



Notice of intent to claim or vary a deduction for personal super contributions

COMPLETING THIS STATEMENT

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character per box.
- Place 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.

Section A: Your details

1 Tax file number (TFN)

! The ATO does not collect this information provided on this form. This form is to assist you in providing 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 doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.

2 Name

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given names

3 Date of birth / /

4 Current postal address

Suburb/town/locality

State/territory Postcode

UPPER SWAN WA 6069

Country if outside of Australia

5 Daytime phone number (include area code)

Section B: Super fund's details

6 Fund name

7 Fund Australian business number (ABN)

8 Member account number

9 Unique Superannuation Identifier (USI) (if known)



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Section A: Your details

1 Tax file number (TFN)

627 477 157

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2 Name

Title: Mr Mrs Miss Ms Other

Family name

GRAY

First given name

VICKIE

Other given names

ANNE

3 Date of birth

Day: 08 / Month: 03 / Year: 1961

4 Current postal address

1419 GREAT NORTHERN HIGHWAY

Suburb/town/locality

UPPER SWAN

State/territory

WA (Australia only)

Postcode

6069 (Australia only)

Country if outside of Australia

5 Daytime phone number (include area code)

Section B: Super fund's details

6 Fund name

THE BIVA GRAY SUPERANNUATION FUND

7 Fund Australian business number (ABN)

68 451 750 242

8 Member account number

002

9 Unique Superannuation Identifier (USI) (if known)

Section C: Contribution details

10 Personal contribution details

Is this notice varying an earlier notice? No Yes

If you answered 'No' complete the **Original Notice to Claim a Tax Deduction** section below.
If you answered 'Yes' complete the **Variation of previous valid notice of intent** section below.

ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION

- 11 Financial year ended 30 June 20
- 12 My personal contributions to this fund in the above financial year \$, .
- 13 The amount of these personal contributions I will be claiming as a tax deduction \$, .

Section D: Declaration

This form has a declaration where you say the information in it is correct and complete. Please 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.

INTENTION TO CLAIM A TAX DEDUCTION

1 Complete this declaration if you have **not** previously lodged a valid notice with your super fund for these contributions.


- I declare that at the time of lodging this notice:*
- I intend to claim the personal contributions stated as a tax deduction
 - I am a current member of the identified super fund
 - the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions
 - I have not included any of the contributions in an earlier valid notice.

- I declare that I am lodging this notice at the earlier of either:*
- before the end of the day that I lodged my income tax return for the income year in which the personal contributions were made, **or**
 - before the end of the income year following the year in which the contribution was made.
- I declare that the information given on this notice is correct and complete.*

Name (Print in BLOCK LETTERS)

V I C Y I E A N N E O R A Y

Signature

VA
X 

Date

Day: 10 / Month: 08 / Year: 2023

2 Send your completed notice to your super fund. **Do not send it to us.** The information on this notice is for you and your super fund. We don't collect this information; we only provide a format for you to provide the information to your super fund.

VARIATION OF PREVIOUS VALID NOTICE OF INTENT

- 14 Financial year ended 30 June 20
- 15 My personal contributions to this fund in the above financial year \$, .
- 16 The amount of these personal contributions claimed in my original notice of intent \$, .
- 17 The amount of these personal contributions I will now be claiming as a tax deduction \$, .