



LIFE INSURANCE

MLC Protection Life and MLC Protection Executive Life 1-7 Product Disclosure Statement

This Product Disclosure Statement (PDS) applies to members that were transferred into the Smart Future Trust from the MLC Super Fund on 1 July 2025. These products are not open to new members.

Preparation date
31 August 2025

Issuer
Equity Trustees Superannuation
Limited (ETSL)
ABN 50 055 641 757
AFSL 229757

In its capacity as Trustee
for the Smart Future Trust
(the Fund)
ABN 68 964 712 340

The Insurer
MLC Limited
ABN 90 000 000 402
AFSL 230694



Protection for you and your family

Important information

This Product Disclosure Statement (PDS or Super PDS) has been prepared on behalf of Equity Trustees Superannuation Limited as Trustee of the Smart Future Trust (the Fund).

References to 'we', 'us' or 'our' are references to the Trustee, unless otherwise stated.

The insurance referred to in this PDS is issued by MLC Limited (trading as Acenda) (Insurer). Acenda uses the MLC brand under licence from the Insignia Financial Group.

Acenda is part of the Nippon Life Insurance Group and is not a part of the Insignia Financial Group. The Acenda logo is shown in this PDS with Acenda's consent.

This PDS is for the exclusive use of current holders of insurance policies within the MLC Protection Life or MLC Protection Executive Life 1-7 product range.

The information in this PDS may change from time to time.

Any changes or updates that aren't materially adverse will be available at

acenda.com.au. You also can obtain a paper copy of these updates at no additional cost by contacting us.

An online copy of this PDS is available at **acenda.com.au/pds**

This PDS is a summary of significant information about membership in the Smart Future Trust and the MLC Protection Life and Executive Life 1-7 product range available through your membership of the Fund. We're the issuer of the super interest in the Fund referred to in this PDS. You should consider all this information before making a decision about the product.

The full legal terms and conditions for any insurance cover provided to you by the Insurer are contained in the relevant Policy Documents issued by the Insurer, copies of which have been provided to you.

The Insurer does not issue, underwrite or guarantee the super interest(s) described in this PDS.

The information in this PDS is general in nature and doesn't take into account your

objectives, financial situation or individual needs. Before acting on any of this information you should consider whether it is appropriate for you. You should consider obtaining financial advice and/or taxation advice before making any decisions based on this information.

This offer is made in Australia in accordance with Australian laws.

In some cases, information in this PDS has been provided to us by the Insurer or third parties. While it is believed the information is accurate and reliable, the accuracy of that information is not guaranteed in any way. Any statements attributable to the Insurer have been shown with the Insurer's consent (which has not expired).

This PDS contains (in summary) general tax information and should not be relied on to determine your personal tax obligations. We recommend you seek professional advice from a registered tax agent.

For more information, please contact us or speak with your financial adviser.

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Importantly, there is no investment and no investment earnings in relation to the super interest as described in this PDS. Your interest in the Fund will be membership of the Fund and the insurance cover you instruct us to take out for you.

The Fund and your Trustee

The Fund is the Smart Future Trust.

It is a resident regulated super fund within the meaning of the *Superannuation Industry (Supervision) Act 1993* and is not subject to a direction under section 63 of that Act.

The Trustee is Equity Trustees Superannuation Limited.

The Trustee is responsible for the operation of the Fund, including management and administration.

The full legal terms which govern your membership of the Fund are contained in the Fund Trust Deed. The full legal terms which govern the MLC Protection Life and Executive Life 1-7 product range provided to you through the Fund are contained in the applicable Policy Document issued by the Insurer.

How insurance in super works

Your MLC Protection Life or Executive Life 1-7 product and the insurance cover you purchased is held in the Fund.

You are the person covered by the insurance however the insurance is issued to us, and we'll hold it on your behalf.

The money you pay into the Fund for the insurance will generally be treated as super contributions¹.

We'll then use those contributions to pay insurance premiums. Holding insurance through the Fund will affect what happens when you make a claim, the benefit payments, and the tax treatment and cost of insurance.

