

# Special beneficiary provision if you have chosen repayment cover and/or family cover within ITP

Agreement area: The Confederation of Swedish Enterprise (Svenskt Näringsliv)/  
The Council for Negotiation and Cooperation (PTK)

|                             |
|-----------------------------|
| Name and accounting address |
|                             |
|                             |

|                                     |
|-------------------------------------|
| Nat. Reg. No. (yyyyymmdd-nnnn)      |
| Daytime telephone (incl. area code) |
| Employer                            |

Please read the information on the next page before completing this form.

| <input type="checkbox"/> <b>Alternative 1</b><br>(Do not state name of beneficiary.)  | My beneficiary shall be: <ul style="list-style-type: none"> <li>• First, my children who are my legal heirs</li> <li>• Second, my spouse, registered partner or cohabitant.</li> </ul>   |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|-------------------------|-------------------------------|-------------------|--------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <input type="checkbox"/> <b>Alternative 2</b><br>(Do not state name of beneficiary.)  | My beneficiary shall be: <ul style="list-style-type: none"> <li>• for one half my spouse, registered partner or cohabitant</li> <li>• for the other half my children who are my legal heirs.</li> </ul> Should one of the parties be missing or waive entitlement, the entire pension amount will accrue to the other party.   |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> <b>Alternative 3</b>   | State who your beneficiaries are to be. The beneficiaries you can choose between are: <ul style="list-style-type: none"> <li>• spouse or previous spouse</li> <li>• registered partner or previous registered partner</li> <li>• cohabitant or previous cohabitant</li> <li>• children, stepchildren or foster children of yours or any of the people above.</li> </ul> My beneficiaries in the first instance shall be: * <table border="1"> <thead> <tr> <th>First names and surname</th> <th>Nat.reg.no.. (yyyyymmdd-nnnn)</th> <th>Kinship with me**</th> <th>Percent per person</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> | First names and surname | Nat.reg.no.. (yyyyymmdd-nnnn) | Kinship with me** | Percent per person |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| First names and surname   | Nat.reg.no.. (yyyyymmdd-nnnn)  | Kinship with me**       | Percent per person            |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |  |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|   |  |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| My beneficiaries in the second instance shall be: *   |  |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <thead> <tr> <th>First names and surname</th> <th>Nat.reg.no.. (yyyyymmdd-nnnn)</th> <th>Kinship with me**</th> <th>Percent per person</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>                         |  | First names and surname | Nat.reg.no.. (yyyyymmdd-nnnn) | Kinship with me** | Percent per person |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| First names and surname   | Nat.reg.no.. (yyyyymmdd-nnnn)  | Kinship with me**       | Percent per person            |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |  |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |  |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <small>*If the lines have insufficient space, or if you wish to add beneficiaries in the third, fourth (and so on) instance, please enclose a separate paper, dated and signed.<br/>** See above whom you can choose. If you write cohabitant in this column, the provision will not apply if you are no longer cohabiting.</small> |  |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> <b>Alternative 4</b>   | I wish the general beneficiary provision to apply once more. (You will find information on the next page.)   |                         |                               |                   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Personal property** If the amount received by the beneficiary is to be classed as personal property, choose 1 or 2.

(1) The amount that the beneficiary receives from the insurance, and the return from it, shall be classed as personal property.

(2) The amount that the beneficiary receives from the insurance, and the return from it, shall be classed as personal property. The beneficiary has the right to stipulate that the personal property shall instead be classed as matrimonial property through a prenuptial agreement.

### Signature

I am aware that this provision applies to all family cover and/or repayment cover within the ITP Plan and within ITP's period of validity according to the information provided on page 2 of this form. If after my death the above specified beneficiary provision cannot be implemented, the beneficiary provision specified in the insurance terms and conditions shall apply.

|                |           |
|----------------|-----------|
| Place and date | Signature |
|----------------|-----------|

Please send the form to:

**Collectum  
Förmånstagarregistret  
103 76 Stockholm**

A copy will be sent to you when the provision has been registered. Remember to review this provision if your family situation should change.

