

Beneficiary Nomination

You can use this form to establish a new beneficiary nomination for your IconiQ Super Wrap or to amend or cancel an existing nomination.

Important note: For binding nominations, the original signed form must be signed, witnessed, scanned and provided to us. Scanned submissions must be of a high quality and clearly legible to be processed.

Section A: Personal Details

Portfolio Number (Account Number eg. IQ1234567)

Family Name

First Given Name

Other Given Names

Date of Birth

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Daytime Phone Number

Section B: Reason for Your Request

Please select one of the following options:

- ☐ I wish to establish a new binding death benefit nomination
- ☐ I wish to renew or amend an existing binding death benefit nomination
- ☐ I wish to cancel an existing binding death benefit nomination (complete Sections A, B and F only)

IconiQ Super Wrap

A Division of WRAP Super ABN 18 906 079 389

GPO Box 1657, Melbourne VIC 3001 P: 1300 746 454 E: clientsupport@iconiqwrap.com.au USI 18906079389002

Issued by the Trustee of WRAP Super:

Equity Trustees Superannuation Limited ABN 50 055 641 757 AFS Licence No 229757 RSE Licence No L0001458

Section C: Type of Nomination

Please select one of the following options:

☐ **Non-binding Nomination**

A non-binding death benefit nomination is an instruction to the Trustee which sets out the dependants and/or legal personal representative you would prefer to receive your super benefit in the event of your death. The Trustee will consider your nominated beneficiaries provided by you but is not legally bound to follow the nomination in the event of your death.

Binding Nomination

If there is a valid binding nomination at the time of your death, it is binding on the Trustee to ensure that your super benefit is paid to the beneficiary nominated in accordance with your instruction.

The Trustee is not required to comply with a death benefit nomination if the Trustee is aware that the nomination is invalid or would breach a Court Order. In the event a person you nominate is not a dependant at the time of your death, e.g. because they have died before you, your nomination will no longer be valid and the Trustee will pay the benefit in accordance with the trust deed.

☐ **Binding Nomination (Lapsing)**

This type of binding nomination expires or lapses after three (3) years. You will need to renew or make a new binding nomination to ensure your nomination instructions continue to be valid. You may revoke or update your binding nomination by completing a new Beneficiary Nomination Form.

☐ **Binding Nomination (Non-lapsing)**

Non-lapsing binding nominations do not have an expiry date, but you can revoke your nomination or update your nomination.

☐ **Reversionary Beneficiary Nomination (Only available in relation to new pensions)**

The nominated person (generally a spouse) will automatically continue receiving the pension after your death.

Section D: Your Beneficiaries

To ensure your nominations are valid, they must add up to 100%.

1. Full Name

Date of Birth

%

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Relationship to You

☐ Legal Personal Representative

☐ Dependant

(including spouse and child. See section E for more information)

2. Full Name

Date of Birth

%

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Relationship to You

☐ Legal Personal Representative ☐ Dependant
(including spouse and child. See section E for more information)

3. Full Name

Date of Birth

%

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Relationship to You

☐ Legal Personal Representative ☐ Dependant
(including spouse and child. See section E for more information)

4. Full Name

Date of Birth

%

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Relationship to You

☐ Legal Personal Representative ☐ Dependant
(including spouse and child. See section E for more information)

5. Full Name

Date of Birth

%

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Relationship to You

☐ Legal Personal Representative ☐ Dependant
(including spouse and child. See section E for more information)

6. Full Name

Date of Birth

%

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Residential Address

Suburb

State

Postcode

Country if Outside of Australia

Relationship to You

☐ Legal Personal Representative ☐ Dependant
(including spouse and child. See section E for more information)

If you have more than six beneficiaries, please attach an additional form and ensure the amount allocated to all listed beneficiaries totals 100%.

Total %

Section E: Important Information

General Advice

The information in this document is general information only and does not take into account your personal financial situation or needs. You should consult a licensed financial adviser to obtain financial advice that is tailored to suit your personal circumstances.

Reversionary Beneficiary Nominations (Pension Portfolios Only)

If a reversionary beneficiary nomination is made, your pension payments will continue to be paid to your nominated reversionary beneficiary. You can nominate your spouse including a de facto or same sex partner, or your child as a reversionary beneficiary. You can also nominate your child as your reversionary beneficiary if, on the date of your death, your child is:

- under age 18;
- over age 18 but under age 25 and financially dependent on you; or
- permanently disabled.

