

IF ANY OF THIS FORM IS LEFT BLANK, THE TRANSACTION WILL NOT BE PROCESSED AND PAPERWORK WILL BE RETURNED TO YOU FOR COMPLETION

ONLY COMPLETE IF FULL OR PARTIAL EXCHANGE/REPLACEMENT HAS BEEN CHECKED IN SECTION 3 ON PREVIOUS PAGE

SECTION 3A - ANNUITY EXCHANGE AND REPLACEMENT (TO BE COMPLETED IF FULL OR PARTIAL EXCHANGE/REPLACEMENT HAS BEEN CHECKED)

	POLICY BEING SURRENDERED	PROPOSED POLICY
7) MARKET VALUE (PLUS APPLICABLE BONUS):	\$ _____	\$ _____
8) EXISTING POLICY SURRENDER CHARGES:	\$ _____ %	
9) CASH SURRENDER VALUE (MARKET VALUE LESS SURRENDER CHARGES):	\$ _____	
10) SURRENDER PERIOD: (PROVIDE ORIGINAL SURRENDER SCHEDULE FOR POLICY BEING EXITED; NOT REMAINING SCHEDULE ON POLICY BEING EXITED)	_____ YRS	_____ YRS
11) TOTAL ANNUAL CHARGES (M&E, ADMIN., AND ADD-ON FEATURES):	_____ %	_____ %

CHECK ALL DEATH BENEFIT OPTIONS THAT APPLY:	POLICY BEING SURRENDERED	PROPOSED POLICY
12) AMOUNT OF GUARANTEED DEATH BENEFIT:	\$ _____	
13) PREMIUM GUARANTEE DEATH BENEFIT (E.G. STANDARD)	<input type="checkbox"/>	
14) STEP-UP TO ACCOUNT VALUE DEATH BENEFIT (E.G. MAV)	<input type="checkbox"/>	
15) GUARANTEE STEP-UP DEATH BENEFIT (E.G. 4%, 5%, 6%)	<input type="checkbox"/>	
16) EARNINGS ENHANCEMENT DEATH BENEFIT (EEB)	<input type="checkbox"/>	
17) NO GUARANTEED DEATH BENEFIT (BENEFICIARIES RECEIVE CONTRACT VALUE WHICH MAY BE LOWER THAN AMOUNT INVESTED)	<input type="checkbox"/>	

18) IF THE PROPOSED EXCHANGE/REPLACEMENT WILL RESULT IN A REDUCTION OF THE GUARANTEED DEATH BENEFIT, PLEASE EXPLAIN WHY THIS IS SUITABLE:

LIST THE GUARANTEED AMOUNTS OF ANY EXISTING LIVING BENEFIT. CHECK ALL LIVING BENEFITS ELECTED IN THE PROPOSED POLICY.	POLICY BEING SURRENDERED	PROPOSED POLICY
19) GUARANTEED MINIMUM INCOME BENEFIT BASE (GMI)	\$ _____	
20) GUARANTEED MINIMUM WITHDRAWAL BENEFIT BASE (GMWB)	\$ _____	<input type="checkbox"/>
21) ANNUAL INCOME WITHDRAWAL RATE ALLOWED (GMI/ OR GMWB; USE PERCENTAGE ALLOWED FOR TIME PERIOD WHEN CLIENT ANTICIPATES STARTING WITHDRAWAL)	_____ %	_____ %
22) PRINCIPAL GUARANTEE BASE (GMA)	\$ _____	
23) NO INCOME GUARANTEE	<input type="checkbox"/>	<input type="checkbox"/>
24) OTHER:	\$ _____	

25) IF THE PROPOSED EXCHANGE/REPLACEMENT WILL RESULT IN A REDUCTION OF THE LIVING BENEFIT, PLEASE EXPLAIN WHY THIS IS SUITABLE.