### Collectum's notes

|  |           |
|--|-----------|
| <b>Above provision received and registered by:</b> |           |
| Date   | Signature |

### Collectum AB

F260-005\_En 2021.02

# Information about beneficiaries and beneficiary provision

## When completing the form

When you write a special beneficiary provision, it is important to complete all details about yourself so that the provision will be registered for the right person and so that we can return a copy of the provision after registration. We may also need to contact you if this matter is being processed. If you do not have a current employer, please give the name of your most recent employer.

Please note that an incorrectly completed provision may be wholly or partly invalid. So take extra care when completing the form!

## Choose beneficiary

Place a cross against *one* of the four alternatives on the form.

### • Alternative 1

If you place a cross here your children will be your beneficiaries 100% in the first instance. If you have no children, the beneficiary will be your spouse, registered partner or cohabitant.

### • Alternative 2

If you place cross here your spouse, registered partner or cohabitant will receive 50% and your children the remaining 50%. If one of these parties is missing or does not wish to receive their share, it automatically accrues to the other party.

### • Alternative 3

Here you give the name of your beneficiary or beneficiaries. When these are your own children you do not need to fill in their nat. reg. nos. Just write “my children” so unborn children will also be included.

If you write the word cohabitant in the column “kinship with me”, the provision in this section will lapse if the cohabitation ceases.

If there is insufficient space, write a separate attachment. Provide the name of the beneficiary, national registration number, kinship with you, percentage or priority. Remember to enter the date and sign your name.

Please note that according to the Swedish Income Tax Act only persons listed under alternative 3 on the form can be chosen as beneficiaries.

### • Alternative 4

Put a cross here if you wish an earlier provision to cease to apply or want to be sure that a general beneficiary provision applies (read more about the general provision in the column to the right).

## Personal property

Box 1: If you would like the amount received from the insurance to be classed as the beneficiary’s personal property (“enskild egendom” in Swedish), place a cross in box 1. This means that the amount the beneficiary receives from the insurance, and the return from it, will be classed as their personal property.

Box 2: If you would like the amount received from the insurance to be classed as the beneficiary’s personal property (“enskild egendom” in Swedish), but you would like to allow the beneficiary to change this to matrimonial property (“giftorättsgods” in Swedish) at a later date, place a cross in box 2 instead.

If you do not want the amount received by the beneficiary to be classed as personal property, do not tick either of these boxes.

## Other

A will or similar expression of will is not a beneficiary provision.

Attached sheets must be dated and signed.

## About the beneficiary provision

### Which insurance areas are covered by the provision?

This provision applies if you have taken out repayment cover and/or family cover for your ITP or ITPK via Collectum. The provision also applies for complementary premiums and so-called lifetime service premiums.

Please note that the defined benefit retirement pension in ITP 2 and the family pension are not included in this provision.

### What is a general beneficiary provision?

It is a standard provision that suits most people and which applies if you do not write a special provision. Beneficiaries are then, in order to preference:

1. spouse, registered partner or cohabitant
2. children who are legal heirs (regardless of age).

Remember that a spouse or registered partner is a beneficiary even if proceedings for divorce/dissolution of partnership are under way.

### Validity period of provision

#### • For repayment cover

Repayment cover applies to paid in money even if your employment within the collective agreement sphere ceases. A changed beneficiary provision applies until a new provision is registered.

#### For family cover

Family cover ceases to apply if you no longer have active employment, i.e. premiums are no longer being paid for you. When employment ceases, the provision applies for 12 months, unless you start another employment within the same collective agreement sphere.

If you start to work within a different collective agreement sphere or you send in a new beneficiary provision, this provision will cease to apply directly.

If you are uncertain what you have written as a provision, we recommend that you write a new one. It is always the most recently signed beneficiary provision that applies.

## We process personal data

Collectum processes personal data in accordance with the regulations applying at any point in time as stipulated in the Swedish Data Protection Act in order to be able to administer ITP and TGL. Read more at [collectum.se](http://collectum.se).

## Collectum AB

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