Rollovers from another fund are not contributions but can be used to pay insurance premiums. If you choose to pay your premiums by rollover to the Fund we can only accept the rollover of taxed superannuation monies.

You should discuss whether this structure is appropriate for you with your financial adviser and registered tax agent.

What documents will be issued to us and to you?

Certain documents are referenced in this PDS. Below is a summary to help you understand what they are, and who issues them:

Document	What is it?	Issued by us as the Trustee	Issued by the Insurer
Super PDS	This PDS, which sets out information you need to know about membership of the Smart Future Trust.	Yes	
Trust Deed	The document which outlines the full legal terms which govern your membership of the Fund.	Yes	
Annual Statement	A document which includes a summary of all transaction details for the financial year.	Yes	
Insurance Disclosure Document	This document may have been provided to you in the form of a Customer Information Brochure or PDS. The document sets out the information you need to know about the insurance. It has information about insurance held both inside and outside of super.		Yes
Insurance Contract	The insurance which is issued to the Trustee. It comprises the Policy Document and the Policy Schedule.		Yes
Policy Document	The document which sets out the full legal terms of your insurance. A copy will be provided to you.		Yes
Policy Schedule	The document which outlines the types of insurance, the amount of the insurance and premium that applies for that year. A copy will be provided to you.		Yes

We or Acenda may also issue change communications from time to time, if there are any changes made to the insurance benefits or terms that may impact you.

You can request, at no additional cost, a copy of the PDSs, change communications, Policy Document, or the Fund Trust Deed referred to in this PDS by contacting us on **13 65 25**. For hearing impaired customers, please call **1300 555 727**. For customers requiring interpreting or translation services, please call **13 14 50**.

¹ Either as concessional (pre-tax) or non-concessional (after tax) contributions

How insurance in super works

The MLC Protection Life and Executive Life 1-7 product range is no longer on sale and is only available to individuals with an existing policy, provided the individual has not left the Fund.

The types of insurance available through the Fund include:

- Death cover, and
- Total and Permanent Disability (TPD) cover.

For more information about the insurances available through the Fund, and the terms and conditions of the insurance, you'll also need to read the relevant Insurance Disclosure Document, as well as this Super PDS.

You were provided with the Insurance Disclosure Document when you applied for this insurance.

All references in this PDS to 'Insurance Disclosure Document' means the original Customer Information Brochure or Product Disclosure Statement, issued by Acenda, the Insurer.

The Insurance Disclosure Document contains information about insurance both inside and outside of super, and transactions you can undertake including increasing existing benefits, altering or taking out new benefits or other insurance options. It also contains information about:

- maximum insured amounts and applicable payment limits
- terms and conditions including important definitions that must be met before benefits are payable, and
- exclusions and restrictions that may apply.

For TPD cover, the insurance excludes cover for claims caused or contributed to by sickness or injury that first appeared, happened or was diagnosed before this insurance started unless it was disclosed to, and accepted by, the Insurer as a part of the application process.

If you apply for insurance, the duty to take reasonable care not to make a misrepresentation, will apply to you. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth. The duty also applies when extending or making changes to existing insurance, and reinstating insurance.

For the terms and conditions of your existing insurance through the Fund (if any) please refer to your relevant Policy Document. For any matters relating to insurance outside of super contact your adviser or the Insurer directly.

For a copy of the Insurance Disclosure Document or for further information about an insurance product, speak to your adviser. You can also contact us on **13 65 25** or go to **acenda.com.au/pds** to obtain a copy of the Insurance Disclosure Document. For hearing impaired customers, please call **1300 555 727**. For customers requiring interpreting or translation services, please call **13 14 50**.

It's important to note that holding insurance inside super through the Fund is different to holding insurance outside of super. Key differences include:

- the Trustee (not you) is the policyholder for insurance acquired through the Fund;

- superannuation laws apply to insurance held through the Fund (which impact when insurance benefits can be paid and how premiums and benefits are treated for tax purposes);
- complaints relating to insurance through the Fund must be dealt with by the Trustee's complaints handling process.

Your financial adviser can help explain the differences, having regard to your personal circumstances.