26) IS THE EXISTING CONTRACT ELIGIBLE FOR ENHANCED RIDERS? Yes No

27) REASON FOR REPLACEMENT TRANSACTION: (CHECK ALL THAT APPLY)

LOWER COSTS REDUCING MARKET RISK DEFERRAL OF ANNUITIZATION

ADDING/ REMOVING/REPLACING A LIVING/DEATH BENEFIT (PLEASE EXPLAIN BELOW) OTHER(PLEASE EXPLAIN BELOW)

28) IF ADDING/ REMOVING/ REPLACING A BENEFIT RIDER (LIVING OR DEATH BENEFIT) OR OTHER IS MARKED ABOVE (QUESTION 21), PLEASE EXPLAIN WHY THE EXISTING CONTRACT CAN NO LONGER MEET THE CLIENT'S NEEDS/OBJECTIVES:

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SECTION 4 - PLEASE COMPLETE THE FOLLOWING QUESTIONS REGARDING THE ANNUITY BEING PURCHASED

NAME OF NEW ANNUITY BEING PURCHASED:	AMOUNT OF PURCHASE:
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1) IS THIS TRANSACTION? AN INITIAL PURCHASE OF AN INDEXED ANNUITY A SUBSEQUENT OR ADD-ON TO AN EXISTING ANNUITY

2) IF THE CLIENT PURCHASING THIS ANNUITY IS EITHER 65 OR OLDER OR YOUNGER THAN 46, PLEASE EXPLAIN WHY THIS ANNUITY, INCLUDING ITS RIDERS AND BENEFITS, IS SUITABLE.

3) THE CLIENT ANTICIPATES USING THIS ANNUITY CONTRACT FOR? (PLEASE CHECK ALL THAT APPLY)

- CURRENT INCOME FUTURE INCOME ESTATE PLANNING GROWTH OF PRINCIPAL
 TAX DEFERRAL (NQ ONLY) PRINCIPAL PROTECTION OTHER: _____

4) IF THE CLIENT INTENDS TO USE THIS ANNUITY FOR INCOME, WHEN DOES THE CLIENT ANTICIPATE STARTING DISTRIBUTIONS?

- WITHIN THE 1ST YEAR BETWEEN 1 AND 5 YEARS BETWEEN 6 AND 10 YEARS MORE THAN 10 YEARS INCOME IS NOT INTENT

5) IF THE OBJECTIVE IS TO OBTAIN A DEATH BENEFIT FOR BENEFICIARIES, HAS LIFE INSURANCE BEEN CONSIDERED AS AN ALTERNATIVE TO THIS ANNUITY? YES NO N/A (DEATH BENEFIT IS NOT PRIMARY OBJECTIVE)

IF YES, PLEASE EXPLAIN WHY LIFE INSURANCE WAS NOT SELECTED:

6) WHAT PERCENTAGE OF THE CLIENT'S TOTAL LIQUID NET WORTH (SEE QUESTION 3 IN SECTION 1) IS BEING USED FOR THIS PURCHASE?

- 0-25% 26%-50% 51%-60% 61%-75% 76% OR MORE

7) WHAT PERCENTAGE OF THE CLIENT'S LIQUID NET WORTH WILL BE IN ANNUITIES AFTER THIS PURCHASE? (THIS % INCLUDES ANY PENDING OR IN TRANSIT BUSINESS) (SEE QUESTION 3 IN SECTION 1)

- 0-25% 26%-50% 51%-60% 61%-75% 76% OR MORE

8) IF THE CLIENT HAS MORE THAN 50% OF THEIR LNW INVESTED IN ANNUITIES (SEE QUESTION 7), PLEASE EXPLAIN WHY THIS IS SUITABLE.

9) PLEASE INDICATE THE TOTAL NUMBER OF ANNUITY EXCHANGE/REPLACEMENTS THE CLIENT HAS TRANSACTED WITHIN THE PAST 36 MONTHS. 0 REPLACEMENTS 1 REPLACEMENTS 2 REPLACEMENTS 3 REPLACEMENTS 4 OR MORE REPLACEMENTS

10) IF THE CLIENT ANSWERED YES TO 1 OR MORE REPLACEMENTS IN QUESTION 9, IDENTIFY: (PRODUCT NAMES)

