SUBMITTING AN ANNUITY APPLICATION

Required Forms:

Application for State - 2000 (may vary by state)

Disclosure for Product - varies by product and state

Suitability Form - 4106 (may vary by state)

Election of Witholding Form (SPIA's only)

1035 Exchange/Transfer Form (if applicable) - 4003

Replacement Form (if applicable) - 4000 (may vary by state)

Lifetime Income Benefit Disclosure- Required on annuities offering the LIBR-2008 or F-LIBR-09

Completing the Application:

Annuitant - must be an individual. Issue ages vary by state and product.

Joint Annuitant - Non-qualified annuities allow a maximum of two Annuitants. Joint Annuitants are not available on a qualified annuity.

Owner - must be an individual (over age 18), trust, or retirement pension/savings plan. In order for a trust to own an annuity, the trust must be established for the benefit of the named annuitant. The front cover and signature page of the trust must be included with the application.

On IRA, SEP-IRA, ROTH-IRA, Simple IRA and TSA annuities the Owner and the Annuitant must be the same person.

Joint Owner - joint ownership is acceptable for non-qualified annuity contracts only. A contract may have an unlimited number of owners. Contingent ownership is not allowed on an American Equity annuity contract.

Age Requirement - We look at both Annuitants and Owners when it comes to the age limits on our annuities. Commissions are paid based on the older age.

Beneficiary - Annuitant's Beneficiary is the recipient of the contract proceeds at the time of the Annuitant's death. If the Annuitant and Owner are different, the Annuitant is the Owner's Beneficiary unless otherwise specified. American Equity does not allow a business, corporation, or funeral home to be named the Beneficiary of an annuity contract. American Equity does not allow the writing Agent to be the Beneficiary on an annuity application unless he/she is the spouse. In a Joint Owner situation, we suggest making the Primary Beneficiary "surviving spouse" since we pay out at first to die. We also suggest not listing the Estate as the beneficiary as this could make the annuity go through probate.

Contract Form - the product being applied for. You must list the product name on the Application.

Tax Status - This is the indication of how the funds are to be held with American Equity. ROTH-IRA applications require form 5305-RA. For Sec 457, H.R. 10, 401(k) and Profit Sharing plans, an applicant's statement and Employee Benefit Plan Disclosure are required. American Equity is simply the funding vehicle for these plans. A third party administrator will be required. A copy of the plan document may be required for some pension contracts.

1035/Direct Transfer - Please list the approximate amount that will be 1035/Transferred to American Equity.

- Information for Other Forms:

Disclosures -

Product: A product specific disclosure **must accompany all applications**. Disclosures with allocations must be completed prior to contract issue. Allocations must total 100% and be listed as whole percentages. The Owner must initial the front page and sign the back page of the disclosure.

LIBR: Annuities offering the LIBR-2008 or F-LIBR-09 also require Form #1103 or #1117 to be signed and completed prior to issue.

Suitability - A Suitability form (4106) is required with all applications.

Delivery Receipt - At the time of delivery, we require a Delivery Receipt (4005) be signed and returned for every contract.

Replacements - Please provide information on the contract being replaced. A current statement works best.

Premium Limits:

Minimum Premium - The minimum premium is generally \$5,000 however this varies on products such as the Guarantee Series (SPDA-MYGA) and SPIA-1. For most traditional fixed products we will accept \$2,000 minimum premium on qualified funds only. See product profile form 1031 for details.

Maximum Premium Limits - For ages 0-69 maximum premium amount is \$1,000,000. Ages 70-74 maximum premium amount is \$750,000. And, ages 75-80 maximum premium amount is \$500,000.

888-647-1371 www.american-equity.com



4809 12.02.09



New Business: PO Box 9304 Des Moines, IA 50306-9304 Phone 888-221-1234 Fax 515-221-9450 www.american-equity.com

Annuity Application

American Equity Investment Life Insurance Company Overnight - 6000 Westown Parkway, West Des Moines, IA 50266

