

Binding death benefit nomination form

Binding death benefit nomination fact sheet

A binding death benefit nomination is a written direction to Australian Ethical Superannuation Pty Ltd as the Trustee outlining the beneficiaries that you wish to receive your benefit. If valid, your binding death benefit nomination will remain in effect even if your personal circumstances change. It is therefore important that you amend your binding death benefit nomination if there is a change in your personal circumstances to ensure that your nomination continues to reflect your wishes.

The binding death benefit nomination form needs to comply with the requirements outlined below in order to be valid. A valid binding death benefit nomination will override any preferred beneficiary nomination. Where your binding death benefit nomination is determined to be valid and is in effect at the date of your death, the Trustee must pay your benefit to the beneficiaries you have nominated and in the proportions set out in the form. If your binding nomination is invalid or is not in effect at the date of your death, the Trustee must pay your benefit, subject to the Trust Deed, to one or more of your dependants and/or legal personal representatives as determined by the Trustee.

If you have multiple accounts with us (eg a super account as well as a pension account) the binding death benefit nomination can cover all accounts. A binding death benefit nomination does not apply to pensions that provide a reversionary benefit. This form cannot be completed under a power of attorney.

Who can I nominate as a beneficiary?

You can nominate one or more of your dependants and/or your legal personal representative. You can nominate as many beneficiaries as you like. If there is insufficient space on the binding death benefit nomination form, attach details of any other beneficiaries on a separate piece of paper and provide this with the application form. The total of all nominations must add up to 100%. Your dependants include:

- your spouse (legally married or defacto partner of the opposite or same sex)
- your child – includes adopted children, foster children and those by previous relationships, of any age
- a person with whom there is an interdependency/ financially dependent relationship as at the date of your death. Two people may have an 'interdependent relationship' (whether or not related) if they:
 - have a close personal relationship
 - live together
 - one or each of them provides the other with financial support
 - one or each of them provides the other with domestic support and personal care.

Each of these conditions must be proved. However where two persons share a close personal relationship, but do not satisfy the other requirements outlined above because either or both of them suffer from an intellectual, psychiatric or physical disability, they will still share an interdependency relationship. Friends or flatmates sharing accommodation, or people providing care under employment contracts or on behalf of a government or charitable or benevolent organisation, are unlikely to qualify.

Before a benefit can be paid to a person with whom you have an interdependency relationship, the Trustee must receive a statutory declaration that sets out the nature of the interdependency relationship. You can make and attach a statutory declaration with this form. The person with whom you had an interdependency relationship will need to make a statutory declaration in the event of your death.

A legal personal representative – this is the executor of your Will or the administrator of your estate. If nominated, the whole or part of your benefit will form part of your estate and will be distributed in accordance with your Will (if you have one) or in accordance with the law.

There may be taxation implications arising from having your super paid to a beneficiary. It is recommended that you seek professional advice before making a nomination.

What if a nominated dependant is no longer a dependant at the date of death?

Each nominated dependant must be your dependant at the date of your death. If at the time of death one of your nominated dependants is no longer a dependant, the Trustee will determine the binding death benefit nomination as invalid. The Trustee must then pay your benefit, subject to the Trust Deed, to one or more of your dependants and/or legal personal representatives.

How long does a binding death benefit nomination remain in effect?

A valid binding death benefit nomination remains in effect for three years from the date it was first signed, last amended or confirmed. The expiry date and details of your binding death benefit nomination will appear on your member statements. In the case of a court order being made or threatened which affects the distribution of a member's superannuation benefits, the Trustee may be required to observe the court order before, or instead of, giving effect to your binding death benefit nomination.

Confirm your binding death benefit nomination before it expires

To continue to bind the Trustee to pay your benefit in accordance with your nomination you need to confirm your binding death benefit nomination before it expires. You can do this using the Binding death benefit nomination form or by giving the Trustee a written notice that has been signed and dated by you to that effect before your binding death benefit nomination expires.

Amend an existing binding death benefit nomination

You can amend an existing binding death benefit nomination if the existing nomination has not expired. To amend your nomination complete the Binding death benefit nomination form.

Cancel an existing binding death benefit nomination

You can cancel your binding death benefit nomination by completing the Binding death benefit nomination form. If you cancel your existing binding death benefit nomination the Trustee must pay your benefit, subject to the Trust Deed, to one or more of your dependants and/or legal personal representatives.