CONTRACT SURRENDERED		CONTRACT PURCHASED		WERE YOU THE FINANCIAL PROFESSIONAL ON THE SURRENDERED CONTRACT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
CONTRACT SURRENDERED		CONTRACT PURCHASED		WERE YOU THE FINANCIAL PROFESSIONAL ON THE SURRENDERED CONTRACT?	<input type="checkbox"/> YES <input type="checkbox"/> NO

11) IF THERE IS A RIDER ASSOCIATED WITH THIS PRODUCT (ELECTED OR INCLUDED IN THE PRODUCT) PLEASE PROVIDE THE FOLLOWING:

RIDER NAME _____ COST = _____ %

SECTION 5 - SURRENDER CHARGES - FIXED ANNUITIES GENERALLY HAVE SURRENDER CHARGES FOR A SPECIFIED PERIOD OF TIME.

THE SURRENDER CHARGE MEANS THAT YOU MAY NOT GET ALL YOUR MONEY BACK IF YOU SURRENDER YOUR CONTRACT. IN THE CASE OF A FULL OR PARTIAL SURRENDER (DEFINED AS WITHDRAWALS IN EXCESS OF THE ALLOWABLE AMOUNT SPECIFIED BY THE ISSUING INSURANCE COMPANY), YOU WILL INCUR THE FOLLOWING PENALTIES DURING THE SURRENDER CHARGE PERIOD, AS SET FORTH IN THE ANNUITY CONTRACT OR DISCLOSURE DOCUMENT, AND SUMMARIZED BELOW:

YE	1	2	3	4	5	6	7	8	9	10	THEREAFTER
PERCENTAGE	%	%	%	%	%	%	%	%	%	%	CHECK CONTRACT

1) DOES THE CLIENT ANTICIPATE NEEDING FUNDS FROM THIS CONTRACT ABOVE AND BEYOND THE ALLOWED WITHDRAWAL AMOUNT PRIOR TO THE SURRENDER PERIOD ENDING? YES NO

2) IF YES TO QUESTION 1 LISTED ABOVE, PLEASE EXPLAIN:

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CLIENT ACKNOWLEDGEMENT

SURRENDER

- I/WE UNDERSTAND THAT IF I/WE CHANGE MY/OUR MIND REGARDING THIS PURCHASE I/WE MAY CANCEL THE CONTRACT WITHIN A PREDETERMINED PERIOD OF TIME AS PROVIDED FOR BY THE "FREE LOOK" PROVISION SPECIFIED BY THE CARRIER, WHICH ALLOWS ME/US TO SURRENDER THE CONTRACT FOR ANY REASON WITHOUT INCURRING ANY CHARGES (ACCOUNT VALUE MAY FLUCTUATE IF PROCEEDS ARE INVESTED DURING FREE LOOK PERIOD).
- I/WE UNDERSTAND THAT SHOULD I/WE SURRENDER MY CONTRACT, ANY INTERESTED INCURRED MAY BE FORFEITED AND I/WE WILL ONLY BE ABLE TO REDEEM OR TRANSFER THE SURRENDER CONTRACT VALUE.
- I/WE UNDERSTAND THAT IF THIS PRODUCT HAS A SURRENDER CHARGE, I/WE WILL PAY THAT CHARGE DURING THE SURRENDER PERIOD ON ANY WITHDRAWALS IN EXCESS OF PERMITTED AMOUNTS.

WITHDRAWALS & TAXATION

- I/WE UNDERSTAND THAT, UNDER CURRENT TAX LAWS, WITHDRAWALS FROM MY/OUR ANNUITY MADE PRIOR TO AGE 59 ½ MAY BE SUBJECT TO ORDINARY INCOME TAXES AND A 10% IRS TAX PENALTY.
- I/WE UNDERSTAND NON-ANNUITIZED WITHDRAWALS FROM ANNUITIES PURCHASED AFTER AUGUST 1982 ARE TAXED AS EARNINGS FIRST, PRINCIPAL LAST (LAST IN FIRST OUT – LIFO). ADDITIONALLY, THE EARNINGS COMPONENT OF ANY ANNUITY WITHDRAWALS IS TAXED AS ORDINARY INCOME.
- I/WE UNDERSTAND THAT AVANTAX INVESTMENT SERVICES® DOES NOT PROVIDE TAX ADVICE AND I/WE SHOULD CONSULT MY/OUR TAX ADVISOR REGARDING ANY TAX-RELATED MATTERS.

