



Section A: Employee to complete

1 Choice of superannuation fund

I request that all my future superannuation contributions be paid to: (place an in one of the boxes below)

my employer's superannuation fund named in 'Section B – Question 6'

my own choice of superannuation fund

! You only need to complete 'Section A' if you want to choose the superannuation fund that your employer's superannuation contributions are paid to.

2 Your details

Name

Employee identification number (if applicable)

Tax file number (TFN)

➤ Make sure your superannuation fund knows your TFN. You can check just by looking at your latest statement from them. It helps you keep track of your money, allows you to pay extra contributions, and makes sure the money gets taxed at the special low rate.

3 Details of my chosen superannuation fund:

Fund name

Fund address

Suburb/town State/territory Postcode

Member No. (if applicable)

Account name

Superannuation fund's Australian business number (ABN) (if applicable)

Superannuation product identification number (if applicable)

Daytime phone number

4 Appropriate documentation (Place an in the box if you have attached the required information.)

- I have attached:
- a. a letter from the trustee stating that this is a complying fund or retirement savings account (RSA) or, for a self managed superannuation fund, a copy of documentation from the ATO confirming the fund is regulated
 - b. written evidence from the fund stating that they will accept contributions from my employer, and
 - c. details about how my employer can make contributions to this fund.

Your employer is not required to accept your choice of fund if you have not provided the appropriate documents.

Signature

Date
Day Month Year
 / /

! If you have completed 'Section A', return this form to your employer and keep a copy for your own records. **Do not send this form to us at the ATO or your superannuation fund.**

Section B: Employer to complete

➤ Give this form to your employee after you have completed 'Section B'.

5 Your details

Business name

ABN

Signature

Date

Day

Month

Year

/ /

6 Your employer nominated superannuation fund

If the employee does not choose a different superannuation fund, superannuation contributions will be paid to the following superannuation fund on behalf of this employee (unless the employee has previously chosen a different fund):

Fund's name

Superannuation product identification number (if applicable)

For the product disclosure statement for this fund (if applicable) Phone

Fund's website

For your records:

This section must be completed when the employee returns the form to you with a completed 'Section A'.

Date valid choice is accepted / / Date you act on your employee's valid choice / /

❗ Do not send a copy of this form to us at the ATO or your superannuation fund. You must keep a copy for your own records for a period of five years.

❗ When you receive this form and all of the required information from your employee, and where an employee has chosen a fund, any contributions you make in the two months after receiving the form can be made to either your employer nominated superannuation fund (your default fund) or the employee's new chosen fund. Contributions after the two month period must be made to the employee's new chosen superannuation fund.

PRIVACY STATEMENT

We do not collect this information. We provide a format for you as an employee to provide that information to your employer.

HOW TO COMPLETE THIS FORM

SECTION A: EMPLOYEES

If you are an employee and you are eligible to choose a super fund, your employer must give you this form after they have completed 'Section B'.

Question 1

Choice of superannuation fund

Complete this question by placing an 'X' in one of the boxes.

OPTION 1: You can stay with your employer's super fund

If you don't make a choice, your employer's super contributions will be paid into a fund chosen by your employer. You do not need to complete 'Section A' for this option.

Your employer is not liable for the performance of the super fund you choose or the employer fund they choose on your behalf.

ⓘ Do not seek financial advice from your employer unless they are licensed to provide it. You can choose a different fund later if you like.

ⓘ You only need to complete 'Section A' if you are choosing a fund that is different to your employer's nominated fund (also known as their default fund). You do not need to return this form to your employer if you want to continue to stay with their default fund.

OPTION 2: Choose your own super fund

You can choose the super fund you want your employer super contributions paid to. You need to complete 'Section A' for this option.

ⓘ Any money you have in existing funds will remain there unless you arrange to transfer it (or roll it over) to another fund. Check the impact of any exit fees, or benefits you may lose, before leaving the fund. Your employer cannot do this for you.

ⓘ Your employer is only required to accept one *Standard choice form* from you every 12 months.

➤ If you chose this option, go to 'Question 2'.

Question 2

Your details

Provide your personal details.

If you quote your tax file number (TFN) to your employer for super purposes, they must provide it to the super fund they pay your super to.

Providing your TFN means:

- your super fund will, subject to its rules, be able to accept all contributions for you
- the tax on contributions your fund receives for you will not increase
- other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your super benefits, and
- it is easier to keep track of different super accounts in your name so you receive all your super when you retire.

➤ You are not legally required to quote your TFN but if you do not quote it your contributions may be taxed at a higher rate.

Question 3

Details of my chosen superannuation fund

Provide the details of your chosen super fund.

Question 4

Appropriate documentation

Complete by placing an 'X' in the box and including a copy of the appropriate documentation listed in the *Standard choice form*.

ⓘ Your employer does not have to accept your choice of fund if you have not provided the appropriate documents.

➤ If you have completed 'Section A', return this form to your employer and keep a copy for your own records. Do not send a copy of this form to us at the Australian Taxation Office (ATO) or your super fund.