# DEATH BENEFIT NOMINATION FORM - SUPERANNUATION



Diversa Trustees Limited (Trustee)

ABN 49 006 421 638, AFSL 235153, RSE L0000635

Protect Super Plan, a division of OneSuper

ABN 43 905 581 638, RSE R1001341

NEOS Life (NEOS), a registered business name of Australian Life Development Pty Ltd

ABN 96 617 129 914, AFSL 502759

#### About this form

It's important that you read the below information before completing this form, including the instructions section on the next page.

Please use this form to make a binding or non-binding beneficiary nomination, renew an existing nomination, or to change an existing

For more information about beneficiary nominations please refer to the Protect Super Plan PDS available at www.neosprotect.com.au/PDS

## Non-binding nomination

A non-binding nomination is a request for the Trustee to pay your benefit in a certain way in the event of your death. It is not legally binding but is taken into account. The Trustee is obliged to follow the law in working out who should receive a death benefit.

#### **Binding nomination**

A binding nomination instructs the Trustee as to who receives your insurance benefit in the event of your death.

Provided your binding nomination is valid, it will remain valid for three years, unless you change, renew or cancel it. After three years, if you have not provided another valid form, your nomination will become invalid.

It's important that you review your nomination regularly, particularly if your personal circumstances change, as in the case of marriage or divorce.

If your nomination is invalid, the Trustee will exercise its discretion when paying out your death benefit. An invalid binding nomination includes a nomination being made more than three years ago, the form being incorrectly signed and witnessed, or, the beneficiaries nominated no longer qualifying as dependants at the date of your death.

#### Who can I nominate as a beneficiary?

You can only nominate one or more dependants and/or your personal legal representative.

A dependant is any of the following:

- · your current spouse (including de facto spouse) of either gender
- your children of any age (including adopted children, stepchildren and your spouse's children)
- · someone who is financially dependent on you; or
- · someone with whom you have an 'interdependency relationship'.

Two people have an 'interdependency relationship' if the following apply:

- 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, but not if one of them provides domestic support and personal care to the other under an employment contract, a contract for services, or on behalf of another person or organisation such as a government agency, a body corporate or a benevolent or charitable organisation; or
  - support or care of a type and quality normally provided in a close personal relationship, rather than by a mere friend or flat mate.

Two people also have an 'interdependency relationship' if they have a close personal relationship, but they don't meet the other requirements of interdependency because:

- · either or both of them suffer from a disability including a physical, intellectual or psychiatric disability; or
- · they're temporarily living apart.

Your legal personal representative is the executor of your will or the administrator of your estate. You can nominate your legal personal representative to receive the whole or part of your benefit. If you nominate your legal personal representative, your benefit will form part of your estate and be distributed in accordance with your will.

#### **Taxation**

Generally, as stated on the ATO website, superannuation lump sum insurance benefits paid on death to a dependant are wholly tax-free.

Please note however, that a 'dependant' for tax purposes is not identical as a 'dependent' for superannuation purposes. For example, while children aged 18 or more are valid dependants for binding nomination purposes, they're not considered to be dependants for taxation purposes, unless they satisfy the definition of a 'dependant' in superannuation law in some other way (for example, they're considered to be 'financial dependents').

Depending on who you nominate, there may be different taxation consequences. You should obtain taxation advice about this, having regard to your personal circumstances.

### **Privacy policy**

Our privacy policy contains information about how you may access personal information held by us and how you can seek correction of such information. It also contains information about how you may complain about a breach of the Australian Privacy Principles and how we'll deal with such a complaint. You may obtain a copy of our privacy policy from www.neosprotect.com.au

### How can I cancel my binding nomination?

You can cancel your binding nomination at any time. To do so, please complete sections 1, 2, 5 and 6 of this form and return the completed

#### How can I renew my current binding nomination?

You can renew your current nomination by completing sections 1, 2, 4 and 6 of this form and return the completed form to us.

