

# Transfer of ownership form

Generation Life Tax Effective Equity Income Fund

## Guide to completing this form

- Use this form to transfer ownership of your investment.
- Please use BLUE/BLACK ink and complete the applicable sections in BLOCK LETTERS.

**Important note:** Transfer of ownership from the current owner to the new owner will occur on the transfer being registered by us.

The registration of the transfer will revoke/cancel all existing:

- beneficiary nomination or Future Event transfer instructions.
- Adviser Representative facility or power of attorney nominated to act on behalf of the existing investor(s).
- direct debit authorisation and Regular Savings Plans attached to the investment.

Transfer of ownership will not change the life insured(s). The existing life insured(s) will remain on the investment.

You can add additional life insured(s) to your investment by completing Section 4.

Phone number

Email address

## 2. Power of attorney

**To be completed if a power of attorney is acting on behalf of the investor(s).**

Title

Given name(s)

Surname

If your power of attorney has not previously been registered by us, we will require a certified copy of the power of attorney document as well as the appropriate proof of identification documents in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Laws).

## 3. New investor details

**To be completed by new owner(s)**

Individual(s). **Proceed to Section 3.1**

Trust (including trusts with individual trustees, corporate trustees and deceased estates). **Proceed to Section 3.2**

## 1. Existing investor details

Client number (if known)

Account number

Investor name




Date of birth (dd/mm/yyyy) (if applicable)

Mobile number

### 3.1 Individual and joint account holders

**Required identification documents**

**Certified copies of the following identification documents are required for each individual.**

a current driver's licence or passport (current or expired passport within the last 2 years)

**OR**

a birth certificate **and**

either a tax assessment (less than 12 months old), council rates notice or utilities provider account statement (less than 3 months old).

For other acceptable forms of identification, please refer to the 'Completing proof of identity' document on our website.

**If there are more than two joint holders you will need to complete a separate form for the additional transferee.**

**Transferee 1 (must be at least 10 years old)**

**Personal details** (all correspondence will be sent to this investor)

Title

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Occupation

**Note:** If aged from 10 to less than 16 years then a parent or guardian must provide their details in Transferee 2 below, provide identification documents and must also sign this form.

Mobile number

Phone number

Email address

This email address may be used for investor correspondence.

**Residential address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State

Country

**Postal address** (if different to residential address)

C/- (if applicable)

Address



Suburb/City/Town

Postcode

State

Country

Correspondence will be sent to your postal address.

**Identification information**

AML/CTF Laws require that we collect this information. Your instructions cannot be processed without this information.

Are you a Politically Exposed Person?

Yes

No

**Residency status for tax purposes**

Under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) laws, we are required to ask all investors to provide additional information about their tax residency.

Are you a tax resident of Australia?

Yes

No

Are you a tax resident of a country other than Australia or a U.S. citizen?

Yes

No

If YES, you will need to complete a separate FATCA/CRS Self-Certification form available on our website.

**Transferee 2 (must be at least 16 years old)**

**Personal details**

Title

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Occupation

Mobile number

Phone number

Email address

**Residential address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State




Country

**Postal address** (if different to residential address)

C/- (if applicable)

Address



Suburb/City/Town

Postcode

State




Country

**Identification information**

AML/CTF Laws require that we collect this information. Your instructions cannot be processed without this information.

Are you a Politically Exposed Person?

 Yes  No

**Residency status for tax purposes**

Under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) laws, we are required to ask all investors to provide additional information about their tax residency.

Are you a tax resident of Australia?

 Yes  No

Are you a tax resident of a country other than Australia or a U.S. citizen?

 Yes  No

If YES, you will need to complete a separate FATCA/CRS Self-Certification form available on our website.

**Authority to operate the account (Joint applicants only)**

Please elect which joint transferees have authority to operate the account and bind the other joint investor(s) for future transactions (including additional investments, switches and withdrawals).

 All transferees (default)  Transferee 1  
 Transferee 2  Either transferee

**Sole trader (option available for individual account holders only)**

Are you a sole trader?

 Yes  No (please go to Section 4)

If you are a sole trader you will need to provide the following additional details.

Business name (if applicable)

Australian Business Number (ABN)

**Business address** (if different to residential address)

Address (PO Box is not acceptable.)



