

Superannuation contribution splitting



What you need to do

This form should be used by members to apply to split their superannuation contributions. A limit of one splitting application will be accepted in relation to contributions made in a particular financial year.

1. Member details (applicant to have contributions split)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Other <input type="checkbox"/>	(please specify): <input type="text"/>	Gender M/F <input type="checkbox"/>	Date of birth <input type="text"/>
Surname	<input type="text"/>					Given name(s)	<input type="text"/>
Preferred name	<input type="text"/>					Member number	<input type="text"/>
POSTAL ADDRESS							
Street no./ PO Box	<input type="text"/>	Street name	<input type="text"/>			Suburb	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>		
Phone (H)	<input type="text"/>	Phone (W)	<input type="text"/>	Mobile phone	<input type="text"/>		
Email	<input type="text"/>						
RESIDENTIAL ADDRESS							
Same as postal address	<input type="checkbox"/>	Different to above; please complete the information below	<input type="checkbox"/>				
Street no.	<input type="text"/>	Street name	<input type="text"/>			Suburb	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>		

2. Receiving spouse details (recipient of splittable contribution)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Other <input type="checkbox"/>	(please specify): <input type="text"/>	Gender M/F <input type="checkbox"/>	Date of birth <input type="text"/>
Surname	<input type="text"/>					Given name(s)	<input type="text"/>
Preferred name	<input type="text"/>					Member number	<input type="text"/>
POSTAL ADDRESS							
Street no./ PO Box	<input type="text"/>	Street name	<input type="text"/>			Suburb	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>		
Phone (H)	<input type="text"/>	Phone (W)	<input type="text"/>	Mobile phone	<input type="text"/>		
Email	<input type="text"/>						

Continued over...



2. Receiving spouse details (recipient of splittable contribution) continued

RESIDENTIAL ADDRESS

Same as postal address Different to above; please complete the information below

Street no. Street name Suburb
State Postcode Country

3. Receiving spouse nominated superannuation fund

(please nominate the super fund for which your splittable contributions are to be rolled over to)

Payment method (please tick)

Pay splittable amount to my Child Care Super account, or

Pay splittable amount to nominated superannuation fund (please complete fund details below).

Fund name

Fund's Australian business number (ABN)

Fund's superannuation fund number (SFN)

Fund's superannuation product identification number (SPIN)

4. Contributions splitting details

Write the amount or percentage that your spouse is to receive. It cannot be more than 85% of the contributions you made in this category or more than your concessional contributions cap for the financial year. From 1 July 2019, the concessional contributions cap may be increased above the general concessional cap if you are eligible. To be eligible you must make concessional contributions in excess of the general concessional cap, have a total superannuation balance less than \$500,000 immediately prior to the financial year, and have unused concessional cap space from the previous 5 years (with 2018–19 financial year being the first year you can accrue unused concessional contributions). Your concessional contributions cap will equal the general concessional cap plus the previously unused concessional contributions made in excess of the general concessional contributions cap. Your increased concessional contributions cap, will be used to determine the maximum amount of taxed splittable contributions.

Financial year ending Taxed splittable contributions to be split \$ OR %

Note: If you intend to claim a deduction for personal superannuation contributions made during the relevant financial year, you must give the Trustee notice of your intention to claim a deduction before you lodge a superannuation contributions splitting application.

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5. Applicant request and declaration

I request that you split the contributions detailed in Section 4 to the superannuation account of my spouse as detailed in Section 3.
I declare that the information provided on this form is correct.

Name

Signature

X

Date

6. Receiving spouse declaration

I declare that at the date of this application I am the spouse of the applicant and I am less than my preservation age, OR between my preservation age and 65 years and not retired.

I declare that the information provided on this form is correct and confirm that the amount to be split is within the legislatively specified limits.

Name

Signature

X

Date

Next step

Send completed form to:
Child Care Super, GPO Box 1088, Melbourne VIC 3001

Need help?

Call Member Services on 1800 060 215 from 9am to 6pm (AEST)
Monday to Friday or visit childcaresuper.com.au.