Please note, you're unable to renew expired binding nominations.

#### Instructions

This form must be signed in the presence of two witnesses who must be aged 18 or over and aren't beneficiaries under your binding nomination. If you'd like to cancel or renew your existing binding nomination, you don't need a witness to sign this form.

Please print this form and complete it using a dark pen and CAPITAL letters (except for your email address). Completed forms can then be scanned and emailed to customerservice@neoslife.com.au or posted to:

## **NEOS Life**

GPO Box 239.

Sydney NSW 2001

#### Questions?

If you have any questions in relation to this form, please don't hesitate to contact us on 1300 090 188 or email us at customerservice@neoslife.com.au

1. Plan deta	ils					
Reference number:						
2. Member/i	nsured person details					
Title: Mr	Mrs Miss Ms	Other				
Name:	First name:	Middle name:	Last name:			
Date of birth:						
Current address						
Street address:						
	Suburb:		State:	Postcode:		

3.	3. Beneficiary details				
Plea	se add <u>up to five</u> beneficiar	ies, ensuring the be	nefit percentages total 100%.		
	I wish to make a binding n	omination			
	I wish to make a non-bind	ing nomination			
	name of nominated reficiary	Nominated person's date of birth	Residential address	Relationship to member	Proportion of benefit (%) whole numbers only
				Spouse Child Financial dependent Interdependency relationship	
				Spouse Child Financial dependent Interdependency relationship	
				Spouse Child Financial dependent Interdependency relationship	
				Spouse Child Financial dependent Interdependency relationship	
				Spouse Child Financial dependent Interdependency relationship	
				Legal Personal Representative (your estate)	
				Total (must add up to 100%)	100%
4.	Renew your curre	ent binding n	omination		
	I confirm that I have reviev I sign this form.	ved my current nom	nination and wish to renew the nomi	nation for a further three years t	rom the date
To re	enew your existing nominati	on, please sign and	date section 6 of this form. No witne	ess signatures are required.	
5.	Cancel your exist	ting nominat	ion		
	Please cancel my previous nomination and pay benefits at the Trustee's discretion as guided by superannuation law.			law.	

To cancel your existing nomination, please sign and date section 6 of this form. No witness signatures are required.

# Member/insured person declaration

I declare that:

- · As indicated above, I wish to:
  - make a new nomination; or
  - cancel or renew an existing nomination
- · I understand that this nomination replaces any nomination I have previously made
- · I understand that I can change this nomination using a Death Benefit Nomination form at any time
- · I understand that I can cancel this nomination in writing at any time
- · I understand that my nominated beneficiaries must be one or more of: my spouse, child, financial dependant, interdependent or my legal personal representative when I die; and
- · I understand that if this nomination is invalid or has not been received by NEOS Life when I die, my death benefit will be paid at the Trustee's discretion as guided by superannuation law.

Member signature:	
Date:	

# Witness declaration (for new binding nominations only)

I declare that:

- · I am 18 years of age or over
- · I am not a nominated beneficiary of this member; and
- this form was signed and dated by the member in my presence.

Witness one signature:	
Witness one name:	
Date:	
Witness two signature:	
Witness two name:	
Date:	

Please return your completed form to customerservice@neoslife.com.au



neosprotect.com.au

GPO Box 239, Sydney NSW 2001

e: customerservice@neoslife.com.au t: 1300 090 188

NEOS Life (NEOS) is a registered business name of Australian Life Development Pty Ltd ABN 96 617 129 914 AFSL 502759. NEOS Protection is issued by NobleOak Life Limited (NobleOak) ABN 85 087 648 708 AFSL 247302. Protect Super Plan is issued by Diversa Trustees Limited (Diversa) ABN 49 006 421 638 AFSL 235153 RSE L0000635 as trustee of OneSuper ABN 43 905 581 638 RSE R1001341. NEOS provides administration services in relation to NEOS Protection and Protect Super Plan on behalf of NobleOak and Diversa, respectively.