ANNUITANT	JOINT ANNUITANT			
Name Sex	Name Sex			
Birth date// Soc. Sec. No	Birth date/ Soc. Sec. No			
Address	Address			
CityStateZip	City State Zip			
OWNER (if other than annuitant)	JOINT OWNER			
Name Sex	Name Sex			
Birth date// SSN# or Tax ID#	Birth date/ SSN# or Tax ID#			
Address	Address			
City State Zip	CityStateZip			
OWNER'S BENEFICIARY - Annuitant, unless otherwise stated				
Relationship: _				
ANNUITANT'S BENEFICIARY				
	to Annuitant:			
	to Annuitant:			
1. Contract form:	5. Will initial premium be a 1035 Exchange, or Direct Transfer?			
Guarantee Period (if applicable) \square 3 year \square 5 year \square other (Specify, if other)	☐ Yes ☐ No If Yes, from what company?			
Settlement option (Immediate annuity only):	Anticipated amount:\$			
2. Tax status: ☐Non-Qualified	6. Billing information (Flexible contracts only):			
\Box Roth IRA \Box IRA \Box Sec. 401(k)	Amount:			
\Box SEP/IRA \Box Sec. 457 \Box Sec. 403(b)	Mode Type			
\Box Simple IRA \Box H.R. 10 \Box Corp Pension/Profit Sharing	☐ Monthly☐ ABC* (Automatic Bank Check)☐ Quarterly☐ Direct Bill			
3. Do you have any existing insurance or annuities in this or any	☐ Semi-Annual ☐ List Bill			
other company? \square Yes \square No	☐ Annual ☐ Government Allotment			
If "Yes" complete replacement form(s).	7. Remarks and/or Special Billing Address (i.e., List Bills):			
4. Premium submitted with application: \$				
Is this a rollover? (Qualified plans only) \square Yes \square No	* Form 4067 required.			
Do you have any reason to believe that applicant has any existing	To the best of my knowledge and belief, the statements above are			
insurance or annuities? $\ \square$ Yes $\ \square$ No	true and complete.			
If "Yes" complete replacement form(s).				
	Signed at			
Agent's Name/Number (Please Print)	City/State			
	on			
Agent's E-mail Address	Date			
	Owner's Signature/Phone Number			
Agent's Signature/Phone Number				
	Joint Owner's Signature/Phone Number			
Resident Agent's Countersignature/Phone Number (where required)				



OTHER INFORMATION

- This annuity is designed generally for people who are willing and able to let their assets build over an extended period of time.
- This annuity does not participate directly in any stocks or equity investments. You aren't buying shares of stock or an index. Dividends paid on the stocks on which the indexes are based don't increase your annuity earnings.
- •We may change your annuity contract from time to time to follow federal or state laws and regulations. If we do, we'll tell you about the changes in writing.
- Like any annuity issuer, American Equity incurs expenses to sell and issue its contracts, including the payment of a commission to its agents, and these expenses are taken into consideration when interest rates, caps and participation rates are established and reset. You will receive all benefits as set forth in the contract.
- •Your state has a law that gives you a set number of days to look at an annuity after you buy it. If you decide during that time that you don't want it, you can return the annuity and get all your money back. Please review your contract after delivery to confirm the number of days you have.

"Standard & Poor's®", "S&P®", "S&P 500®", "Standard & Poor's 500", and "500" are trademarks of The McGraw-Hill Companies, Inc. and have been licensed for use by American Equity Investment Life Insurance Company. This product is not sponsored, endorsed, sold or promoted by Standard & Poor's, and Standard & Poor's makes no representation regarding the advisability of purchasing this product.

Dow Jones", "Dow Jones Industrial Averages" and "DJIA"" are service marks of Dow Jones & Company, Inc. and have been licensed for use for certain purposes by American Equity Investment Life Insurance Company. This product, based on the DJIAsm, is not sponsored, endorsed, sold or promoted by Dow Jones and Dow Jones makes no representation regarding the advisability of purchasing this product.

The S&P 500° Index does not include dividends. The DJIAsm Index does not include dividends.



American Equity's Integrity Gold provides an alternative for your financial future. The design of this product allows for short-term accumulation of money needed for retirement income. Integrity Gold is a flexible premium fixed indexed deferred annuity. Integrity Gold is available for issue ages 0-80.

VALUE CALCULATIONS

Indexed Values are calculated by:

- · Adding any premiums paid
- Subtracting any withdrawals, including associated surrender charges and
- Adding Index credits to determine an indexed value.

The total **Indexed Value** is the sum of the Indexed Value calculations for the Bond, Averaged, Point to Point, and Monthly Point to Point Values. **Fixed Value** is calculated in the same way except interest credited is based on a fixed interest rate rather than an Index Credit. The **Contract Value** equals the sum of the Fixed and Indexed Values. The Contract Value is calculated on each contract anniversary.

MINIMUM GUARANTEES

We set the Minimum Guaranteed Interest Rate on the issue date and guarantee it for the life of the annuity contract. It is guaranteed to never be less than 1%, and applies to Minimum Guaranteed Surrender Value only. The Fixed Value Minimum Guaranteed Interest Rate is 1%.

LIFETIME INCOME BENEFIT RIDER (LIBR-2008)

This rider allows you to take a guaranteed lifetime income from your annuity without losing control of your retirement assets. See Lifetime Income Benefit Consumer Guide and Disclosure (form #1103).

ACCESSIBILITY

Our annuities offer Penalty-free Withdrawals up to **10%** of your contract value once annually after the first contract anniversary.

