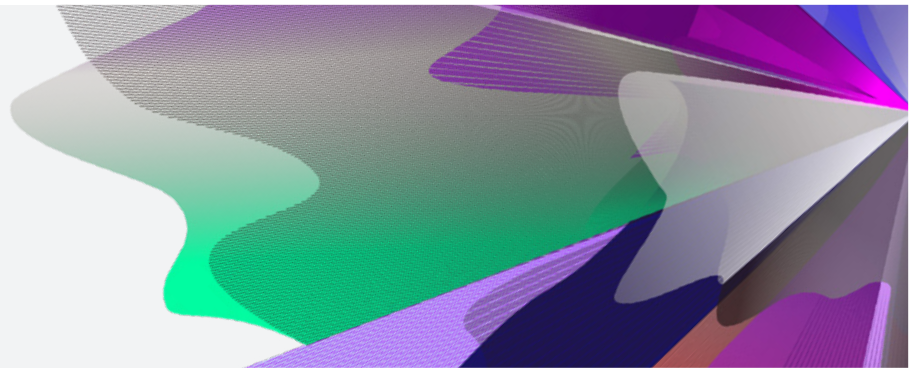




# EXPAND



1 December 2025

## In specie asset transfer authority form

Please use this form to provide IOOF Investment Management Limited (IIML <sup>1</sup>), as Trustee, or Navigator Australia Limited (NAL <sup>2</sup>), as Service Operator, and IOOF Investment Services Limited (IISL <sup>3</sup>), as Custodian, with the ability to in specie transfer listed investments, managed investments, and/or cash (collectively your 'assets') into your Expand Extra or Expand Essential (Expand) account using a Limited general Power of Attorney (LPOA).

**You can use this form to facilitate the transfer of investment assets from your direct ownership or from another investment platform with a different custodian to your Expand account. This form is not required if you are transferring assets from another Expand account.**

An LPOA authorises the Trustee or Service Operator and the Custodian to act on your behalf for a specified time period in relation to facilitating the in specie transfer of your assets into Expand. This LPOA grants the Trustee or Service Operator and the Custodian authority to perform any act that they deem to be reasonably necessary to help facilitate the in specie transfer of your assets into Expand.

Once the assets are transferred, they will be held in the name of IISL on behalf of the beneficial owner. IISL is a related party of the Trustee and Service Operator and is part of the Insignia Financial Group.

It is your responsibility to ensure the information supplied to the Trustee or Service Operator is correct and in the prescribed format. If you do not supply these details, or they are not supplied in the prescribed format, your transfer may not be processed.

If the information supplied is incorrect, this may result in incorrect Capital Gains Tax being reported in the annual tax statement and annual tax reporting to the Australian Tax Office. You should seek legal and financial advice about the implications of a LPOA.

1 IIML ABN 53 006 695 021, AFS Licence No. 230524 is Trustee of Expand Extra Super, Expand Extra Pension, Expand Essential Super and Expand Essential Pension.

2 NAL ABN 45 006 302 987, AFSL 236466 is the Service Operator for Expand Extra Investment and Expand Essential Investment.

3 IISL ABN 80 007 350 405, AFSL 230703 is the Custodian of Expand Extra Super, Expand Extra Pension, Expand Essential Super, Expand Essential Pension, Expand Extra Investment and Expand Essential Investment.

Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided. Any personal information provided in this form will be handled in accordance with the Trustee and Service Operator's privacy policy, available at [myexpand.com.au/privacy](http://myexpand.com.au/privacy)

## Step 1A: Expand Investment account details only

I will be creating a new Expand Essential Investment or Expand Extra Investment account:

Account number (if known)

Account name

## Step 1B: In specie transfer details

Please select one.

You are transferring assets into a new account and have attached this form to your completed application form for Expand.

OR

You are transferring assets into an existing Expand account.

Account number

## Step 1C: Beneficial ownership declaration

Is there a change of beneficial ownership occurring as a result of this in specie transfer?

**No change of beneficial ownership (investment accounts only).** By selecting this option, you acknowledge that this in specie transfer will not result in a change in beneficial ownership.

