

Statement of Recommendation & Disclosure

Best Interest Questionnaire:

Please indicate one response from the selection below that best describes your risk tolerance for this asset:

- I am NOT comfortable with potential loss of my principal due to market downturns, however, I would be comfortable with the ability to achieve some growth.
- I am comfortable with the potential loss of my principal in an exchange for the opportunity to achieve higher growth and the potential for greater returns.

Of the statements below, please select the one that best describes your tolerance for risk and potential returns, specifically regarding this asset:

- I wish to preserve and protect my principal from market downturns.
- I am seeking a stable, consistent rate of return over a specified duration.
- I am seeking a higher rate of return, regardless of the risk of losing my principal.

Which of the following personal objectives are most important to you?

- Accumulation of Asset

If you selected "Accumulation of Asset," please mark one of the following responses indicated below:

- I am seeking returns based on a fixed interest rate and returns are not linked to an index.
- I am seeking returns linked to the performance of one or more indexes.
- Income – Access to lifetime income or guaranteed payment of income.

If you selected "Income," please indicate the anticipated horizon for accessing income (i.e. immediately, 1 year from now, etc.):

-
- Death Benefit – Leave money to beneficiaries

Client Goals that impacted the product decision:

- | | |
|---|---|
| <input type="checkbox"/> Lifetime Income Rider | <input type="checkbox"/> Inflation Protection |
| <input type="checkbox"/> Lifetime Income Rider for Spouse | <input type="checkbox"/> Supplemental Income |
| <input type="checkbox"/> College Savings | <input type="checkbox"/> SPIA |
| <input type="checkbox"/> Tax Deferral | <input type="checkbox"/> Long Term Care |
| <input type="checkbox"/> Accumulation | <input type="checkbox"/> Pass to Beneficiaries |
| <input type="checkbox"/> Preservation of Principal | <input type="checkbox"/> Enhanced Death Benefit |
| <input type="checkbox"/> Client's time horizon for accessing the income impacted the decision | |
| <input type="checkbox"/> Client's risk impacted this decision | |
| <input type="checkbox"/> Client's experience with other investments impacted this decision | |
| <input type="checkbox"/> Client's appetite to loss impacted this decision | |

Other Products Reviewed for Recommendation:

(Carrier/Product name/Surrender Schedule or Charge/Rider/Guarantees/Fees/Compensation/etc.)

Producer's Rationale (Please provide details for why this product was selected):

Life Insurance Waiver

I hereby acknowledge that my agent has presented an opportunity for me to purchase a life insurance policy. I have been made aware of the financial risks and benefits associated with purchasing life insurance should I experience a life insurance event in the future (please initial one):

_____ Accept

_____ Decline. For myself and on behalf of my family and estate, I hereby waive any claim or liability against the above-named agent or agency arising from my declining to purchase life insurance.

Long-term Care Insurance Waiver

I hereby acknowledge that my agent has presented an opportunity for me to purchase a long-term care insurance policy. I have been made aware of the financial risks and benefits associated with purchasing long-term care insurance should I experience a long-term care insurance event in the future (please initial one):

_____ Accept

_____ Decline. For myself and on behalf of my family and estate, I hereby waive any claim or liability against the above-named agent or agency arising from my declining to purchase long-term care insurance.

Client Acknowledgement and Approval of Transaction:

Name: _____ Date: _____

Signature: _____

Agent Acknowledgement:

At the time of the recommendation, I believe my advice to you to be in your "best interest." This means that my advice reflects the care, skill, prudence, and diligence under the circumstances then prevailing that a prudent person acting in a like capacity and familiar with such matters would use in the conduct of an enterprise of a like character and with like aims, based on your investment objectives, risk tolerance, financial circumstances, and needs, without regard to my financial or other interests:

Name: _____ Date: _____

Signature: _____