Our special feature riders (NCR-100 and TIR-100)*, are for annuitants under age 75 at issue. The NCR-100 allows you to take a 100% Penalty-free Withdrawal after the 3rd Contract Anniversary if confinement in a Qualified Nursing Care Center occurs after the end of the 3rd Contract Year and continuing for at least 90 consecutive days. If confinement occurs in the 2nd or 3rd Contract Year then an annual 20% Penalty-free Withdrawal is allowed. The TIR-100 allows you to take an additional Penalty-free Withdrawal of up to 100% of the Contract Value if the diagnosis of a terminal illness by a qualified physician occurs after the first Contract Year, and is expected to result in death within one year. The proceeds may be used however you choose.

TAX TREATMENT

You may be subject to a 10% Federal penalty if you make withdrawals or surrender this annuity before age 59½. If this annuity is within a qualified plan all distributions may be taxable. Under current tax laws annuities grow tax deferred and an annuity is not required for tax deferral in a qualified plan. Any distribution may cause a taxable event. If your state imposes a premium tax, it will be deducted from the money you recieve. Neither American Equity nor our agents offer legal, investment, or tax advice. Please consult a qualified advisor for these matters.

Owner's Initials

^{*} Form numbers and availability vary by state.

Integrity Gold INDEX-5-07*

SURRENDER CHARGES

Surrender Charges are deducted from your Contract Values in the event of:

- 1. Full Surrender or
- 2. Withdrawals in the first year or
- 3. Withdrawals in excess of the Penalty-free Withdrawal amount during the surrender charge period shown below:

Issue Ages 0-80

Year	1	2	3	4	5	6	7+
%	8	7	6	4.5	3	1.5	0

Surrender Charges may vary by state.

The Minimum Guaranteed Surrender Value equals 87.5% of all premiums, minus any withdrawals, all accumulated at the Minimum Guaranteed Interest Rate.

The Cash Surrender Value equals the greater of the Contract Value minus any Surrender Charges or the Minimum Guaranteed Surrender Value. Your Cash Surrender Value can never be lower than the Minimum Guaranteed Surrender Value of the Annuity Contract.

CHOICES AND FLEXIBILITY

You choose how to allocate your total initial premium. You may make additional premium payments in any amount and frequency within the premium limits. Additional premiums are automatically credited to the Fixed Value. The annuity contract offers additional flexibility by allowing you to transfer money in or out of any value on each contract anniversary. Additional premiums credited to the Fixed Value can be transferred to other values at that time.

- The minimum initial premium is \$5,000.
- The minimum allocation for each value is \$1,000.
- The minimum transfer to select a new value is 10% of the Contract Value.

Nine interest crediting methods offer a variety of choices. For a detailed description of each crediting method refer to page 4 of guide.

1 Traditional Fixed Value Interest Rate

2 S&P 500 Annual Monthly Average w/Cap & AFR

3 S&P 500 Annual Monthly Average w/PR**

4 S&P 500 Annual Pt. to Pt. w/Cap & AFR

5 S&P 500 Annual Pt. to Pt. w/PR**

6 S&P Monthly Pt. to Pt. w/Cap & AFR**

7 Dow Annual Monthly Average w/Cap & AFR

8 Dow Annual Pt. to Pt. w/Cap & AFR

9 10-Year U.S. Treasury Bond w/Cap & AFR

You will have the benefit of an annual reset of index credits. Your index credits become part of the Contract Value once credited and can never be lost or taken away.

DEATH BENEFIT

The Death Benefit offers a variety of settlement options. Your beneficiary(ies) will have access to your contract's full value. Settlement options are a lump sum payout, the guaranteed income of annuitization, penalty-free and continued tax deferral if you are a spouse. The Death Benefit is the greater of the Contract Value or Minimum Guaranteed Surrender Value at the death of the Annuitant or Owner, whichever comes first.

This disclosure is intended to summarize this Annuity. Consult your Annuity Contract for specific terms and conditions of your Annuity. Annuity contracts are products of the insurance industry and are not guaranteed by any bank or insured by the FDIC.

If you are replacing an existing contract, carefully compare the benefits of the proposed contract with your existing contract to ensure your decision is in your best interest.

I have read and received a copy of this document and a copy of the NAIC Buyer's Guide to Indexed Annuities***. I understand I am applying for an indexed annuity and that past Interest and Index activity is not intended to predict future activity. I also acknowledge that this annuity meets my financial objectives and that a full Surrender or withdrawals over penalty free amount taken within the Surrender Charge Period will result in Surrender Charges being assessed and potential loss of Premium.

Owner's Signature	Date
-------------------	------

Joint Owner's Signature

Agents Statement - I certify that I have provided a copy of this document*** to the applicant and I have made no promises or assurances regarding values of the annuity contract, nor have I made statements that differ from this disclosure.

