

TAIPING INVESTMENT FUND

Taiping Greater China New Momentum Equity Fund

(FOR HSBC USE)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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To:
 (The “**Registrar**”)
 HSBC Institutional Trust Services (Asia) Limited
 17/F Tower 2 & 3, HSBC Centre,
 1 Sham Mong Road, Kowloon,
 Hong Kong
 Attention: Transfer Agency (Traditional Products)
 Facsimile: (852) 3409-2694

Copy to:
 Directors
 Taiping Assets Management (HK) Company Limited
 Facsimile: (852) 2881 0660

REDEMPTION REQUEST

Capitalised terms used but not defined in this Redemption Request of Units have the same meaning as in the Explanatory Memorandum (“**Memorandum**”) in respect of the offer of Units of the Taiping Greater China New Momentum Equity Fund (“**Sub-Fund**”), a sub-fund of Taiping Investment Fund (“**Fund**”).

The Unitholder(s) named below irrevocably request(s) redemption of Units of the Sub-Fund indicated below in accordance with the terms of the Memorandum.

<u>Name(s) of Unitholder(s):</u>	
<u>Address:</u>	
<u>Sub-Fund in respect of which Units are to be redeemed:</u> <i>(Please tick)</i>	<u>Taiping Greater China New Momentum Equity Fund</u> <input type="checkbox"/>
<u>Number of Units to be redeemed:</u> OR <u>Amount to be redeemed (inclusive of any applicable fees and charges):</u> OR Tick the box if you wish to redeem all Units of the Sub-Fund specified above:	_____ HK\$ _____ ALL _____ <input type="checkbox"/>

(NOTE: If no number or amount of Units of a Sub-Fund is specified for redemption as outlined above, this redemption request will be treated as a request to redeem all of the Unitholder's Units of the relevant Sub-Fund and if no Sub-Fund is specified above, then this request for redemption will be treated as a request to redeem all of the Unitholder's Units in the Fund.)

Minimum Holding applies to each Sub-Fund. Please refer to the Memorandum for details.

Payment Details:

I/We request the redemption proceeds to be paid direct to the following account unless contrary instructions are given at the time of redemption, as the case may be.

Name of Beneficiary Bank :	
Name of Beneficiary Bank Account*:	
Beneficiary Bank Account No.:	
Currency:	
Swift Code (if applicable):	
Beneficiary Bank Address:	
Correspondent Bank Name and Branch:	

(*The bank account name and number MUST correspond to an account in the name of the Unitholder.)

Please complete all information above to enable timely and accurate payment. In the case of incomplete information, we shall effect payment in our best endeavor. None of the Sub-Fund, the Manager, the Trustee, the Registrar or their agents or affiliates accept any responsibility for any loss or delay by incomplete / incorrect bank account details.

Redemption Request Deadline

Redemption requests must be received by the Trustee no later than 4.00 p.m. Hong Kong time on the relevant Dealing Day as at which the redemption is proposed to take effect (“**Dealing Deadline**”).

Requests received after such Dealing Deadline will be held over and dealt with on the next following Dealing Day unless the Manager in its discretion determines otherwise.

If you send this request by facsimile, the original executed request must also be received by the Trustee at the above address. Neither the Trustee, the Registrar, the Fund, the Manager nor their duly appointed agents will be responsible to any Unitholder for any loss resulting from the non-receipt of any request or for any loss caused in respect of any action taken as a consequence of such redemption requests received by facsimile and believed in

good faith to have originated from properly authorized persons.

Payment of Redemption Proceeds

Unless the Unitholder otherwise authorizes the use of redemption proceeds as set out below, redemption proceeds will be transferred to the bank account specified in the Unitholder's Application Form or as may have subsequently been notified to the Manager and the Trustee in writing. Such proceeds will not be transferred to any third party account.

EXECUTION PAGE

Executed as an agreement on _____ 20 .

A. INDIVIDUALS	
UNITHOLDER	SECOND JOINT UNITHOLDER (if any)
Signature:	Signature:
Name: (Please print)	Name: (Please print)
THIRD JOINT UNITHOLDER (if any)	FOURTH JOINT UNITHOLDER (if any)
Signature:	Signature:
Name: (Please print)	Name: (Please print)
B. ENTITES	
UNITHOLDER	SECOND JOINT UNITHOLDER (if any)
Name of entity: (Please print)	Name of entity: (Please print)
Signature:	Signature:
Name of Signatory: (Please print)	Name of Signatory: (Please print)
Position/Office of Signatory: (Please print)	Position/Office of Signatory: (Please print)