



If you do not make a nomination or your nomination is invalid, the Trustee can use its discretion to pay any death benefit to your death benefit dependants or your estate.

If you decide to make a death benefit nomination regardless of which option you choose, it is important for you to note the following:

1. You can only direct the Trustee to pay your death benefit to your death benefit dependants.
2. You can specify the percentage of your death benefit to be paid to each of your death benefit dependants and/or your estate.
3. You can arrange to confirm, amend or revoke this direction at any time by writing to the Trustee or completing a new nomination.

If you choose to make a binding death benefit nomination, some specific points to note are:

4. Binding nominations are valid for three years from the date they are made, amended or confirmed. You must update or confirm your nomination at least every three years for it to remain valid. If your direction ceases to have effect as a binding nomination, the Trustee will treat it as a non-binding nomination and exercise its discretion to decide to whom to pay your benefits, and in what proportions.
5. To the extent a nomination is partly valid at the time of your death (such as where one nominated beneficiary is no longer a death benefit dependant) the Trustee will have discretion as to whom to pay this portion of your death benefit.
6. For a nomination to be valid it must be signed and dated by you in the presence of two witnesses who are at least 18 years old and who are not nominated as your beneficiaries. You must also have received acknowledgment of your nomination from the Trustee.
7. An otherwise valid nomination can only be invalidated if the Trustee is instructed by the courts to pay your benefits in another way.

**Binding or non-binding nomination**

Please select either (i) or (ii).

**i. Non-binding death benefit nomination (if you are a member of Wealthstar you cannot select this option).**

Complete sections A, B and C

I would like the Trustees to consider my nomination of beneficiaries but I do not wish to give a binding direction as to who to pay my death benefit to. I understand that the effect of ticking this box is that the Trustee has the discretion to decide to whom my benefit will be paid, and in what proportions, in the event of my death.

**ii. Binding death benefit nomination (if you are a member of Optimum Allocated Annuity you cannot select this option).**

I wish to give the Trustee a binding direction to pay my death benefit in the manner set out below. The death benefit payable, in the event of my death, is to be paid to the following, in the percentages that I specify.

Complete sections B,C and D

**B. Beneficiary details**

If you wish to nominate more than 4 dependants, please use an additional form and attach it to this form. **The total of all allocated proportions (across both your death benefit dependants and estate) must equal 100%.**

In the event of my death, I direct you to pay my benefit to my dependants as listed below.

<p>Full name of Death Benefit Dependant <input style="width: 100%;" type="text"/></p> <p>Date of birth <input style="width: 150px;" type="text" value=" d   d  /  m   m  /  y   y   y   y "/></p> <p>Relationship to you <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship</p> <p style="text-align: right;">% Allocation</p> <hr/> <p>Full name of Death Benefit Dependant <input style="width: 100%;" type="text"/></p> <p>Date of birth <input style="width: 150px;" type="text" value=" d   d  /  m   m  /  y   y   y   y "/></p> <p>Relationship to you <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship</p> <p style="text-align: right;">% Allocation</p> <hr/> <p>Full name of Death Benefit Dependant <input style="width: 100%;" type="text"/></p> <p>Date of birth <input style="width: 150px;" type="text" value=" d   d  /  m   m  /  y   y   y   y "/></p> <p>Relationship to you <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship</p> <p style="text-align: right;">% Allocation</p> <hr/> <p>Full name of Death Benefit Dependant <input style="width: 100%;" type="text"/></p> <p>Date of birth <input style="width: 150px;" type="text" value=" d   d  /  m   m  /  y   y   y   y "/></p> <p>Relationship to you <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship</p> <p style="text-align: right;">% Allocation</p> <hr/> <p><b>and/or</b></p> <p><input type="checkbox"/> please pay my benefit to my estate</p> <p style="text-align: right;">% Allocation</p> <hr/> <p style="text-align: right;"><b>Total allocation</b></p>	<p>% of benefit</p> <p><input style="width: 50px;" type="text"/> %</p> <hr/> <p><input style="width: 50px;" type="text"/> %</p> <hr/> <p><input style="width: 50px;" type="text"/> %</p> <hr/> <p><input style="width: 50px;" type="text"/> %</p> <hr/> <p><input style="width: 50px;" type="text"/> %</p> <hr/> <p><b>1   0   0</b> %</p>
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## C. Member declaration and signature

I request that the Trustee accepts my nomination above. I understand that:

- On my death, the Trustee must pay my death benefit in accordance with my binding nomination, provided it is valid, at that time.
- This nomination will revoke any previous nominations I have made.
- A binding nomination will be valid for 3 years from the date I sign, confirm or amend it.
- For my nomination to be valid, the beneficiaries I have nominated must be death benefit dependants at the time of my death, or my estate.
- My beneficiaries and I agree to be bound by the Fund's Trust Deed (as amended).
- This nomination applies to all my superannuation death benefit held with Suncorp Portfolio Services Limited and includes any insurance arrangements I may have attached to my account.
- If a nomination is invalid at the time of my death, the Trustee has discretion to determine the dependants. To the extent a nomination is partly not valid at the time of my death, such as where one nominated beneficiary is no longer a dependant, the Trustee will pay that component of the death benefit to any remaining nominated dependants.

Signature

Date   /   /

Signed in the presence of the witness below.

Please print name

## D. Witness declaration

(The date of witness and member signatures must be the same.)

### First witness signature

I declare that:

- I am over 18 years of age and am not a nominated beneficiary, and
- this nomination was signed by the member in my presence.

Signature

Date   /   /

Please print name

### Second witness signature

I declare that:

- I am over 18 years of age and am not a nominated beneficiary, and
- this nomination was signed by the member in my presence.

Signature

Date   /   /

Please print name

**As we are bound to pay your benefit according to your valid binding nomination, we recommend you review your nomination if any of your circumstances change. You can change your nomination at any time by completing a new death benefit nomination form.**

**Please send the completed form to: Asteron Client Services  
GPO Box 1576  
Sydney NSW 2001**