

Notice of intent to claim a tax deduction on personal super contributions

Use this form to claim a tax deduction on your personal super contributions.

Please print in CAPITAL LETTERS and place a cross in any applicable boxes.

1. Personal details

Member name

Date of birth

Contact phone number

Contact email address

By providing your email address, you consent to receiving all future communications, including information about products and services offered by Resolution Life, to the above email address.*

2. Tax deduction claim details

Please enter the **amount** you intend to claim as a tax deduction for the super plan/account you hold:

Plan/account number

Financial year ended

Total personal contributions made

Tax deduction claim amount

3. Declaration

Important: Please review the information you've provided in this form before signing and dating the declaration in section 3. The **declaration** section is your confirmation that the information you've provided is complete and correct. Providing false, misleading information or failing to take reasonable care in completing this form could result in administrative penalties imposed by taxation law.

This may include making false or misleading statements to an entity other than the Australian Taxation Office if the statement is required or allowed to be made under tax law (eg a notice of intent to claim a tax deduction for personal contributions made to a superannuation fund).

3. Declaration (continued)

Intention to claim a tax deduction

I'm lodging this notice before both of the following dates:

- the end of the day that I lodged my income tax return for the financial year, and

At the time of completing this notice:

- I intend to claim the personal contributions stated in the **tax deduction claim amount \$** column as a tax deduction.
- I'm a member of the superannuation fund(s) stated in the section below.
- The superannuation fund(s) currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part of these contributions.
- I haven't included these contributions in an earlier valid notice.

I declare that the information given on this notice is correct and complete.

Member signature

Date

Where to send this form

Mail or email this completed form to:

Resolution Life Customer Service
GPO Box 5441
Sydney NSW 2001

Any questions?
133 731

askus@resolutionlife.com.au

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Resolution Life Australasia Limited ABN 84 079 300 379

* We may use or disclose your personal information to contact you for purposes relating to the administration, operation and management of your policies with us. We may also send you information about products and services offered by Resolution Life. You may opt out of receiving direct electronic marketing communications from us at any time.

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