How to apply for TPD

You can only apply for TPD if you have an existing MLC Protection Life and Executive Life 1-7 policy.

To apply for insurance through the Fund you will need to complete the insurance application form, answering all the medical and personal history questions.

We will use your completed insurance application form to apply for insurance on your behalf.

The Insurer will then consider your application.

Information about how the Insurer assesses your application, including any special terms the Insurer may apply, is set out in the Insurance Disclosure Document.

The insurance

If you apply for new TPD cover, it starts when your application is accepted and the Insurance Contract is issued by the Insurer.

The Insurance Contract is made up of the Policy Document and Policy Schedule. You'll receive a copy of the Policy Document. You'll also receive a new Policy Schedule each year, close to the anniversary of the insurance.

We're the owner of the Insurance Contract but you'll be given a copy.

The Policy Schedule will confirm the type of insurance being held in the Fund, the amount of the insurance and also inform you about the premium that applies for that year.

What you need to know about the risks in relation to your insurance through the Fund

There is a risk that the insurance won't meet your needs. Your adviser can assess your circumstances and help you choose a type and amount of insurance to suit your needs.

They can help you consider your future needs now as you may not qualify for some insurances if your circumstances change. If you're replacing your insurance, you should compare the differences between the existing and replacement policies. Please also consider exclusion periods which may apply from the start of the replacement insurance. Benefits may be limited or not paid if you suffer a claimable event in an exclusion period.

This way, you can help ensure the replacement insurance is suitable for you. If you are replacing insurances, do not cancel that insurance before the new insurances are in place (after the insurance is issued).

There are some other risks you need to consider. For example, using super money to pay insurance premiums may reduce your potential retirement savings.

There are conditions and exclusions that apply to insurance cover under the Policy Terms which may affect your entitlement to insured benefits. You may also have an individual exclusion applied at commencement following underwriting, and should this occur it will be displayed in your Policy Schedule.

Also laws governing super (including insurance in super) or the taxation of super may change from time to time and may impact the suitability of you holding insurance in super, or the amount or circumstances of any payment.

Paying for insurance, costs and fees

Insurance costs

The cost of the insurance cover is known as the premium.

Stamp duty and other government charges may also be payable in respect of the insurance.

The Insurer will provide you or your adviser with a quote which sets out the expected cost of the insurance.

There are a number of ways to pay for insurance, including directly (by making contributions into the Fund to cover the cost of the premiums), or by rollover from an external super fund. You cannot pay for insurance through the Fund with contributions from your employer or spouse.

To understand all of the fees and costs that might be payable for the insurance cover (including how these are calculated), please refer to the sections below in this PDS and the relevant Insurance Disclosure Document.

Payments into the Fund, excluding rollovers, to cover the cost of insurance premiums are generally considered to be super contributions.

There are caps on the amount you can contribute to super. If you exceed these caps you may pay additional tax.

These contribution caps apply across all contributions you make into super or those made on your behalf, including employer super contributions and other personal contributions you make across all super accounts that you have, even where those accounts are with different super providers.

For more information about taxation implications of insurance arrangements in super refer to the Taxation section in this PDS.

To find out who can contribute, go to apra.gov.au or ato.gov.au. You can also speak to your financial adviser.

How is the first premium treated?

Any premium paid stays in a trust account while the application for insurance through the Fund is being considered by the Insurer, until the application is accepted or declined (in which case the premium is refunded). Any interest earned on monies in the trust account will be retained by the Fund and paid to the Insurer.

If your application for insurance (TPD only) is not finalised before the end of the income year, we will not record the contribution (in the form of a premium) as being received until the following income year when your application is approved.

Trustee fees

As at the date of preparation of this PDS, we do not charge you a fee for your membership of the Fund for this super interest or for setting up insurance through the Fund. If this changes, we'll let you know at least three months before introducing the fee.

As the Trustee of the Fund, Equity Trustees Superannuation Limited receives payments from the Insurer in connection with our role and the management of super interests associated with this product. These payments are not an additional cost to

you and may vary from time to time. They are by agreement between the Trustee and the Insurer, having regard to the costs we incur in managing this product based on the number of insured members and may be paid by the Insurer out of the premiums they receive.