Agent's	Sianature	Date
Adems	Signature	Date

Agent's State License Number

***NAIC Buyer's Guide is recommended for all applications and **delivery is required** at the time of application in AZ, CO, HI, and UT.

AMOUNT OF PREMIUM RECEIVED				
Amount	Received From			
Owner's Name				
Date				
Agent's Name - Pleas	se Print			
Agent's Signature				



American Equity Investment Life Insurance Company P.O. Box 71216 Des Moines, Iowa 50325 www.american-equity.com 888-221-1234



Date



WHAT IS THE INCOME ACCOUNT VALUE (IAV)?

The Income Account Value is an accounting value used only to calculate the Rider's Lifetime Income Benefit (LIB). It is not part of your Contract Value, as outlined in the product brochure and Base Contract, and is only used to calculate your LIB amount. The IAV is not available for cash surrender or in a lump sum. Your initial IAV is the initial premium you deposit, plus any premium bonus. The IAV accumulates at the IAV Rate, which is set at issue, and continues to grow until the end of the IAV period which expires at the end of the 10th Contract Year, unless you submit a written request to Restart. LIB payments reduce both your contract value and IAV.

WHEN CAN I BEGIN TAKING MY LIFETIME INCOME BENEFIT PAYMENTS?

You may begin taking LIB payments anytime after the first Contract Anniversary or age 50, whichever is later. See page 3 of the guide for more detail.

CAN I TAKE OTHER WITHDRAWALS FROM MY ANNUITY?

Yes. Anytime, either before or after beginning LIB payments, you may take withdrawals. You may always take up to the Contract Base, less any surrender charge prior to election of LIB payments. Withdrawals taken prior to election of LIB payments reduce the Contract Value and Income Account Value on a pro-rata basis. A withdrawal after LIB payments start (excess withdrawal) will reduce future LIB payments by the same percentage the withdrawal reduces your Contract Value. If the excess withdrawals reduce the Contract Value to zero, the LIBR terminates and LIB payments stop.

*Not available in all states.

Lifetime Income Benefit Rider

(LIBR-2008)*

DISCLOSURE STATEMENT

Before purchasing an annuity with the Lifetime Income Benefit Rider (LIBR-2008), American Equity wants to make sure you understand the features of this Rider including all benefits, limitations, and costs. You should read through the brochure, and then go through the summary of information on this disclosure. Ask questions of your agent prior to making any decision. After you have read the information provided, and had your questions answered, please sign the acknowledgement stating your understanding of the key provisions of the Rider. Please refer to the actual Rider for a complete description of the benefits, limitations, and costs.

WHAT IS THE LIFETIME INCOME BENEFIT RIDER?

It is a benefit rider we automatically issue along with your Base Contract if Owner and Annuitant are the same person. Based on the Income Account Value (IAV) option you choose and your age when you elect this benefit, your money will accumulate at a predetermined accumulation rate to provide you with a lifetime income in the future. This income is available to you without a surrender charge and without having to annuitize your Contract. This means that you maintain control of all money accumulated in your base annuity, and can access that money at anytime, with certain restrictions.

IS THERE A COST TO THIS RIDER?

That depends on which IAV accumulation rate you choose. There is no Rider Fee for the 5% IAV accumulation option during the initial IAV Period. There is a Rider Fee if you elect the 8% IAV accumulation option under this LIBR. The Rider Fee is currently 0.45% and is set at issue. The Rider Fee is charged annually against your Contract Value at your Contract Anniversary and continues until either the Rider or the Base Contract expire. The Rider Fee will never change, unless you elect to Restart your IAV accumulation period.

If you do elect to Restart your IAV accumulation period, the Company may change the Rider Fee. This applies to both the 5% and the 8% IAV accumulation options. The Rider Fee will never be more than 1% even after you elect to Restart the IAV accumulation period. See page 4 of the guide for more details on restarting the IAV accumulation period.

HOW MUCH INCOME CAN I GET?

That depends on several factors, including your age at time you elect to begin receiving an income, the amount of time the IAV accumulates, the IAV Rate you choose, the premium paid and any premium bonus credited. See page 3 of the guide for more detail.

WILL I BE TAXED ON LIFETIME BENEFIT PAYMENTS?

Yes. All payments are considered a withdrawal from the Base Contract's Contract Values. Any part of the withdrawal that is deferred interest is taxable as ordinary income. If the Base Contract is a Qualified Plan, the entire amount of the withdrawal may be taxable. We calculate taxation of LIB payments as outlined in the Internal Revenue Code. In addition, the taxable portion of any withdrawal taken prior to age 59 $\frac{1}{2}$ may be subject to an additional penalty of 10% by the Internal Revenue Service.

