

FINANCIAL NEEDS ANALYSIS

EquiTrust Life Insurance Company®

7100 Westown Parkway, Suite 200
 West Des Moines, Iowa 50266-2521
 (866) 598-3692 Fax: (515) 226-5103
www.EquiTrust.com

Mailing Address: PO Box 14500
 Des Moines, Iowa 50306-3500

The information provided on this form will help you, your agent and EquiTrust to determine if the annuity product being applied for meets your current financial needs and objectives. **This entire form must be completed.**

	Owner/Applicant	Joint Owner/Applicant
Full Name		
Current Age		
Employment Status	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired

CURRENT FINANCIAL STATUS

Complete on behalf of the owner. For joint owners, information should be combined. For minors, provide the financial objectives of the parent/guardian. If the annuity will be owned by a trust, use the assets and objectives of the trust.

1. Annual Gross Household Income

- \$0-19,999 \$20,000-49,999 \$50,000-99,999 \$100,000-149,999
 \$150,000-199,999 \$200,000-249,999 \$250,000-499,999 Over \$500,000

2. Source of Income (Check all that apply)

- Wages Pension Payments Guaranteed Annuity Payments
 Investments Social Security Rental Income Other _____

3. Annual Household Expenses (Examples include mortgage/rent, health care, insurance, daily expenses, etc.)

- \$0-24,999 \$25,000-49,999 \$50,000-74,999 \$75,000-100,000 Over \$100,000

4. Liquid Net Worth NOT including the funds used to purchase this annuity. (These are assets that can be easily converted to cash without incurring penalty charges (e.g. checking, savings, stocks, bonds, penalty free withdrawals from current assets))

- Under \$10,000 \$10,000-24,999 \$25,000-49,999 \$50,000-99,999
 \$100,000-149,999 \$150,000-199,999 \$200,000-249,999 \$250,000-500,000 Over \$500,000

5. Estimated Total Net Worth (Exclude primary residence, furnishings & automobiles)

- \$0-49,999 \$50,000-99,999 \$100,000-149,999 \$150,000-199,999
 \$200,000-249,999 \$250,000-499,999 \$500,000-999,999 Over \$1,000,000

6. Total amount of debt excluding primary residence (credit cards, student loans, personal loans, auto loans, etc.)

- Under \$10,000 \$10,000-50,000 \$50,000-100,000 \$100,000-250,000 Over \$250,000

7. Types of current assets (Check all that apply)

- Life Insurance Annuities; \$ _____ Accumulation Value Real Estate 401k/Pension
 Stocks/Bonds/Mutual Funds CD/Money Market Funds Other _____ None

8. Source of funds used to purchase this annuity (Check all that apply)

- Life Insurance Variable Life Insurance Fixed/Index Annuity Variable Annuity Checking/Savings
 CD Money Market 401k/pension Stocks/Bonds/Mutual Funds Other _____

CURRENT FINANCIAL STATUS (CONT'D)

9. Do you have a *reverse mortgage* on your primary residence? (A reverse mortgage is an agreement in which a senior homeowner takes a loan against the equity in their home. The loan is repaid when the borrower dies or moves out of the property and the house is sold.)

- Yes No

10. Do you have an emergency fund for unexpected expenses?

- Yes No (please explain) _____

FINANCIAL OBJECTIVES

11. Why are you purchasing this annuity? (Check all that apply)

- Estate Planning Potential Growth Tax Deferral Flexible Income Options
 Other (Details) _____

12. Indicate your risk tolerance

- Conservative Moderate Aggressive

13. What is your financial experience?

- 0-5 years 6-10 years 11-20 years Over 20 years

14. Federal tax bracket

- 10-20% 21-30% 31-40% 41-50% Other (Details) _____

15. Do you anticipate material changes in your income, expenses, or assets during the surrender charge period of the annuity you are purchasing?

- No Yes (please explain) _____

16. How long do you plan to keep this annuity?

- 3 years 4-7 years 8-10 years More than 10 years

17. When do you anticipate taking your first distribution from this annuity? (Check one)

- < 1 year 1-5 years 6-10 years 11+ years I don't plan to take distributions

18. In consideration of your answer to item 17, how do you anticipate taking distributions from this annuity? (Check all that apply)

- Immediate Income Income Rider Required Minimum Distribution Penalty-free withdrawals
 Lump sum Annuitize Leave to Beneficiary I don't plan to take distributions

19. Are you aware that the fixed annuity contract for which you are applying may be a long-term contract with substantial penalties for early withdrawal and there are non-guaranteed elements in the annuity?