Family Law Charges

The *Family Law Act* allows super, life insurance and other investments to be divided between parties should there be a marriage or de facto relationship breakdown.

We may be obliged to provide information to other parties and manage the insurance in line with court orders or binding family law agreements. We may charge a fee for any costs we incur. We will let you know the amount of fee, if applicable.

Claiming on the insurance

We will make a claim on your behalf to the Insurer by submitting your completed claim forms to the Insurer. Please refer to the relevant Insurance Disclosure Document for how to make a claim.

You'll need to satisfy the insurance terms for the insurance benefit to be paid.

The insurance terms are described in the relevant Insurance Disclosure Document and will also be set out in the Policy Document.

Any insurance benefits paid in respect of insurance held through a MLC Protection Life and Executive Life 1-7 policy is part of your super and will be paid to us as the Trustee of the Fund.

We'll then release the benefits to you providing you meet a condition of release set by law.

The condition of release that may be relevant for each type of insurance is shown in the table below:

Type of insurance	Related conditions of release
Life Cover	Death
Accidental Injury Benefit and TPD	Permanent Incapacity – this means the Trustee is satisfied that your ill-health (whether physical or mental) makes it unlikely that you will engage in gainful employment for which you are reasonably qualified by education, training or experience. The Trustee will require two registered medical practitioners certify that you meet the definition of Permanent Incapacity to be eligible for tax concessions pursuant to the Income Tax Assessment Act.
Terminal Illness	Terminal Medical Condition – a terminal medical condition exists in relation to you at a particular time if the following circumstances exist: • two registered medical practitioners have certified, jointly or separately, that you are suffering from an illness, or have incurred an injury, that is likely to result in death within a period (the certification period) that ends not more than 24 months after the date of the certification • at least one of the registered medical practitioners is a specialist practicing in an area related to the illness or injury suffered by the person, and • for each of the certificates, the certification period has not ended.

Irrespective of the conditions of release described above, the applicable insurance definition in the Policy Document must be met for an insurance benefit to be payable.

For new insurance benefits inside super that commenced after 30 June 2014, super trustees are required to provide insurance benefits that are consistent with the conditions of release.

Therefore, any new insurance that you apply for through the Fund after that date will be consistent with a relevant condition of release.

This means that all valid claims for such insurance benefits will meet the relevant condition of release, and we will be able to release to you the benefit we receive from the Insurer.

Most benefits can be paid to you or your beneficiary following a valid claim. However in rare cases you may not meet a condition of release, and we therefore can't release the benefit to you.

In such a case, the benefit must be held in a super fund as "preserved benefits", until you do meet a condition of release. We'll seek instructions from you about where you would like the benefit to be held. Until your instructions are received and processed, the benefit will not accrue interest.

The law is strict about how and when you can access preserved benefits.

You can generally access preserved benefits when you reach age 65.

Before age 65 you can generally access preserved benefits if you are age 60 and fully retire or if you satisfy another condition of release.

For more information about the conditions of release, go to apra.gov.au or ato.gov.au

Death benefits and nominating a Beneficiary

We'll generally pay any insurance death benefit we have received to your eligible beneficiaries (typically your dependants) or your legal personal representative (estate) in accordance with super laws.

Nominating a Beneficiary

You're able to nominate how you prefer your insurance benefits are distributed on your death, as described below.

Beneficiary Nomination Option	What this means
Binding death benefit nomination	You may specify dependants and/or your estate as beneficiaries and nominate the appropriate proportion of the insurance benefits payable to each. If your nomination has been accepted by us and is valid and effective when you die, usually we must pay the insurance benefit to those you nominated in your latest nomination, in the proportions you requested. Your nomination will be valid for three years, after which it will expire.
Non-binding death benefit nomination	Under this option, you may also specify dependants, and/or your estate as beneficiaries and proportions payable to each however we'll determine who receives the insurance benefit, taking into account relevant laws and other factors. Your nomination will guide us as to your wishes, but it will not be binding. We have absolute discretion to determine who will receive the insurance death benefits.

