

# Nomination of beneficiaries



Complete this form to make, change or revoke a binding or non-binding death benefit nomination.

RED SECTIONS FOR YOUR INFORMATION

GREY SECTIONS TO FILL OUT

## Before you start

- Read the **Important Information section** at the end of this form to understand the different type of nominations and who is eligible to be nominated as a beneficiary
- If you are making a binding nomination, you must ensure that all requirements listed in **section 4** are completed by both witnesses
- Any changes to your nomination will take effect from the date the form is processed by TelstraSuper.
- If you're completing this form as an attorney under a power of attorney, as a guardian under a guardianship order or as an administrator under an administration order, we will not accept this form nor consider an appointment on this form as a valid nomination unless:
  - you are renewing an existing binding or non-binding death benefit nomination without any changes to the nominated beneficiaries and proportions payable to them, or
  - the power of attorney or order (as applicable) expressly authorises you to undertake the action proposed on this form (that is, to make, change or revoke a binding or non-binding death benefit nomination, as applicable).
- If you're completing this form as an attorney, guardian or administrator, you will also need to provide identification in the member's name and attach an **Authorised Third Party Representative Identification** form available at [telstrasuper.com.au/forms](https://telstrasuper.com.au/forms) and include certified documents as required.

**Please note:** We cannot accept any electronic signatures on this form.

YOUR  
BASIC  
INFO



## 1. Your details currently held by TelstraSuper

| Title  | Mr | Mrs | Miss | Ms     | Other |                |  |
|--|----|-----|------|--------|-------|----------------|--|
| Surname*                                     |    |     |      |        |       | Member number* |  |
| Given name(s)*                               |    |     |      |        |       | Date of birth* |  |
| Residential address* (PO Box not acceptable) |    |     |      |        |       |                |  |
| Suburb*                                      |    |     |      | State* |       | Postcode*      |  |
| Mobile/contact no.*                          |    |     |      | Email* |       |                |  |

### \*Mandatory fields

**Note:** We'll be unable to process this form if your contact or personal details are different to those we currently hold for you. To check and/or update your details before you submit this form you can:

- log into your SuperOnline account, or
- call us on **1300 033 166**, or
- complete a **Change of contact details** form to update your contact details or a **Change of member details** form to update your personal details available at [telstrasuper.com.au/forms](https://telstrasuper.com.au/forms) and submit it with this form.



## Before you act

You may wish to consult an adviser before you make any decisions relating to your financial affairs. To speak with an adviser from TelstraSuper Financial Planning call **1300 033 166**.

## 2. Nomination details

Your nomination will apply to all your TelstraSuper accounts including if you transfer to another TelstraSuper account\*.

Please tick one option only.

I wish to make or change a binding nomination (complete **sections 3, 4 and 5**)

I wish to make or change a non-binding nomination (complete **sections 3 and 5**)

I wish to revoke my current binding nomination and no other nomination is required (complete **sections 4 and 5**)

I wish to revoke my current non-binding nomination and no other nomination is required (complete **section 5** only)

\* An exception to this is where you have a TelstraSuper RetireAccess account and have appointed a reversionary beneficiary to receive the remainder of your income stream. In this situation, the remainder of your income stream will be payable to your nominated reversionary beneficiary.

## 3. Binding or non-binding beneficiary nomination

See the Important Information section at the end of this form about who you can nominate as your beneficiary. This nomination will override any existing binding or non-binding nomination you have\*. If you want to make a binding nomination, you must complete **section 4** and all signatures must be hand written.

Nominated percentages must total 100% or all nominations will be invalid

| Full name of beneficiary |   | Relationship to you                                     |                              | % of total benefit |   |   |
|--------------------------|---|---|------------------------------|--------------------|---|---|
| First names and surname  |   | Select one option only for each beneficiary             |                              | Whole numbers only |   |   |
| 1.                       |   | Spouse  | Financial dependant          |                    | + |   |
|                          |   | Child   | Interdependency relationship | %                  |   |   |
| 2.                       |   | Spouse  | Financial dependant          |                    | + |   |
|                          |   | Child   | Interdependency relationship | %                  |   |   |
| 3.                       |   | Spouse  | Financial dependant          |                    | + |   |
|                          |   | Child   | Interdependency relationship | %                  |   |   |
| 4.                       |   | Spouse  | Financial dependant          |                    | + |   |
|                          |   | Child   | Interdependency relationship | %                  |   |   |
| 5.                       | Legal personal representative (your estate) | To have part or all of your benefit paid to your estate |                              |                    | % | + |
|                          |   |   |                              | TOTAL              |   | = |
|                          |   |   |                              | must total 100%    | % |   |

To nominate more beneficiaries please attach a separate sheet with their details. If you are making a binding nomination, the sheet must be signed and dated by you and your witnesses on the same date as this form.

\* An exception to this is where you have a TelstraSuper RetireAccess account and have appointed a reversionary beneficiary to receive the remainder of your income stream on your RetireAccess account. In this situation, the remainder of your income stream will be payable to your nominated reversionary beneficiary.

#### 4. Witness declaration (binding nomination only)

**Note:** This section must be completed by **two** witnesses.

By signing this form **each** witness makes the following declaration:

- I am over 18 years old
- I am not named as a beneficiary
- I witnessed the member sign and date this form in my presence
- I understand that TelstraSuper may contact me to verify that I witnessed this form.

