### **Nomination of Beneficiary Form**



#### Important information before you get started

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

- 1. Lapsing Binding Beneficiary Nomination
- 2. Non-Lapsing Binding Beneficiary Nomination
- 3. 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 are the differences between Lapsing Binding, Non-Lapsing Binding, and Non-Binding Nominations?

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.

There are two types of **Binding Nomination**.

- > A Non-Lapsing Binding Nomination is valid indefinitely unless you cancel or amend it.
- A Lapsing Binding Nomination only lasts for three years, so you will need to keep it updated for your wishes to be followed. Members with a Lapsing Binding Nomination in place will be reminded to update it before it expires.

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-Lapsing Binding Nomination or 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:

- 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.
- 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.

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#### **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**.

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### **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 or Non-Lapsing 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.

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super	An Industry SuperFund

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 r	number	Account number		
Surname				
Given name(s)				
Given name(s)				
Residential address				
Suburb		State Postcode		
Postal address  (Tick box if same as above)				
Suburb		State Postcode		
Suburb		State Postcode		
Telephone (home) Telephone (work)	Mobile			
Email address				
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	1.		
The total % of your nomination must add up to 100%. It if doesn't, it will be invalid		% of benefit		
Legal Personal Representative				
Beneficiary 1: Full name  Date of birth (DD/MM/YYYY)				
Deficiency 1.1 an name	/	/		
Relationship to you – tick one box only.		% of benefit		
Spouse Child Financial dependant Interdependent re	lationship			
		(77 / 1110 0 0 0 0		
Beneficiary 2: Full name	Date of birth	(DD/MM/YYYY) /		
Relationship to you – tick one box only.	/	% of benefit		
Spouse Child Financial dependant Interdependent re	lationahin	% of beliefit		
	nationship			
Beneficiary 3: Full name		(DD/MM/YYYY)		
	/	/		
Relationship to you – tick one box only.		% of benefit		
Spouse Child Financial dependant Interdependent re	elationship			
Beneficiary 4: Full name	Date of birth	(DD/MM/YYYY)		
	1	1		
Relationship to you – tick one box only.		% of benefit		
Spouse Child Financial dependant Interdependent re	elationship			

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: Lapsing Binding Nomination Non-Lapsing Bir	nding Nomination Non-Binding Nomination		
First Super accepts original copies both electronically and by r	mail.		
Section 4   Witness declaration			
This section is for Lapsing and Non-Lapsing Binding Nominations of a beneficiary on this form, and this Binding Nomination was signed laigned by me.	·		
Witness 1			
Full name	Date of birth (DD/MM/YYYY)		
Address	I I		
Address			
Signature			
	Date (DD/MM/YYYY)		
X	/ /		
Witness 2			
Full name	Date of birth (DD/MM/YYYY)		
	1 1		
Address			
Signature			
X	Date (DD/MM/YYYY)		
<u>^</u>	1 1		
Section 5   Member declaration			
request and direct the Trustee (First Super) to distribute any benef	it navable when I die in accordance with this form		
This form supersedes any previous beneficiary nomination I have m			
I acknowledge that I have read and understand the information about meets these requirements.			
I confirm that I am authorised to provide the personal details include checked by First Super or the official record holder via third-party sy			
Please sign here	otomo for the purpose of commining my facility.		
	Date (DD/MM/YYYY)		
X			
How to send us this form			
Mail your form to: OR E	Email us your form:		
First Super, PO Box 666, Carlton South, VIC 3053			
Need help?			
For more information about how to make a beneficiary nomination, read the	e Nominating Beneficiaries Fact Sheet at		
firstsuper.com.au/fact-sheets or call Member Services on 1300 360 988.	-		

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