**Change of beneficial ownership.** By selecting this option, you acknowledge that this in specie transfer will result in a change in beneficial ownership.

Changes in beneficial ownership will realise CGT gains or losses on the transferred assets and there may be tax implications. We suggest seeking advice from a registered tax agent to determine how this may impact your tax obligations

OR

## Step 1D: Expand Super and Expand Pension account details only

I will be creating a new Expand Essential Super, Expand Essential Pension, Expand Extra Super or Expand Extra Pension account:

Account number (if known)

Account name

## Step 1E: In specie transfer details

Please select one.

You are transferring assets into a new account and have attached this form to your completed application form for Expand.

OR

You are transferring assets into an existing Expand account.

Account number

**Important note:** a change in beneficial ownership will occur for any in specie transfers into an Expand super or pension account.

Changes in beneficial ownership will realise CGT gains or losses on the transferred assets and there may be tax implications. We suggest seeking advice from a registered tax agent to determine how this may impact your tax obligations.

## Step 1F: Rollover contribution details (if applicable)

If your in specie contribution is being rolled over from another superannuation fund, please complete the following details:

Fund name	<input type="text"/>									
Unique Super Identifier (USI)	<input type="text"/>									
Account number	<input type="text"/>									
Please advise if it's a Full rollover with a tick <input checked="" type="checkbox"/> or Partial rollover <input type="checkbox"/>	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Step 1G: Concessional or non-concessional contribution details (if applicable)

Please provide details of any concessional or non-concessional contribution details:

### Concessional contributions

Personal contribution for which you intend to claim a tax deduction <sup>1</sup>	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (please provide details in the 'Additional Information sheet' of this form.)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Non-concessional contributions

Personal contribution	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse contribution	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (please provide details in the 'Additional Information sheet' of this form.)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total of concessional and non-concessional contributions</b>	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<sup>1</sup> Personal contributions for which you intend to claim a tax deduction must be accompanied by a 'Notice of intent to claim or vary a deduction for personal super contributions' form from the Australian Taxation Office (ATO). If this ATO form is not submitted along with this 'In specie transfer form', then we will process the contribution as being a non-concessional contribution.



## Step 3: Transferor details

Please provide the transferor(s) details. One or both options may apply. These details will help the Trustee or Service Operator contact your transferor(s), if needed.

Name/institution	<input type="text"/>
Account name	<input type="text"/>
Account number	<input type="text"/>
Contact phone number	<input type="text"/>
Contact email address	<input type="text"/>

### AND/OR

Please transfer from a directly held investment in my name or company name.

Holder identification number (HIN) or Securityholder Reference Number (SRN)	<input type="text"/>				
Postal address	<input type="text"/>				
Suburb	<input type="text"/>	State	<input type="text"/>	Post code	<input type="text"/>

## Step 4: Checklist

Before signing the declaration and returning this document to the Trustee or Service Operator, please check that you have:

Completed the applicable section of **Step 2b: Expand In specie Transfer Form – Excel spreadsheet** form (only required for Expand Essential or Expand Extra Investment where there is no change of beneficial owner).

### AND

My/our witness has completed, signed and dated **Step 6: Witness declaration**.

### AND

I/we have provided valid certified ID.

### AND

I/we have retained the original copy of this In specie asset transfer form.

### AND

I/we acknowledge that the acceptance of the in specie asset transfer authority form is outside of IIML, NAL, and IISL's control, and that I/we may be asked to provide Standard Transfer Forms in some circumstances.

## Step 5: Authorisation and declaration

The Trustee and Service Operator collect the information in this form for the purpose of executing a LPOA and transfer the requested assets into your account. Any personal information provided in this form will be handled in accordance with the privacy policy available at [myexpand.com.au](http://myexpand.com.au).

