	C	0	R	P	0	R	A	T
Credit Card Details			www.c	orpora	iteexpr	ess.co	m.au	
☐ Visa ☐ Master Card ☐ American Express * American Express cards will attract a 1.75% surcharge	ABN 35 115 087 520 PO BOX 20247, World Square NSW 2002							
Name on card:		S			′ Castle y NSW	_	Street	:
Expiry Date:			Tele	phone	(02) 9	261 21	100	
CVC:		а	dmin@)corpo	rateexp	oress.c	com.au	
Signature: \$495.00								
Disclaimer - We do not provide legal, accounting or stamp duty advice and taxation, legal or other liabilities which may arise from the work we perfor obtain legal and accounting advice in relation to your affairs and in particu	m on y	our ir	struc	tions.		•	•	

INSTRUCTION SHEET FOR UNIT TRUST

Name of Trust:

Unfixed Trust □ Form of Trust: Fixed Trust □

Please Note: If you have ticked Fixed Trust the unit trust deed created pursuant to this order will be a fixed trust for the purposes of the NSW Land Tax Management Act 1956. See Notes at the foot of this order form.

If the Unit Trust will not hold real estate as an asset, you may wish to create an unfixed trust as it is a more flexible vehicle for commercial transactions.

Please seek professional advice from your accountant or solicitor in relation to establishing the type of unit trust that best suits your purposes.

State of jurisdiction:		
Date of Deed:		to be left blank
Name of Settlor: (Must not be a beneficiary		
Address of Settlor:		
Amount of Settled Sum	: \$	
Full Name of Trustee:		
ACN of Trustee: (Not required for individual		
Address of Trustee:		
Directors of Trustee:		
Chairman of Trustee:		

Unitholders (Please provide full names)				
Name of 1st Unitholder:				
Company ACN (if applicable):				
Address of 1st Unitholder:				
Number of units to be held:				
Amount paid per Unit: \$ per unit				
If 1st Unitholder is a company – full names of Directors	attendir	ng Dire	ctors M	eeting:
Chairman of Directors of Unitholder Company:				
If sole director, is this person also a secretary? If NOT sole director/secretary – full name of company so	□ ecretary	Yes		No
Does the Company have a Common Seal?		Yes		No
Is the 1st Unitholder to hold the Units as a trustee?		Yes		No
If so, name of Trust or beneficiaries:				
Name of 2nd Unitholder:				
Company ACN (if applicable):				
Address of 2nd Unitholder:				
Number of units to be held:				
Amount paid per Unit: \$ per unit				
If 2nd Unitholder is a company – names of Directors att	ending I	Directo	rs Meet	ing:
Chairman of Directors of Unitholder Company:				
If sole director, is this person also a secretary?		Yes		No
Does the Company have a Common Seal?		Yes		No
Is the 2nd Unitholder to hold the Units as a trustee?		Yes		No
If so, name of Trust or beneficiaries:				

Notes:

Under the New South Wales Land Tax Management Act 1956, if land is the subject of a fixed trust, the tax-free threshold applies in respect of land that is the subject of that trust. If the trust is not a fixed trust, it is treated as a special trust and the tax-free threshold does not apply to land owned by the trust.

If a trust satisfies relevant criteria, the beneficiaries of the trust will be taken to be owners of the land.

Accordingly, the trust will be taken to be a fixed trust and the trust will be entitled to the tax-free threshold.

The relevant criteria are as follows:

- a) the trust deed must specifically provide that the beneficiaries of the trust:
 - i) are presently entitled to the income of the trust, subject only to payment of the trustees proper expenses, and
 - ii) are presently entitled to the capital of the trust, and may require the trustee to wind up the trust and distribute the trust property or the net proceeds of the trust property,
- b) the entitlements referred to in paragraph (a) cannot be removed, restricted or otherwise affected by the exercise of any discretion, or by a failure to exercise any discretion, conferred on any person by the trust deed.

Your Details

By completing this form you agree to the trading terms and conditions of Corporate Express found on www.corporateexpress.com.au and acknowledge that Corporate Express will act as the lodging agent for any ASIC forms relating to this order.

Name	
Contact	Email
Address	
Delivery Address ———————————————————————————————————	
Phone	