

choosing a super fund

Instructions for employers and employees on how to complete this form.



Do you need to complete this form?

Employers

You must complete this form if you are an employer and:

- You hire a new employee who is eligible to choose a super fund
- An existing eligible employee asks you for a form
- You can no longer contribute to an employee's chosen super fund or it is no longer a complying fund, or
- You change your employer-nominated super fund (for employees affected by this change).

Employees

You may complete this form if you are eligible to choose a super fund and that fund is different from your employer's nominated fund. Make sure you provide all the required information so your employer can make contributions to your chosen fund.

Before you complete this form

For more information about super, and tips on how to choose a fund that suits you, visit:

- moneysmart.gov.au (and search 'choose super fund'), or
- · ato.gov.au/super

Call 13 10 20 between 8am and 6pm Monday to Friday to speak to a tax officer.

Section A: Employees

If you are an employee and you are eligible to choose a super fund, your employer must give you this form after they have completed **section B**.

Q1 – Choice of superannuation fund

Option 1: Choose your own super fund

Complete **section A** if you want to choose the super fund your employer pays contributions to. Note that:

- Your employer is only required to accept one Standard choice form from you every 12 months
- Your employer has 2 months after you return this form to action your request.

If you have money in other funds, it will remain there unless you roll it over. Check the impact of any exit fees or benefits, such as insurance, you may lose before leaving the fund.

Option 2: Nominate a self-managed super fund (SMSF)

Complete section A if you are nominating a self-managed super fund. To find out how SuperStream applies to SMSFs, you may want to visit ato.gov.au/SMSFSuperStream.

Option 3: Stay with your employernominated super fund

If you don't make a choice, super contributions from your employer will be paid into the fund they have nominated.

Note that:

- Your employer is not liable for the performance of the super fund you or they nominate
- You should not seek financial advice from your employer unless they are licensed to provide it.

You do not need to complete this form if you want to stay with your employer's nominated (default) fund.

If you choose option 1 or 2, go to Q2.

Q2 – Your details

Provide your personal details.

You do not have to quote your tax file number (TFN), but if you don't there may be tax or other consequences.

If you supply your TFN to your employer for super purposes, they must provide it to the fund they pay your super to.

Q3 – Details of my chosen fund

Provide the details of your chosen super fund. Make sure to attach the appropriate documentation.

Q4. Details of my SMSF

Provide the details of your SMSF. Make sure to attach the appropriate documentation.

Q5. Signature and date

Place an ' \mathbf{X} ' in the box once you have completed the form and attached the relevant documentation.

V If you have completed **section A**, return this form to your employer and keep a copy for your own records.

Could you have lost super?

It's important to keep track of your super to avoid paying multiple sets of fees and charges and reducing your overall super investment.

You can use SuperSeeker to find and transfer any lost super by registering for online services at **ato.gov.au/superseeker**.

CARE Super Pty Ltd (Trustee) ABN 91 006 670 060 AFSL 235226. CARE Super (Fund) ABN 98 172 275 725

Section B: Employers

Complete this section before you give this form to your eligible employee.

Q6. Your details

Provide your details.

Q7. Your nominated super fund

Provide details of your employer-nominated super fund. Make sure you pay your super contributions for your employees by the quarterly cut-off dates:

- 28 October
- 28 January
- 28 April
- 28 July.

This applies whether an employee completes this form or not.

Sive this form to your employee after you have completed section B. Once you have received the completed form from your employee, complete section C.

Section C: Employers

Complete this section when your employee returns this form to you.

Q8. Record of choice acceptance

Once you receive this form from your employee, you can make contributions to either your employer-nominated super fund or your employee's new chosen fund for a period of 2 months. After this period you must make payments to the fund chosen by your employee.

Do not send a copy of this completed form to the ATO or your super fund – keep it for your own records for 5 years.

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Information for employers

You can find out more by:

- · Going to ato.gov.au/employersuper
- Reading Super what employers need to know (NAT 71038), available at ato.gov.au, or
- Visiting caresuper.com.au/EmployerGuide.



SuperStream changes

SuperStream forms part of the government's Stronger Super reforms and is a new standard for the way employers pay contributions and send information to super funds. This **Standard choice** form collects information that employers will need to comply with SuperStream.

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Letter of compliance - choice of fund

To whom it may concern,

 CARE Super Fund (CareSuper)

 SPIN/USI: CAR0100AU
 AFSL: 235226

 FUND ABN: 98 172 275 725
 RSEL: 0000956

 SFN: 1257/039/43
 RSER: 1004120

I certify on behalf of the Trustees of CareSuper, that:

- CareSuper is a complying resident regulated superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1999 (SIS)
- The fund is not, nor has ever been, subject to a direction under section 63 of SIS not to accept any contributions from an employer-sponsor
- CareSuper is able to accept superannuation contributions
 from employers on behalf of their employees
- CareSuper meets the minimum insurance requirements for choice of fund, is an authorised MySuper provider and therefore eligible to be nominated as a default fund.

Details of how an employer can make contributions to the fund are provided on the right.

Yours sincerely,

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Julie Lander Chief Executive Officer

Issued by CARE Super Pty Ltd CARE Super Pty Ltd (Trustee) ABN 91 006 670 060 AFSL 235225 CARE Super (Fund) ABN 98 172 275 725

Making contributions to CareSuper

CareSuper provides a number of options to suit your business needs.

If you are not already a participating employer, visit the Employer section of **caresuper.com.au** to join online. Call the CareSuperLine on **1300 360 149** if you require assistance.

Contribution option	How it works	Payment options
EmployerOnline (log in via caresuper.com.au)	All your contribution details are provided via our secure website. Simply check, update and click to submit	Authorised bank transfer (ABT) Online transfer BPAY [®]
Payroll file	Create a contribution file using one of the popular payroll systems and submit via EmployerOnline	Authorised bank transfer (ABT) BPAY
Excel spreadsheet	Manage your contribution records in a pre-formatted Excel spreadsheet and submit via EmployerOnline	Authorised bank transfer (ABT) BPAY
Clearing house	Manage your contribution data across all your employees' super fund choices in one online location	Direct debit (authorisation required)