GENERAL

- I/WE HAVE RECEIVED INFORMATION FOR THE PRODUCT BEING PURCHASED AND HAVE HAD AMPLE OPPORTUNITY TO REVIEW THE INFORMATION IN THE INSURERS CONTRACT AND/OR INSURERS CLIENT GUIDE.
- I/WE HAVE DETERMINED THAT MY INVESTMENT PORTFOLIO SHOULD INCLUDE THIS PRODUCT. I/WE HAVE DETERMINED THAT THIS INVESTMENT IS CONSISTENT WITH MY RISK TOLERANCE AND OVERALL INVESTMENT STRATEGY.
- I/WE HAVE BEEN INFORMED THAT ANY GUARANTEES ASSOCIATED WITH THIS PRODUCT ARE BACKED BY THE ONGOING CLAIMS PAYING ABILITY OF THE ISSUER.
- I/WE HAVE READ THE CARRIERS ANNUITY DISCLOSURE STATEMENT AND UNDERSTAND HOW THE INTEREST IS CREDITED TO ACCUMULATION VALUE, SPECIFICALLY, I/WE UNDERSTAND THE PARTICIPATION RATES, CAPS AND OR SPREADS AND I/WE UNDERSTAND THAT THE RATES MAY CHANGE DURING THE CONTRACT PERIOD.
- I/WE UNDERSTAND A FIXED ANNUITY IS A CONTRACT THAT PAYS A FIXED, STATED RATE OF RETURN ON INVESTED FUNDS. THE INTEREST RATE GUARANTEED FOR A CERTAIN PERIOD OF TIME, SUCH AS A YEAR, AND THEN THE RATE MAY CHANGE, BASED ON CURRENT MARKET CONDITIONS. MOST FIXED CONTRACTS INCLUDE A MINIMUM GUARANTEE RATE SO THE ANNUITY WILL ALWAYS EARN A CERTAIN MINIMUM AMOUNT NO MATTER HOW LOW INTEREST RATES FALL. ANY GUARANTEES ARE DEPENDENT ON THE FINANCIAL STRENGTH OF THE ISSUING INSURANCE COMPANY.
- I/WE HAVE BEEN INFORMED OF THE FEATURES OF THIS PRODUCT INCLUDING THE DEATH BENEFITS AND UNDERSTAND HOW THEY WORK, INCLUDING RESTRICTIONS, EXCLUSIONS AND LIMITATIONS.
- I/WE UNDERSTAND THAT IF I/WE ELECT TO PURCHASE A RIDER, THE EXPENSES WILL BE CHARGED AS LONG AS I/WE HOLD THE CONTRACT AND MAY INCREASE AFTER ISSUE. THE CARRIERS DISCLOSURE STATEMENT CONTAINS DETAILED INFORMATION ABOUT RIDERS.
- IF REQUESTING A 1035 EXCHANGE, I/WE HAVE BEEN SHOWN A COMPARISON IN SECTION 3A OF THIS DISCLOSURE DISPLAYING THE DIFFERENCE OF THE FEES AND EXPENSES, DEATH BENEFITS AND LIVING BENEFITS AND SURRENDER PERIODS BETWEEN THE PRODUCT BEING SURRENDERED AND THE PRODUCT BEING PURCHASED. I/WE HAVE DETERMINED THAT THE EXCHANGE(S) WILL RESULT IN MY/OUR BENEFIT AND MEET MY/OUR INVESTMENT GOALS.
- I/WE UNDERSTAND INTEREST IN THIS PRODUCT GROWS TAX-DEFERRED. IF THIS PRODUCT IS PLACED IN A RETIREMENT ACCOUNT, I/WE DO NOT GAIN ANY ADDITIONAL TAX-DEFERRED ADVANTAGES.
- I/WE HAVE BEEN GIVEN THE OPPORTUNITY TO ASK QUESTIONS AND RECEIVE ANSWERS CONCERNING THE TERMS AND CONDITIONS OF THIS INVESTMENT AND HAVE RECEIVED ANY ADDITIONAL INFORMATION I/WE DEEM NECESSARY TO EVALUATE THIS PRODUCT.
- I/WE UNDERSTAND THAT MY AGENT AND AVANTAX INSURANCE AGENCY WILL BE COMPENSATED FOR THE SALE OF THIS PRODUCT.
- I/WE UNDERSTAND THAT IF I/WE HAVE ANY QUESTIONS ABOUT THE INFORMATION CONTAINED IN THIS DOCUMENT, AND I/WE WOULD LIKE TO SPEAK WITH SOMEONE AT THE AVANTAX HOME OFFICE, I/WE CAN CONTACT THE SALES SUPERVISION DEPARTMENT AT (866) 218-8206, OPTION 8, OPTION 1. MY/OUR AVANTAX AGENT WILL BE NOTIFIED AND GIVEN THE OPPORTUNITY TO PARTICIPATE IN THE CONVERSATION.