Owner's Initials

Lifetime Income Benefit Rider (LIBR-2008)

AUTHORIZATION AND ACKNOWLEDGEMENT OF LIFETIME INCOME BENEFIT RIDER AND IAV ACCUMULATION OPTION CHOICE

I understand the Lifetime Income Benefit Rider (LIBR-2008) is automatically added to my Base Annuity Contract. I understand that this rider provides a Lifetime Income option. I understand that I may choose between two Income Account Value (IAV) options as offered by the Company. I choose the IAV Rate option indicated below:

☐ IAV Accumulation Option 5% -

By choosing this option I understand that:

- The IAV has no cash value and I cannot receive or withdrawal in a lump sum the Income Account Value, and that the IAV is only used as a factor in determining a Lifetime Income amount.
- There is no Rider Fee associated with this option at the time of issue;
- If I choose to Restart my Income Account Value Period, as allowed under the Rider, the Company may at that time implement a Rider Fee and that:
- Such a Rider Fee will be declared by the Company at Restart of my IAV Period;
- The Rider Fee will be deducted annually from my Contract Value on each Contract Anniversary as long as the Rider is active; and
- o The Rider Fee will never be more than 1%.

(Owner's Initials)

☐ IAV Accumulation Option 8% -

By choosing this option, I understand that:

- The IAV has no cash value and I cannot receive or withdrawal in a lump sum the Income Account Value, and that the IAV is only used as a factor in determining a Lifetime Income amount.
- I will incur a Rider Fee of 0.45% of my Contract Value on each Contract Anniversary as long as the Rider is active, unless I choose to Restart my IAV Period;
- The Rider Fee will be deducted annually from my Contract Value on each Contract Anniversary as long as the Rider is active;
- If I choose to restart my IAV Period, as allowed under the Rider, the Company may change the Rider Fee percentage, and that:
 - The Company will declare the new Rider Fee at the Restart of my IAV Period; and
 - o The Rider Fee will never be more than 1%.

(Owner's Initials)

WHEN DOES THE LIFETIME INCOME BENEFIT RIDER TERMINATE?

LIBR-2008 terminates on the earliest of the following events:

- You choose to cancel the rider;
- You, or if jointly owned, the last surviving owner/ annuitant, dies without a surviving spouse as sole beneficiary;
- IAV becomes zero due to excess withdrawals;
- You surrender the Base Contract;
- You annuitize the Base Contract;
- The Owner and Annuitant are no longer the same person;
- You die and your spouse is not at least Age 50.

AFTER I MAKE THIS ELECTION MAY I CHANGE MY MIND AND OPT FOR THE OTHER IAV ACCUMULATION RATE OPTION?

- No. The election you make on this disclosure document may not be changed once the Base Contract is issued. Therefore, if you elect the 8% Income Account Value Rate at issue of the Base Contract and later decide to cancel that election you will not receive the 5% IAV accumulation rate that you would have received under this LIBR-2008 for no fee. You will also not be eligible for the 8% IAV accumulation rate if you do not affirmatively elect that IAV accumulation rate at issue and decide to take the 5% IDF Rate at no charge. It is extremely important that you review this election carefully with your agent.
- I have read the information explained above, and understand its content. By signing, I acknowledge and understand the following:
 - In purchasing the Base Annuity Contract from American Equity Investment Life Insurance Company I will automatically receive the Lifetime Income Benefit Rider if the Owner and Annuitant are the same person.
 - I will have a choice between two different IAV accumulation options, as described above. In choosing an option, I have discussed my financial status, tax status, current insurance products, and other information with my agent and believe the Income Account Value option I have chosen may assist me in meeting my current financial needs and objectives.
 - There may be a Rider Fee for this Rider, depending on the option I choose, but any Rider Fee will never be more than 1% of the Base annuity's Contract Value, charged annually.
 - The Rider Fee, if any, will be taken annually from the Base Contract Value, and will continue as long as the Rider is active.
 - Any values referred to in this and other documents, other than minimum guaranteed values and the contractual IAV values, are not guarantees and are subject to change.