Suburb/City/Town

Postcode

State




Country

**3.2 Trusts (including corporate trustees, individual trustees and deceased estates)**

**Required identification documents**

**For trusts that do not have an ABN**

 a certified copy of extracts of the trust deed or extracts of the trust deed showing the name of the trust, name and address of the settlor, amount of the initial settled sum, name(s) and address(es) of the trustee(s), the beneficiaries / unitholders names / class(es) and the trust's execution page.

**For individual Key Beneficial Owners of the Trust and individual trustees (including trustee of a deceased estate) certified copies of the following identification documents are required for each individual.**

 a current driver's licence or passport (current or expired passport within the last 2 years)

**OR**

- a birth certificate **and**
- either a tax assessment (less than 12 months old), council rates notice or utilities provider account statement (less than 3 months old).

**For company Key Beneficial Owners and company trustees (including trustee of a deceased estate).**

Please refer to the 'Completing proof of identity' document on our website for identification document requirements.

**Trust details**

Trust/Fund/Estate name

Business name (if applicable)

ABN (if applicable)

**Type of trust**

Please select the type of trust and provide the relevant information

- Family trust or discretionary trust
- Unit trust
- Foreign trust
- Testamentary trust (i.e. under a Will)

Other (please specify)

**Trust Beneficiaries**

Does the trust deed name the beneficiaries?

- Yes
- No

If YES, please list their full names.

**If there are more than four beneficiaries/unit holders, please provide details on a separate attachment to this Form.**

Beneficiary 1 full name (or entity name)

Are they Key Beneficial Owners?

- Yes
- No

Beneficiary 2 full name (or entity name)

Are they Key Beneficial Owners?

- Yes
- No

Beneficiary 3 full name (or entity name)

Are they Key Beneficial Owners?

- Yes
- No

Beneficiary 4 full name (or entity name)

Are they Key Beneficial Owners?

- Yes
- No

For any of the above trust beneficiaries/unit holders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed Person?

- Yes
- No

If the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and also the beneficiaries named (if any) within specified classes:

1.
2.

**Trust Settlor details**

If the initial settled sum to establish the trust is \$10,000 or more, please provide name and address of the settlor(s) of the trust.

A settlor is the person or entity that subscribes for or settles the initial sum to create the trust.

Name of settlor

Address of settlor

**Are you an individual trustee? (including trustee of a deceased estate)**

- Yes. Proceed to Section 3.3.
- No. Please continue.

**Company as trustee**

**If there are more corporate trustees, repeat those details for each additional trustee and write the full name and address of each trustee down on a piece of paper and attach to this form.**

Full name of company

ACN or ABN

**Contact person details**

Title

Given name(s)

Surname

Mobile number

Phone number

Email address

This email address is the default email address for investor correspondence.

**Registered office address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State

Country

**Postal address (if different to above)**

Address



Suburb/City/Town

Postcode

State

Country

Correspondence will be sent to your postal address.

**Residency status for tax purposes**

Under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) laws, we are required to ask all investors to provide additional information about their tax residency.

Is the company a tax resident of Australia?

 Yes  No

You will need to complete a separate FACTA/CRS Form if any of the following apply to the company:

A tax resident of a country other than Australia or a U.S.citizen?

 Yes  No

A US Company, US Trust or US Partnership?

 Yes  No

An Australian Financial Institution ('AFI') or Other Partner Jurisdiction Financial Institution ('FI')?

 Yes  No

If you answered YES to any of the above, you will need to complete a separate FATCA/CRS Self-Certification form available on our website.

**Director details (proprietary companies only)**

Is the company a proprietary/private company (i.e. Pty Ltd company)?

 Yes.  No. **Proceed to Section 4.**

**If there are more than two directors please attach their details to the Form.**

**Director 1**

Title

Given name(s)

Surname

Are you a Politically Exposed Person?

 Yes  No

Are you a US citizen or US tax resident?

 Yes  No

If YES, please provide your Taxpayer Identification Number (TIN)

**Director 2**

Title

Given name(s)

Surname

Are you a Politically Exposed Person?

Yes

No

Are you a US citizen or US tax resident?

Yes

No

If YES, please provide your Taxpayer Identification Number (TIN)

**Beneficial owners (proprietary companies only)**

If there are more than three beneficial owners please attach their details to the Form.

