



Excess concessional contributions Election form

Complete this form if you wish to release excess concessional contributions from your superannuation fund.

- This election and the amount you release are optional – you do not have to release any amount.
- You are able to choose more than one superannuation fund.
- The amount released will be used to pay any income tax liability you have and offset any outstanding tax or other Australian Government agency debts. The remaining amounts will be credited to you.
- This election is irrevocable.

To make an election you must return this form to us within **21 days** of your Determination letter issue date.

Refer to your letter and *Important information – fact sheet* for further details or log on to ato.gov.au and search for excess concessional contributions.

Section A: Personal details

1 Tax file number (TFN)

⚠ While it is not compulsory to provide your ABN or TFN, it will help us advance your request promptly.

2 Name

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given name

Section B: Excess contributions details

All fields are mandatory.

3 Your excess concessional contributions amount stated on your determination

\$, , .

Day Month Year

4 Date of your excess concessional contributions determination

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5 Year of contributions (eg. use 2015 for the 2014–15 financial year)

Section C: Superannuation fund details

6 Provide election amounts

Complete the below table detailing the amount and fund you are electing to release amounts from.

⚠ The total election amount cannot exceed the maximum release amount provided to you on your determination letter.

Superannuation fund name	Superannuation fund ABN	Account number	Election amount
<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"/>	<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"/>	<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"/>
Total election amount			\$ <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 amount must be equal to or less than 85% of the amount stated at question 3.

Section D: Declaration

Privacy

We are authorised by taxation law to collect information and to disclose it to other government agencies. You can find out more information about your privacy on our website ato.gov.au/privacy

Complete the declaration that applies to you

ACCOUNT HOLDER DECLARATION

I declare that the information contained in this election form is true and correct. I am aware that penalties can apply and I may be prosecuted if I make a false or misleading statement and that this election may be deemed invalid.

Name (Print in BLOCK LETTERS)

Signature

Date

Day

Month

Year

 / /

OR

LEGAL REPRESENTATIVE DECLARATION

I, the legal representative, declare that:

- *I am authorised by the client to give this election form to the ATO*
- *this election form and any attached documents have been prepared according to the information supplied by the client*
- *I have received a declaration from the client on this election form stating that the information provided and any attached documents are true and correct*
- *I am aware that penalties can apply, that the client may be prosecuted if I make a false or misleading statement and that this election may be deemed invalid.*

Name (Print in BLOCK LETTERS)

Tax agent number (if applicable)

Signature

Date

Day

Month

Year

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Lodging your form

Complete form and return to:

Australian Taxation Office

PO Box 3333

Albury NSW 2640

Fax: **1300 139 024**