

INDEXED ANNUITY ACKNOWLEDGMENT FORM

In an effort to be sensitive to regulatory concerns and express support, we have included this acknowledgment with the forms to purchase or transfer your annuity.

An annuity does not guarantee investment performance or guarantee against loss of principal due to withdrawals or surrenders.

Persuant to the following information, I/we certify that this transaction is consistent with my/our investment objectives.

Title of Account:						
Type of Account:	Qualified (IRA)	Non-Quali	fied			
Liquid Net Worth:	\$					
Amount of check of	or approximate transfer/exchange amount:	\$				
Will there be any change in title, ownership or beneficiary?		yes	no			
If yes, please explain.						
		_				
	<u>New Product</u>		Old Product/Source of Funds			
Name of Product		Name of Product				
Surrender		Surrender Period				
Period		Remaining				
Bonus % (if applicab	le)	Surrender Charge	\$			
Approx. amount of bonus \$		Loss in Death Benefit	\$			
All values listed above are approximate and subject to change.		Loss in Income Benefi	t_\$			
-	the following by <u>initialing</u> in the space pro		ialing each appropriate line)			
/ Tax-Def	Ferred Growth / Guaranteed I	ncome / O	ther (please explain)			
	/ Tax-Deferred Growth / Guaranteed Income / Other (please explain) / Stepped-up Death Benefit / Estate Planning					
	/ Death Benefit Guarantee					
/ Preserva	ation of Principal					
/	I/We certify that this type of product is consistent with my/our insurance, tax, and investment objectives. / I/We believe we will benefit from the product enhancements and improvements. It is unlikely that I/we will need a withdrawal in excess of the free withdrawal amount specified in the					
/	contract during the surrender charge period.					
/	I/We understand that the contract value may increase or have no change in value during the contract term and that income or death benefits could differ from my account value.					
/	I/We understand that there is a no stepped-up cost basis to the heirs.					
/	I/We understand that taxable distributions will	be taxed as ordinary inco	me as opposed to capital gains.			



CLIENT ACKNOWLEDGMENT INDEXED ANNUITY FORM

Page 2	/	I/We have considered my Net Worth, Source of Funds, Liquidity needs, Risk Tolerance and Time horizon. I/We believe this annuity contract is suitable for my financial situation and objectives.
	/	I/We have been explained and understand the features of the Indexed Annuity. These feature include but are not limited to: participation rate, minimum participation rate, term of participation rate, any cap the product may are may not have, how averaging is used, fees such as margin, spread or administrative that may be in addition to or instead of a participation rate, the indexing method chosen and minimum interest the contract may earn.
	/	I/We have received an explanation of each of the following to our satisfaction: Guaranteed Death Benefit, Guaranteed Income Benefit, Market Value Adjustment Surrender Charge, Rider Costs, and Other Fees or Costs

Have you exchanged an annuity within the past 36 months?

Yes No

REPRESENTATIVE'S STATEMENT OF REASONING: MUST BE COMPLETED. PLEASE BE VERY SPECIFIC AS THIS WILL ASSIST THE TRUSTMONT HOME OFFICE PRINCIPAL IN THE SUPERVISORY REVIEW.

Client's Signature	Date	Client's Signature	Date
By signing this form, I, the Registered Repr and have verified this Indexed Annuity prod	e		
approved product list.		Principal's Signature	Date
Registered Representative's Signature	Date	Marketing Organization Name	