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 pald 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:

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You are not legally required to quote your TFN but if you do not quote it your contributions may be taxed at a higher rate.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

SECTION B: EMPLOYERS

You must complete 'Section B' of the form before you give the form to your eligible employee.

Question 5 Your details

Provide your details.

Question 6

Your employer nominated superannuation fund Provide details of your employer nominated super fund.

If your employer nominated fund has not changed, write 'NOT APPLICABLE' in the 'Fund's name' field.

Give this form to your employee after you have completed 'Section B'. When your employee returns the completed form to you, do not send it to us at the ATO or your super fund. You must keep a copy for your own records for five years.

Make sure that you pay super contributions for your employees by the super guarantee cut-offs:

- ы 28 October
- 28 January
- 28 April

This applies whether an employee completes this form or not.

Where an employee chooses a fund, any contributions you make in the two months after receiving the form can be made to either your employer nominated super 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 super fund.

♦ MORE INFORMATION

For individuals

- Super what you need to know (NAT 71039), and
- M Super and your retirement (NAT 71040).

For employers

- Super what employers need to know (NAT 71038)
- Superannuation guarantee how to meet your super obligations (NAT 1987), and
- Paying super your handy reference (NAT 72035).

For more information:

- visit our website at www.ato.gov.au
- visit ASIC's FIDO website at www.fido.gov.au for financial tips and safety checks
- subscribe to 'What's New' at www.ato.gov.au to receive regular updates
- phone us on **13 10 20** between 8.00am and 6.00pm, Monday to Friday, to speak to a tax officer
- write to us at

Australian Tax Office PO Box 3578 ALBURY NSW 2640

If you do not speak English well and need help from us, phone the Translating and Interpreting Service on 13 14 50.

If you are deaf, or have a hearing or speech impairment, phone us through the National Relay Service (NRS) on the numbers listed below:

- xx TTY users, phone 13 36 77 and ask for the ATO number you need
- Speak and Listen (speech-to-speech relay) users, phone 1300 555 727 and ask for the ATO number you need
- internet relay users, connect to the NRS on www.relayservice.com.au and ask for the ATO number you need.



Standard choice form

	Choice of superannuation fund I request that all my future superannuation contributions be paid to: (place an X 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.								
	Your details								
	Name								
	Employee ident	tification 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.							
Details of my chosen superannuation fund:									
	Fund name								
	Fund address								
	Manala au Nia	Suburb/town State/territory Postcode							
	Member No. (if applicable)								
	Account name								
	Superannuation	n fund's Australian business number (ABN) (if applicable)							
	Superannuation	n product identification number (if applicable)							
	Daytime phone number								
	Appropriate (documentation (Place an X) in the box if you have attached the required information.)							
	I have attact a. a letter fr self man b. written e								
	Your emplo	oyer is not required to accept your choice of fund if you have not provided the appropriate documents.							
	Signature								

	Sive this form to your employee after you have completed 'Section B'.									
	Your details									
	Business name	Morgan Consi	Consulting Pty Ltd							
	ABN Signature	82 5	508	773	214					
								Date Day	Month /	Year
	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	MLC Masterke	ey Busine:	ss Super						
	Superannuation product identification number (if applicable) MLC0430AU									
	For the product	disciosure stat	ement fo	r this fund (if	applicable)	Phone 13	2652			
	Fund's website	www.mlc.com	.au							
ľ	your records:									
	This section mu	st be complete	ed when t	he employee _{Month}	returns the _{Year}	form to you	ı with a comp	Day	Month	Year
	Date valid choic	e is accepted				Date yo employ	ou act on your ee's valid cho		/	/
		end a copy of or a period of f		s form to us at the ATO or your superannuation fund. You must keep a copy for your years.						
									_	
	chosen a fund nominated su	u receive this for l, any contribut perannuation for e made to the	tions you und (your	make in the r default fund)	two months or the emp	s after receiv ployee's new	ring the form o chosen fund	can be made	to either y	our employe

PRIVACY STATEMENT

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