

PTE 84-24 Disclosure and Acknowledgment Form

In connection with your purchase of the Annuity, Section 408(b)(2) of the Employee Retirement Income Security Act of 1974, as amended, and Section 4975(d)(2) of the Internal Revenue Code, as amended, require that I disclose the following information to you. You should consider this information prior to purchasing the Annuity. The disclosure of this information is intended to satisfy the requirements of U.S. Department of Labor Prohibited Transaction Exemption or PTE 84-24.

Agent Name: _____

Applicant Name: _____

Annuity Product recommended: _____ (the "Annuity")

Issuing Insurance Company: _____ (the "Company")

Relationship Between Agent and Company

I am required to disclose to you whether I am an affiliate of the Company or if my ability to make recommendations is limited by any agreement with the Company, and, if so, the nature of the affiliation, limitation, or relationship.

I am not an affiliate of the Company nor am I an employee of the Company. I am an independent contractor appointed with the Company to sell insurance products issued by the Company. My agreement with the Company does not limit my ability to make recommendations nor does it require me to recommend the Company's products to the exclusion of other companies' products. I am also appointed with other insurance companies to recommend and sell their products. The Company pays me a commission in exchange for selling its products.

Commissions

The Company pays me commissions for each Annuity purchase. These commissions are paid by the Company, which means 100% of your premium payment will be credited to your Annuity's account value. In connection with your purchase of the Annuity, the Company will compensate me as follows:

In the first year you own the Annuity, the Company will pay me a commission of % _____ of the amount of premiums received by the Company during the first contract year.

In each of the succeeding years you own the Annuity, the Company will pay me a commission of % _____ of your account value each year the Annuity is in force.

The Company may pay additional amounts to other third parties that are involved in the marketing, training, administration, wholesaling, supervision, or issuance of the Annuity. These third parties may allocate a portion of such amounts to me.

Annuity Charges and Fees

The Annuity includes certain charges imposed by the Company. Any charges or fees that may be imposed under the Annuity in connection with your purchase of the Annuity have been disclosed to you in the Statement of Understanding that has been provided to you. If you have any questions about these charges, please ask me for more information.

Conflicts of Interest

I am required to disclose to you any material conflicts of interest that may affect my recommendation that you purchase the Annuity. A conflict of interest exists when a reasonable person would conclude that a financial interest affects my best judgment when recommending the purchase of the Annuity.

I will receive a commission as a result of your purchase of the Annuity, and I may receive additional commissions each year you own the Annuity. My commission will vary depending on the Annuity you purchase and the amount of your premium payments. The Company may pay additional amounts to other third parties that are involved in the marketing, training, administration, wholesaling, supervision, or issuance of the Annuity. These third parties may allocate a portion of such amounts to me.

The following are other material conflicts of interest that may affect my recommendation:

Applicant Acknowledgment and Approval

By signing below, I acknowledge receipt of the above information, as well as receipt of the information contained in the Statement of Understanding referenced above. I approve the purchase of the Annuity, including the commissions and Annuity fees and charges.

Applicant Name: _____

Applicant Signature: _____

Date: _____