

# **HSBC Change or Remove a Beneficiary Package**

## **Deposit Accounts**

This kit contains:

- > Instructions
- > Fiduciary Deposit Agreement
- > Master Deposit Agreement
- > Fiduciary Account Change  
Beneficiary Form

# Change/Remove Beneficiary Instructions

Thank you for choosing to bank with HSBC Bank USA, N.A. We're dedicated to ensuring that your transition is a smooth one. The easy steps below will guide you through the process of switching accounts to us.

Print all pages of the Change/Remove Beneficiary Package

**Important:** The attached Fiduciary Account Change Beneficiary Form must be completed and notarized by a Notary Public at either an HSBC Wealth Center or through external notary service.

If you are removing a beneficiary and the account will not have any beneficiaries listed complete:

- The Fiduciary Account Change Beneficiary Form and have it notarized
- The Master Deposit Agreement- Consumer Form

If you are changing the beneficiary complete the following forms:

- The Fiduciary Account Change Beneficiary Form and have it notarized
- The Fiduciary Deposit Agreement- Consumer Form

All completed and notarized documents must be returned by mail to:

HSBC Bank USA, NA  
Attn: Account Opening  
PO Box 9  
Buffalo, NY 14240

For any questions, message using Personal Internet Banking or on the HSBC Mobile App<sup>1</sup>, or if you prefer you may call us at 1.800.975.HSBC (4722) or visit one of our Wealth Centers, and we will be happy to assist you. Thanks again for choosing HSBC.

<sup>1</sup> Data charges from your mobile service provider may apply. HSBC BANK USA, N.A. is not responsible for these charges. HSBC personal internet banking is required to access HSBC mobile banking.





**Fiduciary Account Beneficiary Change Form**  
**FOR TITLE CHANGE ONLY: FDA SIGNATURE (S) MUST BE NOTARIZED**

As owner(s) of Totten Trust account number \_\_\_\_\_ maintained at HSBC Bank USA, N.A. (the "Account"), I (we) hereby affirm and acknowledge our intent to modify the Account by removing \_\_\_\_\_ (name[s]) as beneficiary(ies) and adding \_\_\_\_\_ (name[s]) as beneficiary(ies) to the Account.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_, a notary public in and for said County and State, personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s), acted, executed the instrument.

WITNESS my hand and official seal. (Seal)

\_\_\_\_\_  
(Signature of Notary Public)

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_, a notary public in and for said County and State, personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s), acted, executed the instrument.

WITNESS my hand and official seal. (Seal)

\_\_\_\_\_  
(Signature of Notary Public)



**HSBC**

**FIDUCIARY DEPOSIT AGREEMENT - CONSUMER**

**Name/Account Title** \_\_\_\_\_

**Taxpayer Identification Number** \_\_\_\_\_

By signing or electronically accepting this Agreement, the person establishing the account of the account owner, as the case may be (herein after, "I") understand I am opening the Deposit Account(s), and I agree that HSBC will handle my account(s) associated with this Agreement according to the "Rules for Consumer Deposit Accounts" (the "Rules") and the "Terms and Charges Disclosure", **and I acknowledge receiving copies of them**. I confirm that this Agreement and the "Rules" and "Terms and Charges Disclosure" are a binding contract between HSBC and me. I further understand they may be amended from time to time.

**Additional Terms:**

By signing or electronically accepting this Agreement, I authorize HSBC to accept oral or electronic instructions from me to open or close deposit accounts with the same effect as if I had signed them. HSBC may refuse to accept such instructions at any time. I agree to follow HSBC's security precautions and to provide my signature upon request.

**For Single or Joint Accounts where the depositor is designating a beneficiary(ies):** An In Trust For (ITF) beneficiary designation creates a tentative or Totten trust. An ITF beneficiary designation on an account is also known as and sometimes referred to as a pay-on-death designation. The parties listed below as the account owners share equal interest and transaction ability on the account during their life/lives. If more than one person is named as an account owner, such account will be considered a joint account. Transaction instructions may be given by any joint account owner. Upon the death of the last surviving account owner, account ownership transfers in equal shares to the ITF beneficiary (ies) designated below and is not part of the last surviving account owner's estate. The ITF beneficiary(ies) below do not have any account ownership or transaction ability while any of the account owners are living. Upon the death of the last surviving account owners, the ITF beneficiary(ies) will have no transaction authority over the account other than to claim the funds available at the time of invoking their rights as the ITF beneficiary. The account will be immediately closed upon all ITF beneficiaries claiming the funds. If all ITF beneficiary(ies) pass away before the last account owner, the account will be handled based on the rules for the relevant state.

**Account Owners:**

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

**Authorized Signors:**

Print Name \_\_\_\_\_ **Signature**

Title \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ **Signature**

Title \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ **Signature**

Title \_\_\_\_\_ Date \_\_\_\_\_

**ITF Beneficiary(ies) Designation (Refer to designating a beneficiary above):**

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_



**HSBC**

**FIDUCIARY DEPOSIT AGREEMENT - CONSUMER**

**Name/Account Title** \_\_\_\_\_

**Taxpayer Identification Number** \_\_\_\_\_

By signing or electronically accepting this Agreement, the person establishing the account of the account owner, as the case may be (herein after, "I") understand I am opening the Deposit Account(s), and I agree that HSBC will handle my account(s) associated with this Agreement according to the "Rules for Consumer Deposit Accounts" (the "Rules") and the "Terms and Charges Disclosure", **and I acknowledge receiving copies of them**. I confirm that this Agreement and the "Rules" and "Terms and Charges Disclosure" are a binding contract between HSBC and me. I further understand they may be amended from time to time.

