



Annuity Sale Suitability Disclosure

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State law requires anyone considering an annuity purchase the opportunity to provide information concerning his or her finances. This is done to help your insurance producer and/or broker determine if the annuity is financially suitable based upon your situation. You may choose not to provide the requested information. In doing so, you take full responsibility for determining that this annuity meets your needs. Even if you do complete this information, a determination of suitability is limited to financial suitability only. **By signing below you acknowledge and understand that National Guardian Life Insurance Company and its representatives do not offer legal, financial, tax, investment, Medicaid planning, Veterans benefit, or estate planning advice.**

Section A

Proposed Annuity Owner	Date of Birth	Proposed Annuity Premium \$
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- Yes, I represent that all statements contained in the information provided below are true and complete and any recommendations are made assuming the information provided is both current and accurate. [Answer each question in Section A and sign and date the form at the bottom of Section A.]
- No, I do not wish to provide answers to the questions below and I acknowledge that I am responsible for determining whether the proposed annuity contract is appropriate and suitable for me and my circumstances. [Continue on to Section B.]

Estimated gross annual income \$	Sources of income (Select all that apply):	<input type="checkbox"/> Soc. Security <input type="checkbox"/> Pension <input type="checkbox"/> Other
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Are you currently retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, in what year do you plan to retire?
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My estimated net worth (assets less liabilities): \$	My Tax Bracket: <input type="checkbox"/> Less than 15% <input type="checkbox"/> 15%-28% <input type="checkbox"/> Greater than 28%
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Your investment risk style: Conservative Moderate Aggressive

What are your financial objectives in purchasing this annuity? (Select all that apply)

<input type="checkbox"/> Income Now	<input type="checkbox"/> Guaranteed Interest Rate	<input type="checkbox"/> Pass to Beneficiary(ies)
<input type="checkbox"/> Preservation of Capital	<input type="checkbox"/> Avoid Probate	<input type="checkbox"/> Growth
<input type="checkbox"/> Tax Deferral	<input type="checkbox"/> Lifetime Income	<input type="checkbox"/> Other: _____

The source(s) of funds to purchase this annuity is:

Will the proposed annuity replace an existing life insurance or annuity contract? Yes No
 If yes, do you believe that the proposed annuity will better suit your financial needs? Yes No

What percentage of your total net worth does this annuity premium represent? _____%

(Note: If the percentage exceeds company liquidity guidelines, the annuity is automatically considered unsuitable. If the client still desires to purchase the annuity, proceed to Section B.)

During the term of the annuity contract, do you expect to need more than the scheduled annuity payments? Yes No

(Note: By answering in the affirmative, the annuity is automatically considered unsuitable based upon company guidelines. If the client still desires to purchase the annuity, proceed to Section B.)

Section A (continued)

I hereby affirm that the answers provided above are true and correct to the best of my knowledge and belief and will be used to evaluate the suitability of any proposed annuity contract. My answers are provided voluntarily.

**Proposed
Owner's
Signature:**

Date

Section B

Either this proposed annuity does not meet the NGL liquidity guidelines or I have chosen not to provide information requested in Section A. Regardless, I want to purchase the proposed annuity and I take full responsibility for determining whether the proposed annuity is suitable and appropriate for me and my circumstances.

**Proposed
Owner's
Signature:**

Date

Producer's Statement: I believe that the proposed owner will benefit from the purchase of the proposed annuity and any replacement/exchange is necessary and justified. Based on the facts disclosed to me by the proposed owner, and based on all facts and circumstances known to me at the time the recommendation was made, I declare that this annuity purchase is suitable to the insurance needs and financial objectives of the proposed owner.

**Producer's
Signature:**

Date

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