

Beneficiary and/or Successor Annuitant Designation Form

To make or change beneficiary designation for Registered Accounts (Not applicable in Quebec)

Account Number (7 digits): _____ **(the "Plan")**

Account Holder's Name: _____

I hereby revoke any and all prior designations made by me in respect to this Plan, and I make the following new designations:

Successor Annuitant For A RIF

(For a retirement income fund (RIF) only)

- I designate my spouse or common-law partner, by naming them below, to be successor annuitant of my Plan, in the event of my death prior to the maturity of my Plan, in order for my spouse or common-law partner to continue to receive payments from the Plan after my death. I understand that if my successor annuitant survives me, and if I have also designated a beneficiary or beneficiaries below, then the designation of my successor annuitant takes precedence. I understand that, after my death, my successor annuitant may change the beneficiary or beneficiaries I have designated. I understand that my designation of a successor annuitant will not be effective if the person designated is no longer my spouse or common-law partner at the time of my death.

First Name	Middle Name	Last Name
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Social Insurance Number	Birth Date (MM/DD/YYYY)
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Phone Number	Email Address
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Residence Address (P.O. Boxes, G.D. or C/O not accepted)

City	Province	Postal Code
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Beneficiary Designation

- I designate the person(s) named below as beneficiary or beneficiaries to receive the proceeds payable under my Plan in the event of my death. I understand that I may also name one or more contingent beneficiaries, who will receive the proceeds payable under my Plan in the event of my death if the designated beneficiary or beneficiaries dies before me. I understand that if I do not designate a beneficiary, or if all designated and contingent beneficiaries die before me, my estate may be entitled to the proceeds payable under my Plan in the event of my death. This designation will remain in effect until revoked in accordance with the HSBC InvestDirect Client Terms and Conditions.

Beneficiary Information

Note: Percentage of Entitlement must total 100%

Primary Beneficiary 1

First Name	Last Name	Percentage of Entitlement
Relationship to Account Holder		Social Insurance Number
Phone Number	Email Address	
Address (P.O. Boxes, G.D. or C/O not accepted)		
City	Province	Postal Code

Primary Beneficiary 2

First Name	Last Name	Percentage of Entitlement
Relationship to Account Holder		Social Insurance Number
Phone Number	Email Address	
Address (P.O. Boxes, G.D. or C/O not accepted)		
City	Province	Postal Code

Primary Beneficiary 3

First Name	Last Name	Percentage of Entitlement
Relationship to Account Holder		Social Insurance Number
Phone Number	Email Address	
Address (P.O. Boxes, G.D. or C/O not accepted)		
City	Province	Postal Code

Contingent Beneficiary designation

(In the event that there are no surviving primary beneficiaries at the time of your death)

Contingent Beneficiary 1

First Name	Last Name	Percentage of Entitlement
Relationship to Account Holder		Social Insurance Number
Phone Number	Email Address	
Address (P.O. Boxes, G.D. or C/O not accepted)		
City	Province	Postal Code

Contingent Beneficiary 2

First Name	Last Name	Percentage of Entitlement
Relationship to Account Holder		Social Insurance Number
Phone Number	Email Address	
Address (P.O. Boxes, G.D. or C/O not accepted)		
City	Province	Postal Code

Contingent Beneficiary 3

First Name	Last Name	Percentage of Entitlement
Relationship to Account Holder		Social Insurance Number
Phone Number	Email Address	
Address (P.O. Boxes, G.D. or C/O not accepted)		
City	Province	Postal Code

I acknowledge that, before making the above designation, I should discuss with my legal advisor the validity and effect of making the designation.

Note: In the province of Quebec you can only designate a beneficiary by including a special clause in your will.

