

Disclosure and Acknowledgment Form

This Disclosure and Acknowledgment Form ("Disclosure") is intended to provide you with important information to consider prior to purchasing an Individual Retirement Annuity or other tax-qualified annuity ("Annuity"). The Disclosure is intended to satisfy conditions of U.S. Department of Labor Prohibited Transaction Exemption 84-24 in the event that I, acting as an insurance agent, am deemed a fiduciary in connection with this transaction.

The Annuity being purchased is: _____

The insurance company issuing the Annuity is: _____

Agent Relationships & Limitations

- I am an independent agent meaning that I am not contractually limited to representing particular insurance companies. However, I can only recommend products permitted by my license and issued by insurance companies to which I am appointed. This limits my ability to recommend certain products to you.
- I offer various products with different features and limitations that you may wish to consider. I am selling this Annuity in the ordinary course of my business on terms at least as favorable as any arms-length transaction with an unrelated party.

Agent Compensation

- I will be paid commission for purchase of the Annuity as shown below. All commission or compensation for sale of the Annuity is paid by the insurance company or intermediary third parties involved in product distribution and not deducted from premium paid by you for the Annuity.

Percentage of the gross annual premium received upon purchase: _____%

Percentage of the gross annual premium received during the first year after purchase: _____%

Percentage of the gross annual premium received for ___ years after year of purchase: _____%

Percentage of account value received for the life of the policy after year of purchase: _____%

I am also eligible for a bonus up to _____% of gross annual premium based on sales performance.

- I may be offered and receive additional incentives usually based on broader sales performance rather than any particular transaction including but not limited to provision of or reimbursement for training, education, marketing, and advertising; travel and lodging for events and conferences; gifts, meals, and entertainment customary to the business; loans or other financial arrangements; supplemental commission; participation in profit sharing or bonus programs. These incentives may be provided by the insurance company or by an independent marketing organization, wholesaler, agency, or other third party involved in distribution of this product.
- The insurance company may pay additional amounts including override commissions to an independent marketing organization, wholesaler, agency, or other third party involved in distribution who assists in supporting and managing the relationship between me and the insurance company. Those entities may allocate a portion of such amounts or provide other benefits and services to me.

Annuity Product Information

- The Annuity includes fees and charges which are disclosed in detail in product materials provided to you at time of purchase. These may include but are not limited to surrender charges, fees for optional riders, index strategy formula factors such as caps and spreads, and market value adjustments.
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Acknowledgment of Disclosure

I have read and understand the above disclosures and hereby approve the purchase of the Annuity for my IRA or other tax-qualified plan. I also have read and understand the disclosures provided by the insurance company including but not limited to information on agent compensation and product charges. I understand this disclosure form should not be construed to indicate a fiduciary relationship exists. I further understand this Disclosure is not a contract and does not create enforceable obligations between me and the agent, the insurance company, or any third party.

Applicant Name (Printed):	Applicant Signature:
Date:	

Agent Certification

Agent Name (Printed):	Agent Signature:
Date:	