

Important information before you get started

There are two ways to tell First Super who you want to receive your super benefit, including any insurance payable, when you die.

1. Binding Beneficiary Nomination
2. Non-Binding Beneficiary Nomination.

To help you decide what type of beneficiary nomination is better for you, read First Super's *Nominating Beneficiaries Fact Sheet* at firstsuper.com.au/fact-sheets.

What's the difference between a Binding and Non-Binding Nomination?

A Binding Nomination instructs the Trustee (First Super) about who you want to receive your benefit and in what proportions. As long as it's valid at the time of your death, we are legally bound to follow your instructions. **A Binding Nomination only lasts for three years, so you will need to keep it updated for your wishes to be followed.**

A Non-Binding Nomination is a request for First Super to pay your benefit to the person or people you've asked. It is not legally binding, so while we will take it into account, we must ultimately follow super and tax laws when deciding who receives your money.

Make your Non-Binding Nomination online

Log into your firstonline account at firstsuper.com.au/login and go to 'Beneficiaries' under 'My details' to make your nomination instantly online.

Who can be nominated as a beneficiary?

You can nominate:

1. One or more dependants. A dependant is generally a child, spouse, financial dependant, or person with whom you have an interdependency relationship. See the *Nominating Beneficiaries Fact Sheet* for examples of these relationships.
2. Your Legal Personal Representative. This is the executor of your Will or the person responsible for administering your estate if you do not have a Will. If you want to leave your benefit to a non-dependant, nominating a Legal Personal Representative means all or part of your super can be distributed under the terms of your Will.

What is an interdependency relationship?

Two people may have an interdependency relationship if:

- > they have a close personal relationship
- > they 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.

An interdependent relationship can also exist if a close personal relationship exists but the other requirements for interdependency are not satisfied because of a physical, intellectual or psychiatric disability that requires a person to live in an institution.

continued over>

Valid Binding Nominations

A Binding Nomination is assessed when you pass away. It is only valid if:

- > you have made it using this form and completed all sections clearly and correctly
- > you have signed and dated the form in the presence of two eligible witnesses, who have signed and dated the form at the same time as you
- > you have only chosen beneficiaries who are eligible to be nominated
- > First Super receives this form from you before you die.

Your nomination could become invalid if:

- > it is cancelled or lapses after three years and you do not renew it, in which case it will revert to a Non-Binding Nomination
- > a beneficiary you nominated is no longer a dependant
- > you do not provide all details requested in the form, or it is not properly witnessed (in this case, we will consider your nomination to be Non-Binding)
- > a beneficiary you nominated dies before you (if you have nominated more than one beneficiary, this person's part will be distributed equally among the other dependants or your Legal Personal Representative, and if there are no other beneficiaries it will be distributed according to super and tax laws).

Changing or cancelling a beneficiary nomination

You can use this form to change or cancel an existing beneficiary nomination. Whenever we receive a new *Nominating Beneficiary Form* from you it automatically overrides any instructions you have provided in the past. Refer to the form on page 2 for which sections to complete to change or cancel a beneficiary nomination.

Tax on death benefits

Death benefits paid to dependants (generally limited to your spouse and minor children) are tax free. The taxable component of a death benefit paid to non-financial dependants will be taxed at special rates. For more information contact the Australian Taxation Office on **13 10 20**.

Privacy

We only use the information received as part of this form to follow your requests. Find out more about how First Super collects and manages your personal information by reading the Privacy Policy at firstsuper.com.au/privacy-policy or calling us on **1300 360 988**.

Nomination of Beneficiary Form



Please complete this form with **CAPITAL LETTERS** using a blue or black pen.

- > If you are making or changing a Binding Nomination, complete **every** section.
- > If you are making or changing a Non-Binding Nomination, complete sections **1, 2, 3** and **5** only.
- > If you are cancelling an existing beneficiary nomination, complete sections **1** and **5** only.

Office Use Only: Member Number

Section 1 | Your personal details

Title (Mr, Mrs, Ms etc)	Date of birth (DD/MM/YYYY)	Sex (M/F)	Member number	Account number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname				
<input type="text"/>				
Given name(s)				
<input type="text"/>				
Residential address				
<input type="text"/>				
Suburb		State	Postcode	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
Postal address <input type="checkbox"/> (Tick box if same as above)				
<input type="text"/>				
Suburb		State	Postcode	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
Telephone (home)	Telephone (work)	Mobile		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Email address				
<input type="text"/>				

Section 2 | Your beneficiary's details

To make sure your nomination is valid, read page 1 to see who can be nominated as a beneficiary.

The total % of your nomination must add up to 100%. If it doesn't, it will be invalid.

<input type="checkbox"/> Legal Personal Representative	% of benefit
<input type="text"/>	<input type="text"/>
<hr/>	
Beneficiary 1: Full name	Date of birth (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>
Relationship to you – tick one box only.	% of benefit
<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependent relationship	<input type="text"/>
<hr/>	
Beneficiary 2: Full name	Date of birth (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>
Relationship to you – tick one box only.	% of benefit
<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependent relationship	<input type="text"/>
<hr/>	
Beneficiary 3: Full name	Date of birth (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>
Relationship to you – tick one box only.	% of benefit
<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependent relationship	<input type="text"/>
<hr/>	
Beneficiary 4: Full name	Date of birth (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>
Relationship to you – tick one box only.	% of benefit
<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependent relationship	<input type="text"/>

Have more than four beneficiaries? Provide their details on a separate piece of paper and attach it to this form. Make sure any additional Binding Nominations are signed, dated and witnessed (refer to section 4).

Section 3 | Your nomination type

Tick one box only.

This is a Binding Nomination

This is a Non-Binding Nomination

First Super accepts original copies both electronically and by mail.

Section 4 | Witness declaration

This section is for Binding Nominations only. I declare that I am over the age of 18, not named as a beneficiary on this form, and this Binding Nomination was signed by the member in my presence on the same date it was signed by me.

Witness 1

Full name

Date of birth (DD/MM/YYYY)

Address

Signature

Date (DD/MM/YYYY)

Witness 2

Full name

Date of birth (DD/MM/YYYY)

Address

Signature

Date (DD/MM/YYYY)

Section 5 | Member declaration

I request and direct the Trustee (First Super) to distribute any benefit payable when I die in accordance with this form.

This form supersedes any previous beneficiary nomination I have made.

I acknowledge that I have read and understand the information about Binding Nominations on page 1 and my nomination meets these requirements.

I confirm that I am authorised to provide the personal details included on this form and I consent to my information being checked by First Super or the official record holder via third-party systems for the purpose of confirming my identity.

Please sign here

Date (DD/MM/YYYY)

How to send us this form

Mail your form to:

OR

Email us your form:

 First Super, PO Box 666, Carlton South, VIC 3053

 Email a copy to mail@firstsuper.com.au

Please retain all original documents for future use in case it is required by the Trustee.

Need help?

For more information about how to make a beneficiary nomination, read the *Nominating Beneficiaries Fact Sheet* at firstsuper.com.au/fact-sheets or call Member Services on **1300 360 988**.