

Change of trustee form

Change of trustee from individual to corporate

This form is for existing investors with an individual trustee of an SMSF or other trust who wish to change from an individual trustee to a corporate trustee of that same SMSF or trust. This form can only be used where the following conditions exist:

- There is no change in the beneficial ownership of the units in the relevant fund/s (that is, the units remain held for the same SMSF or trust as before and the transfer does not involve a change to the beneficiaries of the SMSF or trust), and
- There is no change in the name of the SMSF or trust.

This is an electronic form, so you can type directly into the provided boxes. If you prefer to handwrite your information, please use capital letters and black or blue ink, and mark boxes with an X. If you make an error, initial the change. Do not use correction fluid.



If you have any questions, contact Bennelong Funds Management **Client Experience** on **1800 895 388 (Australia)** or **0800 442 304 (New Zealand)** or email client.experience@bennelongfunds.com.

Please return all pages, including the cover page, together with a certified copy of proof of the appointment of the new corporate trustee as trustee of the SMSF or trust.

Once completed, please post or fax this form to:



Bennelong Funds Management Ltd
C/- Citi Unit Registry Australia
GPO Box 764
Melbourne VIC 3001
Australia



Attention: Bennelong Funds Management Ltd
C/- Citi Unit Registry Australia
(+61) 1300 989 813

Important information

You should read the latest Product Disclosure Statement (PDS) and Additional Information Booklet (available at bennelongfunds.com/forms) of the fund/s in which you are investing before completing this form.

If you are a New Zealand investor, you must read the New Zealand Investors' Information Sheet.

References to a PDS in this form refer to the PDS of the relevant fund, including any information incorporated by reference in that PDS in accordance with the Corporations Act (as contained within the Additional Information Booklet).

Note: All information provided is in accordance with the Privacy Act 1988 and its amendments. Bennelong Funds Management's Privacy Policy is available on our website (bennelongfunds.com/privacy) or by contacting Client Experience.

1. Individual trustee details

Investor number

2	8						
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Account name (this must EXACTLY match your existing account name e.g. "Ben and Nell Long ATF The Bennelong Super Fund")

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Details of individual trustees/transferor

Name of individual trustee 1

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Date of birth

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Name of individual trustee 2

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Date of birth

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If there are more than two, provide the above details for additional individual trustees on a separate sheet.

2. Corporate trustee details

Details of company/corporate trustee (transferee)

Full company name

--

Country of formation, incorporation or registration (if non-Australian)

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ACN/ARBN

--

TFN, ABN or exemption code

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It is not compulsory to provide the company's TFN or ABN. However, without a TFN, ABN or exemption information, withholding tax will be deducted from the company's distributions at the highest marginal rate (plus Medicare levy).

If you do not provide your ACN or ARBN you must provide a certified copy of company registration.

Tax residence (non-Australian companies only)

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Name of regulator (if licensed by an Australian Commonwealth, state or territory statutory regulator)

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Regulator licence number (or other details)

--

Registered business street address in Australia or country of formation (not a PO Box)

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Suburb

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State

--

Postcode

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Country

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Principal place of business (if different from registered address)

Street name and number

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Suburb

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State

--

Postcode

--	--	--	--

Country

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Main source(s) of funds for investment

- ☐ Business activity ☐ Superannuation savings
- ☐ Financial investments ☐ Inheritance/Gift
- ☐ Other (please provide brief description)

Industry/Nature of business (describe in 10 words or less)

ASIC registration status

- ☐ Proprietary company
- ☐ Public company

Director information

For Australian proprietary companies and non-Australian private companies, provide the full name of each director of the company.

Director 1

Title	First name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Director 2

Title	First name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Director 3

Title	First name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Director 4

Title	First name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>

If there are more than four directors, write their full names on a separate page and attach to this form.

Beneficial ownership

Are there any individuals who ultimately own 25% or more of the company's issued share capital (through direct or indirect shareholdings) or are entitled (either directly or indirectly) to exercise 25% or more of the voting rights, including a power of veto?

- ☐ Yes
- ☐ No

If yes, provide the following information for each individual. If no, proceed to **Other beneficial owners**.

Shareholder beneficial owner 1

Title	First name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth

Citizenship

- ☐ Australia
- ☐ Other (specify)



Street name and number

Suburb

State

Postcode

Country

Shareholder beneficial owner 2

Title

First name(s)

Family name

Date of birth

Citizenship

☐ Australia

☐ Other (specify)

Street name and number

Suburb

State

Postcode

Country

Other beneficial owners

If there are no individuals who own 25% or more of the company's issued share capital, provide the names of the individuals who hold the position of senior managing officials (or equivalent), for example Managing Director or Directors.

Other beneficial owner 1

Title

First name(s)

Family name

Date of birth

Citizenship

☐ Australia

☐ Other (specify)

Street name and number

Suburb

State

Postcode

Country

Role (for example Managing Director)

Other beneficial owner 2

Title	First name(s)	Family name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of birth			
<input type="text"/>			
Citizenship			
<input type="checkbox"/> Australia			
<input type="checkbox"/> Other (specify) <input type="text"/>			
Street name and number			
<input type="text"/>			
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Role (for example Managing Director)			
<input type="text"/>			

If there are more beneficial owners/shareholders, write their full names, dates of birth, citizenship, residential addresses and roles on a separate page and attach to this form.