AVANTAX CLIENT PRE-DISPUTE ARBITRATION AGREEMENT

THIS AGREEMENT CONTAINS A PRE-DISPUTE ARBITRATION CLAUSE. BY SIGNING AN ARBITRATION AGREEMENT THE PARTIES AGREE AS FOLLOWS:

- ALL PARTIES TO THIS AGREEMENT ARE GIVING UP THE RIGHT TO SUE EACH OTHER IN COURT, INCLUDING THE RIGHT TO A TRIAL BY JURY, EXCEPT AS PROVIDED BY THE RULES OF THE ARBITRATION FORUM IN WHICH A CLAIM IS FILED.
- ARBITRATION AWARDS ARE GENERALLY FINAL AND BINDING; A PARTY'S ABILITY TO HAVE A COURT REVERSE OR MODIFY ARBITRATION AWARD IS VERY LIMITED.
- THE ABILITY OF THE PARTIES TO OBTAIN DOCUMENTS, WITNESS STATEMENTS AND OTHER DISCOVERY IS GENERALLY MORE LIMITED IN ARBITRATION THAN IN COURT PROCEEDINGS.
- THE ARBITRATORS DO NOT HAVE TO EXPLAIN THE REASON(S) FOR THEIR AWARD UNLESS, IN AN ELIGIBLE CASE, A JOINT REQUEST FOR AN EXPLAINED DECISION HAS BEEN SUBMITTED BY ALL PARTIES TO THE PANEL AT LEAST 20 DAYS PRIOR TO THE FIRST SCHEDULED HEARING DATE.
- THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.
- THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.
- THE RULES OF SOME ARBITRATION FORUMS MAY IMPOSE TIME LIMITS FOR BRINGING A CLAIM IN ARBITRATION. IN SOME CASES, A CLAIM THAT IS INELIGIBLE FOR ARBITRATION MAY BE BROUGHT IN COURT.

THE RULES OF THE ARBITRATION FORUM IN WHICH THE CLAIM IS FILED, AND ANY AMENDMENTS THERETO, SHALL BE INCORPORATED INTO THIS AGREEMENT.

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AVANTAX CLIENT PRE-DISPUTE ARBITRATION AGREEMENT - CONTINUED

- (viii.) THE RULES OF SOME ARBITRATION FORUMS MAY IMPOSE TIME LIMITS FOR BRINGING A CLAIM IN ARBITRATION. IN SOME CASES, A CLAIM THAT IS INELIGIBLE FOR ARBITRATION MAY BE BROUGHT IN COURT.
- (ix.) THE RULES OF THE ARBITRATION FORUM IN WHICH THE CLAIM IS FILED, AND ANY AMENDMENTS THERETO, SHALL BE INCORPORATED INTO THIS AGREEMENT.

