

13 What is the entity's new email address?

Please use BLOCK LETTERS. Provide only ONE email address.

➤ See Instructions page 5

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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 tax agent.

Title: Mr Mrs Miss Ms Other
Family name
Preferred name
Position held
Business hours phone number Mobile phone number
After hours phone number Fax number
Email address (Please use BLOCK LETTERS)
Preferred language, if other than English.

➤ If you have nominated a tax agent as the new authorised contact person, please provide the tax agent's 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 the contact details for the authorised contacts and list the matters they are authorised to deal with on a separate sheet of paper. Please make sure that any additional sheets of paper include the name (provided at question 2) and ABN of the entity. Title the additional sheets of paper with the heading, 'Authorised contacts to add'.

❗ If additional contact people are tax agents also provide their tax agent 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.

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 details of the authorised contact people that you want to remove on a separate sheet of paper. Please make sure that any additional sheets of paper include the name (provided at question 2) and ABN of the entity. Title the additional sheets of paper with the heading 'Authorised contacts to remove'.

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

This section is used to add or remove associates of the entity, including corporate or individual trustees (and for self managed superannuation funds, members and directors of the entity's corporate trustee).

➔ See Instructions page 5

No Go to Section K

Yes 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 disclosure

You are not required by law to quote a tax file number, but not quoting it increases the risk of administrative error and may 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 tax file number, they must provide their residential address 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 tax file number, 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'.

Please make sure that any additional sheets of paper include the name (provided at question 2) and ABN of the entity.

20 Is the entity a self managed superannuation fund?

❗ This question must be answered by non-regulated or APRA funds that are becoming self managed funds or self managed funds that wish to add or remove an associate.

No Go to question 21

Yes Does the fund have:

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

or

a corporate trustee which has a director who is a legal personal representative or a parent or guardian acting on behalf of a member under a legal disability?

No

Yes

21 Do you want to add new individuals associated with the entity?

No Go to question 25

Yes Go to question 22

22 Is the new associate a corporate trustee?

No Go to question 23

Yes Provide corporate trustee details below.

Full name of the corporate trustee

S A M P L E S U P E R A N N U A T I O N F U N D P T Y L T D

ACN/ARBN

The corporate trustee's Australian Company Number or Australian Registered Body Number must be provided.

1 6 0 4 0 3 4 4 9

Tax file number

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

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

No Go to question 25

Yes Provide details below of the individual associates you want to add.

Individuals include:

- trustees (if corporate trustee details are provided at question 22, individual trustee details are not required)
- members of the self managed superannuation fund, and
- directors of the corporate trustee (for self managed superannuation funds only).

INDIVIDUAL ONE

Position held (Place in ALL applicable boxes) Individual trustee

Director of the corporate trustee

Member of self managed superannuation fund

Title: Mr Mrs Miss Ms Other

Family name S A M P L E

First given name J O E Other given names

Tax file number 8 8 0 4 8 8 4 9 2 Refer to the 'Tax file number disclosure' on page 6.

Date of birth Day 0 9 / Month 1 2 / Year 1 9 6 2 Sex Male Female

26 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.

Position held (Place in ALL applicable boxes) Individual trustee

Director of the corporate trustee

Member of self managed superannuation fund

Title: Mr Mrs Miss Ms Other

Family name
S A M P L E

First given name
J A M E

Tax file number
8 8 0 4 8 8 4 9 2 Refer to the 'Tax file number disclosure' on page 6.

Date of birth
Day: 0 9 / Month: 1 2 / Year: 1 9 6 2 Sex: Male Female

27 Do you want to remove more than one individual associated with the entity?

No Go to Section K

Yes Provide details of the additional associate that you want to remove on a separate sheet of paper. Please make sure that any additional sheets of paper include the name (provided at question 2) and ABN of the entity. Title the additional sheets of paper with the heading, 'Associates to be removed'.

Section K: Do you want to update the entity's financial institution account details?

No Go to Section L

Yes Complete this section

28 What are the entity's new financial institution account details for Tax Office 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 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: Account number:

Full account name:

Is the account held by: The entity

The entity jointly with others

A tax agent for the entity

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: Notice of election

! This notice of election is only required to be made by entities that are now electing to be regulated under the *Superannuation Industry (Supervision) Act 1993*. Entities already regulated under this act should go to Section M.

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

No Go to Section M

Yes Complete this section

➔ See Instructions page 6

Place in ONE or BOTH boxes as appropriate

The governing rules provide that the sole or primary purpose of the entity is the provision of old age pensions (pensions power)

and/or

The entity trustee is a constitutional corporation pursuant to a requirement contained in the governing rules (corporations power)

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

S A M P L E S U P E R A N N U A T I O N F U N D

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

Pensions power only

Signature of each individual trustee

Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>

! If there is insufficient space, please provide each of the additional individual trustee signatures on a separate sheet of paper. Please make sure that any additional sheets of paper include the name (provided at question 2) and ABN of the entity.

Corporate trustees only

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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SIGN HERE

Date / /

Common seal of corporation

➔ See 'Corporate trustees only' on page 6 of the instructions for more information.

Section M: Self managed superannuation fund trustee disclosure

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

No

Yes Go to question 32

31 Are you a self managed superannuation fund that updated details at Section J?

No Go to Section N

Yes

Privacy

The Tax Office is authorised by the *Superannuation Industry (Supervision) Act 1993* to collect the information in this section. This information will be used to assess your eligibility to be an individual trustee, a corporate trustee or a responsible officer of a body 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 are APRA and the Australian Securities & Investments Commission.

32 Does the fund intend to be a self managed superannuation fund for 12 months or longer?

No

Yes

➤ See Instructions page 6

Trustee disclosure supplementary questions

➤ See Instructions page 6

ⓘ Please note that these questions must be answered on behalf of all individual trustees, a body corporate trustee, and responsible officers of a body 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 – must be completed by an individual authorised by the entity

Before you sign this form

Please check that you have provided complete and accurate information.

Penalties

Please be aware that penalties may be imposed for deliberately giving false or misleading information.

Privacy

The collection of information on this application by the Australian Business Registrar and the Commissioner of Taxation is authorised by the *Australian Prudential Regulation Authority Act 1998*, the *Superannuation Industry (Supervision) Act 1993* and by tax laws. The Information will be used to help us administer these laws. Some information may be made publicly available and some may be passed to other government agencies. If you want more information see The Australian Business Register and your privacy on page 7 of the instructions.

Name of signatory

J O E A N D A R A W E W A

Position held

D I R E C T O R

I declare that:

- I am authorised to complete this form on behalf of the entity whose Australian business number appears on this form,
- the information given on this form is accurate and complete, and
- 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 3).

Signature



Day

Month

Year

/ /



How to lodge this form

Make a copy of this application for your own records and return the original of your completed application to:

Australian Taxation Office
PO Box 3373
PENRITH NSW 2740

ASSOCIATES TO BE REMOVED

Entity's name: O'BRIEN FAMILY SUPERANNUATION FUND

TFN: 929 058 785

2) BELINDA O'BRIEN

Title: MRS

First name: BELINDA

Surname: O'BRIEN

DOB: 18/09/1975

TFN: 202 016 834

Position held: Individual Trustee