

Split your contributions

Use this form to split your superannuation contributions with your spouse.

Please read this information before you complete the form

The instructions you provide in this form will apply to contributions made in the previous financial year (no earlier) or the current financial year if you are leaving the Fund.

You are limited to one splitting application each financial year and the amount to be split will be limited to 85% of your eligible contributions to the Fund.

Your spouse does not need to be a member of Prime Super to receive your contributions.

Under government legislation, you can split the following:

Concessional (before-tax) contributions

- 85% of Superannuation Guarantee (SG) contributions
- 85% of any salary sacrifice contributions

Non-concessional (after-tax) contributions

You can claim on personal contributions that you are claiming a tax deduction on.

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

Providing proof of your identity

When completing this form, you will need to provide proof of your identity. There are two ways to do this. You can take the paperless option and consent to an electronic identity verification, or you can provide certified, printed copies of identity documents.

Electronic identity verification

Using the secure Green ID system, you must provide

details from your Medicare card, current Driver Licence and/or your passport. We use two of these documents to confirm your identity.

Certified identity documents

You will need to post a certified copy of one of the following documents:

- birth certificate
- passport
- certificate of Australian citizenship
- current Driver Licence
- marriage certificate or deed poll document (for a name change)

Certified copies are clear photocopies of original documents, which are signed by an authorised person and 'certified' as being true and correct copies of the original documents. You will need to show the authorised person the photocopied documents to be certified, along with the original documents for reference.

For more information, see our *Proof of identity requirements* fact sheet at www.primesuper.com.au/member/publications/factsheets/

Please complete all of this form and note that both you and your spouse will need to sign the form. If you are completing a printed copy, please use a pen and write in BLOCK letters. Print 'X' to mark boxes where applicable.

1 Member details

Surname		Given names		Title
<input type="text"/>		<input type="text"/>		<input type="text"/>
Member number	Email			
<input type="text"/>	<input type="text"/>			
Date of birth (DD/MM/YYYY)		Mobile number		
<input type="text"/>		<input type="text"/>		
Other/Previous names (if applicable)				
<input type="text"/>				
Residential address				
<input type="text"/>				
Town/Suburb/City			State	Postcode
<input type="text"/>			<input type="text"/>	<input type="text"/>

2 Spouse details

Surname	Given names	Title
<input type="text"/>	<input type="text"/>	<input type="text"/>
Member number	Email	
<input type="text"/>	<input type="text"/>	
Date of birth (DD/MM/YYYY)	Mobile number	
<input type="text"/>	<input type="text"/>	
Other/Previous names (if applicable)		
<input type="text"/>		
Residential address		
<input type="text"/>		
Town/Suburb/City	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

3 Spouse super fund

Is your spouse a Prime Super member?

Yes

Prime Super details

Member account number

Fund details: Prime Super

Phone: 1800 675 839

Australian Business Number (ABN): 60 562 335 823

Unique Superannuation Identifier (USI): 60562335823001

No

Other fund details

Member account number

Fund name

Fund phone number

Australian Business Number (ABN)

Superannuation Product Identification number (SPIN)/
Unique Superannuation Identifier (USI)

4 Contribution split details

You can split contributions made in the previous financial year (no earlier) or the current financial year if you are leaving Prime Super. If you are leaving the fund and want to split contributions from the current financial year, you must provide a completed *Benefit payment form* and return it to us.

Please enter the relevant years for your contribution split:

Financial year /

Financial year /

e.g. financial year /

Contributions to be split (nominated amount or percentage split):

\$ OR %

5 Member declaration

I request that Prime Super split the contributions detailed in Section 4 to my spouse's superannuation account as detailed in Section 3.

I declare that:

- the information provided in this form is correct
- I am less than my preservation age **OR**
- I am between my preservation age and 65 years and have not retired from the workforce
- a family law splitting or flagging order does not apply to my account in Prime Super
- I understand that the personal information collected is for purposes outlined in Prime Super's Privacy Statement. The information is only used to administer my fund membership or a related purpose. For more information, see Prime Super's Privacy Statement at www.primesuper.com.au/privacy-statement/ or phone us on 1800 675 839.

Full name

Member signature

Date

6 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 have not retired from the workforce.

Full name

Member signature

Date

7 Proof identity

Please provide proof of your identity by either consenting to an electronic identity certification (Option 1), or providing certified, printed copies of identity documents (Option 2).

Option 1 – Electronic verification

I have selected this option and provide the details of my Medicare card, Australian driver licence and/or Australian passport below. I authorise the use of my personal details, including the information below, for the purpose of electronic data verification. I understand that my information will be subject to an information match request from the relevant official record holder. Results of an information match will be provided via the use of third party systems.

Please provide details from TWO of the following sources for electronic identity verification:

1. Medicare card

Full name as appears on my Medicare card

My Medicare number is

Medicare card is valid to:

My reference number on this card

7 Proof identity (continued)

2. Driver Licence

Full name as appears on my Driver Licence

Licence number

State of Licence

Expiry date

3. Australian passport

My Australian passport number is

Option 2 – Paper copies of certified identity documentation

I have included the appropriate certified documents as proof of identity to update my name or date of birth.

Note: The certification must include the certifier's original signature, printed name, qualification (e.g. police officer), contact number and date. Paper copies of certified identification documents must be posted to us. For more information, see the *Proof of identity requirements* fact sheet at www.primesuper.com.au/member/publications/factsheets/

If my identification documentation has not been certified correctly, I authorise Prime Super to use the information from the documents, in conjunction with the information on this form to verify my identify electronically using independent data sources.

Privacy

I understand that the personal information collected is for purposes outlined in Prime Super's Privacy Statement. The information is only used to administer my fund membership or a related purpose. For more information, see Prime Super's Privacy Statement at www.primesuper.com.au/privacy-statement/ or phone us on 1800 675 839.

Member signature

Date

Return this form to us via by mail or email

mail: Prime Super
Reply Paid 85860
PARRAMATTA NSW 2124
No stamp required

email: administration@primesuper.com.au
visit: primesuper.com.au
call: 1800 675 839