NO PERSON SHALL BRING A PUTATIVE OR CERTIFIED CLASS ACTION TO ARBITRATION, NOR SEEK TO ENFORCE ANY PRE-DISPUTE ARBITRATION AGREEMENT AGAINST ANY PERSON WHO HAS INITIATED IN COURT A PUTATIVE CLASS ACTION; OR WHO IS A MEMBER OF A PUTATIVE CLASS WHO HAS NOT OPTED OUT OF THE CLASS WITH RESPECT TO ANY CLAIMS ENCOMPASSED BY THE PUTATIVE CLASS ACTION UNTIL:

- (i) THE CLASS CERTIFICATION IS DENIED; OR
- (ii) THE CLASS IS DECERTIFIED; OR
- (iii) THE CLIENT IS EXCLUDED FROM THE CLASS BY THE COURT.

SUCH FORBEARANCE TO ENFORCE AN AGREEMENT TO ARBITRATE SHALL NOT CONSTITUTE A WAIVER OF ANY RIGHTS UNDER THIS AGREEMENT EXCEPT TO THE EXTENT STATED HEREIN.

YOU AGREE THAT ALL CLAIMS, CONTROVERSIES AND OTHER DISPUTES BETWEEN YOU AND AVANTAX INVESTMENT SERVICES AND ITS AFFILIATED ENTITIES, INCLUDING AVANTAX INSURANCE AGENCY, LLC (COLLECTIVELY REFERRED TO AS "AVANTAX") AND ANY OF THEIR DIRECTORS, OFFICERS, EMPLOYEES, REGISTERED REPRESENTATIVES OR AGENTS ARISING OUT OF OR RELATING TO THIS AGREEMENT OR ANY ORDERS OR TRANSACTIONS THEREIN OR THE CONTINUATION, PERFORMANCE OR BREACH ANY AGREEMENT BETWEEN YOU AND AVANTAX, WHETHER ENTERED INTO BEFORE, ON, OR AFTER THE DATE THIS ACCOUNT IS OPENED, SHALL BE DETERMINED BY ARBITRATION CONDUCTED BY, AND SUBJECT TO THE ARBITRATION RULES THEN IN EFFECT OF, FINRA. IF FINRA DECLINES JURISDICTION, THEN YOU AGREE TO HAVE THE ARBITRATION CONDUCTED BY AND SUBJECT TO THE RULES THEN IN EFFECT OF THE AMERICAN ARBITRATION ASSOCIATION. THIS AGREEMENT TO ARBITRATE SHALL BE SPECIFICALLY ENFORCEABLE UNDER PREVAILING LAW AND PROCEDURES. ALL FEDERAL AND STATE STATUTES OF LIMITATION, DOCTRINES OF REPOSE AND TIME BARS SHALL APPLY TO ANY ARBITRATION PROCEEDING, AND NOTHING IN THIS AGREEMENT SHALL BE DEEMED TO LIMIT OR WAIVE THE APPLICATION OF ANY SUCH STATUTE OR DOCTRINE. THE AWARD RENDERED BY THE ARBITRATORS SHALL BE FINAL, AND JUDGMENT MAY BE ENTERED UPON IT IN ANY COURT HAVING JURISDICTION OVER THE PARTIES. COUNSEL CAN ADVISE YOU ON HOW THIS PROVISION MAY AFFECT YOU.

I/WE AGREE THAT THIS AGREEMENT SHALL BE GOVERNED BY THE LAWS OF THE STATE OF TEXAS WITHOUT REGARD TO ITS CONFLICT OF THE LAW'S PROVISIONS AND SHALL INURE TO THE BENEFIT OF MY/OUR AND AVANTAX INVESTMENT SECURITIES, INC.'S RESPECTIVE SUCCESSORS AND ASSIGNS, AND SHALL BE BINDING ON ME/US AND MY/OUR REPRESENTATIVES, ATTORNEYS-IN-FACT, HEIRS, EXECUTORS, ADMINISTRATORS, AND ASSIGNS.

