claiming a superannuation death benefit guide



This document explains how to make a claim for a superannuation death benefit and what will happen when a death benefit claim is submitted.

What is a death benefit?

A superannuation death benefit consists of:

- the super account balance, plus
- any insurance cover which may be payable.

The superannuation death benefits do not form part of the deceased estate and are not paid in accordance with the member's wishes in their Will.

HESTA can only pay a death benefit as allowed by the *Superannuation Industry Supervision (SIS) Act 1993* (the Act which governs superannuation), and the Trust Deed (the legal document which sets out the rules of the Fund) available at **hestaformercy.com.au/disclosures** or by calling 1300 368 891, and the Income Tax Assessment Act (ITAA) 1997.

How is a death benefit paid?

This can be paid as either:

- a lump sum
- an income stream, certain eligible dependants can have a death benefit paid via an income stream.

For more information about income stream, go to **hestaformercy.com.au/pds** or call us on **1300 368 891** or email **information@hestaformercy.com.au**

Who can claim a benefit?

A death benefit can only be paid to dependants of the member or their Legal Personal Representative (LPR).

Who are dependants?

Under the SIS Act, a 'dependant' means:

- a spouse of the member, including a legally married spouse, de facto spouse (including same sex partner), ex-spouse (separated but not divorced)
- a child including adult child, step-child, ex-nuptial and child of the member's spouse
- any person who was financially dependent on the member at the time of death
- any person who had an interdependency relationship at the time of the member's death.

What is financial dependency?

A person who relied on the member (totally or partially) for financial support such as for payments of bills, rent and mortgage. HESTA requires evidence of financial dependency.

What is an 'interdependency relationship'?

Two people may have an interdependency relationship if they have a close personal relationship, live together, one or each provide the other with financial support, one or each provide the other with domestic support and personal care.

A close personal relationship may be considered an interdependency relationship if either or both persons have a physical, intellectual or psychiatric disability.

Taxation law sets out the criteria of interdependency. An interdependency relationship does not generally apply in respect of housemates, parents or children.

What is a legal personal representative (LPR)?

Generally, this is the person who is managing the deceased estate either:

- the executor, if the deceased left a valid Will, or
- the administrator, if the deceased died without a Will.

The administrator is granted *Letters of Administration* from the relevant state or territory court.

HESTA may request probate or Letters of Administration from the LPR if necessary.

What is probate?

Probate is a document issued by the court certifying the Will is valid. It also confirms the appointment of the executor/s.

What if the member has nominated preferred beneficiaries?

The Trustee will consider all preferred nominations by the member. However, HESTA is bound by relevant superannuation laws and the Trust Deed when determining to whom a death benefit is paid.

What if the member has made a binding death benefit nomination?

HESTA will pay the person/s as nominated, as long as the nomination is valid at the time of death, the beneficiaries qualify as dependants, and/or legal personal representative.

What if the dependant or beneficiary is a minor?

HESTA will require the legal guardian to claim on their behalf. Generally, a payment to a minor is paid in trust to the legal guardian for the minor's advancement, education and maintenance. However, in some instances the Trustee will appoint a Trustee for a minor child.

Paying a death benefit income stream to a dependent child of the deceased member must stop on or before the child turns age 25 with the remaining benefit being paid as a tax free lump sum. However, if the dependent child has a permanent disability, the income stream arrangement may continue.

Tax on Lump sum payments	
Paid to:	Is tax payable?
 Dependant of the deceased including: spouse or former spouse a child (under 18) any person financially dependent on the deceased at the time of death any person in an interdependency relationship with the deceased at time of death. 	No
Non-dependant (includes a child above the age of 18)	Yes
The Estate (Legal Personal Representative)	Tax payable will depend on whether the beneficiary is a dependant or non-dependant

What happens when a death benefit claim is made?

When notified of the death of a member, the Trustee must determine to whom a benefit should be paid in accordance with the Trust Deed.

We will send out the Superannuation death benefit claim form to potential claimant/s.

1. Claimants are required to provide documents including:

- proof of age of the deceased such as a certified copy of a driver licence, passport or birth certificate
- proof of any name change of the deceased member, e.g. a certified copy of a marriage certificate or deed poll
- a certified copy of any signed and dated Will left by the deceased
- a certified copy of the full death certificate
- proof of identity for each claimant or person claiming on behalf of a minor child
- a certified copy of the birth certificate of any minor child.

