

FIXED ANNUITY NEEDS ANALYSIS

This form can be used for each Consumer who is considering the purchase of a fixed annuity.

Below are factors for the agent and Consumer to consider when determining if the recommendation to purchase, sell, or exchange an annuity is suitable for the Consumer.

If you elect not to provide the requested information, please complete Section B. If Section B is completed, please be aware that the Insurance Company may still contact you for information or elect not to issue the annuity contract.

Section A - This section allows you, with the assistance of your agent, to determine if the annuity product you've requested meets your financial needs and objectives.

1 PERSONAL INFORMATION

Owner/Applicant Name (Please print) _____

SSN/TIN _____ Date of Birth _____

Joint Owner/Applicant Name (Please print) _____

SSN/TIN _____ Date of Birth _____

Address _____

City _____ State _____ ZIP _____

2 EMPLOYMENT

- a. Is the Owner/Applicant currently employed?..... Yes No
If "Yes", what is the length of employment? _____
- b. Is the Joint Owner/Applicant (if any) currently employed?..... Yes No
If "Yes", what is the length of employment? _____

3 ACCOUNT/FINANCIAL PROFILE (For Joint Accounts, information may be combined.)

- a. Approximate Annual Gross Income:
- | | |
|--|--|
| <input type="checkbox"/> \$0 - \$29,999 | <input type="checkbox"/> \$100,000 - \$149,999 |
| <input type="checkbox"/> \$30,000 - \$49,999 | <input type="checkbox"/> \$150,000 - \$249,999 |
| <input type="checkbox"/> \$50,000 - \$74,999 | <input type="checkbox"/> \$250,000 - \$399,999 |
| <input type="checkbox"/> \$75,000 - \$99,999 | <input type="checkbox"/> \$400,000 and over |
- b. Source of Income: (Check all that apply.)
 Salary Investments Social Security Retirement Plans Other _____
- c. Estimated Net Worth: (Exclude primary residence, automobile(s), furnishings.)
- | | |
|--|--|
| <input type="checkbox"/> \$0 - \$74,999 | <input type="checkbox"/> \$250,000 - \$499,999 |
| <input type="checkbox"/> \$75,000 - \$149,999 | <input type="checkbox"/> \$500,000 - \$999,999 |
| <input type="checkbox"/> \$150,000 - \$249,999 | <input type="checkbox"/> \$1,000,000 and over |
- d. Financial Objectives: (Check all that apply.)
 Income Growth Tax Deferral Guarantee against loss of Principal
 Speculation Income for Life Estate Planning Guaranteed Death Benefit Other _____
- e. What annual income do you require? \$ _____
- f. Product Time Horizon: (How long you plan to keep this account open?)
 1-3 years 4-6 years 7-9 years 10-12 years 13 years or more
- g. Marginal Federal Income Tax Bracket: (Check one.)
 0% 10% 15% 25% 28% 33% 35% Other _____%
- h. How do you rate your investment knowledge?
 Limited Good Extensive Registered Representative
- i. What amount do you contemplate using to purchase an annuity? \$ _____

- j. Are you an experienced Investor?
 Yes No

Answer the following only if you answered "Yes":

1. What number of years have you been investing? _____
2. What is the average size of your transactions? \$ _____
3. What is the approximate percentage of your total assets in each of the following?: (Enter approximate percentage in each applicable category.)
 Stocks _____% Bonds _____% Mutual Funds _____% Options _____%
 Partnerships _____% Fixed Annuities _____% Variable Annuities _____% Other _____%

- k. What is your risk tolerance?
 Aggressive Moderate Conservative

4 **EXISTING ACCOUNTS**

- a. For this purchase, are you considering the discontinuation of premium payments; surrendering, forfeiting, or assigning to the insurer; or otherwise terminating an existing life insurance policy or annuity contract?..... Yes No
- b. Are you considering using funds from existing life insurance policies or annuity contracts to contribute to the new contract?..... Yes No
- c. If you answered "Yes" to either question 4(a) or 4(b), how long has the policy or contract been in force?
 1-3 years 4-6 years 7-9 years 10-12 years 13 years or more
- d. Is there a surrender charge associated with the existing contract?..... Yes No
 If "Yes", what is the surrender charge? _____%
- e. Do you have any outstanding loan(s) on an existing annuity contract?..... Yes No
- f. Are you currently taking either a Required Minimum Distribution (RMD) or a 72(t)/(q) distribution?..... Yes No

5 **OTHER FACTORS CONSIDERED**

6 **SIGNATURE/AUTHORIZATION**

By signing below, I acknowledge that the fixed annuity product I am applying for is a long term contract with substantial penalties for early withdrawal, I have reviewed the product specific Disclosure Statement with my agent, and I have determined that it meets my financial needs and objectives. My agent agrees to maintain and make available upon request to the insurer or insurance commissioner, records of the information collected and other information used as the basis for this insurance recommendation for at least 6 years after the insurer completes the recommended transaction.

Signature of Owner/Applicant _____ Date _____

Signature of Joint Owner/Applicant _____ Date _____

Signature of Agent _____ Date _____

Section B - To be completed in lieu of Section A.

- I elect not to provide the information in Section A.
- I have decided to enter into this fixed annuity purchase without a recommendation from my agent.

Signature of Owner/Applicant _____ Date _____

Signature of Joint Owner/Applicant _____ Date _____

Signature of Agent _____ Date _____