You will need to complete the nomination of beneficiary section of the relevant application form if you wish to make a nomination. For a binding death benefit nomination to be binding on us, the nomination must be valid and effective. A court order may override a binding beneficiary nomination.

If you haven't made an insurance death benefit nomination, we'll have absolute discretion over who receives the benefit in the event of your death (subject to relevant laws).

You can change any insurance death benefit nomination you have made or replace it with a different type of death benefit nomination by completing the

Beneficiary nomination form available from acenda.com.au/beneficiaryform. You can cancel a nomination at any time by writing to us.

Who can you nominate?

When you make a death benefit nomination, under super laws you can only nominate a dependant and/or legal personal representative. A dependant may include:

- your spouse (including a de facto spouse or same-sex partner)
- children (including adopted children, step-children, a child of your spouse or someone who is your child within the meaning of the Family Law Act 1975)

- individuals who are financially dependent on you at the time of your death, or
- someone in an 'Interdependency Relationship' (see definition below) with you.

Your legal personal representative is either the executor under your Will or a person(s) granted letters of administration for your estate if you die without having left a valid Will.

If you don't have any such beneficiaries at the time of your death, then we may pay the benefit to another person. When nominating beneficiaries you should take these restrictions into account.

An interdependency relationship exists if two persons (whether or not related by family) have a close personal relationship, live together, one or each of them provides the other with financial support, and one or each of them provides the other with domestic support and personal care.

Two persons will still have an interdependency relationship if they have a close personal relationship but they don't satisfy the other requirements set out above if the reason they don't satisfy the other requirements is that:

- they are temporarily living apart, or
- if either of or both of the two persons suffer from a disability that prevents them from satisfying the other requirements.

It is important that you review your nomination regularly and keep your beneficiary nomination up to date with changes in your personal circumstances.

If you make a non-lapsing binding death benefit nomination your nomination will not automatically become invalid in the event of marriage, divorce or any other life-changing event. In these circumstances, your last valid nomination may no longer reflect your intentions and, unless you update it, we'll still pay the person named in the nomination so long as they are still an eligible beneficiary.

We'll confirm the details of your nomination each year via your annual statement. You can cancel or change your nomination at any time by completing the relevant form available from **acenda.com.au/beneficiaryform** or by calling us on **13 65 25**. For hearing impaired customers, please call **1300 555 727**. For customers requiring interpreting or translation services, please call **13 14 50**.

You should speak to your financial adviser, estate planner or legal representative and registered tax agent to determine which type of nomination will best suit your circumstances and how the complex tax rules about death benefits and beneficiaries may affect you. The definition of 'dependant' for tax purposes is different (eg it does not include an adult child unless they are financially dependent on, or in an interdependency relationship with, you).

When insurance in super ends

If premiums are paid and the terms of the insurance are met, it will continue until the expiry date of the insurance is reached, or a termination event happens. See the Insurance Disclosure Document for further details.

Cooling off period

If the insurance is cancelled within the applicable cooling off period, the Insurer will refund to us all premiums paid.

We'll then refund the amount to you subject to super preservation requirements.

If the monies paid include preserved or restricted non-preserved benefits, you must nominate another complying super fund or rollover vehicle to which these amounts are to be rolled over.

However, if you make an alteration to the insurance or claim on the insurance during the cooling off period, this will confirm acceptance of the insurance and any premiums paid won't be refunded.

For further details about the cooling off period, please see the relevant Insurance Disclosure Document.

Note: If the cancelled cover is the only cover held through the Fund, your membership of the Fund for this super interest will also cease.

Cancelling insurance

You can cancel the insurance at any time by request to the Insurer. The Insurer will refund to us premiums paid for any cover relating to the period after the effective date of the cancellation.

We will then refund the amount to you subject to super preservation requirements.

If the monies paid include preserved or restricted non-preserved benefits, you must nominate another complying super fund or rollover vehicle to which these amounts are to be rolled over.

For more information about the risks and consequences of cancelling your insurance, please speak with your financial adviser or go to **acenda.com.au/cancelyourinsurance**

For further details about cancelling the insurance, please see the Insurance Disclosure Document.

