

Section C: Super provider details

10 TFN

! We are authorised under the *Taxation Administration Act 1953* to collect your TFN. You are not required to provide your TFN, however, not doing so may cause delays in processing your PVA.

11 ABN

12 Date PVA completed ^{Day} / ^{Month} / ^{Year}

Section D: Member variation details

▶ See page 3 of *Completing the Superannuation payment variation advice* (NAT 8450) for more information.

13 Our contribution reference number

14 Reason code P Q NT NC IF
(Complete by placing X in ONE box only)

15 Rejected amount \$,,,.

16 Is the member deceased? No Yes What was the date of death (if known) ^{Day} / ^{Month} / ^{Year}

Section E: Transfer-out information

17 Your reference

18 Destination type R Rollover* I Individual D Death beneficiary V Non-member
*Provide destination super provider information

19 Destination super provider ABN

20 Destination super provider product identification number

21 Destination super provider member account number

22 Destination super provider member client identifier

23 Your reference

24 Destination type R Rollover* I Individual D Death beneficiary V Non-member
*Provide destination super provider information

25 Destination super provider ABN

26 Destination super provider product identification number

27 Destination super provider member account number

28 Destination super provider member client identifier

Section F: Super provider payment information

➤ See page 5 of *Completing the Superannuation payment variation advice* (NAT 8450) for more information.

➤ To be completed ONLY if advice is for remittance payment rejections or if this is a re-lodged PVA and we have already accepted payment.

29 TFN

30 Payment type (Complete by placing **X** in ONE box only) Direct credit BPAY® Cheque*

*Complete the payment slip below

31 Payment date / /

32 Payment amount \$, , , .

33 Payment reference number

34 Payment remitter name

! PRIVACY

The ATO is a government agency bound by the *Privacy Act 1988* in terms of handling personal information and tax file numbers (TFN). We are authorised by the *Taxation Administration Act 1953* to ask for the information requested on this form including your member's TFN. We require this information to help us administer taxation and superannuation laws. We may give this information to other government agencies. For further information about privacy go to ato.gov.au/privacy

⊖ Penalties may apply if you report incorrectly. The law has changed to expand the false or misleading statement penalty provisions to include false and misleading statements that do not result in a shortfall amount. These changes apply to all statements made from 4 June 2010 that relate to tax and superannuation laws administered by the Commissioner of Taxation, including the PVA.

If paying by **cheque**, the payment slip below must be completed as follows:

- provide the name of the superannuation provider
- provide the superannuation provider TFN
- write the amount paid as specified in **question 32** of **super provider payment information section**, and
- either place **X** in the
 - SG rejected allocations – 17 box (below), if the PVA payment type is a Superannuation guarantee – remittance
 - Superannuation co-contribution rejected entitlements – 93 box (below), if the PVA payment type is a Superannuation co-contribution – remittance
 - SHA special account rejected entitlements – 92 box (below), if the PVA payment type is a SHA special account – remittance
 - Unclaimed superannuation rejected payment – 15 box (below), if the PVA payment type is an unclaimed superannuation – remittance
 - FHSA government contribution rejected entitlements – 97 box (below) if the PVA payment type is a FHSA government contribution – remittance, or
 - Low income superannuation contribution rejected entitlements – 54 box (below), if the PVA payment type is a Low Income Superannuation Contribution – remittance.

! If this is a re-lodged PVA and payment has already been accepted by us, the payment slip below should be left blank.

➤ If you are rejecting a debit request on a recovery notice, do not complete the payment slip. Mail the completed PVA to the address shown on the back page of this form.

Sensitive (when completed)

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Payment for superannuation PVA

Super provider name

Australian Taxation Office

Super provider TFN

Amount paid \$

Important: Select type of payment:

(Complete by placing **X** in ONE box only)

SG rejected allocations – 17

Unclaimed superannuation rejected payment – 15

Superannuation co-contribution rejected entitlements – 93

FHSA government contribution rejected entitlements – 97

SHA special account rejected entitlements – 92

Low income superannuation contribution rejected entitlements – 54

Section G: Declaration

It is a requirement that this section must be completed for FHSA and USM superannuation provider or suppliers.

I declare that:

- I am authorised to give this information to the Tax Office.
- The information I have provided is true and correct and includes all the information required.

Name of superannuation provider/supplier

Name of signatory

Signature of authorised representative

Date

Day	Month	Year
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

How to pay



BPAY®

Make a payment directly from your cheque or savings account to us using your financial institution's phone or internet banking service.

© Registered to BPAY Pty Ltd ABN 69 079 137 518

Details you need

Bill code: **75556**

Reference: **your EFT code or PRN**

To obtain your EFT code or PRN or to request more information about making a payment, phone **1800 815 886** between 8:00am and 6:00pm, Monday to Friday.

If you pay by BPAY you should mail the completed PVA to the mailing address shown below.

DIRECT CREDIT

Transfer your payment to us online from your cheque or savings account (also referred to as EFT payment).

Details you need

Bank: **Reserve Bank of Australia**

BSB : **093 003**

Account number: **316 385**

Account name: **ATO direct credit account**

Reference: **your EFT code or PRN**

To obtain your EFT code or PRN or to request more information about making a payment, phone **1800 815 886**.

If you pay by direct credit you should mail the completed PVA to the mailing address shown below.

MAIL PAYMENTS

Mail the completed PVA together with your cheque or money order to the mailing address shown below.

Cheques or money orders should be for amounts in Australian dollars and payable to the 'Deputy Commissioner of Taxation'. Cheques should be crossed 'Not negotiable' and must not be post dated.

You should also include your payment slip or a note that states your:

- full name
- address and telephone number
- account identifier: TFN, ABN, client identification number etc
- payment type: for example, Superannuation co-contribution, Low income superannuation contribution or Superannuation guarantee.

Do not use pins, staples, paper clips or adhesive tape.

Do not send cash.

- ! Allow sufficient time for your payment to reach us on or before its due date.

Payments cannot be made through a post office using this payment form.

Payments cannot be made at any of our shopfronts or branches.