2. When the claim and all documents have been received, the Trustee will consider to whom the death benefit should be paid.

- 3. Claimants are required to provide documents to help:
 - identify people who might have been dependants of the deceased, and
 - determine their relationships with, and the extent to which they may have been financially dependent on the deceased at the time of their death.
- 4. The Trustee will then make a determination in accordance with the Trust Deed by considering:
 - the information provided by any dependants or the deceased member's Legal Personal Representative
 - any Will left by the deceased member
 - any nomination of preferred beneficiary
 - the circumstances of each claimant or other potential beneficiary at the time the member died.
- 5. All claimants will receive a letter advising them of the proposed payment. If there is more than one beneficiary, we will advise the proposed distribution of the benefit.
- 6. All claimants have 28 days to respond and advise if they agree with the proposal or want to object to it.
- 7. If all the claimants agree with the decision, the benefit will be paid less any applicable tax.
- 8. If there is an objection to the decision, the Trustee will review the decision, the objections and any additional information provided. Further information may be requested to help with the review.
- 9. Generally, no portion of the benefit will be paid unless the HESTA Trustee is satisfied all issues have been resolved.

Before submitting this claim, have you:

Fully completed and signed the form?	
Provided a certified copy of the full death certificate?	
Provided a certified copy of the deceased's proof of age document?	
If married, provided a certified copy of the deceased's marriage certificate?	
Provided a certified copy of the deceased's Will (if any)?	
Provided a certified copy of the Grant of Probate or Letters of Administration (if any)?	
Provided a certified copy of the children's birth certificate (if any)?	
Provided a certified copy of your own ID documents?	

We're here to help you

If you have any queries or need help with making a death claim, please contact us.



hestaformercy.com.au information@hestaformercy.com.au



Email form to information@hestaformercy.com.au or mail to: PO Box 8334, Woolloongabba QLD 4102

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superannuation death benefit claim form

HESTA

Tips to help you complete this form:

- 1. Read the attached Claiming a superannuation death benefit guide
- 2. Complete all sections of this superannuation death benefit claim form
- 3. Use the checklist on the previous page of the Death benefit guide to ensure you've provided all necessary documents.

Got any questions?

Call us on **1300 368 891**

Please note: Under superannuation law, HESTA is required to inform all potential beneficiaries of the proposed payment. This means a person's name and details of their relationship with or dependence on the deceased member may be disclosed to other claimants. This information may also be disclosed to HESTA's legal advisers, the Australian Financial Complaints Authority (AFCA) or a court.

Section A: Details of deceased me	mber	
Title: Ms Mrs Miss Mr Dr Oth	Family name:	
Do you identify as: Female Male Status at the date of death: Married Residential address: Unit number/Street nu	De facto Separated Divorced Single Interdependant	
Suburb	State/Terr.	Postcode
Date of death:	Tax File Number:	

Section B: Personal details of dependants

A

Provide details of surviving spouse and/or children. If there are more than five dependants, please photocopy the page overleaf and attach to this form.

Title: Ms Mrs Miss Mr Dr Other	Given name/s:			
Date of Birth: D D M M Y Y Y	Family name:			
Residential address: Unit number/Street number				
Suburb			State/Terr.	Postcode
Mobile number:	Home number:	Email:		
Relationship to the deceased:	Commencement of relationship:			
Do you identify as: Female 🗌 Male 🗌				
Financially dependent on the deceased at ti	me of death?: Yes No]		
In an interdependency relationship with the or *If ticked 'Yes', please complete Section C.	deceased at time of death?*: Yes 🗌 No 🗌]		
in tieked res, piedse complete section C.				