Signing and submitting the form

The form needs to be signed and dated by you (the member) in the presence of two witnesses at the same time to be valid. Both witnesses must also sign and date the form, and need to be over the age of 18 and not nominated as a beneficiary.

The original form needs to be sent to us by post, unfortunately we can't accept it by email.

Binding death benefit nomination form

Please use **BLOCK LETTERS** and **black ink**.

If you make a mistake, please start a new form as we can't accept forms with corrections.

Post your completed form to:

Australian Ethical Super, Locked Bag 20013, Melbourne VIC 3001

Step 1: Personal details

Member number

Date of birth

Given name(s)

Surname

Step 2: Nominate, amend, cancel or confirm beneficiaries

This nomination is to apply to my: Australian Ethical Super account Australian Ethical Pension account

Please select **ONE** of the following:

- | | |
|--|--|
| <input type="checkbox"/> Make a binding death benefit nomination | <input type="checkbox"/> Go to Step 3 |
| <input type="checkbox"/> Amend an existing binding death benefit nomination | <input type="checkbox"/> Go to Step 3 |
| <input type="checkbox"/> Cancel my existing binding death benefit nomination | <input type="checkbox"/> Your existing nominations will be revoked. Go to Step 4 |
| <input type="checkbox"/> Confirm my binding death benefit nomination before it expires | <input type="checkbox"/> Go to Step 4 |

Step 3: Beneficiary nomination

In the event of my death, I nominate my superannuation death benefit to be paid as follows:

Beneficiary name 1 Legal personal representative Proportion of payout %

Beneficiary name 2 DOB / / Proportion of payout %
Relationship (select one only) Spouse Defacto partner Child Interdependency/financially dependent relationship

Beneficiary name 3 DOB / / Proportion of payout %
Relationship (select one only) Spouse Defacto partner Child Interdependency/financially dependent relationship

Beneficiary name 4 DOB / / Proportion of payout %
Relationship (select one only) Spouse Defacto partner Child Interdependency/financially dependent relationship

Beneficiary name 5 DOB / / Proportion of payout %
Relationship (select one only) Spouse Defacto partner Child Interdependency/financially dependent relationship

TOTAL (attach the same details of any other beneficiaries on a separate piece of paper)

100%

Step 4: Member declaration

I have read and have understood the Binding death benefit nomination fact sheet when completing this form.

- The details that I have provided are correct.
- I understand that it is my responsibility to ensure that my binding death benefit nomination is valid and remains in effect.
- I understand that where my binding nomination is invalid or is not in effect at the date of my death that the Trustee must pay my benefit to one or more of my dependants and/or legal personal representatives as determined by the Trustee.
- I agree to be bound by the Trust Deed that governs the Trustee.
- I acknowledge that my benefit will be paid to each beneficiary nominated in the specified proportions, which totals 100%, and that they must be my dependants at the date of my death.
- I understand that the Trustee accepts no responsibility for either the correct nomination of beneficiaries or the completion of this form.
- I have received, read, and agree to be bound by the Privacy Collection Notice (Super) and the Privacy Policy available at

Step 5: Member signature

The form needs to be signed and dated by the member and in the presence of two witnesses at the same time to be valid. The two witnesses need to be over the age of 18 and not nominated as a beneficiary.

The date must be the same as the declaration date of the witnesses in the following section.

Signature

Date

D	D	M	M	Y	Y	Y	Y
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Signatory's full name (please print)

Step 6: Witness declaration and signature

Witness 1

I declare that the member signed this Binding death benefit nomination form in my presence. I am over 18 years of age and am not listed as a beneficiary on this form.

The date must be the same as the declaration date of the member in the above section.

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signatory's full name (please print)

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Witness 2

I declare that the member signed this Binding death benefit nomination form in my presence. I am over 18 years of age and am not listed as a beneficiary on this form.

The date must be the same as the declaration date of the member in the above section.

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signatory's full name (please print)

Date of Birth

D	D	M	M	Y	Y	Y	Y
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Interests in the Australian Ethical Retail Superannuation Fund (ABN 49 633 667 743, SPIN AET0100AU) are offered by Australian Ethical Investment Ltd (ABN 47 003 188 930, AFSL 229949) by arrangement with its subsidiary and Trustee of the Fund, Australian Ethical Superannuation Pty Ltd (ABN 43 079 259 733, RSE L0001441)

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