Converting to insurance outside of super

You can convert the insurance inside of super to insurance outside of super at any time, as long as the insurance is still in place (while your policy is active and premiums are paid up to date). Contact your financial adviser or the Insurer for further information.

How does conversion work?

On conversion the Insurer will cancel the insurance through super, and issue you a new insurance policy outside super, with similar types of insurance and amounts of insured benefits.

At that point your interest in the insurance product offered through the Fund ends. Any premiums relating to your insurance through super will be refunded in accordance with the usual arrangements applicable to cancelling insurance (see above). Your entitlement to receive any insurance benefits through super also ends and your membership of the Fund will cease (unless you hold another account in the Fund).

Any beneficiary nomination for insurance in super will also end when the insurance through super ends.

The amount of insured benefits under the new insurance will not be more than it was under the old insurance at the date of conversion.

Premiums under the new insurance will be calculated in line with the Insurer's premium rates for the cover at the time of conversion.

Any beneficiary nomination made for the insurance in super will not apply to the new insurance outside of super. To make a new beneficiary nomination for your insurance outside of super you will need to complete the Insurer's nomination of beneficiary forms.

See the relevant Insurance Disclosure Document for further details.

Taxation

The information in this section is of a general nature and is a summary only of relevant tax laws based on our understanding at the preparation date of this document. Tax laws are subject to change and their impact depends on your personal situation. It should not be relied on solely for making financial decisions. We recommend that you seek professional tax advice regarding your own taxation position.

Tax laws change. To keep up-to-date, please visit ato.gov.au

Any contributions used to fund premiums will be reported to the Australian Taxation Office (ATO) for the purpose of calculating your usage of the relevant super contribution cap.

Where required by law, we'll deduct any tax, duty or government fees and forward the money to the relevant authority.

How are super contributions taxed?

Contributions are generally either tax free (non-concessional contributions) or taxed at a concessional rate of 15% (concessional contributions).

Non-concessional contributions include personal (non-deductible) contributions you (or your spouse) make for you. Concessional contributions include, but aren't limited to, contributions from your employer (including salary sacrifice) or, if you're eligible, personal contributions for which you can claim a tax deduction.

An additional 15% tax may also apply on the concessional contributions of high income earners whose adjustable taxable income exceeds \$250,000 per annum. This tax will be assessed by the ATO and will be charged to the individual.

Insurance premiums may be tax deductible to the Fund.

Where the premium is deductible to the Fund, we are able to offset any tax payable on contributions by the amount of the deduction. This may reduce the amount of tax you pay from your super account on concessional contributions.

If you choose to fund insurance premiums by rollover from an external super account, we will pass on any tax refund to you by reduction of premium. However, when rolling over, you should consider the impact on the tax and preservation components on each of your super interests.

To find out more about the taxation implications and the preservation components inside super, speak to a financial adviser or registered tax agent.

What are the maximum contribution amounts?

There are limits on how much concessional or non-concessional contributions you can pay (or receive) into your super fund(s) each financial year without having to pay extra tax. These limits are called 'contribution caps'.

Your contributions for the payment of insurance premiums are added to any contributions you or your employer make across all your super accounts for the purpose of applying the concessional and non-concessional contribution caps.

If you exceed these caps you may pay additional tax. These caps may change from time to time.

To find out more about current contribution caps, the taxation implications of exceeding these caps, or any tax law changes, go to ato.gov.au and/or speak to a financial adviser or registered tax agent.

Taxation

Do you intend to claim a tax deduction for contributions used to fund the insurance premium?

Individuals under the age of 67 are generally permitted to claim a tax deduction for personal contributions.

If you are aged 67 to 74 you will need to meet a work test, or work test exemption, in order to be eligible to claim a tax deduction for your personal contributions.

If you intend to claim a tax deduction for any contributions used to fund premiums, you'll also need to provide us a **Notice of intent to claim or vary a deduction for personal super contributions form** within the relevant time limits.

To find out more go to ato.gov.au and/or speak to your tax agent.

