is a self-managed superannuation fund, the entity is aware that all new trustees or directors of the corporate se appointed after 30 June 2007 must sign a trustee declaration within 21 days of them becoming a trustee or director of orporate trustee of the fund (see instructions page 7).
Signat	ure
	Date Day Month Year The property of the control o
امط	ging this form

OFFICIAL: Sensitive (when completed)

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**