Owner's Signature
Joint Owner's Signature
Agent's Signature
Date



American Equity Investment Life Insurance Company P.O. Box 71216 Des Moines, Iowa 50325 www.american-equity.com 888-221-1234



P.O. Box 71216 Des Moines, IA 50325 888-221-1234 Fax 515-221-9450 www.american-equity.com

Direct Custodial Transfer Request

(CD's, Qualified, Non-Qualified, Mutual Funds & Qualified Annuities)

Existing Company Phone Number () - Existing Company Address Existing Contract Number City State Zip Investment Vehicle (CD, Mutual Fund, Et Account Type (IRA, Roth IRA, 401(k), Keogh, Etc.) Maturity Date	.)				
City State Zip Investment Vehicle (CD, Mutual Fund, Et	.)				
City State Zip Investment Vehicle (CD, Mutual Fund, Et	.)				
	.)				
	.)				
Account Type (IRA Roth IRA 401(k) Keogh Etc.) Maturity Date Transfer funds immediately					
Account Type (IRA Roth IRA 401(k) Keogh Etc.) Maturity Date III Transter tunds immediately					
☐ Transfer at maturity					
Insured's/Annuitant's Name Annuitant's Social Sec. No.	Annuitant's Social Sec. No.				
Joint Insured's/Annuitant's Name Joint Annuitant's Social Sec. No.					
Owner's Name Owner's Social Sec. No.					
Owner's Name Owner's Social Sec. No.					
Joint Owner's Name Joint Owner's Social Sec. No.					
☐ Contract/CD Enclosed ☐ I have lost, destroyed or mislaid my contract/	CD.				
AUTHORIZATION TO SELL, LIQUIDATE AND TRANSFER FUNDS					
	6				
of my account as listed above to the contract I have established through American Equity Investment Life Insurance Com					
NOTE: A Medallion signature guarantee may be required	ourry.				
Owner's Signature(s) Date Medallion Signature Guarantee By: Name of Bank or Fi	m				
Joint Owner's Signature (if applicable) Date Signature of Officer & Title					
REQUIRED MINIMUM DISTRIBUTION - DIRECT TRANSFER INFORMATION					
My Required Minimum Distribution (RMD) Must complete if client is 70½ or old	er.				
☐ has been taken already for this year. ☐ has not been taken. (Complete form #4083.)					
INFORMATION MUST BE COMPLETED AT TIME OF APPLICATION					
Acceptance By American Equity Investment Life Insurance Company	We agree to accept the transfer described above for the Plan established on behalf of the above named individual.				
Acceptance By American Equity Investment Life Insurance Company We agree to accept the transfer described above for the Plan established on behalf of the above named indivi	ual.				
We agree to accept the transfer described above for the Plan established on behalf of the above named indiving American Equity Investment Life Insurance Company accepts its appointments as successor custodian of the above account and required to the above account and the above account and required to the above account and the a	lual. iests				
Acceptance By American Equity Investment Life Insurance Company We agree to accept the transfer described above for the Plan established on behalf of the above named indivious American Equity Investment Life Insurance Company accepts its appointments as successor custodian of the above account and required the liquidation and transfer of assets indicated above.	lual. iests				
We agree to accept the transfer described above for the Plan established on behalf of the above named indiving American Equity Investment Life Insurance Company accepts its appointments as successor custodian of the above account and required the liquidation and transfer of assets indicated above.	Iual. iests —				
We agree to accept the transfer described above for the Plan established on behalf of the above named indiving American Equity Investment Life Insurance Company accepts its appointments as successor custodian of the above account and required to the above account and the above account and required to the above account and the a	lual. Jests				

AMERICAN EQUITY INVESTMENT LIFE INSURANCE COMPANY

Reference Contract No.

Mailing Address: P.O. Box 9304 Overnight Address: 6000 Westown Pkwy

Des Moines, IA 50306-9304

West Des Moines, IA 50266

Form 4003 12.01.09



P.O. Box 71216 Des Moines, IA 50325 888-221-1234 Fax 515-221-9450 www.american-equity.com

1035 Exchange Request Form

(Non-Qualified Annuities & Life Insurance Policies Only)

Complete One Side Only

	Complete one	Jiue Oilly	
Existing Company	-	-	Phone Number
Existing Company Address			Existing Policy/Contract Number
City	State	Zip	Investment Vehicle
City	Jidle	Σιρ	invesiment venicle
Account Type (Annuity or Life)	Maturity Date		☐ Transfer funds immediately
			☐ Transfer at maturity
Insured's/Annuitant's Name			Annuitant's Social Sec. No.
Joint Insured's/Annuitant's Name			Joint Annuitant's Social Sec. No.
Owner's Name			Owner's Social Sec. No.
Joint Owner's Name			Joint Owner's Social Sec. No.
Policy/Contract Enclosed		☐ I have I	lost, destroyed or mislaid my policy/contract
Full 1035 Exchange			
The Assignor hereby designates American Equity Investment L	_ife Insurance Com	pany as beneficiary	of the above policy/contract.
Equity Investment Life Insurance Company all assignable be contract in exchange for a new policy/contract as described in contract. Assignor and American Equity Investment Life Insurance Comexchange of insurance policies/contracts. Assignor represents this transaction. Assignor represents and agrees that American tax treatment under Internal Revenue Code Section 1035 or assumes no responsibility or liability for the assignor's tax treatment.	n Assignor's applice apany expressly rep and agrees that As a Equity Investment otherwise as a res	resent and recognizesignor has consulted Life Insurance Computer of this transaction	e that the sole purpose of this assignment is to effect and his own tax advisor regarding the tax consequences of cany has made no representations concerning Assignor's on. American Equity Investment Life Insurance Company
Owner's Signature Date		Joint Owner's S	ignature Date
Partial 1035 Exchange			
I understand the Internal Revenue Service may take the position a new life insurance policy or an annuity contract does not acknowledge, and agree that American Equity assumes no lice	qualify as a valid e	exchange under Sec	tion 1035 of the Internal Revenue Code. I understand,
□ \$%			
Owner's Signature Date		Joint Owner's S	ignature Date
Acceptance By Ame We agree to accept the transfer described above for American Equity Investment Life Insurance Company the liquidation and transfer of assets indicated above	r theaccepts its appoi	Plan establ	ished on behalf of the above named individual.
Accepted by (Signature and Title of an authorized off	icer of American	Equity)	Dated
	MAKE CHECK P	PAYABLE TO:	
AMERICAN FOUITY			NCE COMPANY

