



Notice of re-contribution of COVID-19 early release amounts

When to use the form

Use this form to notify your super fund of re-contribution of COVID-19 early release superannuation amounts.

Only use this form when making personal contributions to be treated as a re-contribution of COVID-19 early release of superannuation amounts. These amounts will not count towards your non-concessional contributions cap.

! This form must be provided to your super fund on or before the time when the contribution is made.

Completing this statement

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character per box.
- Place **X** in ALL applicable boxes.

! The instructions contain important information about completing this notice. Refer to them for more information about how to complete and lodge this notice.

Requirements

To meet the conditions of re-contributing COVID-19 early release amount, you must:

- have received COVID-19 early release superannuation amounts
- re-contribute the amounts between 1 July 2021 and 30 June 2030
- the total amount re-contributed cannot exceed the total amount released to you through COVID-19 early release, and
- you cannot claim a deduction in your income tax return for amounts you re-contribute on this form.

Section A: Your details

1 Tax file number (TFN)

<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

! This form is to help you provide details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the *Superannuation Industry (Supervision) Act 1993*, the *Income Tax Assessment Act 1997* and the *Taxation Administration Act 1953*. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund does not already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy, contact the entity you are providing this form to.

2 Name

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given name

3 Date of birth

Day / Month / Year

4 Current postal address

Suburb/town/locality State/territory Postcode

Country if outside Australia (Australia only) (Australia only)

5 Daytime phone number (include area code)

Section B: Super fund's details

The super fund to which the re-contribution of COVID-19 early release amounts is going to be paid.

6 Fund name

Two rows of empty boxes for entering the fund name.

7 Fund Australian business number (ABN)

Empty boxes for entering the ABN, structured as 11 separate input fields.

8 Member account number

A single row of 14 empty boxes for entering the member account number.

9 Unique superannuation identifier (USI) (if known)

A single row of 14 empty boxes for entering the USI.

Section C: Re-contribution details

10 Date of contribution

Day / Month / Year input fields with small text labels above each part.

11 The amount to be treated as a re-contribution of COVID-19 early release of superannuation

\$ [] [] [] [] [] . [] [] input fields for the amount.

Section D: Declaration

This form has a declaration for you to state the information in it is true and correct. Review the information before you sign the declaration. If you provide false or misleading information, or fail to take reasonable care, you may be liable to administrative penalties imposed by taxation law.

I declare that:

- I received COVID-19 early release superannuation amounts
- the amount re-contributed in this notice, in addition to any previous re-contributed amounts, is not more than the total of my COVID-19 early release amounts.
- this form was given to my super fund on or before the time the re-contribution was made.
- the information given on this notice is true and correct.

Name (Print in BLOCK LETTERS)

A single row of 30 empty boxes for entering the name.

Signature

A large rectangular box for the signature.

Date

Day / Month / Year input fields with small text labels above each part.

! Send your completed notice to your super fund. Do not send it to us. Your fund will provide the required information to us.