**Signature of Witness 1** (electronic signature is not acceptable)

X

**Full name of Witness 1**

**Signature of Witness 2** (electronic signature is not acceptable)

X

**Full name of Witness 2**

**Contact number Witness 1**

**Contact number Witness 2**

The date below must match the date of the member's signature in Section 5

**Date**

**Date**

#### 5. Member declaration and signature

By signing this declaration, I acknowledge that:

- I have read the Important Information section and have nominated one or more of my dependants and/or legal personal representative
- I have read the Privacy Policy and Privacy Collection Statement and I understand and consent to how TelstraSuper will use my personal information
- Each dependant nominated must be my dependant at the date of my death
- 100% of my benefit must be allocated and the allocation must be clearly set out
- My beneficiary nomination can be changed or amended at any time
- My beneficiary nomination will take effect from the date the form is processed by TelstraSuper
- If I have made a binding nomination:
  - it has been signed and dated by two witnesses on the same date that I sign and date this declaration
  - it will expire 3 years after the date it is signed
  - that is not valid or in effect at the date of my death, the Trustee must pay my benefit to one or more of my dependants or legal personal representative in the proportions it determines.

Each person who signs this form on behalf of the applicant named in this form:

- represents and warrants that they are lawfully appointed as guardian, administrator or attorney (as applicable), and
- declares that they are acting in accordance with the terms of the relevant power of attorney, guardianship order or administration order, including that if more than one person must act under the appointing document, all nominated persons must include their name, signature and date on this form below, and
- declares that their appointment remains valid and current as at the date of this form.

State your capacity (if applicable):      Guardian      Administrator      Attorney

**Name**

**Signature**

X

Electronic signature is not acceptable

**Date**



**Please upload completed form via your SuperOnline account or return it to:**

PO Box 14309, MELBOURNE VIC 8001



## Important Information - Nomination of beneficiaries

### Types of nominations

**Binding nomination** – a valid binding death benefit nomination gives you certainty about who will receive your benefit in the event of your death and means the trustee must pay your death benefit to the beneficiaries nominated in the proportion set out in the nomination. To be valid and in effect, all the following conditions must be met:

- each person nominated must be a dependant or the legal personal representative
- the allocation amongst the beneficiaries must be clearly set out
- the total percentage of the benefit allocated to the beneficiaries nominated must equal 100%
- the nomination form must be signed and dated by two witnesses who are both aged 18 or over and are not named as beneficiaries on this form
- must contain a declaration signed and dated by the witnesses stating that notice was signed and dated by the member in their presence

A binding nomination remains in effect for 3 years after the date it was first signed or last confirmed/amended.

**Non-binding nomination** – a non-binding nomination is not binding on TelstraSuper, but it will be taken into consideration when determining whom to pay your death benefit to.

#### Other information

Your binding or non-binding nomination will be effective across all your TelstraSuper accounts including any RetireAccess account you may have even if you have nominated a reversionary beneficiary. Your binding or non-binding nomination will apply for any death insurance cover you may have with your RetireAccess account.

Each dependant nominated must be a dependant at the date of your death. If your personal circumstances change (e.g. you marry, divorce, have a child or enter a de facto relationship), please ensure that you make a new binding nomination.

If your binding nomination is not valid or in effect at the date of your death, TelstraSuper must pay your benefit to one or more of your dependants or legal personal representative in any proportion determined by TelstraSuper.

#### Who can be nominated as a beneficiary?

You can nominate one or more of your dependants or your legal personal representative as your beneficiaries.

#### Your dependants are:

- **spouse** – a person to whom you are legally married, a person whether of the same or a different sex with whom you are in a relationship that is registered under an Australian State or Territory law, or a person whether of the same or a different sex with whom you are not legally married but who lives with you on a genuine domestic basis as a couple.
- **child** – your child (or your spouse's child) of any age, including an adopted child, a step-child or an ex-nuptial child, or a child within the meaning of the Family Law legislation.
- **financial dependant** – any other person totally or partially financially dependent upon you at the time of your death.
- **interdependency relationship** – any other person with whom you have an interdependency relationship. You will generally have an interdependency relationship with someone if:
  - you have a close personal relationship, and
  - you live together, and
  - one or both of you provide financial support for the other, and
  - one or both of you provide domestic support and personal care for the other.

You may also have an interdependency relationship with someone when you have a close personal relationship but do not satisfy the other criteria listed above by reason that one or both of you suffer from a physical, intellectual or psychiatric disability.

#### Your legal personal representative is the person:

- nominated by you to be the executor of your Will
- appointed to distribute your assets according to the laws of the relevant State or Territory (if you do not have a Will).

Telstra Super Pty Ltd, ABN 86 007 422 522, AFSL 236709, is the trustee of the Telstra Superannuation Scheme ABN 85 502 108 833 (TelstraSuper).  
Telephone 1300 033 166 Website [telstrasuper.com.au](http://telstrasuper.com.au)

Telstra Super Pty Ltd complies with the Privacy Act 1988 (Cth). For further information on privacy visit our website at [telstrasuper.com.au](http://telstrasuper.com.au) for a copy of our Privacy Policy and Privacy Collection Statement.

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