TO HELP THE GOVERNMENT FIGHT THE FUNDING OF TERRORISM AND MONEY-LAUNDERING ACTIVITIES, U.S. FEDERAL LAW REQUIRES FINANCIAL INSTITUTIONS TO OBTAIN, VERIFY, AND RECORD INFORMATION THAT IDENTIFIES EACH PERSON (INDIVIDUALS AND BUSINESSES) WHO OPENS AN ACCOUNT. WHAT THIS MEANS FOR YOU: WHEN YOU OPEN AN ACCOUNT, WE WILL ASK FOR YOUR NAME, ADDRESS, DATE OF BIRTH, AND OTHER INFORMATION THAT WILL ALLOW US TO IDENTIFY YOU. WE MAY ALSO ASK FOR YOUR DRIVER'S LICENSE OR OTHER IDENTIFYING DOCUMENTS.

THE AVANTAX AFFILIATED COMPANIES EXCLUSIVELY PROVIDE FINANCIAL PRODUCTS AND SERVICES, AND DO NOT PROVIDE TAX OR ACCOUNTING SERVICES. FINANCIAL PROFESSIONALS MAY PROVIDE TAX, ACCOUNTING OR OTHER SERVICES THROUGH THEIR INDEPENDENT OUTSIDE BUSINESSES, BUT THESE SERVICES ARE SEPARATE AND APART FROM, AND ARE NOT SUPERVISED BY, AVANTAX. ALL PAYMENTS FOR THE PURCHASE OF ANNUITIES SHOULD BE MADE BY CHECK OR ACH TRANSFER PAYABLE TO THE INSURANCE COMPANY, NOT TO AN AVANTAX FINANCIAL PROFESSIONAL OR HIS/HER INDEPENDENT COMPANY. WHEN YOU PURCHASE AN ANNUITY THROUGH AVANTAX YOU WILL RECEIVE PERIODIC ACCOUNT STATEMENTS REFERENCING AVANTAX DIRECTLY FROM THE INSURANCE COMPANY. IF YOU BELIEVE YOU MADE AN INVESTMENT THROUGH AVANTAX BUT DID NOT RECEIVE A CONFIRMATION OR STATEMENTS, PLEASE CALL US TOLL-FREE AT (866) 218-8206, OPTION 2.

I/WE ACKNOWLEDGE REVIEW AND APPROVAL OF ALL OF THE INFORMATION CONTAINED ON ALL PAGES OF THIS INDEXED ANNUITY DISCLOSURE FORM, INCLUDING MY FINANCIAL INFORMATION INCLUDED ON PAGE 2.

THIS AGREEMENT CONTAINS A PRE-DISPUTE ARBITRATION CLAUSE, WHICH BEGINS ON THE PREVIOUS PAGE.

I/WE ACKNOWLEDGE RECEIVING A COPY OF THIS AGREEMENT, INCLUDING THE AVANTAX PRE-DISPUTE ARBITRATION CLAUSE.

CLIENT SIGNATURE:	DATE:
CLIENT SIGNATURE (JOINT OWNER):	DATE:

IF ANY OF THIS FORM IS LEFT BLANK, THE TRANSACTION WILL NOT BE PROCESSED AND PAPERWORK WILL BE RETURNED TO YOU FOR COMPLETION

FINANCIAL PROFESSIONAL USE ONLY

BY SIGNING BELOW, I ATTEST THAT:

1. I HAVE THE PROPER INSURANCE LICENSE/APPOINTMENTS (3 STATE RULE).
2. I HAVE COMPLETED THE REQUIRED TRAINING FOR THE ANNUITY PRODUCT BEING SOLD.
3. I VERIFY THAT THE APPLICATION IS COMPLETE (INCLUDING PRODUCT NAME, RIDERS, SIGNATURES, ETC.).
4. I VERIFY THAT IF THE FUNDS ARE COMING FROM THE LIQUIDATION OF ANOTHER PRODUCT AND THERE IS A CDSC OF 3% OR MORE THAT PROPER DOCUMENTATION HAS BEEN PROVIDED EXPLAINING WHY THIS IS APPROPRIATE.
5. I VERIFY THAT IF THE CLIENT PURCHASING THIS ANNUITY IS EITHER 65 OR OLDER OR YOUNGER THAN 46 THAT PROPER DOCUMENTATION HAS BEEN PROVIDED EXPLAINING WHY THIS IS APPROPRIATE.
6. I VERIFY THAT IF THE CLIENT HAS INCOME LESS THAN \$25,000 OR A LNW UNDER \$50,000 THAT PROPER DOCUMENTATION HAS BEEN PROVIDED EXPLAINING WHY THIS IS APPROPRIATE.
7. I VERIFY THAT IF THE CLIENT ANTICIPATES NEEDING FUNDS ABOVE AND BEYOND THE ALLOWED WITHDRAWAL RATE, THAT PROPER DOCUMENTATION HAS BEEN PROVIDED EXPLAINING WHY THIS IS APPROPRIATE.
8. I VERIFY THAT THE CLIENT DOES NOT HAVE AN OVER CONCENTRATION IN ANNUITIES OR THAT PROPER DOCUMENTATION HAS BEEN PROVIDED EXPLAINING WHY THIS IS APPROPRIATE.
9. I VERIFY THAT IF THE CLIENT IS DOING AN EXCHANGE/REPLACEMENT THAT PROPER DOCUMENTATION HAS BEEN PROVIDED EXPLAINING WHY THIS IS APPROPRIATE.
10. I VERIFY THAT IF THE CLIENT IS DOING AN EXCHANGE/REPLACEMENT THAT THE MOST RECENT STATEMENT FOR THE CLIENTS EXISTING ANNUITY CONTRACT HAS BEEN INCLUDED WITH THE PAPERWORK.
11. I VERIFY THAT THE DISCLOSURE FORM IS COMPLETE INCLUDING SIGNATURES AND DATE SIGNED.

FINANCIAL PROFESSIONAL (FP) SIGNATURE:

DATE:

FINANCIAL PROFESSIONAL (FP) NAME (PRINTED):

FP NUMBER:

DO NOT USE

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INTERNAL USE ONLY

APPROVE REJECT REASON FOR REJECTION : _____

1. I HAVE VERIFIED THAT THE APPLICATION IS COMPLETE (INCLUDING PRODUCT NAME, RIDERS, SIGNATURES, ETC.).	<input type="checkbox"/> YES
2. I HAVE VERIFIED THAT THE DISCLOSURE FORM IS COMPLETE INCLUDING SIGNATURE AND DATE SIGNED.	<input type="checkbox"/> YES
3. IS THE PRODUCT BEING EXITED HAVE A CDSC GREATER THAN 3%?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. IS THE CLIENT PURCHASING THIS ANNUITY AGE 65 AND OLDER OR YOUNGER THAN 46?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. DOES THE CLIENT HAVE INCOME LESS THAN \$25,000 OR A LNW UNDER \$50,000?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. DOES THE CLIENT ANTICIPATE NEEDING FUNDS ABOVE AND BEYOND THE ALLOWED WITHDRAWAL RATE?	<input type="checkbox"/> YES <input type="checkbox"/> NO
7. DOES THE CLIENT HAVE MORE THAN 50% OF LNW INVESTED IN ANNUITIES?	<input type="checkbox"/> YES <input type="checkbox"/> NO
8. I HAVE RUN THE ASSET REPORT TO VERIFY HOLDINGS AT AVANTAX.	<input type="checkbox"/> YES <input type="checkbox"/> NO
9. FOR EXCHANGE/REPLACEMENTS, IS THE CLIENT LOSING OR REDUCING ANY BENEFITS TO EXIST UNDER THEIR CURRENT POLICY?	<input type="checkbox"/> YES <input type="checkbox"/> NO
10. FOR EXCHANGE/REPLACEMENTS, A THIRD PARTY STATEMENT HAS BEEN INCLUDED AND THE INFORMATION APPEARS CONSISTENT WITH THE INFORMATION PROVIDED ON THE DISCLOSURE FORM.	<input type="checkbox"/> YES <input type="checkbox"/> NO

SALES SUPERVISOR: _____

SALES SUPERVISOR SIGNATURE: _____	DATE: _____
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SUPERVISOR NOTES:

DO NOT USE