Also, if your application for insurance is not finalised before the end of the income year, we will not record the contribution as being received until the following income year when your application is approved.

This could have implications for the income year in which you are entitled to a tax deduction and can also impact your contribution caps.

How are insurance benefits taxed?

The rules relating to the taxation of benefits are complex and you should speak to a financial adviser or obtain professional tax advice from a registered tax agent.

Where required we or our agent will withhold tax from benefit payments and forward the money to the ATO.

What is the work test?

To meet the work test, you must be gainfully employed for at least 40 hours over a 30 consecutive day period during the financial year that you make the contribution(s).

If you have recently retired, are aged 67 to 74 and your Total Super Balance¹ is less than \$300,000 the work test exemption may allow you to claim a tax deduction for personal super contributions that you make during the first financial year in which you don't meet the work test.

¹ Total Super Balance: Your Total Super Balance for a financial year is the value, at 30 June of the previous financial year, of all of your accumulation or pre-retirement phase accounts, retirement phase accounts, such as an account based pension, and funds in the process of being transferred from one super account to another (known as 'in-transit rollovers'). You can find out your Total Super Balance by logging in to your my.gov.au account.

Providing your Tax File Number (TFN)

Under the Superannuation Industry (Supervision) Act 1993, your super fund is authorised to collect, use and disclose your TFN, which will only be used for lawful purposes.

These purposes may change in the future as a result of legislative change. The trustee of your super fund may disclose your TFN to another super provider, when benefits are being transferred, unless you request the trustee of your super fund in writing that your TFN not be disclosed to any other super provider.

It is not an offence not to quote your TFN. However giving your TFN to your super fund will have the following advantages (which may not otherwise apply):

- your super fund will be able to accept all types of contributions to your account/s
- the tax on contributions to your super account/s will not increase
- other than the tax that may ordinarily apply, no additional tax will be deducted, and
- it will make it much easier to trace different super accounts in your name so that you receive all your super benefits when you retire.

You should provide your tax file number (TFN) to us. If we don't have it, your application for a policy in MLC Protection Life and Executive Life 1-7 and membership of the Fund cannot be accepted.

Also, without a TFN you may be taxed at the highest marginal tax rate for the benefits that are paid to you.

We will verify your TFN with the ATO. For more information visit ato.gov.au

Complaints resolution

If you have a complaint about our organisation, related to our products, services, staff or the handling of a complaint, we'd like an opportunity to put it right. Your complaint can be made verbally or in writing.

Please call us on **13 65 25** (Toll free **1800 062 061**) or for international calls **+61 2 9121 6500** (charges apply) between 8.30am and 6pm (AEST/AEDT), Monday to Friday, to discuss your concerns. For hearing impaired customers, please visit accesshub.gov.au/about-the-nrs to contact us via your preferred NRS call channel or call **1300 555 727**. For customers requiring interpreting or translation services, please call **13 14 50**.

An acknowledgement will be issued to you at the time of receipt of your complaint and our team will investigate and respond on all aspects of the matters raised in your complaint. If we are unable to resolve your issues to your satisfaction within the first 5 business days, we will put you in contact with our Internal Complaints Resolution Team at:

Email: resolve@acenda.com.au

Mail: The Complaint Manager
Acenda Complaints Resolution
PO Box 23501
Docklands VIC 3008

For more information, please visit acenda.com.au/support/customer/complaint

If you make a complaint and we resolve it within 5 business days from receipt to your satisfaction we are not required to send you a formal complaint response, unless you request one; or your complaint relates to hardship, a declined insurance claim, the value of an insurance claim or any decision of the Trustee (or failure by the Trustee to make a decision) relating to a complaint.

We will provide you with a response no later than 45 calendar days after receiving your complaint, unless another timeframe is allowed or required under the relevant legislation.

For death benefit objections, the trustee must provide a complaint response no later than 90 calendar days after the expiry of the 28-calendar day period for objecting.

We will do our best to resolve your complaint as soon as possible. However, if we are unable to provide you with a response within the required timeframe, we will provide you with progress updates including any reasons for a delay.

