

Macquarie Wrap Superannuation Additional investment form



Macquarie Investment Management Limited ABN 66 002 867 003 AFSL 237 492 RSEL L0001281
Macquarie Superannuation Fund ABN 65 508 799 106 RSE R1004496

PLEASE USE BLACK INK

1. Account details

Account number Account name

2. Clients aged between 65 and 75

If aged 64-75*

I confirm that I have met the work test, by being gainfully employed for at least 40 hours in a period of not more than 30 consecutive days in the current financial year.

* Contributions that are otherwise eligible may be accepted up to 28 days after the end of the month in which the individual reaches age 75, provided the work test has been met in the financial year in which the contribution is made.

3. Investment type

Please confirm which investment type we are receiving by completing the relevant details in A or B below:

A) Contribution

(i) Contribution method

Cheque – make cheques payable to *MIML Super Manager/Consolidator/Accumulator* (full account name)

In specie transfer – please include the additional required documents.

Transfer from a (non-SMSF) Macquarie CMA – please specify: CMA number

Account name

(ii) Contribution details

If you are **aged 65 or more** and completing this section, you must be eligible to make contributions into superannuation. You confirm this by signing the declaration in the terms and conditions.

Personal contribution: \$

Tax File Number: (if not already provided)

DEDUCTION NOTICE (OPTIONAL)

Only complete if you intend to claim a tax deduction for all/part of the above contribution. This will be taken to be a deduction notice in the ATO approved form. Restrictions apply that can affect the validity of your deduction notice. For more information, please contact your financial adviser or one of our client service consultants on 1800 025 063.

For contribution(s) made in the financial year ended: 30 June 20
Amount (covered by this notice) I will be claiming as a tax deduction: \$

Employer contribution \$

Spouse contribution \$

Other contribution* \$ Contribution type

Please note

We can not accept contributions made by you or someone on your behalf (other than your employer):

- if you have not provided your tax file number, or
- if the contribution is a non-concessional contribution that would exceed the level of the non-concessional contribution cap.

* Please specify the Other contribution type and attach appropriate documentation.

B) Rollover

(i) Rollover method

From another (non Macquarie) fund. Please complete the *Rollover Authority* form only.

From another Macquarie superannuation or Investment Manager/Accumulator SMSF account. Complete the details below.

Existing account details

Account number

Account name

Amount to be transferred

Entire balance (your account will be closed)

If that account holds insurance:

Transfer it to a standalone policy (attach the insurance application)

Cancel my insurance

There is no insurance on the account

Partial amount by (select one only):

Transferring

\$

from the above account, or

Leaving

\$

in the above account and transferring the rest.

Specify the assets to be transferred out of or remain in the account (depending on your election) or attach a list:

- Where no list of assets is provided, we will transfer out of the account's cash hub.
- Importantly, you must leave the required minimum balance in the account (refer to the PDS for minimum balances).
- Assets cannot be transferred out of Macquarie SuperOptions or ADF Superannuation accounts.

DEDUCTION NOTICES (OPTIONAL AND ONLY FOR CONTRIBUTIONS MADE TO THE ABOVE ACCOUNT – NOT AVAILABLE FOR SMSF ACCOUNTS)

Only complete if the rollover includes personal contributions for which you wish to lodge or vary a deduction notice in the above section (3B). This will be taken to be a deduction notice in the ATO approved form. **Restrictions in tax law may prevent you from lodging or varying a deduction notice for contributions once a rollover has been processed.**

For contributions made in the current financial year

- a) Contribution(s) made in the financial year ended 30 June 20
- b) Personal contributions (covered by this notice) that I will be claiming as a tax deduction
- \$
- c) Is this notice varying an earlier notice? Yes[^] No

For contributions made in the prior financial year

- a) Contribution(s) made in the financial year ended 30 June 20
- b) Personal contributions (covered by this notice) that I will be claiming as a tax deduction
- \$
- c) Is this notice varying an earlier notice? Yes[^] No

[^] The amount you intend to claim as a tax deduction cannot be greater than the amount stated in the earlier notice.

4. Confirmation and signature

I confirm that I have met the eligibility rules to contribute to superannuation (for information on these rules, refer to the *Are you eligible to invest?* section of the PDS).

If you have completed the Deduction Notice in section 3A; or if you have not previously lodged a notice with the fund for these contributions in section 3B:

I confirm:

- I am lodging this/these notice/s before both of the following dates:
 - the day that I lodged my income tax return for the year stated for the respective contribution(s), and
 - the end of the income year after the year stated for the respective contribution(s)
- at the time of completing this notice:
 - I intend to claim the personal contributions stated in the Deduction Notice (in section 3) above as a tax deduction
 - the trustee has not begun to pay a pension based in whole or part on these contributions
 - I have not included these contributions in an earlier notice
 - the fund still holds these contributions,
- I understand that I may not be able to vary this notice after the withdrawal/rollover has occurred
- the information given on this form is correct and complete.

If you have completed the Deduction Notice in section 3B and have already lodged a notice with the fund for these contributions and wish to reduce the amount stated in that notice:

I confirm:

- I intend to claim the personal contributions stated in the Deduction Notice in section 3 above as a tax deduction.

- I wish to vary my previous notice for these contributions by reducing the amount I advised in my previous notice. I confirm that either:
 - I have not yet lodged my income tax return for the year stated for the contribution and this variation notice is being lodged on or before 30 June of the following financial year, or
 - the Tax office has disallowed my claim for a deduction for the relevant year stated for the respective contribution and this notice reduces the amount stated in my previous notice by the amount that has been disallowed.
- I am lodging this/these notice/s before both of the following dates:
 - the day that I lodged my income tax return for the year stated for the respective contribution(s), and
- the information given on this form is correct and complete.

Signature of client

Title Mr Mrs Miss Ms Other

Name

Date / /

1. Please make cheques payable either to:

MIML – Super Manager [insert applicant's name]
MIML – Super Consolidator [insert applicant's name] or
MIML – Super Accumulator [insert applicant's name]

2. Send this form to:

Macquarie Wrap
PO Box N498
Grosvenor Place NSW 1220 (please affix a stamp)
Fax number 1800 025 175

If you have any questions about completing this form please call us on **1800 025 063**.