

Beneficiary Designation Form

to make or change a beneficiary designation

ORIGINAL SIGNATURE REQUIRED

Standard Beneficiary Designation with Contingent Options								
Note to Annuitants Domiciled in Quebec: Beneficiary designations are not accepted on registered plans.								
RBC Direct Investing® Account #:		Type of plan: ☐RRS	P □RRIF	LIF	□PRIF			
Annuitant name:		□LIRA	A □LRIF	□RLIF	□RLSP			
This beneficiary designation forms part of the plan or retirement income fund (the "Plan"), a	• •				t savings			
Successor Annuitant / Beneficiary Des	signation							
			elationship to Annuitant					
surname	first name		pouse $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		w Partner			
address								
city, province, postal code			Social	Insurance (if available				
Please check box if electing for S Successor Annuitant Election (Plans Only)				

If my Plan is a retirement income fund, and if the person identified above is my spouse or common law partner who survives me, I elect to have my spouse or common law partner continue to receive all Plan payments after my death as my successor annuitant. If my successor annuitant survives me, I acknowledge that I cannot designate a beneficiary under the plan.

If I have not elected to have a successor annuitant, in accordance with the declaration of trust under the above identified retirement income fund, or if I am an annuitant of a retirement savings plan, I hereby revoke all previous beneficiary designations made in respect of the Plan, including any such designation made in my will, and I designate the person identified above as the Plan beneficiary entitled to receive all amounts payable under the Plan upon my death.

If the person identified above predeceases me, or dies at the same time as me, or in circumstances rendering it impossible to determine which of us died first, then I designate the person(s) identified on the second page as the beneficiary(s) of my Plan to receive their Percentage of Entitlement (as indicated on the second page) of the proceeds of the Plan on my death.

In certain provinces or territories, a beneficiary designation, or any revocation thereof, can only be made by will. In some cases, the rights of my spouse or partner as may be defined under applicable provincial law may override any such beneficiary designation. Also, a beneficiary designation will not automatically change as a result of a future relationship or relationship breakdown; it may be necessary to designate a new beneficiary for this purpose.

I am solely responsible for ensuring that this beneficiary designation is valid under the laws of Canada, its provinces or territories and that this designation is changed when appropriate. If I am domiciled in Canada when I die, I acknowledge that this beneficiary designation will be governed by the laws of my province or territory of domicile at the time of my death. If I am not domiciled in Canada at the time of my death, then the laws of the province or territory where I was domiciled at the time of execution of this form will apply. Otherwise, the laws of Ontario will apply.

I declare that any property passing to a beneficiary from the Plan, the value of such property, and any and all income or capital gain or other benefit arising from such property, shall remain the exclusive property of a beneficiary and shall be excluded from a beneficiary's net family property or community of property or the value of a beneficiary's assets for the purposes of division of property on a beneficiary's separation, divorce, annulment or death as contemplated by any statute dealing with matrimonial or family property in any jurisdiction to the extent allowed by law.

Contingent Beneficiary Designations

Note: Percentage of Entitlement must total 100%.

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CIARY	surname	first name	relationship to Annuitant
BENEFICIARY	address		Social Insurance Number (if available)
8	city, province, postal code		percentage of entitlement
8			
CIARY	surname	first name	relationship to Annuitant
BENEFICIARY	address		Social Insurance Number (if available)
8	city, province, postal code		percentage of entitlement
m			
SIARY	surname	first name	relationship to Annuitant
BENEFICIARY	address		Social Insurance Number (if available)
8	city, province, postal code		percentage of entitlement
4			
CIAR	surname	first name	relationship to Annuitant
BENEFICIARY	address		Social Insurance Number (if available)
8	city, province, postal code		percentage of entitlement
D			
IARY	surname	first name	relationship to Annuitant
BENEFICIARY	address		Social Insurance Number (if available)
BE	city, province, postal code		percentage of entitlement

If no Percentage of Entitlement is stated above, or the Percentages of Entitlement do not add up to 100%, I direct that the proceeds of my Plan be divided equally among the surviving beneficiaries or paid to the surviving beneficiary on my death, as the case may be. If any person identified as a contingent beneficiary predeceases me, I direct that their Percentage of Entitlement (as indicated above) be divided equally among the surviving beneficiaries or paid to the surviving beneficiary on my death, as the case may be. For greater certainty, the share of a deceased beneficiary will go in equal portions to the surviving beneficiary(ies). If none of the person(s) identified above survive me, I direct that the proceeds of my Plan be paid to my estate on my death.

I have expressly requested that this document be drawn up in the English language only./ J'ai expressément demandé que ce document soit rédigé en langue anglaise seulement.

date province or territory of execution

Annuitant's signature Accepted by RBC Direct Investing Inc.

Return the completed form to:

RBC Direct Investing Inc. Royal Bank Plaza 200 Bay Street, North Tower P.O. Box 75 Toronto, Ontario M5J 2Z5 Accepted by **RBC Direct Investing Inc.** as Agent for The Royal Trust Company

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