



# Member contributions statement – Supplier lodgment declaration

**!** You must complete this declaration each financial year if you are supplying an electronic *Member contributions statement* (MCS) on behalf of the superannuation provider. This declaration will cover all MCSs lodged electronically for the provider for its members for a particular financial year of reporting. You must receive the declaration from the provider ('Section B'), complete your declaration ('Section A') and return it to the provider prior to lodgement of the MCS.

## Name of superannuation provider

**!** A provider can be a superannuation fund, an approved deposit fund, a retirement savings account provider or a life insurance company.

Provider's tax file number

OR

Australian business number

Financial year being reported ending 30 June 20

## Section A: Declaration by supplier

### Privacy

We are authorised under the *Income Tax Assessment Act 1997* and the *Taxation Administration Act 1953* to ask for the information on this declaration. We need this information to help us to administer the taxation laws.

I declare that:

- I have prepared the MCS for the above financial year in accordance with the information supplied by the superannuation provider.
- I have received a declaration made by the superannuation provider that the information provided to me for the preparation of this statement is true and correct.
- I am authorised by the superannuation provider to give the information in the MCS statement to the Tax Office

Name of supplier

Name of signatory

Signature of supplier

Date

Day:  / Month:  / Year:

## Section B: Declaration by provider

I declare that in relation to the MCS for the financial year ended 30 June 20 :

- I authorise  to give the approved form to the Tax Office.
- The information provided to the supplier (if any) for the preparation of the MCS is true and correct and includes all contributions received for each reported member.
- I will retain this declaration for five years and I must produce it if requested by the Tax Office.

Name of provider

Name of signatory

Signature of provider

Date

Day:  / Month:  / Year:

**!** If we ask to see this declaration, you must provide it within a reasonable time.