

Please complete this form in BLOCK CAPITALS and return to the Pensions Department, Mezzanine Floor, 80 Strand, London, WC2R 0RL.

In certain circumstances, a lump sum may be payable from The Pearson Pension Plan (the Plan) when you die. It is for the Trustee of the Plan to decide who should receive any discretionary lump sum benefit which becomes payable on the death of a member of the Plan. You can help the Trustee in making this decision by completing the boxes below indicating who you would like to receive the lump sum (if any). Please note that, while the Trustee will bear your wishes in mind when exercising its discretion, the Trustee is not legally bound by them.

### Personal information

Surname (Mr, Mrs, Miss, Ms, Other)		Forename(s)	
Address		Postcode	
Date of birth	National Insurance number		

### Member category

Active (currently in Pearson employment) <input type="checkbox"/>	Pensioner (currently receiving a pension from the Plan) <input type="checkbox"/>
Deferred (not currently employed by Pearson) <input type="checkbox"/>	

### Nominee information (person(s))

Full name		<b>% of benefit</b> <input type="text"/> %
Address		
Postcode		
Date of birth	Relationship (if any)	

The Trustee, as the controller under the EU General Data Protection Regulation, uses certain personal information about you to (amongst other reasons) communicate with you and administer your benefits in the Plan. Your information is shared with the Plan's administrators, other providers of services to us, and public bodies such as Her Majesty's Revenue and Customs. For more detailed information on how we use and disclose your information, the protections we apply, the legal bases we rely on and your data protection rights, please see our privacy notice at [www.pearson-pensions.com/privacy-policy](http://www.pearson-pensions.com/privacy-policy). If you would like a copy of our privacy notice to be sent to you, please contact the pensions helpline.

## Expression of wish form

### Nominee information (person(s))

**% of benefit**

Full name	
Address	
Postcode	
Date of birth	Relationship (if any)

%
---

### Nominee information (person(s))

**% of benefit**

Full name	
Address	
Postcode	
Date of birth	Relationship (if any)

%
---

### Nominee information (charity or organisation)

**% of benefit**

Name of organisation	
Address	
Postcode	

%
---

### Member declaration

**Total**

<p>I acknowledge that this notification cancels any previously submitted expression of wish form.</p> <p>Under the terms of the EU General Data Protection Regulation , I agree to the Trustee keeping records and using information about me for the purpose of administering the Plan.</p> <p>In the event of any change in your circumstances or alteration to the details indicated, please submit an updated form (available from the pensions website: <a href="http://www.pearson-pensions.com">www.pearson-pensions.com</a>).</p>	
Signature	Date

%
---