

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.

Responsible Entity: Bennelong Funds Management Ltd (ABN 39 111 214 085, AFSL 296806)

Effective date: 18 May 2022

1. Individual trustee details

Investor number			
2 8 0			
Account name (this must EXACTLY match you	ur existing account name e.	g. "Ben and Nell Long ATF T	he Bennelong Super Fund")
Details of individual trustees/transferor			
Name of individual trustee 1			Date of birth
Name of individual trustee 2			Date of birth
If there are more than two, provide the above o	details for additional individu	ual trustees on a separate sh	neet.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2. Corporate trustee details			
·			
Details of company/corporate trustee (transf	eree)		
Full company name			
Country of formation, incorporation or registra	ition (if non-Australian)		
ACN/ARBN	TF	N, ABN or exemption code	
It is not compulsory to provide the company's tax will be deducted from the company's distri			
If you do not provide your ACN or ARBN you m	nust provide a certified copy	of company registration.	
Tax residence (non-Australian companies only	·)		
Name of regulator (if licensed by an Australiar	 n Commonwealth, state or t	erritory statutory regulator)	
Regulator licence number (or other details)			
Registered business street address in Australi	a or country of formation (r	pot a PO Pov)	
Negistered business street address in Australi			
Suburb	State Postcoo	de Country	
Suburb		le Godinity	
Principal place of business (if different from	registered address)		
Street name and number			
Suburb	State Postcoo	de Country	



Main source(s) of fu	nds for investment			
Business activity Supe		perannuation savings		
Financial investments Inherit			ritance/Gift	
Other (please pro	ovide brief description)			
Industry/Nature of bu	usiness (describe in 10 words or less)			
ASIC registration sta	atus			
Proprietary com	•			
Public company				
Director information	on			
For Australian propri the company.	ietary companies and non-Australian private	companie	es, provide the full name of each director of	
Director 1				
Title	First name(s)		Family name	
Director 2				
Title	First name(s)		Family name	
Director 3	First name(a)		Family mana	
Title	First name(s)		Family name	
Director 4 Title	First name(s)		Family name	
	The thanks			
	n four directors, write their full names on a se	oarate pag	e and attach to this form.	
Beneficial ownersh	hip			
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 benefic				
Title	First name(s)		Family name	
Date of birth				
Citizenship				
Australia				
Other (specify)				



Street name and nu	mber ——————				
Suburb		State	Postcode		Country
Shareholder benefic	cial owner 2				
Title	First name(s)			Family	y name
Date of birth					
Citizenship					
Australia					
Other (specify)					
Street name and nu	mber				
Suburb		State	Postcode		Country
Other beneficial o	owners				
	duals who own 25% or more of senior managing officials (or of the senior managing off				oital, provide the names of the individuals who g Director or Directors.
Other beneficial ow	ner 1				
Title	First name(s)			Family	y name
Date of birth					
Citizenship					
Australia					
Other (specify)					
Street name and nu	mber				
Suburb		State	Postcode		Country
Role (for example M	lanaging Director)				



Other beneficial owi	ner 2				
Title	First name(s)		Family name		
Date of birth					
Citizenship					
Australia					
Other (specify)					
Street name and nur	nber				
Suburb	S	State Postcode	Country		
Role (for example M	anaging Director)				
	neficial owners/shareholders, writ and attach to this form.	te their full names, date	s of birth, citizenship, residential addresses and roles		
3. Identificatio	n and certification				
	nents provided by you or your age repared by an accredited translate		on-English documents must be accompanied by an		
certification requirer		ngfunds.com/forms). If	outlined in Section 1 of the Identification and we already have this documentation on file from a ovide the documentation again.		
For a change of trus The document must		F , a Deed of Variation no	ominating the corporate trustee must be provided.		
	ided an ACN or ARBN for your co s. The document must be certifie		ust provide ONE of the following documents to verify		
Certificate of reg	Certificate of registration or incorporation issued by ASIC				
If a regulated co	mpany, a report extracted from th	he relevant registration	body		
Certificate of req	Certificate of registration or incorporation issued by the relevant foreign registration body				
/ Dictribution	election and bank accou	int dotails			
4. Distribution	CIECTION and Dank accor	ant uctans			
Distribution election	on				
Select how you wish	distributions to be processed. If	no selection is made, ir	come distributions will be reinvested.		
Reinvest distribu	utions				
Pay distributions	s into the bank account below				
Nominated bank a	account				
	e held in the same name as the a		thdrawal and distribution payments made. in Section 2, domiciled in Australia and		
Australian financial i	nstitution/bank				



BSB number	Account number
Bank account name	
5 Signing authority	for future transactions
J. Jigining additiontry	
Select who is authorised to prexecuted by all the individual(rovide instructions for this account. If you don't indicate a preference, future instructions must be (s) who signed this form.
Sole director (ONLY for so	ole director companies)
Two directors who have s	signed this form
Director and company se	ecretary 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 - Inc	dividual trustee		
Signature of investor A		Date	
Title	First name(s)	Family name	
Authorisation 2 – Inc	dividual trustee		
Signature of investor	В	Date	
Title	First name(s)	Family name	
Corporate trustee			
Authorisation 1 - Co	prporate trustee		
Signature of investor	A	Date	
Title	First name(s)	Family name	
0			
Capacity Director	Company Secretary Sole director		
Authorisation 2 – Co	orporate trustee		
Signature of investor		Date	
Title	First name(s)	Family name	
Capacity			
Director	Company Secretary		