Section B continued: Personal details o	f dependants			
Title: Ms Mrs Miss Mr Dr Other	Given name/s: Family name:			
Suburb			State/Terr.	Postcode
Mobile number:	Home number:	Email:		
Relationship to the deceased:	Commencement of relationship:			
Do you identify as: Female Male Financially dependent on the deceased at till n an interdependency relationship with the or *If ticked 'Yes', please complete Section C.		-		
Title: Ms Mrs Miss Mr Dr Other	Given name/s:			
Date of Birth: DDMMYYY Residential address: Unit number/Street number	Y Family name:			
Suburb			State/Terr.	Postcode
Mobile number:	Home number:	Email:		
Relationship to the deceased:	Commencement of relationship:			
Do you identify as: Female Male Financially dependent on the deceased at till In an interdependency relationship with the artificked 'Yes', please complete Section C.				
Title: Ms Mrs Miss Mr Dr Other	Given name/s:			
Date of Birth: DD M M Y W Residential address: Unit number/Street number	Y Family name:			
C. J J.			Charles /Taran	Destanda
Suburb			State/Terr.	Postcode
Mobile number:	Home number:	Email:		
Relationship to the deceased:	Commencement of relationship:			
Do you identify as: Female Male Financially dependent on the deceased at ti	me of death?: Yes No]		
In an interdependency relationship with the of *If ticked 'Yes', please complete Section C.		-		

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Section B continued: Personal details c	-	
Provide details of surviving spouse and/or cr	hildren. If there is more than one dependant	please copy this page and attach to this form.
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: D D M M Y Y Y	Family name:	
Residential address: Unit number/Street number		
Coloreda		Chata /Tana Dashaa da
Suburb		State/Terr. Postcode
Mobile number:	Home number:	Email:
Relationship to the deceased:	Commencement of relationship:	
Do you identify as: Female Male		
Financially dependent on the deceased at t	ime of death?: Yes No	
In an interdependency relationship with the *If ticked 'Yes', please complete Section C.	deceased at time of death?*: Yes No	
in licked res, please complete section C.		
Section C: Personal details of interdep		aim a death benefit has to complete the following
Please copy this page to enable each person		aim a death benefit has to complete the following
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: DDMMYYY	Family name:	
Residential address: Unit number/Street number		
Suburb		State/Terr. Postcode
Date of birth: Mob	ile number:	Email:
Please answer the following:		
Did you have a close personal relationship	o with the deceased?	Yes No
What was your relationship with the deced		
What was the duration of your relationship		
Were you living together at the time of dea Did one or each of you provide the other y		Yes*No □Yes* □No
	with domestic support and personal care?	
Did you and the deceased have the owne	ership of or use of acquired property?	Yes* No
Did you and the deceased have a mutual		Yes* No
Did both of you care and support your ch Did both of you enjoy the reputation and		Yes* No
Did you and the deceased provide each of		
Was the relationship a mere convenience?		
Did either you or the deceased have a dis	ability?	Yes* No
*If you answered 'Yes' to this question, ple	ease attach any evidence to support this clo	aim.

Section D: Additional information

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If there is other information you can provide to assist the Trustee to assess this claim, (such as evidence of joint ownership of property, joint bank accounts, etc) please complete a Statutory Declaration (overleaf) along with supporting evidence.

