Schindler Pension Fund

Assignment for the lump sum death benefit

Purpose of this form

If an active insured dies before retirement and no claim to survivors' benefits pursuant to Art. 13.1, 13.2 and 13.9 exists, a lump sum death benefit amounting to 100% of the accrued retirement assets will be paid out to the entitled claimants, as specified under Art. 13.23.

Basis in the Regulations - Article 13.23 Pension Fund Rules, Version of January 1, 2026

The following are entitled to the lump sum death benefit in the order of precedence shown:

a. Natural persons who were supported to a considerable extent by the insured, or a partner with whom the insured had cohabited without interruption during the last five years before their death, or who is responsible for financially supporting one or more joint children, provided that the partner is not married and is not related to the insured. However, a cohabiting partnership entitling a partner to a pension must be confirmed in writing and the confirmation signed by both partners. To this end, the beneficiary form provided by the Pension Fund must be completed and submitted to the Pension Fund administration before the death of the insured.
b. The children of the deceased, followed by the deceased's parents, and finally their siblings.

Where the lump sum death benefit is divided between several entitled claimants, each receives an equal share. However, the insured may submit a written declaration to the Pension Fund in which they change the order of precedence of beneficiaries within the same beneficiary category (letters a and b above) and/or determine that the individual beneficiaries within the same beneficiary category receive different shares of the lump sum death benefit.

The order of precedence of the beneficiary categories themselves cannot be changed.

Rights and obligations

1. The beneficiary nomination is valid only if submitted to the Schindler Pension Fund prior to the death of the insured using the present form, which should be duly signed by both the insured and their partner under Art. 13.23 letter a.
2. The insured can revoke the beneficiary nomination at any time in writing, even without the consent of the beneficiary. In this case, the general order of precedence of beneficiaries is reinstated.
3. The present beneficiary nomination replaces any previously submitted nominations.
4. If an insured revokes or amends the beneficiary nomination, the previous beneficiary will not be informed by the Schindler Pension Fund.
5. The Schindler Pension Fund is to be informed in writing immediately if the life partnership is dissolved or if the insured or the beneficiary marries, both of which might affect the entitlement.
6. The claim to the lump-sum death benefit lapses when the insured or the beneficiary marries.
7. It is the duty of the person claiming beneficiary status to prove that they fulfil the entitlement criteria (e.g. five years of uninterrupted cohabitation, material support, etc.). The Schindler Pension Fund's evaluation as to whether or not such criteria have been met will be based on the circumstances at the time of the death of the insured. The statutory provisions and those of the Pension Fund Rules, in force at the time of the death of the insured, will apply.
8. The entitlement to the lump-sum death benefit of the children, as well as of the parents and of the siblings of the insured, lapses if the life partner or the supported person is nominated as beneficiary.
9. Nomination as beneficiary of the lump-sum death benefit lapses automatically when disability or retirement benefits fall due for payment.

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Insured person

Last name …… Date of birth ……..

First name ……

Marital status ☐ single ☐ married ☐ divorced ☐ widowed
☐ registered partnership ☐ dissolved partnership

Beneficiary (as per Art. 13.23 / a)

Last name …… Date of birth ……..

First name ……

Sex ☐ female ☐ male

Marital status ☐ single ☐ married ☐ divorced ☐ widowed
☐ registered partnership ☐ dissolved partnership

Confirmation

The insured person and the beneficiary hereby confirm that:

- a life partnership exists
- they have taken note of and acknowledge the conditions set out in this form.

Commencement of partnership:

_____

Current residential address of the beneficiary:

_____

Signatures

Place, date _____ _____

Signatures _____ _____

Insured person

Please enclose a copy of your passport or ID card

Beneficiary

Please enclose a copy of your passport or ID card

Please submit to: Schindler Pension Fund, Zugerstrasse 13, 6030 Ebikon

Schindler Pension Fund

Assignment for the lump sum death benefit

Insured person

Last name …… Date of birth ……..

First name ……

Marital status ☐ single ☐ married ☐ divorced ☐ widowed
☐ registered partnership ☐ dissolved partnership

Order of beneficiaries (as per Art. 13.23 / b)

I would like the following change to be made to the order of beneficiaries:

The children of the deceased, followed by the deceased's parents, and finally their siblings.

Last name	First name	Date of birth	Share in %

Signature

Place, date _____

Signature _____

Insured person

Please enclose a copy of your passport or ID card

Please submit to: Schindler Pension Fund, Zugerstrasse 13, 6030 Ebikon