

# Beneficiary nomination

Use this form to nominate the beneficiaries to receive your benefit or pension in the event of your death.

## Please read this information before you complete the form

### Nominating beneficiaries

Who receives your death benefit when you die depends on the super law and your instructions to us.

Your death benefit is the balance in your super or pension account when you die, along with any insurance payable.

Nominating a beneficiary lets us know who you want to receive your death benefit. If you have a super account, you can nominate 'preferred' or 'binding' beneficiaries. If you have a pension, you can also nominate a reversionary beneficiary. The different nominations are described below.

*Preferred beneficiary nomination* If you nominate a preferred beneficiary, your nomination will be taken into account, but ultimately Prime Super will decide who receives your death benefit. You can nominate preferred beneficiaries through MemberOnline, or complete this form.

*Binding beneficiary nomination* A valid binding beneficiary nomination gives you more certainty over who receives your death benefit as it is legally binding. A binding nomination, overrides any preferred nomination you have made.

There are two types of binding beneficiary nominations. A **general binding beneficiary nomination**, and a **nonlapsing binding beneficiary nomination**. A general binding beneficiary nomination expires after three years when we write to you for an updated nomination. A nonlapsing binding beneficiary does not expire.

If you make a non-lapsing binding beneficiary nomination, we will still notify you in writing every three years so you can review and update your beneficiary nomination.

To make a valid binding beneficiary nomination, you need to sign and date it in the presence of two witnesses who are:

- 18 years of age or over, and
- not nominated as a beneficiary in this form.

Your witnesses will need to sign and date (section 5 of this form). Your benefit will be paid to your beneficiaries, at the time of your death provided:

- your nomination is valid, and
- the people you have nominated qualify as dependants (see the following section 'Who is a dependant?') or your legal personal representative.

To cancel your binding beneficiary nomination, please let us know in writing.

If you don't nominate a beneficiary, the Fund must pay your benefit to:

- your eligible dependants (see the following text)
- your legal personal representative (the executor or administrator of your estate), or
- another person permitted by law.

*Reversionary beneficiary nomination* If you have an income stream account, you can nominate a reversionary beneficiary to receive your usual payments from your account when you die. Only one person can be your reversionary beneficiary, and they must be:

- your spouse (including de facto and same sex spouse);
- a child (including a step-child) who:
  - > is under 18
  - > is between 18 and 24 (inclusive) and financially dependent on you, or
  - > has a qualifying disability, or
- another person who is cared for by you or financially dependent on you when you die, where permitted by law.

### Who is a dependant?

Under super law, a dependant includes:

- a spouse (including same-sex partners), regardless of whether the spouse is financially dependent on you. A spouse also includes a de facto partner, meaning a person who although not legally married to you, lived with you on a genuine domestic basis at the time of your death
- a child including a biological, adopted, or stepchild, regardless of whether the child was financially dependent on you
- any person who was financially dependent on you at the time of your death, and
- a person with whom you have an interdependent relationship. Two people may have an interdependent relationship if:
  - > they have a close personal relationship
  - > they live together
  - > one or each of them provides the other with financial support, and
  - > one or each of them provides the other with domestic support and personal care.

An interdependent relationship may also exist where there is a close personal relationship between two people who do not satisfy other criteria because either or both of them suffer from a physical, intellectual or psychiatric disability. Examples of interdependent relationships may include:

- siblings who reside together, and
- an adult child who resides with and cares for an elderly parent.

For more information about beneficiaries, please see your *Product Disclosure Statement*, *Member Guide* and the *Beneficiary nomination* fact sheet.

Please complete this form in pen using block letters or complete online then print to sign. Print 'X' to mark boxes where applicable. If you want to make a preferred beneficiary nomination, you also have faster options – you can update your beneficiaries using MemberOnline, or phone us on 1800 675 839.

**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	Phone number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Residential address		
<input type="text"/>		
Town/Suburb/City	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

I understand that the personal information collected is for purposes outlined in Prime Super's Privacy Statement. The information is only used for the purpose of administering fund membership or related purpose. Further information about privacy can be found in the Prime Super Privacy statement at [primesuper.com.au](http://primesuper.com.au) or by contacting Prime Super.

**2 Choose the type of beneficiary to nominate**

Please indicate which type of beneficiary you would like to nominate.

- Preferred beneficiary
- Binding beneficiary
- Non-lapsing binding beneficiary
- Reversionary beneficiary – go to section 6 of this form

**3 Beneficiary details**

Nominate your beneficiaries in the table below. When you submit this form it overrides any existing nominations you have. Please provide the full name of your nominated beneficiary, the percentage of your benefit you would like them to receive and their relationship to you.

Remember, nominated beneficiaries may be your spouse, child, a person who is financially dependent on you or meets the definition of interdependency (you will need to identify the nature of the relationship and nature of interdependency or financial dependency) or your legal representative (e.g. executor of your will or administrator of your estate).

Full name	% of benefit	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total (must equal 100%)</b>	<b>100%</b>	

#### 4 Preferred beneficiary nomination – declaration

I have made a preferred beneficiary nomination. I declare that the beneficiaries nominated by me on this form are people who I understand may receive my death benefit. I acknowledge that the Trustee of Prime Super is not bound by my nomination.

Full name

Member signature

Date

#### 5 Binding beneficiary nomination – declaration

I have made a binding beneficiary nomination. I declare the beneficiaries nominated by me on this form are people who I understand will receive my death benefit and the Trustee is bound by my nomination as long as my nomination remains valid.

I understand that in order for my nomination to be valid I must:

- ensure that the people nominated by me are considered my legal personal representative or my dependant(s) under super law
- renew my binding nomination every three years, unless I have made a non-lapsing binding beneficiary nomination
- have my nomination witnessed (below) by two people over 18 years who do not benefit from this nomination.

I acknowledge that the Trustee is not bound by my nomination if it becomes invalid or expires.

Full name

Member signature

Date

#### Witness – declaration (all parties must sign and date this form on the same day)

As a witness to this form, I declare that:

- I have witnessed the signing and dating of this form by the member named above
- I am at least 18 years of age
- I am not a beneficiary nominated in this form.

Witness 1 – full name

Witness signature

Date

Witness 2 – full name

Witness signature

Date

## 6 Reversionary beneficiary nomination

You can nominate one person to be your reversionary beneficiary who will receive your pension account balance as a regular income if you die.

In some cases, making a reversionary nomination may impact your Centrelink benefits. If you have questions about your Centrelink entitlements, please contact the Department of Social Services at [dss.gov.au](http://dss.gov.au)

If you make a reversionary beneficiary nomination this automatically cancels any previous nomination you have with the Fund.

Your reversionary beneficiary must be your dependant at the date of your death. See the first page of this form for details on who you can nominate as a reversionary beneficiary.

I wish to make a reversionary beneficiary nomination for my pension account. Please cancel any existing beneficiary nominations that I have made and replace them with the details below.

I nominate the following person as my reversionary beneficiary:

Surname	Gender	Title
<input type="text"/>	<input type="text"/>	<input type="text"/>
Given names	Date of birth (DD/MM/YY)	
<input type="text"/>	<input type="text"/>	
Relationship to you		
<input type="text"/>		

I understand that my reversionary beneficiary nomination above:

- will cancel any binding beneficiary nominations
- is only effective when received and accepted by Prime Super.

I acknowledge that the Trustee is not bound by my nomination if it is invalid.

Member signature	Date
<input type="text"/>	<input type="text"/>

### 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](mailto:administration@primesuper.com.au)  
**visit:** [primesuper.com.au](http://primesuper.com.au)  
**call:** 1800 675 839