Section E: Details of the Estate		
Is there a Will? If 'Yes', has Probate been applied for? If Probate has been applied for, has Proba If there is no Will, are Letters of Administration If 'Yes', have Letters of Administration beer *Please provide a certified copy of the Will ,	n being applied for? Yes n received? Yes*	No Don't know No No No Don't know No Don't know No No
Section F: Details of the person making	y the claim	
Title: Ms Mrs Miss Mr Dr Other	Given name/s: Family name:	
Suburb		State/Terr. Postcode
Mobile number:	Home number:	Email:
Tax File Number†:	Relationship to the deceased:	Commencement of relationship:
We are authorised by law to ask for your TFN. Y Do you identify as: Female 🗌 Male 🗌	ou do not have to provide it, but if yo	u don't, you may end up paying more tax than you need to.
Section G: Statutory declaration		
You must complete the below Statutory De See back page for a list of persons who mo	-	-
You must complete the below Statutory De	y witness the signing of a Statutor	-
You must complete the below Statutory De- See back page for a list of persons who mo	y witness the signing of a Statutor	y Declaration.
You must complete the below Statutory De- See back page for a list of persons who ma I, FULL NAME	y witness the signing of a Statutor	y Declaration.
You must complete the below Statutory Dev See back page for a list of persons who man I, FULL NAME of RESIDENTIAL ADDRESS make the following declaration under the St 1. To the best of my knowledge, all informat 2. I understand that a person who intention	y witness the signing of a Statutor occ atutory Declarations Act 1959: ion given on this application is true ally makes a false statement in a s	y Declaration.
You must complete the below Statutory Dev See back page for a list of persons who man I, FULL NAME of RESIDENTIAL ADDRESS make the following declaration under the St 1. To the best of my knowledge, all informat 2. I understand that a person who intention	y witness the signing of a Statutor atutory Declarations Act 1959: ion given on this application is true ally makes a false statement in a s ct 1959, and I believe that the stater	y Declaration. UPATION e and correct, and tatutory declaration is guilty of an offence under
You must complete the below Statutory Dec See back page for a list of persons who model I, FULL NAME of RESIDENTIAL ADDRESS make the following declaration under the St 1. To the best of my knowledge, all informat 2. I understand that a person who intention section 11 of the Statutory Declarations Adv	y witness the signing of a Statutor atutory Declarations Act 1959: ion given on this application is true ally makes a false statement in a s ct 1959, and I believe that the stater Decla	y Declaration. UPATION e and correct, and tatutory declaration is guilty of an offence under ments in this declaration are true in every particular.
You must complete the below Statutory Dec See back page for a list of persons who model I, FULL NAME of RESIDENTIAL ADDRESS make the following declaration under the St 1. To the best of my knowledge, all informat 2. I understand that a person who intention section 11 of the Statutory Declarations Adv	y witness the signing of a Statutor atutory Declarations Act 1959: ion given on this application is true ally makes a false statement in a s ct 1959, and I believe that the stater Decla	y Declaration. UPATION e and correct, and tatutory declaration is guilty of an offence under ments in this declaration are true in every particular. ared at: D D M M Y Y Y Y
You must complete the below Statutory De- See back page for a list of persons who model FULL NAME of RESIDENTIAL ADDRESS make the following declaration under the State 1. To the best of my knowledge, all informate 2. I understand that a person who intention section 11 of the Statutory Declarations Add Signature: (Person making this declaration)	y witness the signing of a Statutor atutory Declarations Act 1959: ion given on this application is true ally makes a false statement in a s it 1959, and I believe that the stater Decla on	y Declaration. UPATION e and correct, and tatutory declaration is guilty of an offence under ments in this declaration are true in every particular. ared at: D D M M Y Y Y Y
You must complete the below Statutory Dec See back page for a list of persons who model I, FULL NAME of RESIDENTIAL ADDRESS make the following declaration under the St 1. To the best of my knowledge, all informat 2. I understand that a person who intention section 11 of the Statutory Declarations Ad Signature: (Person making this declaration) Before me,	y witness the signing of a Statutor atutory Declarations Act 1959: ion given on this application is true ally makes a false statement in a s at 1959, and I believe that the stater Decla on Signa	y Declaration. UPATION e and correct, and tatutory declaration is guilty of an offence under ments in this declaration are true in every particular. ared at: D D M M Y Y Y Y

contact us

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Proof of identity

From time to time you may be required to provide certified proof of identity and other information to ensure the security of your HESTA for Mercy account.

To help make this process easier, read through this factsheet to determine the documents you need to supply and the steps you need to take when we ask you to prove your identity.

When do I need to prove my identity ?

You will need to provide us with certified identification before progressing with certain transactions. Typically this will include transactions that involve paying any money out of your account or authorising someone else to speak to us on your behalf or connect to your account in any way.

The most common situations for when this occurs is when you are:

- · Applying for a benefit payment
- Transferring to a self-managed super fund (SMSF)
- Transferring to a KiwiSaver account
- Activating an Income Account

1. Primary identification documents

To prove your identity you will need to provide a certified copy of one of the following primary identification documents that contains your photograph, date of birth and signature (copy both sides where applicable):

- current driver's licence
- Australian passport or a current foreign passport
- current card issued under a State or Territory for the purpose of proving a person's age (that contains your photograph and signature).

Identification documents must not be expired (excepting an Australian passport which may be expired within 2 years).

The person certifying your documents must state their name, their position (e.g. Justice of the Peace, Police Officer) and their position identifier (e.g. JP Number, Police badge number).

