

# Income stream payment change

# Understand your income stream drawdown limits

When updating the amount you draw from your income stream, you need to keep in mind that the total amount is subject to minimum (and maximum for TTR Income Streams) levels set by the Australian Government.

- For the HESTA for Mercy Transition to Retirement (TTR)
   Income Stream the annual payment amount must be
   a minimum based on your age (see table below) and a
   maximum of 10% of your total account balance.
- For HESTA for Mercy Retirement Income Stream the annual minimum payment is based on your age and your account balance at 1 July each year (see table below) - there are no maximums that apply to TTR Income Streams.

### Minimum payments

The minimum annual payment amount for both types of income stream during a financial year is:

	% of account balance	
Age	2022/23*	2023/24 onwards
Under 65	2%	4%
65 - 74	2.5%	5%
75 – 79	3%	6%
80 - 84	3.5%	7%
85 - 89	4.5%	9%
90 - 94	5.5%	11%
95 or more	7%	14%

<sup>\*</sup> Temporary reduction in minimum payment amounts for the 2020/21, 2021/22 and 2022/23 financial years

# Maximum payments (TTR Income Stream only)

A maximum of 10% of your account balance applies to TTR income streams.

There is no maximum payment amount for HESTA for Mercy Retirement Income Streams.

#### Example: Michael, age 58

Michael commences a TTR Income Stream, with \$240,000. The maximum he can take out in his first year is  $$240,000 \times 10\% = $24,000 \text{ p.a.}$ 

As Michael has chosen to receive his payments monthly his monthly maximum payment is \$2,000 per month.

# Need to change your bank account details?

If you need to change the bank account that receives payments from your income stream, you will need to complete the attached *Income stream payment change* form and provide a copy of your bank statement issued within the last 6 months as evidence of the account details. Payments can only be made to a bank account that is in your name or a joint account to which you are a party.

To protect your security, a change to your bank account details cannot be made using your online account.

## contact us

1300 368 891 | Email form to information@hestaformercy.com.au or mail to: PO Box 8334, Woolloongabba QLD 4102





# Income stream payment change

#### **COMPLETE SHADED SECTIONS**

Please complete in **BLOCK LETTERS** using a **BLACK** or **BLUE** pen and ensure it is signed and dated. Use this form to change payments from your income stream. You can also change your income stream payment amount and frequency quickly and easily using Member Online.

**IMPORTANT:** Complete ALL details. This is needed to validate your identity and get in touch if we have any questions.

1. Your personal details			
Member Number	Your name (First name and surname)		
Date of birth	Mobile or daytime telephone		
DD / MM / YYYY			
Residential Address			
Suburb		State	Postcode
Email			
2. Income stream payment details			
Change your payment frequency			
	to change your payment frequency, payment amount or the bank according this section blank if you do not wish to change your current arrangeme		receive
How often do you wish to receive pay	ments?* 💢 Fortnightly 💢 Monthly 💢 Quarterly* 💢 Half-	-yearly* X	Annually*
* For quarterly, half-yearly and annuc	al payments, please nominate the first month in which your payment is t	o commence	e: MM
Change your payment amount			
I wish to receive income payments as income payment details)	follows: (select one option only $\checkmark$ or leave this section blank if you do n	ot wish to ch	ange your
Minimum amount permitted Of	R Nominated amount* of \$ per period	as indicated	d above
X Maximum amount permitted (TT	TR Income stream only)		
	islated age-based minimum amount permitted and will be gross of tax ed amount must not exceed the maximum amount permitted (gross of t		cable. For

Please continue over page

Change the bank account to receive your payments
Leave this section blank if you do not wish to change your current bank account details.
Name of institution
BSB Account number
Account name
<b>Note:</b> Payments can only be made to your account or joint account to which you are a party. Please provide a copy of your bank statement issued within the last 6 months as proof of your bank account details. Payments to your account cannot commence until this proof is received.
3. Authorisation – read, sign and date
3. Authorisation – read, sign and date  Please arrange for payments from my HESTA for Mercy income stream to be made in accordance with the instructions provided on this form. I understand that:
Please arrange for payments from my HESTA for Mercy income stream to be made in accordance with the instructions provided on
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Please arrange for payments from my HESTA for Mercy income stream to be made in accordance with the instructions provided on this form. I understand that:  • My request will not be actioned if the information is incomplete or ambiguous.  • If I've provided my contact details on this form, the Trustee may, at its discretion, use these details to update any existing
<ul> <li>Please arrange for payments from my HESTA for Mercy income stream to be made in accordance with the instructions provided on this form. I understand that:</li> <li>My request will not be actioned if the information is incomplete or ambiguous.</li> <li>If I've provided my contact details on this form, the Trustee may, at its discretion, use these details to update any existing information on my member record and use this in future communications with me.</li> <li>I have read and understood HESTA's Privacy Collection Statement which is available at hestaformercy.com.au/privacy or by calling 1300 368 891, and accept that the information on this form is true and correct to the best of my knowledge and belief. I consent to my personal information being collected and used by the Trustee for the ongoing administration of my membership</li> </ul>
<ul> <li>Please arrange for payments from my HESTA for Mercy income stream to be made in accordance with the instructions provided on this form. I understand that:</li> <li>My request will not be actioned if the information is incomplete or ambiguous.</li> <li>If I've provided my contact details on this form, the Trustee may, at its discretion, use these details to update any existing information on my member record and use this in future communications with me.</li> <li>I have read and understood HESTA's Privacy Collection Statement which is available at hestaformercy.com.au/privacy or by calling 1300 368 891, and accept that the information on this form is true and correct to the best of my knowledge and belief. I consent to my personal information being collected and used by the Trustee for the ongoing administration of my membership by the fund administrator and other service providers.</li> </ul>

#### Return your completed form

Scan and email all requirements to **information@hestaformercy.com.au** or mail it to HESTA for Mercy, PO Box 8334, Woolloongabba QLD 4102 or drop it off in person to Potter Building, Ground Floor, Mater South Brisbane campus

### **Getting your super sorted**

When it comes to super, it's the small incremental steps that can make a big difference over time.

If you need help implementing your super options - just get in touch. We can help get your super in shape - whether it's help filling out this form or implementing a customised super strategy based on your personal circumstances.

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