The laws in this area are complex and you should seek appropriate professional advice before nominating your child as a reversionary beneficiary.

Death benefits can only be paid as a pension to a reversionary beneficiary who is a dependant at the date of a member's death.

Please note that a reversionary beneficiary nomination can only be changed or revoked by commuting the pension and initiating a new income stream.

Who can I nominate as a beneficiary?

You can nominate a dependant or your legal personal representative. If you nominate your legal personal representative it is important that you have a valid will and keep it up-to date, as the Trustee must pay your death benefit to your estate.

Your dependants generally include your spouse (including a qualifying de facto spouse of the same or opposite sex), child, a person financially dependent on you, or someone with whom you have an "interdependency relationship".

Who are my dependants?

Under superannuation law, "dependants" include the following:

- any spouse (including a same-sex legal or de facto partner);
- any child (including a child of a spouse);
- any person in an 'interdependent relationship' with you; or
- any other person who the Trustee considers was dependent on you for maintenance or support, at the date of your death.

Someone can be in an interdependent relationship with you if: you have a close personal relationship, you live together, one or each of you provides the other with financial support, and one or each of you provides the other with domestic support and personal care. Dependency can also arise where two people have a close personal relationship but don't live together or provide each other with financial support or personal care because of physical, intellectual or psychiatric disability.

Your nomination may become invalid if:

- one of your beneficiaries dies before you do;
- one of your nominated dependants is not a dependant at the time of your death;
- you are no longer a member of the super fund at the time of your death; or
- the nomination was not made directly by you (it is Trustee policy not to accept nominations through Power of Attorneys, or from anyone other than you).

We recommend that you periodically review your nomination as it is your responsibility to ensure that your nomination continues to be appropriate in accordance with your personal circumstances.

Section F: Privacy & Declaration

Privacy

When you provide instructions by completing this form, personal information about you is being collected. If you hold an IconiQ Investment and/or IconiQ Super Wrap portfolio, information about how the Operator and/or Trustee collects, uses and discloses your personal information is set out in the Operator's Privacy Policy available at www.iconiqwrap.com.au and the Trustee's Privacy Statement at www.eqt.com.au.

Declaration

I acknowledge that I have read and understood the Important Notes in section 5 above, and agree that:

- the information provided on this form is true and correct, and I authorise the changes to be made to my Account;
- if the information provided in this form is not correct or verifiable, this form may not be processed, or I may be requested to provide additional information;
- I have read the Trustee's Privacy Statement and understand how my personal information will be collected and used;
- I understand the terms of this nomination and have read the current IconiQ Super Wrap Product Disclosure Statement;
- the beneficiary/ies I have nominated above are either my dependant(s) or my legal personal representative(s);
- the proportions of benefit I have completed are certain;
- I acknowledge that if my circumstances change, or I otherwise wish to change my nomination, I must notify the Trustee and provide a new Beneficiary Nomination Form;
- my nomination will only be valid if it is received by the Trustee before the date of my death; and
- this nomination supersedes any previous nomination made by me, and I understand that if I amend my beneficiary nomination, any prior beneficiary nomination I have made will be revoked.

Full Name of Member

Signature

Date

D

D

M

M

Y

Y

Y

Y

Section G: Witness Declaration

Binding Nominations Only

For a lapsing binding nomination, signing by the member in section 6 must be witnessed by two people, and all signatures must be provided on the same date.

Witness 1

By witnessing this Beneficiary Nomination Form, I declare that I am over 18 years of age, I am not a beneficiary nominated on this form and I have witnessed the signing of this document in the presence of the Member whose signature appears on this form.

Full Name of Witness 1

Signature

Date

D

D

M

M

Y

Y

Y

Y

Witness 2

By witnessing this Beneficiary Nomination Form, I declare that I am over 18 years of age, I am not a beneficiary nominated on this form and I have witnessed the signing of this document in the presence of the Member whose signature appears on this form.

Full Name of Witness 2

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

How to return this form

Provide to your Adviser

Provide this form to your Financial Adviser to upload on your behalf via the IconiQ portal (Portfolios > Reports & Documents > Submit Superannuation Documents).