If you're not satisfied with the resolution provided by our Internal Complaints Resolution Team, or we haven't responded to you in 45 calendar days, you can lodge a complaint with the Australian Financial Complaints Authority (AFCA).

AFCA is an independent body that provides a complaint resolution service free of charge to customers. Time limits may apply to complaints to AFCA and so you should act promptly or otherwise consult the AFCA website to find out if or when the time limit relevant to your circumstances expires. You can contact AFCA at any time, in writing, by email or by phone. AFCA's contact details are:

Australian Financial Complaints
Authority
GPO Box 3
Melbourne VIC 3001

Phone: **1800 931 678** (free call)
Email: info@afca.org.au
Website: afca.org.au

If you have a complaint about financial advice services you have received from your financial adviser, you should follow the complaint handling process explained in the Financial Services Guide provided by your financial adviser. We also suggest you contact your financial adviser.

Other information

Keeping you informed

Each year, you'll be provided with information so you can stay informed about your super interest in the Fund (including your insurance) and any changes that may arise including:

- a statement of the insurance with a summary of all transaction details for the financial year
- information in relation to any material changes, and
- confirmation of non-routine transactions you make on the insurance.

We may provide this information to you by mail, email or by making the information available on **acenda.com.au**.

We'll let you know when information about the insurance has been made available online. If you prefer to receive information (including any updates) about your account in the Fund (including any insurance) by mail, please let us know.

Anti-Money Laundering

We're required to comply with our obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Act) (Cth) and the Australian Sanctions laws.

We (or the Insurer on our behalf) may need to collect information from you, anyone acting on your behalf or your related parties.

All documents we request need to be dated, and must be an original or certified copy of original document(s) (not a photocopy of a certified copy of original document(s), not faxed or scanned copies)

and must be valid at the time you send them to us. Amongst its other AML/CTF obligations, we are required to adhere to AUSTRAC's reporting requirements.

We may decide to delay or refuse any request to process any transaction, including suspending a withdrawal application, freeze accounts or restrict access to funds (where permissible under any applicable legislation), if we're concerned that the request or transaction may breach any obligation we have under the AML/CTF Act, or cause us to commit or participate in an offence, under any law.

To the extent permitted by law, we'll incur no liability to you if we do so.

Privacy information

We and the Insurer collect your personal information from you directly wherever we can, but in some cases we may collect it from third parties such as your adviser. We do this to determine your eligibility and to administer the product.

If personal information is not provided, we or the Insurer may not be able to provide you the product or a service, or administer it appropriately. We may collect information about you because we are required or authorised by law to collect it. There are laws that affect financial institutions, including company and tax law, which require us to collect personal information.

For example, we require personal information to verify your identity under the AML/CTF Act.

We may disclose your personal information to other EQT Holdings Limited Group (EQT Group) members and

to external parties including the Insurer for purposes that include: insurance management, product development and research.

For more information refer to **eqt.com.au/global/privacystatement**

It is generally unlikely that we will disclose your personal information overseas, however, any overseas disclosure does not affect our commitment to safeguarding your personal information and we will take reasonable steps to ensure any overseas recipient complies with Australian privacy laws.

We, other EQT Group members, and the Insurer may use your personal information to contact you about products and for marketing activities.

If you do not wish for the Insurer to contact you about products and for marketing activities, you need to contact them directly on **13 65 25** or **enquiries.retail@acenda.com.au**

You can let us know at any time if you no longer wish to receive these direct marketing offers by contacting us.

More information about how we collect, use, share and handle your personal information is in our Privacy Statement (**eqt.com.au/global/privacystatement**), including how to access or correct information we collect about you and how to make a complaint about a privacy issue. Contact us for a paper copy or if you have any questions or comments.



LIFE INSURANCE

Contact us

For more information (including to obtain a copy of this PDS and the relevant Insurance Disclosure Document) visit acenda.com.au or call us from anywhere in Australia on **13 65 25** or contact your financial adviser. For hearing impaired customers, please visit accesshub.gov.au/about-the-nrs to contact us via your preferred NRS call channel. For customers requiring interpreting or translation services, please call **13 14 50**.

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