The certification must not be more than 12 months old.

Identifying another super fund

If you are providing us with instructions relating to another super fund, we will ask you for additional identifying information including Tax File Number and if it's a Self Managed Super Fund (SMSF), copies of a recent bank statement of the SMSF. **IMPORTANT**: If you are unable to provide a copy of your primary identification documents, you can provide alternative documents (see overleaf)

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for mercy super

2. Photocopy both sides of your ID



The photocopy should:

- be easy to read
- show your current ID in full (expired ID won't be accepted)
- be less than 12 months old when we receive it
- have your current residential address on it.

3. Certify your identification



Take both your original ID document/s and the photocopy to an authorised person who can certify (such as Justice of the Peace, police officer, medical practitioner or post office employee - see overleaf for other people that can certify your documents).

After sighting the original and the copy and making sure both documents are identical, the authorised person will certify each page of your copies. The example above shows how a certified copy of your proof of identity should look.

This must be included on every page.

4. Provide copies of your certified ID to HESTA for Mercy

AND



PO Box 8334, Woolloongabba QLD 4102

OR

information@hestaformercy.com.au

Alternative identification

If you are unable to provide any primary photographic identification, you will need to provide two certified identification documents, one from each of the following lists:

- Birth certificate or birth extract
- Citizenship certificate issued by the
 Commonwealth
- Pension card issued by the Department of Human Services (Centrelink) that entitles the person to financial benefits (back and front)
- Letter from the Department of Human Services (Centrelink) or other Government body (in your name) in the last 12 months regarding a Government assistance payment
- Tax Office Notice of Assessment (in your name) issued in the last 12 months
- Rates notice from local council (in your name) issued in the last 3 months
- Electricity, gas or water bill (in your name) issued in the last 3 months
- Landline phone bill (in your name) issued in the last 3 months (mobile phone bills will not be accepted)

We may ask you for more information

We don't like asking you for more than we need to, however for your security we may ask for additional information relating to your identity. We'll only do this if we need greater confidence that it is you we are dealing with and not a criminal or unauthorised person. Sometimes we'll be acting on advice from authorities about known fraudulent practices and taking extra precautions.

Who can certify documents in Australia?

For a full listing of people who can certify your documents, see Schedule 2 of the Statutory Declarations Regulations 2018.

Some of the people who can certify copies of originals as true copies are:

- a Justice of the Peace
- a Commissioner for Declarations
- a financial adviser or financial planner with two or more years continuous service with one of more licensees
- a police officer
- a medical practitioner
- a nurse
- an accountant (member of ATMA, CA ANZ, CPA or IPA)
- a teacher permanently employed on a full time or part time basis at a school or tertiary institution
- a notary public
- a magistrate
- a bank officer with 2 or more continuous years of service

Who can certify documents outside of Australia?

- an authorised staff member of an Australian Embassy,
- High Commission or Consulate
- an authorised employee of the Australian Trade Commission who is in a country or place outside Australia
- an authorised employee of the Commonwealth of Australia who is in a country or place outside Australia
- a Member of the Australian Defence Force who is an officer or a non-commissioned officer with 2 or more years of continuous service
- a Notary Public from a country ranked 129 or below in the latest Transparency International Corruptions

Change of name

If you have changed your name, you **must** provide a certified copy of the relevant name change document, for example, a Marriage Certificate issued by the Registry of Births Deaths & Marriages, Decree Nisi or Deed Poll (in addition to the above identification).

If your legal name or date of birth does not match exactly to

our records (excluding aforementioned name changes), please contact us for further instructions.

Signing on behalf of another person.

If you are signing on behalf of a HESTA for Mercy member you will need to provide the following:

- a **certified** copy of the Guardianship papers or Power of Attorney; and
- a certified copy of the appropriate proof of identity for the holder of the Guardianship or Power of Attorney.

Note: Certified ID is also required for the member

Note: If your identification is written in a language other than English, the identification must be accompanied by an English translation prepared by a translator accredited by the National Accreditation Authority for Translators and Interpreters Ltd. (NAATI) at the level of Professional Translator or higher (or an equivalent accreditation), to translate from a language other than English into English.

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