Reference Contract No. _____

Mailing Address: P.O. Box 9304

Des Moines, IA 50306-9304

Overnight Address: 6000 Westown Pkwy

West Des Moines, IA 50266



P.O. Box 71216 Des Moines, IA 50325 Phone 888-221-1234 Fax 515-221-9450 www.american-equity.com

Important Notice:

Replacement of www.american-equity.com **Life Insurance or Annuities** This document must be signed by the applicant and the producer, if there is one, and a copy left with the applicant.

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases this purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A replacement occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financed purchase.

A financed purchase occurs when the purchase of a new life insurance policy involves the use of funds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, including accumulated dividends, or an existing policy, to pay all or part

of any premium or payment due on the new	policy. A financed p	ourchase is a replacement.	
We want you to understand the affects of requestions and consider the questions on the	or contract. You mand the purchase will respect to the purchase will respe	y be able to make changes to your existing duce the value of your existing policy/cour make your purchase decision and ask that	g policy or contract to meet ontract and may reduce the at you answer the following
terminating your existing policy or con-	tract?		YES NO
2. Are you considering using funds from y	our existing policies	or contracts to pay premiums due on the n	ew policy or contract? YES NO
If the answers to either of the above questice the name of the insurer, the insured, and to source of financing:	•		
INSURER NAME	Contract/ policy #	INSURED/ANNUITANT	Replace(R)/finance(F
1.			
2.			
3.			
Make sure you know the facts. Contact your request, an in-force illustration, policy sum for and retain all sales material used by the are replacing the existing policy or contract	mary or available dis agent in the sales pr	closure documents must be sent to you by	y the existing insurer. Ask
AGENT USE ONLY - I certify that I used of all sales materials with the Applicant, a Applicant on the following date:		a printed copy of any electronically pres	
		Agent Signature	
NOTICE TO APPLICANT - Your agent he of all materials for future reference. If your			portant that you keep copies
I UNDERSTAND THAT THERE MAY EXISTING POLICY OR CONTRACT.	BE A SURRENDEI	R PENALTY OR FEE FOR LIQUIDAT	- <u></u> -
I certify that the responses herein are, to the	best of my knowledg	ge, accurate:	Applicant's initials
Applicant's Signature		Applicant's Printed Name	Date
Agent's Signature		Agent's Printed Name	Date
I do not want this notice read aloud to me.		ts must initial only if they do not want the O HOME OFFICE	notice read aloud.)

A replacement may not be in your best interest, or your decision could be a good one. You should make a careful comparison of the costs and benefits of your existing policy or contract and the proposed policy or contract. One way to do this is to ask the company or agent that sold you your existing policy or contract to provide you with information concerning your existing policy or contract. This may include an illustration of how your existing policy or contract is working now and how it would perform in the future based on certain assumptions. Illustrations should not, however, be used as a sole basis to compare policies or contracts. You should discuss the following with your agent to determine whether replacement or financing your purchase makes sense:

PREMIUMS:

Are they affordable? Could they change?

You're older—are premiums higher for the proposed new policy?

How long will you have to pay premiums on the new policy? On the old policy?

POLICY/CONTRACT VALUES:

New policies usually take longer to build cash values and to pay dividends.

Acquisition costs for the old policy/contract may have been paid; you may incur costs for the new one.

What surrender charges do the policies/contracts have?

You may pay a penalty to transfer funds from an existing policy/contract to the new policy/contract.

What expense and sales charges will you pay on the new policy?

Does the new policy provide more insurance coverage?

INSURABILITY:

If your health has changed since you bought your old policy, the new one could cost you more, or you could be turned down.

You may need a medical exam for a new policy.

