Add to your super through your employer



Talk to your employer first to make sure they're happy to contribute to super from your pay, what your options are and any impacts it might have on your salary and benefits. If your employer agrees, you can either:

- complete this form and give it to your employer, or
- follow the process your employer has in place.

Please complete in pen using CAPITAL letters. Use (X) to mark boxes where applicable.

This form is not used for Super Guarantee (SG) contributions. If you want your employer to pay your super into your AustralianSuper account please complete the *Pay my Super into AustralianSuper* form.

Work out if you can add extra to your super

To confirm you can add extra to your super, mark (\mathbf{X}) in the box.

Yes, I am under age 75.

Note: From 1 July 2022 if you're between 67 and 74 years old you'll be able to make or get non-concessional and salary sacrifice superannuation contributions (subject to existing contribution caps) without meeting the work test.

You will still need to meet the work test or work test exemption if you wish to claim a concessional personal contribution deduction.

² Provide your details

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You must have provided your Tax File Number (TFN) to us to make after-tax contributions. If your TFN has not been provided, an aftertax contribution cannot be accepted and will be returned to you. We'll accept contributions from your before-tax salary however, these will be subject to additional contributions tax unless your TFN is provided. You can check if you've provided your TFN by logging into your account online or calling us on **1300 300 273** from 8am to 8pm AEST/AEDT weekdays.

3 How would you like to contribute?

Before-tax

I wish to contribute \$, 0 0 or% of my before-tax salary to my AustralianSuper account.
After-tax
I wish to contribute \$, 0 0 of my after-tax salary to my AustralianSuper account.
How often do you want to make payroll contributions?

Weekly Fortnightly Monthly Once-off

4 Agreement with employer

Employer to complete

I confirm the amount of Superannuation Guarantee contributions I am required to pay on behalf of my employee named above will not be reduced because of their additional payroll contributions.

I confirm there will be no impact on how other benefits are calculated (for example, leave entitlements)

OR

I confirm there will be an impact on how other benefits are calculated as detailed below:

Employer to sign here

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	Date
	D D M M Y Y Y
Employer to print full name here	
Employee to sign here	
Employee to sign here	Date
Employee to sign here	Date
Employee to sign here Employee to print full name here	

Please keep a copy of this request for your records.

Please give this completed form to your employer. Don't send it to us or the Australian Taxation Office.