3. Identification and certification

Identification documents provided by you or your agent must be certified. Non-English documents must be accompanied by an English translation prepared by an accredited translator.

For **each individual beneficial owner**, we require certified documentation as outlined in Section 1 of the Identification and certification requirements guide (available at bennelongfunds.com/forms). If we already have this documentation on file from a previous application, and it is still valid and not expired, you do not have to provide the documentation again.

For a change of trustee for a trust that is **not an SMSF**, a Deed of Variation nominating the corporate trustee must be provided. The document must be certified.

If you have not provided an ACN or ARBN for your corporate trustee, you must provide **ONE** of the following documents to verify your company details. The document must be certified.

- ☐ Certificate of registration or incorporation issued by ASIC
- ☐ If a regulated company, a report extracted from the relevant registration body
- ☐ Certificate of registration or incorporation issued by the relevant foreign registration body

4. Distribution election and bank account details

Distribution election

Select how you wish distributions to be processed. If no selection is made, income distributions will be reinvested.

- ☐ Reinvest distributions
- ☐ Pay distributions into the bank account below

Nominated bank account

Please provide us with the bank account details into which you would like withdrawal and distribution payments made. The account must be held in the same name as the account holder supplied in Section 2, domiciled in Australia and denominated in Australian dollars.

Australian financial institution/bank

BSB number

Account number

Bank account name

5. Signing authority for future transactions

Select who is authorised to provide instructions for this account. If you don't indicate a preference, future instructions must be executed by all the individual(s) who signed this form.

- ☐ Sole director (ONLY for sole director companies)
- ☐ Two directors who have signed this form
- ☐ Director and company secretary who have signed this form
- ☐ Other (specify)

6. Declaration and signatures

Individual trustee

- I/We the registered holder and undersigned individual trustee, transfer all units currently held in my/our trust to the corporate trustee named in Section 2 of this form.

Corporate trustee

- I/We hereby accept the transfer of units in the relevant fund/s.
- I/We declare that I/we have read, understood and agreed to the terms and conditions contained within the latest PDS (available at bennelongfunds.com/forms) and any related incorporated material to which this form applies.
- I/We declare all the details given in this form are correct and true.

AML/CTF terms and conditions

- Each of Bennelong Funds Management (BFM), the Investment Manager and the Administrator are required to comply with the AML/CTF laws and I/we undertake to provide them with such additional information or documentation as may be requested of me/us, from time to time, to ensure its compliance with such requirements.
- By making this application and holding units in the Fund:
 - I/We will not knowingly do anything to put BFM, the Investment Manager or the Administrator in breach of AML/CTF laws, and agree to promptly notify each of them if I/we am/are aware of anything that would put them in breach of AML/CTF laws.
 - I/We acknowledge that I/we am/are not aware and have no reason to suspect that:
 - the money used to fund my/our investments in the Fund is derived from or related to money laundering, terrorism financing or similar activities (Illegal Activities); and
 - proceeds of my/our investments in the Fund will fund Illegal Activities.
- I/We consent to BFM, the Investment Manager or the Administrator disclosing, in connection with AML/CTF laws, any of my/our Personal Information (as defined in the Privacy Act 1988 (Commonwealth) and its amendments) that they may have.
- I/We acknowledge that in certain circumstances my/our units may be frozen or blocked where it is used in connection with Illegal Activities or suspected Illegal Activities. Freezing or blocking can arise as a result of the monitoring that is required by AML/CTF laws. If this occurs, neither BFM, the Investment Manager nor the Administrator is liable to me/us for any consequences or losses whatsoever and I/we agree to indemnify them if they are found liable to a third party in connection with the freezing or blocking of my/our units.

Tax information

- I/We will provide BFM or its nominee any information that BFM reasonably requires in order to enable BFM to meet all of its compliance, reporting and other obligations under the United States of America Foreign Account Tax Compliance Act ('FATCA') and OECD Common Reporting Standards ('CRS') and all associated rules and regulations from time to time.
- I/We understand that where I/we have provided BFM or its nominee with information about my status or designation under or for the purposes of FATCA, CRS and all associated rules and regulations, BFM will treat that information as true and correct without any additional validation or confirmation being undertaken by BFM except where it is under a legal obligation to do so.

This form must be signed by two directors, a director and the company secretary, or the sole director for sole director companies.

Individual trustee

Authorisation 1 – Individual trustee

Signature of investor A

Date

Title

First name(s)

Family name

Authorisation 2 – Individual trustee

Signature of investor B

Date

Title

First name(s)

Family name

Corporate trustee

Authorisation 1 – Corporate trustee

Signature of investor A

Date

Title

First name(s)

Family name

Capacity

☐

Director

☐

Company Secretary

☐

Sole director

Authorisation 2 – Corporate trustee

Signature of investor B

Date

Title

First name(s)

Family name

Capacity

☐

Director

☐

Company Secretary