

The information contained in this form does not constitute general or individual advice. We strongly recommend that you seek professional advice from an appropriately qualified person before making any nomination.

## 1. Member Details

Full Fund Name	<input type="text"/>		
Surname	<input type="text"/>		
Given Names	<input type="text"/>	Date of Birth	<input type="text"/>
Street Address	<input type="text"/>		
City / State / Post Code	<input type="text"/>		
Home Phone	<input type="text"/>		
Work Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		

## 2. Nominated Beneficiaries

Please refer to the information overleaf before completing this form.

I wish to make a new nomination thereby revoking all prior binding or non-binding nominations.

- This is:  A Binding Nomination  
 A Non-lapsing Binding Nomination  
 A Non-Binding Nomination

Who would you like your benefit to be paid to in the event of your death?

### A. Beneficiary

Full Name	<input type="text"/>	Or Legal Personal Representative	<input type="checkbox"/>
Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
		Post Code	<input type="text"/>
Date of Birth	<input type="text"/>	Percentage of Benefit	<input type="text"/>
Relationship to you	<input type="text"/>		

(ie spouse, child, other financial dependant, interdependency relationship)

## B. Beneficiary

Full Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Post Code	<input type="text"/>
Date of Birth	Percentage of Benefit	<input type="text"/>	
Relationship to you	<input type="text"/>		

(ie spouse, child, other financial dependant, interdependency relationship)

## C. Beneficiary

Full Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Post Code	<input type="text"/>
Date of Birth	Percentage of Benefit	<input type="text"/>	
Relationship to you	<input type="text"/>		

(ie spouse, child, other financial dependant, interdependency relationship)

In the event that above Nominated Beneficiary predeceases me, please pay my benefit as follows:

- Legal Personal Representative
- Alternative Beneficiaries

## 3. Member Declaration

I acknowledge that I have read and understood the Important Information set out and I agree to the terms contained therein.

Signature	<input type="text"/>	Date Signed	<input type="text"/>
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### Binding Nomination - Declaration by Witnesses

Only complete this section if you wish to make a Binding Nomination.

We declare that we are each over 18 years of age, that we are NOT nominated beneficiaries on this form, and that this form was signed by the member in our presence.

Signature of Witness A	<input type="text"/>	Date Signed	<input type="text"/>
Full Name	<input type="text"/>	Date of Birth	<input type="text"/>
Signature of Witness B	<input type="text"/>	Date Signed	<input type="text"/>
Full Name	<input type="text"/>	Date of Birth	<input type="text"/>

# IMPORTANT INFORMATION

Please read the following information carefully

## Member Options

You may choose to make either a **Binding, Non-lapsing Binding** or a **Non-binding** nomination. The difference between these types of nomination is set out below:

### A. Binding Nomination

- Your valid **binding nomination** is a legal instruction to the Trustee/s to who the death benefit should be paid and the amount. The beneficiaries must be your dependants and/or the Legal Personal Representative of your Estate.
- A binding nomination is valid for three years from the date that it is made. The nomination will become a non-binding nomination after three years unless a new binding nomination is signed.
- A valid binding nomination must be signed by you in the presence of two witnesses who must each sign and date the declaration where indicated at the bottom of the form and state their full name and date of birth.  
**The witnesses must be over 18 and must not be nominated beneficiaries.**
- An invalid binding nomination will be treated as a non-binding nomination by the Trustee/s and will **NOT** revoke or replace an existing valid binding nomination.

OR

### B. Non-lapsing Binding Nomination

- Your valid **non-lapsing binding nomination** is a legal instruction to the Trustee/s as per a binding nomination.
- A valid non-lapsing binding nomination is valid until revoked or replaced by the member.
- All other conditions as per binding nomination

OR

### C. Non-Binding Nomination

- A **NON-BINDING NOMINATION** is an expression of your wishes to be taken into account knowing the **Trustee/s has complete discretion** in deciding who will receive the death benefit and the amount(s) that they will receive. The benefit may be paid to one or more of your dependants in whatever proportion(s) the Trustee/s thinks fit **and/or** may be paid to the Legal Personal Representative of your Estate to be distributed in accordance with your Will.
- A non-binding nomination is valid for the whole term of Fund membership unless another valid nomination is lodged with the Trustee/s.
- A non-binding nomination does not need any witness signatures.

OR

### D. No Nomination

- If you do NOT make a nomination, the benefit will be paid at the discretion of the Trustee/s to the dependant(s) and/or your Legal Personal Representative to be distributed as part of your Estate.

## You Should:

- Read the Important Information section of this Form **in full**.
- Ensure the Trust Deed governing the Fund contains provisions for you to make the desired nomination and benefit payment method.
- Seek professional advice before making any nomination (either Binding or Non-Binding).
- Complete the Nomination of Beneficiaries Form.
- Complete Sections 1 and 2 then sign the form in Section 3.
- Complete the Witness Declaration in the case of a Binding Nomination.
- Ensure the percentage totals exactly 100%.

## NOTE:

- The person/s who you nominate to receive the benefit must be a person/s who is a 'dependant' under the superannuation laws, which includes your spouse or de facto spouse, children and any person who is financially dependent on you at the time of death. The definition of dependant also includes interdependency relationships.
- If your nominated beneficiary (excluding a Legal Personal Representative) is not a dependant at the time of your death the nomination will be invalid, therefore leaving The Fund Trustee to exercise discretion while being aware that the prime purpose of superannuation is for your benefit in retirement or any remaining dependants in the event of your death. If foresight indicates a probability that it is unlikely that a proposed beneficiary may not be a dependent at some time in the future, it may be preferable to nominate the Legal Personal Representative of your Estate and have the death benefit distributed in accordance with your Will. This course of action may also be adopted if a non-dependant is to be nominated.
- You may revoke or change your nomination at any time by providing the Trustee/s with a new valid Nomination of Beneficiaries Form.

**Please provide the original of this form (including the original of any photocopies of this Form made to accommodate additional beneficiaries) to the Trustee/s and copies of all aforementioned forms to your legal adviser and to:**

SMSF Alliance

PO Box 371  
STONES CORNER QLD 4120