**Additional Terms:**

By signing or electronically accepting this Agreement, I authorize HSBC to accept oral or electronic instructions from me to open or close deposit accounts with the same effect as if I had signed them. HSBC may refuse to accept such instructions at any time. I agree to follow HSBC's security precautions and to provide my signature upon request.

**For Single or Joint Accounts where the depositor is designating a beneficiary(ies):** An In Trust For (ITF) beneficiary designation creates a tentative or Totten trust. An ITF beneficiary designation on an account is also known as and sometimes referred to as a pay-on-death designation. The parties listed below as the account owners share equal interest and transaction ability on the account during their life/lives. If more than one person is named as an account owner, such account will be considered a joint account. Transaction instructions may be given by any joint account owner. Upon the death of the last surviving account owner, account ownership transfers in equal shares to the ITF beneficiary (ies) designated below and is not part of the last surviving account owner's estate. The ITF beneficiary(ies) below do not have any account ownership or transaction ability while any of the account owners are living. Upon the death of the last surviving account owners, the ITF beneficiary(ies) will have no transaction authority over the account other than to claim the funds available at the time of invoking their rights as the ITF beneficiary. The account will be immediately closed upon all ITF beneficiaries claiming the funds. If all ITF beneficiary(ies) pass away before the last account owner, the account will be handled based on the rules for the relevant state.

**Account Owners:**

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

**Authorized Signors:**

Print Name \_\_\_\_\_ **Signature** \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ **Signature** \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ **Signature** \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

**ITF Beneficiary(ies) Designation (Refer to designating a beneficiary above):**

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

**TAX CERTIFICATION** (see IRS Form W-9 Instructions at [www.irs.gov](http://www.irs.gov))

**IMPORTANT: If you are not a U.S. person do not complete this Tax Certification. Complete IRS Form W-8 instead.**

Federal tax classification (select appropriate choice)

- Individual/sole proprietor single-member LLC  
 Trust  
 Other (see instructions): \_\_\_\_\_

If you are an exempt payee (see IRS Form W-9 Instructions at [www.irs.gov](http://www.irs.gov)), enter your exempt payee code (if any): \_\_\_\_\_

If you are exempt from Foreign Account Tax Compliance Act (FATCA) reporting (see IRS Form W-9 Instructions at [www.irs.gov](http://www.irs.gov)), enter your exemption from FATCA reporting code (if any): \_\_\_\_\_  
(Not applicable to individuals or required for accounts held in the U.S.)

I certify, under penalties of perjury, that:

1. The number shown above is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. Backup withholding status (select appropriate choice):
  - I am not subject to backup withholding because:
    - a. I am exempt from backup withholding, or
    - b. I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or
    - c. The IRS has notified me that I am no longer subject to backup withholding; and
  - I am subject to backup withholding because I have been notified by the IRS that I am currently subject to backup withholding due to failure to report all interest and dividends on my tax return; and
3. I am a U.S. citizen or other U.S. person (defined in the IRS Form W-9 Instructions at [www.irs.gov](http://www.irs.gov)); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

***The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.***

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Signature of U.S. Person

Title

Date

**INTERNAL USE ONLY**

Account Number: \_\_\_\_\_

Reference Number: \_\_\_\_\_



# MASTER DEPOSIT AGREEMENT FOR CONSUMER ACCOUNTS

Name/Account Title \_\_\_\_\_

Taxpayer Identification Number \_\_\_\_\_

By signing or electronically accepting this Agreement, I understand I am opening the Deposit Account(s), and I agree that HSBC will handle my account(s) associated with this Agreement according to the "Rules For Consumer Deposit Accounts" (the "Rules") and the "Terms and Charges Disclosure", and I acknowledge receiving copies of them. I confirm that this Agreement and the "Rules" and "Terms and Charges Disclosure" are a binding contract between HSBC and me. I further understand they may be amended from time to time.

The parties listed as the Account Owners share equal interest and transaction ability on the account. If more than one person is named as an account owner, such account will be considered as joint account. Transaction instructions may be given by any joint account owner. Also, unless stated otherwise, each intends to create a joint deposit payable to either (any) of them or the survivor.

**Additional Terms:**

By signing or electronically accepting this Agreement, I authorize HSBC to accept oral or electronic instructions from me to open or close deposit accounts with the same effect as if I had signed them. HSBC may refuse to accept such instructions at any time. I agree to follow HSBC's security precautions and to provide my signature upon request.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**TAX CERTIFICATION** (see IRS Form W-9 Instructions at [www.irs.gov](http://www.irs.gov))

**IMPORTANT: If you are not a U.S. person do not complete this Tax Certification. Complete IRS Form W-8 instead.**

If you are exempt from Foreign Account Tax Compliance Act (FATCA) reporting (see IRS Form W-9 Instructions), enter your exemption from

FATCA reporting code (if any): \_\_\_\_\_

(Not applicable to individuals or required for accounts held in the U.S.)

I certify, under penalties of perjury, that:

1. The number shown above is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. Backup withholding status (select appropriate choice):
  - I am not subject to backup withholding because:
    - a. I am exempt from backup withholding, or
    - b. I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or
    - c. The IRS has notified me that I am no longer subject to backup withholding; and
  - I am subject to backup withholding because I have been notified by the IRS that I am currently subject to backup withholding due to failure to report all interest and dividends on my tax return; and
3. I am a U.S. citizen or other U.S. person (defined in the IRS Form W-9 Instructions at [www.irs.gov](http://www.irs.gov)); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

\_\_\_\_\_  
Signature of U.S. Person

\_\_\_\_\_  
Date

**INTERNAL USE ONLY**

Account Number: \_\_\_\_\_

Reference Number: \_\_\_\_\_

HSBC MDA for Consumer Accounts (Rev. 07/25/2019)