- Yes No (please explain) _____
 N/A - Confidence Income Immediate Annuity

20. Are you aware that withdrawals prior to age 59-1/2 may result in a 10% IRS penalty tax?

- Yes No N/A

INSURANCE AGENT/PRODUCER DISCLOSURE FOR ANNUITIES

Do not sign unless you have read and understand the information in this form.

1. INSURANCE AGENT INFORMATION (“Me”, “I”, “My”)

Full Name (first-middle-last)		
Business Telephone Number	National Producer Number	State

2. OWNER/APPLICANT INFORMATION (“You”, “Your”)

Full Name (first, middle, last)

3. TYPES OF PRODUCTS I CAN SELL:

I am licensed to sell annuities to you in accordance with state law. If I recommend that You buy an annuity, it means I believe that it effectively meets Your financial situation, insurance needs and financial objectives. Other financial products, such as life insurance or stocks, bonds and mutual funds, also may meet Your needs.

I offer the following products:

Fixed or Fixed Indexed Annuities Variable Annuities Life Insurance

I need a separate license to provide advice about or to sell non-insurance financial products. I have checked below any non-insurance financial products that I am licensed and authorized to provide advice about or to sell.

Mutual Funds Stocks/Bonds Certificates of Deposits

4. ANNUITIES I CAN SELL:

I am authorized to sell: Annuities from One (1) Insurer Annuities from Two (2) or more Insurers

Annuities from Two (2) or more Insurers although I primarily sell annuities from _____

5. HOW I’M PAID FOR MY WORK:

It’s important for You to understand how I’m paid for my work. Depending on the particular annuity You purchase, I may be paid a commission or a fee. Commissions are generally paid to Me by the insurance company while fees are generally paid to Me by the consumer. If You have questions about how I’m paid, please ask Me.

Depending on the particular annuity You buy, I will or may be paid cash compensation as follows (select one):

Commission, which is usually paid by the insurance company or other sources.

Other (Details) _____

If you have questions about the above compensation I will be paid for this transaction, please ask me.

ACKNOWLEDGEMENTS AND SIGNATURES

By signing below, I acknowledge that I have reviewed the product-specific Disclosure Statement with my agent, in addition to the financial factors listed on this form, and have determined that the product meets my needs and objectives.

Do not sign this form if any item has been left blank, before carefully reviewing the information recorded, or if any of the information recorded is not true and correct to the best of your knowledge.

New Jersey residents ONLY: The sale and suitability of annuities is regulated by the Department of Banking and Insurance and consumers may obtain assistance from the Department by contacting 609-292-7272 or 1-800-446-7467, or visiting the Department's website at www.njdobi.org.

APPLICANT/OWNER REFUSAL TO PROVIDE INFORMATION

To recommend a product that effectively meets your needs, objectives and situation, the agent, broker or company needs information about you, your financial situation, insurance needs and financial objectives. If you refuse to provide your agent, broker, or company, some or all of the information needed to decide if this annuity effectively meets your needs, objectives and situation, or you provide inaccurate information, you may lose protections provided by various state insurance laws.

Note: if you refuse or are unable to provide the requested information, EquiTrust is unable to issue the contract.

Statement of Purchaser:

- I have provided complete and accurate information at this time.
- I **REFUSE** to provide information at this time.
- I have chosen to provide **LIMITED** information at this time

Purchase Recommendation:

- My annuity purchase **IS NOT BASED** on the recommendation of this agent or the insurer.
- My annuity purchase **IS BASED** on the recommendation of this agent or the insurer.

Owner/Applicant Signature	Date	Joint Owner/Applicant Signature	Date
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AGENT/PRODUCER ACKNOWLEDGEMENT

By signing below, I acknowledge that I have made a reasonable effort to obtain information concerning the financial and tax status, investment objectives and other information considered reasonable for this purchase. It is my belief that based on this information and all circumstances known to me at this time, the annuity being applied for meets the financial needs and objectives provided by my clients. In addition, I have verified identity, believe the information provided to me is true and accurate and I understand the Company may contact my client directly for additional information, if necessary.

I understand and acknowledge that some annuity recommendations, such as those related to "rollovers" or transfers from certain retirement plans or IRAs, could be "fiduciary" investment advice recommendations as that term is defined by ERISA and the Internal Revenue Code. If I make such a fiduciary recommendation, I acknowledge that I am responsible for complying with the requirements of an applicable U.S. Department of Labor prohibited transaction exemption covering any receipt of sales-related compensation. I understand and acknowledge that if I choose to rely on PTE 84-24, an 84-24 disclosure form must be completed, signed by the applicant and the producer, and a copy left with the applicant. I understand that the 84-24 disclosure form should not be sent to EquiTrust.

REQUIRED: The basis for my recommendation to purchase the proposed annuity(ies):

Agent/Producer Signature	Date	Agent/Producer Number
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