

Australian Government

#### Australian Taxation Office

## Division 293 tax Deferred debt account Election form

Complete this form if you wish to release an amount from your superannuation fund(s) to pay your Additional tax deferred debt account. It can also be used where an unsuccessful release has previously occurred and you want to choose a different superannuation fund/account. Please note:

- when completing the form, all fields are mandatory
- you are able to choose more than one superannuation fund to release from
- the amount released will be used to pay your Additional tax deferred debt account first. Any amounts remaining may be used to pay any income tax liability you have and offset any outstanding liabilities or other Australian Government agency debts. The remaining amounts will be credited to you
- if you have more than one deferred account that you would like to release to, please complete a subsequent form
- this election is irrevocable.

To make an election you must return this form to us within **60 days** of your Division 293 tax Notice of assessment issue date.

Refer to your Division 293 Notice of assessment or visit our website **ato.gov.au/division293** to find out more.

### **Completing this form**

- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS and print one character per box.

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Place X in ALL applicable boxes.

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Section A: Personal details										
1 Tax file number (TFN)										
You don't have to provide the TFN to us. However, if you do, it will help us identify the member correctly										
and process your report quickly. For more information on privacy, refer to <b>ato.gov.au/privacy</b>										
Title: Mr Mrs Miss Ms Other										
First given name Other given names										
Section B: Division 293 tax assessment details										
Day Month Year										
3 Date of your Division 293 tax Notice of assessment										
4 Year of your Division 293 tax Notice of assessment										
(eg. use 2018 for the 2017–18 financial year)										
Section C: Deferred debt account to pay										
<ul> <li>Enter the details of the deferred account to be paid</li> <li><b>Deferred account superannuation fund name from your notice of assessment</b></li> </ul>										
6 Deferred account superannuation fund account number from your notice of assessment										
7 Deferred account superannuation client ID										
8 Your Additional tax deferred amount from your notice of assessment \$										
9 Unique superannuation identifier (if applicable)										

## Section D: Superannuation fund details to release amounts

## 10 Superannuation fund details - provide election amounts

You may not be able to release amounts from your defined benefit interest to pay your deferred amount, but you can release from any other superannuation accounts you have.

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The total amount cannot exceed the relevant Additional tax deferred amount on your Division 293 tax Notice of assessment for the fund listed at question 8, or the amount we advised you in a more recent letter was not successfully released from your super fund(s) and you could elect to release from another fund(s).

## Section E: Declaration

### **Privacy**

We are authorised by taxation law to collect information and to disclose it to other government agencies. You can find out more information about your privacy on our website **ato.gov.au/privacy** 

## Complete the declaration that applies to you

#### ACCOUNT HOLDER DECLARATION

- I declare that the information contained in this election form is true and correct.
- I acknowledge that this request is irrevocable.

#### Name (Print in BLOCK LETTERS)

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OR

## LEGAL REPRESENTATIVE DECLARATION

- *I, the legal representative, declare that:*
- I have prepared this document in accordance with the information supplied by the client
- I have received a declaration from the client stating that the information provided to me is true and correct
- I am authorised by the client to give this election form to the Commissioner
- The client who has supplied the information acknowledges this request is irrevocable.

#### Name (Print in BLOCK LETTERS)

Signature	
	Date Day Month Year
Contact number	]
Tax agent number (if applicable)	

# Lodging this form

Complete form and return to: Australian Taxation Office PO BOX 3578 ALBURY NSW 2640

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