Please provide full name and address details of those persons who owns or controls 25% or more of the issued capital of the company.

**Beneficial owner 1**

Title

Given name(s)

Surname

Address



Suburb/City/Town

Postcode

State

Country

**Beneficial owner 2**

Title

Given name(s)

Surname

Address



Suburb/City/Town

Postcode

State

Country

**Beneficial owner 3**

Title

Given name(s)

Surname

Address



Suburb/City/Town

Postcode

State

Country

**3.3 Individual(s) as trustee(s)**

**Trustee 1**

**Personal details**

Title

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Occupation

Mobile number

Phone number

Email address

This email address may be used for investor correspondence.

**Residential address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State




Country

**Postal address (if different to residential address)**

C/- (if applicable)

Address



Suburb/City/Town

Postcode

State




Country

Correspondence will be sent to your postal address.

**Trustee 2**

**Personal details**

Title

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Occupation

Mobile number

Phone number

Email address

**Residential address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State




Country

**Postal address (if different to residential address)**

C/- (if applicable)

Address



Suburb/City/Town

Postcode

State




Country

**4. Life insured details**

**The existing life insured(s) will remain registered on the account.**

**New individual and joint owners**

Do you want the new owners named in Section 3.1 to be the life (joint lives) insured?

Yes (default). Each new owner will be registered as the life/lives insured.

No. Please provide additional life insured details below.

**Life insured details**

**If there are more than two additional lives insured please attach their details to the Form.**

**Life insured 1** (if different to individual owners and for new trust owners)

Title

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Occupation

**Residential address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State

Country

**Life insured 2 (if required)**

Title

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Occupation

**Residential address**

Address (PO Box / RMB / Locked Bag is not acceptable)



Suburb/City/Town

Postcode

State

Country

**5. New investor declaration and signature(s)**

I/We confirm that I/We have received a copy of the current disclosure document and have read and understood the disclosure document and agree to be bound by the terms and conditions set out in the disclosure document. If signed under a power of attorney, the attorney certifies that he/she has not received notice of revocation of that power.

**New investor 1**

Name (please print)

Signature

Date (dd/mm/yyyy)

**Please select appropriate box**

Individual

Director

Trustee

Power of attorney

**New investor 2**

Name (please print)

Signature

Date (dd/mm/yyyy)

**Please select appropriate box**

Individual

Director

Trustee

Power of attorney

If your power of attorney has not previously been registered by us, we will require a certified copy of the power of attorney document as well as the appropriate proof of identification documents in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

For more information, please refer to the 'Completing proof of identity' document on our website.



## 6. Existing investor declaration and signature(s)

I/we being the investment owner(s) named above confirm that I/ we am/are the legal and beneficial owner(s) of the above investment and that I/we have not transferred, assigned, mortgaged or charged the investment, or any rights or interests under the investment. I/we transfer my/ our rights, powers and interest in the above investment to the person(s) named above as the Transferee(s), and further acknowledge that any beneficiary nomination or Future Event transfer instructions that I/we have made will be revoked and cancelled.

### Existing owner 1

Name (please print)

Signature

Date (dd/mm/yyyy)

### Please select appropriate box

- |                                     |  |
|-------------------------------------|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Director          |
| <input type="checkbox"/> Trustee    | <input type="checkbox"/> Power of attorney |

### Existing owner 2

Name (please print)

Signature

Date (dd/mm/yyyy)

### Please select appropriate box

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Director / Company secretary |
| <input type="checkbox"/> Trustee    | <input type="checkbox"/> Power of attorney            |

If signed under a power of attorney, the attorney certifies that he/she has not received notice of revocation of that power.

If your power of attorney has not previously been registered by us, we will require a certified copy of the power of attorney document as well as the appropriate proof of identification documents in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

For more information, please refer to the 'Completing proof of identity' document on our website.

### You can submit this form by:

**Mail:** PO Box 263, Collins Street West  
Melbourne VIC 8007



#### Postal address

GPO Box 263, Collins Street West  
Melbourne VIC 8007

#### Email

enquiry@genlife.com.au

#### Enquiries

Investor services: 1800 806 362  
Adviser services: 1800 333 657

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[genlife.com.au](http://genlife.com.au)