

Superannuation Standard choice form

For use by employers when offering employees a choice of fund and by employees to advise their employer of their chosen fund.

| Se | ection A: Employee to complete |
|----|---|
| 1 | Choice of superannuation (super) fund |
| | I request that all my future super contributions be paid to: (place an X in one of the boxes below) |
| | The APRA fund or retirement savings account (RSA) I nominate \nearrow Complete items 2, 3 and 5 |
| | The self-managed super fund (SMSF) I nominate Complete items 2, 4 and 5 |
| | The super fund nominated by my employer (in section B) Ocomplete items 2 and 5 |
| 2 | Your details |
| | Name ALEESHA BUNRITH |
| | Employee identification number (if applicable) |
| | Tax file number (TFN) TFN here |
| | You do not have to quote your TFN but if you do not provide it, your contributions may be taxed at a higher rate. |
| | Your TFN also helps you keep track of your super and allows you to make personal contributions to your fund. |
| | You will need current details from your APRA regulated fund or RSA to complete this item. Fund ABN 34 300 938 877 Fund name STUDENT SUPER PROFESSIONAL SUPER |
| | Fund address |
| | 56 MEAGHER STREET |
| | |
| | Suburb/town State/territory Postcode CHIPPENDALE NSW 2008 |
| | |
| | Fund phone 1 3 0 0 6 4 6 9 6 0 |
| | Unique superannuation identifier (USI) 34300938877006 |
| | Your account name (if applicable) |
| | ALEESHA BUNRITH |
| | Your member number (if applicable) 9 9 4 9 1 |
| | |

Required documentation

You need to attach a letter from your fund stating that they are a complying fund and that they will accept contributions from your employer. Correct information about your super fund is needed for your employer to pay super contributions.

| Nominating your self-managed super fund (SMSF) | |
|--|--------------|
| You will need current details from your SMSF trustee to complete this item. | |
| Fund ABN | |
| Fund name | |
| | |
| Fund address | |
| | |
| | |
| Suburb/town State/territory Postco | ide |
| | الــالـ |
| Fund phone | |
| Fund electronic service address (ESA) | |
| | |
| Fund bank account | _ |
| BSB code (please include all six numbers) Account number | |
| Required documentation You need to attach a document confirming the SMSF is an ATO regulated super fund. You can locate and print a copy of the compliance status for your SMSF by searching using the ABN or fund name in the Super Fund Lookup service at http://superfundlookup.gov.au/ | |
| If you are the trustee, or a director of the corporate trustee you can confirm that your SMSF will accept contributions from your employer by making the following declaration (place an 'X' in the box below): | Ш |
| I am the trustee, or a director of the corporate trustee of the SMSF and I declare that the SMSF will accept contribut from my employer. | ions |
| If you are not the trustee, or a director of the corporate trustee of the SMSF, then you must attach a letter from the trustee confirming that the fund will accept contributions from your employer. | эе |
| Signature and date | |
| If you have nominated your own fund in Item 3 or 4, check that you have attached the required documentation and then place an 'X' in the box below. | |
| I have attached the relevant documentation (Letter of Compliance). | |
| Signature Sign here | |
| Date | _ |
| Day Month Year | |

Return the completed form to your employer as soon as possible.

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Section B: Employer to complete You must complete this section before giving the form to an employee who is eligible to choose the super fund into which you pay their super contributions. Sign and date the form when you give it to your employee. 6 Your details Business name **ABN** Signature Date Day Month 7 Your nominated super fund If the employee does not choose their own super fund, you are required to pay super contributions on their behalf to the fund that you have nominated below: Super fund name Unique superannuation identifier (USI) Phone (for the product disclosure statement for this fund) Super fund website address Section C: Employer to complete Complete this section when your employee returns the form to you with section A completed. 8 Record of choice acceptance In the two months after you receive the form from your employee you can make super contributions to either the fund you nominated or the fund the employee nominated. After the two-month period you must make payments to the fund chosen by the employee. If you don't meet your obligations, including paying your employee superannuation contributions to the correct fund, you may face penalties. Month Month Year Date employee's choice Date you act on your is received employee's choice

PRIVACY STATEMENT

The ATO does not collect this information; we provide this form as a means for employees to identify and provide necessary information to their employer. An employer is authorised to collect an employee's TFN under the *Superannuation Industry* (*Supervision*) *Act 1993*. It is not an offence for an employee not to quote their TFN. However, quoting a TFN reduces the risk of administrative errors and if the employee does not quote their TFN their contributions may be taxed at a higher rate. An employee can get more details regarding their privacy rights by contacting their superannuation fund.

Employers must keep the completed form for their own record for five years. Do not send it to the Australian

Taxation Office, the employer's nominated fund or the employee's nominated fund.

Student Super Professional Super Letter of Compliance





Fund name: Student Super Professional Super Australian Business Number (ABN): 34 300 938 877

Fund RSE Registration Number: L0000888 Unique Superannuation Identifier (USI): 34300938877006

1 Complying Fund Status

Student Super Professional Super is a complying and regulated fund in accordance with the Superannuation Industry (Supervision) Act 1993 (SIS).

2 Acceptance of Superannuation Contributions

Student Super Professional Super is able to accept all types of superannuation contributions.

The Trustee of Student Super Professional Super has no reason to believe that the fund will not comply with the SIS Act and Regulations, and is not subject to any direction from the regulator not to accept employer contributions.

All preserved benefits remain preserved in accordance with the SIS Act and Regulations.

3 SuperStream

Under SuperStream (the Government's legislation for electronic superannuation payments), all employers must pay super contributions through a method that meets the SuperStream rules.

Employers can do this by using:

- Their own software solution that complies with SuperStream;
- A solution by an outsourced payroll or other service provider that complies with SuperStream; or
- A clearing house, such as the Small Business Superannuation Clearing House.

More information about SuperStream is available at ato.gov.au/super/superstream/.

4 Issued by:

Diversa Trustees Limited as Trustee for Student Super Professional Super, a division of the Tidswell Master Superannuation Plan.

5 Date of Issue:

18 December 2020