



Suitability Acknowledgement Form

Product Information

Please check this box if submitting multiple applications for the same household

ANNUITY TYPE
(check one)

Qualified
 Non-Qualified

DEFERRED/IMMEDIATE ANNUITY
(check one)

Fixed Indexed
 Traditional Fixed
 Multi-Year Guarantee
 FG Immediate-Income

Information about the Owners

Owner's Name: _____ Age: _____
(see instructions if Owner is not a natural person)

Joint Owner's Name: _____ Age: _____

1. Work Status: Owner: Retired Employed Unemployed Other _____
Jt. Owner: Retired Employed Unemployed Other _____

2. Residence:
Owner: Living at home Assisted Living Facility Nursing Home
Jt. Owner: Living at home Assisted Living Facility Nursing Home

3. Federal Tax Rate: 0% 10% 15% 28% 33% +

4. Do you currently or have you previously owned any of the products listed below and for how long?

<input type="checkbox"/> Stocks & Bonds	0-5 yrs.	> 5 yrs.	<input type="checkbox"/> Government Securities	0-5 yrs.	> 5 yrs.
<input type="checkbox"/> Mutual Funds	_____	_____	<input type="checkbox"/> Fixed Annuities	_____	_____
<input type="checkbox"/> Variable Insurance	_____	_____	<input type="checkbox"/> I have not owned any of the above products.		
<input type="checkbox"/> Certificates of Deposit	_____	_____			

5. What is your risk tolerance?

Conservative
Cautious—Does not like to take on any risk or minimal risk

Moderate
Comfortable exposing some assets to volatility

Aggressive*
Attempt to achieve maximum returns—takes on additional risk

***Fixed Annuities are generally NOT considered aggressive savings vehicles. They are not securities and do not constitute a direct investment in the stock market.**

6. What are the primary reasons for purchasing this annuity?
(please check 1-3 primary reasons)

Tax Deferral** Wealth Accumulation Immediate Income
 Potential for better rate Death Benefit Estate Planning
 Protection from Market Risk Qualify for Government Programs (e.g., Medicaid, VA) Other _____
 Retirement Income

****Annuities purchased in a tax qualified account offer no additional tax deferral benefit over other tax qualified products or accounts.**



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Financial Information *(client financial information prior to purchase of annuity)*

Please provide all the information below and perform calculations in boxes (c),(d),(e),(f),(h) and (j).

7. Source(s) of Income			
<input type="checkbox"/> Salary/Wages	<input type="checkbox"/> Interest Income	<input type="checkbox"/> Pension/IRA Payments	<input type="checkbox"/> Trust Income
<input type="checkbox"/> Social Security	<input type="checkbox"/> Dividends	<input type="checkbox"/> Other Annuities	<input type="checkbox"/> Other _____
8. Monthly Income/Expenses			
Approximate Monthly Household Income (net after taxes):	\$ _____ (a)	Approximate Monthly Household Expenses:	\$ _____ (b)
		Monthly Disposable Household Income:	\$ _____ (c) (a) – (b) = (c)
9. Non-Liquid Assets			
Value of Home	\$ _____	Mutual Funds/Brokerage Accounts not readily convertible to cash without penalty	\$ _____
Business Interests	\$ _____	Annuities/Insurance cash values subject to surrender penalties	\$ _____
Other Real Estate	\$ _____	Other _____	\$ _____
Qualified Plans (if under 59½)	\$ _____	Total Non-Liquid Assets:	\$ _____ (d)
10. Liquid Assets			
Cash	\$ _____	Mutual Funds/Brokerage Accounts readily convertible to cash without penalty	\$ _____
Short Term CDs	\$ _____	Annuities/Insurance cash values not subject to surrender penalties	\$ _____
Checking/Savings/Money Market	\$ _____	Other _____	\$ _____
Qualified Plans (if over 59½ and no surrender penalties)	\$ _____	Total Liquid Assets:	\$ _____ (e)

Gross Value of Assets (Total Non-Liquid Assets plus Total Liquid Assets) \$ _____ (f)
(d) + (e) = (f)

Total Liabilities, Debts, and Loans
Long term (e.g., mortgage) \$ _____ + Short Term (e.g., credit cards) \$ _____ = \$ _____ (g)

Total Net Worth \$ _____ (h)
(f) – (g) = (h)

What is the total amount of this annuity purchase? \$ _____
Amount from liquid assets? \$ _____ (i)
Amount from non-liquid assets? \$ _____

Remaining Liquid Assets (after purchasing this annuity) \$ _____ (j)*

* (j) = (e) – (i) if annuity is purchased with liquid assets
(j) = (e) if annuity is purchased with non-liquid assets