By signing the Limited Power of Attorney (LPOA) declaration below, I/we:

- Request all assets detailed in Step 2 be transferred into the requested Expand account.
- Declare that the beneficial ownership declaration section in Step 1C applies to the transfer of all assets detailed in Step 2.
- Acknowledge any assets transferred into the Expand account will form part of the account balance. The terms and conditions relating to the ongoing administration of these holdings and associated fees and costs relevant to your Expand account will apply to the transferred assets.
- Acknowledge that for a no change in beneficial ownership transfer, the unrealised CGT parcel information you provide will be used by the Trustee or Service Operator as a base for future tax reporting supplied by Expand.

## Limited Power of Attorney

You appoint IIML, as Trustee, NAL, as Service Operator, and also IISL, as Custodian, each of Level 1, 800 Bourke Street, Docklands, Victoria, Australia, jointly and severally to be your attorneys to do on your behalf anything you may lawfully authorise an attorney to do in facilitating the transfer of the assets as described in Step 2 of this form into your Expand account.

As your lawful attorneys, the Trustee, Service Operator and Custodian (Attorneys) can perform any act that they deem to be reasonably necessary to help facilitate the transfer of the assets described in Step 2 of this form into your Expand account. These acts include but are not limited to:

- Transferring all assets described in Step 2 of this form into your Expand account.
- Executing any documents or forms the Attorneys reasonably believe are necessary to transfer the assets described in Step 2 of this form.

I declare that this LPOA remains in full effect until all assets described in Step 2 of this form are transferred into your Expand account or until the Attorneys have received revocation of this LPOA.

### Signature

Digital signatures will not be accepted.

Signatory 1		Date (dd/mm/yyyy)	
Role (such as Investor/Director/ Trustee as applicable)			
Full name			

### Additional Signatures (if required)

Signatory 2		Date (dd/mm/yyyy)	
Role (such as Investor/Director/ Trustee as applicable)			
Full name			

Signatory 3		Date (dd/mm/yyyy)	
Role (such as Investor/Director/ Trustee as applicable)			
Full name			

Signatory 4		Date (dd/mm/yyyy)	
Role (such as Investor/Director/ Trustee as applicable)			
Full name			

Signatory 5

Date (dd/mm/yyyy)

Role (such as Investor/Director/Trustee as applicable)

Full name

Signatory 6

Date (dd/mm/yyyy)

Role (such as Investor/Director/Trustee as applicable)

Full name

Common seal  
(of company) if required

## Step 6: Witness declaration

I have witnessed the signing of this LPOA by the signatory/signatories on the date stated and declare that I am over 18 years of age.

Witness 1

Date (dd/mm/yyyy)

Full name

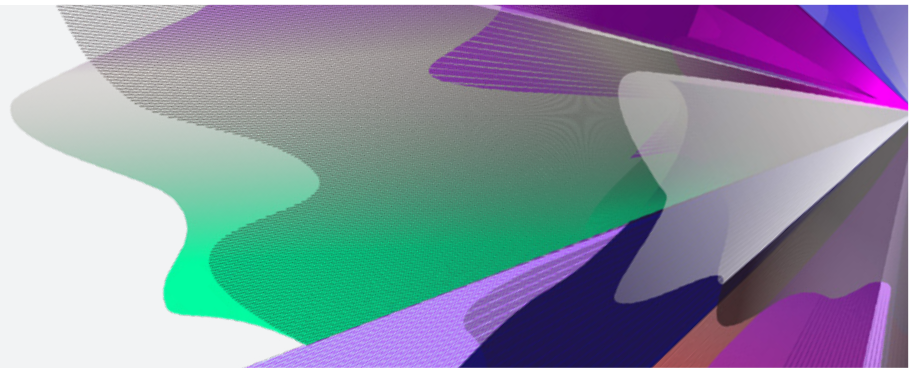
**Please forward all correspondence and enquiries to**

**Post** Expand GPO Box 264, Melbourne VIC 3001  
**Email** [clientfirst@myexpand.com.au](mailto:clientfirst@myexpand.com.au)

**Telephone** 1800 517 124  
**Web** [myexpand.com.au](http://myexpand.com.au)



**EXPAND**



1 December 2025

# Additional information sheet

Please use this Additional information sheet to provide any additional information to help facilitate the transfer of your assets onto Expand.

Eg If transferring cash, please provide details on how and when we will be receiving it.