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Other Important Considerations

11. With the exception of any (i) RMDs (required minimum distributions), (ii) GMWB (guaranteed minimum withdrawal benefit) withdrawals, or (iii) surrender charge free withdrawals or annuitizations, do you anticipate taking distributions from this annuity and when? (Not applicable to single premium immediate annuities)

- 0-5 year from now
 6-7 years from now
 8-10 years from now
 11-14 years from now
 15 or more years from now
 Do not plan to take distributions other than RMDs, GMWB, and surrender charge free withdrawals

12. After purchase of this annuity, do you believe you have enough remaining liquid assets and other sources of income to cover any emergencies or contingencies such as sudden health care needs or increased living expenses?

- Yes No

13. Do you anticipate any adverse change in assets, living expenses, medical expenses, and/or income during the surrender period of this contract?

- Yes No

(if yes, please explain): _____

14. Is the purchase of this annuity in any way connected to or based on information provided during the establishment of a trust sold to you by (i) your Fidelity & Guaranty Life (FGL) agent or affiliate of your FGL agent or (ii) an attorney provided to you through your FGL agent or affiliate of your FGL agent?

- Yes No

15. What is the source of funds for this annuity purchase? (check all that apply)

- Cash or Cash Equivalent
 Life Insurance Cash Value
 Reverse Mortgage/Home Equity Loan
 Another Fixed Annuity
 Mutual Fund Redemption
 Other (please specify): _____
 Variable Annuity
 Inheritance

16. Do you have a reverse mortgage? Yes No

17. Will you have to pay any surrender charge or penalty to withdraw funds from your current financial product (i.e., the source of funds for this annuity purchase)? Yes No

If yes, provide the name of the company and product, account value prior to surrender, dollar amount of surrender charge or penalty, and percentage of surrender charge or penalty. **Do not reduce the amount or percentage by any bonus earned on the proposed annuity and do not reduce the penalty by offsets such as positive MVAs (market value adjustments).** If applicable provide MVA amount separately and indicate positive or negative.

Company/Product	Account Value Prior to Surrender Charge or MVA	Surrender Charge Amt (\$)	Surrender Charge Amt (%)	MVA Amt (\$ (+/-))

18. If source of funds is an annuity or life insurance policy, indicate whether you replaced or exchanged any life or annuity contracts within the past 36 months (past 60 months if you reside in California or Minnesota):

- Yes No Source of funds is not an annuity or life insurance policy

If yes, describe details of past replacements (e.g. how long ago, whether they involved the same agent, whether they involved the same funds): _____



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Rationale (to be completed in **all** cases whether or not a replacement)

19. Basis for recommendation to purchase this annuity explaining how this purchase – taking into account surrender costs or potential disadvantages of any exchange or replacement – will result in a positive financial benefit for the applicant over the life of the annuity:

Acknowledgements

- I understand an annuity is a long term contract that I should not plan to fully surrender before completion of the surrender charge period.
- I understand that my principal may be subject to a surrender charge if I surrender or partially surrender my contract before completion of the surrender charge period.
- **I understand that this annuity charges a surrender charge schedule beginning at _____% and declines over _____ years.**
- I understand surrender charges may apply to withdrawals, withdrawals may be taxable and when made before age 59½, may result in tax penalties.
- I understand annuities that offer bonus features may have higher fees and charges, lower credited interest, and longer surrender charge periods than annuities that do not provide a bonus feature.
- (if replacement) I understand the benefits and costs of this replacement, including but not limited to surrender charges, possible loss of benefits, tax consequences, product features and enhancements, fees, and expenses. My Agent has provided a comparison of the benefits and restrictions of both contracts.
- I understand that I should contact my tax professional or attorney for any tax or legal advice.

DO NOT SIGN THIS FORM IF ANY ITEM IS LEFT BLANK. PLEASE CAREFULLY REVIEW THE FORM AND SIGN ATTESTING THAT THE INFORMATION IS TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE.

Owner/Applicant's signature Date

Joint Owner/Applicant's signature Date

Agent's Statement

I believe the purchase of this annuity contract is suitable after carefully reviewing the suitability information provided to me by the Owner. If applicable, I have discussed the advantages and disadvantages of any replacement or exchange of another annuity contract or life policy. I have reasonably informed the owner(s) of all important features of the annuity and proposed transaction.

To the best of my knowledge, the questions on this form have been answered truthfully and I have complied with Fidelity & Guaranty Life suitability requirements consistent with my contractual obligations.

Agent signature Date

Agent's Printed Name and Producer Number