Claims on most new policies for up to the first two years can be denied based on inaccurate statements.

Suicide limitations may begin anew on the new coverage.

IF YOU ARE KEEPING THE OLD POLICY AS WELL AS THE NEW POLICY:

How are premiums for both policies being paid?

How will the premiums on your existing policy be affected?

Will a loan be deducted from death benefits?

What values from the old policy are being used to pay premiums?

IF YOU ARE SURRENDERING AN ANNUITY OR INTEREST SENSITIVE LIFE PRODUCT:

Will you pay surrender charges on your old contract?

Will you pay a penalty on the funds transferred into the new policy/contract?

What are the interest rate guarantees for the new contract?

Have you compared the contract charges or other policy/contract expenses?

OTHER ISSUES TO CONSIDER FOR ALL TRANSACTIONS:

What are the tax consequences of buying the new policy/contract?

Is this a tax-free exchange? (See your tax advisor.)

Is there a benefit from favorable "grandfathered" treatment of the old policy/contract under the federal tax code?

Will the existing insurer be willing to modify the old policy/contract?

How does the quality and financial stability of the new company compare with your existing company?

YOU HAVE THE RIGHT TO RETURN THE POLICY OR CONTRACT WITHIN 30 DAYS OF DELIVERY AND RECEIVE AN UNCONDITIONAL FULL REFUND OF ALL PREMIUMS PAID, OR IN THE CASE OF A VARIABLE OR MARKET VALUE ADJUSTED POLICY, A REFUND OF CASH SURRENDER VALUE PROVIDED UNDER THE POLICY/CONTRACT PLUS FEES AND OTHER CHARGES DEDUCTED



P.O. Box 71216 Des Moines, IA 50325 888-221-1234 Fax 515-221-9947 www.american-equity.com

SUITABILITY ACKNOWLEDGEMENT

THE COMPLETION OF THIS SUITABILITY ACKNOWLEDGMENT FORM IS MANDATORY.

This form will assist you and your agent to determine if the American Equity annuity being applied for meets your particular financial situation.

Personal Information

Owner	r/Applicant Full Name	Joint Owner/Applicant Full Name
Owner	r/Applicant Occupation (If retired list former occupation)	Joint Owner/Applicant Occupation
	cial Information Net Worth, excluding home(s) and automobile(s):	
2.3.4.	Approximate Household Annual Income \$\text{\$\exititt{\$\text{\$\}}}\exititt{\$\text{\$\exititt{\$\text{\$\}\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\tex	Over \$100,000
	If no, explain how you cover your monthly live b. Do you anticipate a change in your future inco If yes, please explain: c. Do you anticipate a change in your future expe	ing expenses: me during the surrender charge period? Yes No enses during the surrender charge period? Yes No
5.	Financial Objectives (Check all that apply)	
	☐ Income Tax Deferral	versity of Interest Crediting Strategies crease Return on Assets crease Current Income ovide Lifetime Income fetime Income Benefit Rider
6.	Liquidity a. Do you have sufficient liquid assets in addition Equity annuity for unforeseen events and emer	n to the money you are using to purchase the American regencies? The Yes No Initial
	 b. If you indicated yes on 6(a) please provide the (checking, money market, short-term CDs, storif necessary) c. Did your agent discuss the ways to access your d. Do you anticipate needing more than your pent contract? ☐ Yes ☐ No If yes, please explain: e. Did the agent explain that withdrawals taken in 	approximate amount of liquid assets you have \$

4106 09.11.09

cowledge. By signing below, I acknowledge that its. I acknowledge my agent has fully explained the applicable disclosure statement with my agasituation. I further acknowledge that neither A in advised to consult with my own legal and tax applicant's Signature Statement The provided the Owner/Applicant a copy of the Fale. Also, I have not made any representations of company provided materials. The reviewed the client's financial information and its in the client and objectives based on the informative reviewed government issued photo identificant diffication information provided by the client. Signature	the surrender charges are gent in determining this formerican Equity nor its agadvisor. Product Disclosure for the promises about the future discharge the recordion the client has provided.	mended meets my long-term financial and surrender charge period and I have fixed annuity product is suitable for my gents offer legal or tax advice and that I Date Date product applied for and NAIC's Buyers are value of this contract that differ from an annual product meets the client's ed.
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n Equity and my agent may rely on the informat	tion I have provided here	ein and it is true and accurate to the best
annuity contract:s Statement		
Please share any additional information you con		
Does the owner reside in a nursing home or assis	sted living facility?	☐ Yes ☐ No
Please attach a current annual st	tatement or currer	nt values printout.
a. If "yes", what is the percentage? b. Is this penalty free? □ Yes □ No		
ife insurance policy or contract? \(\subseteq \text{Yes} \) \(\subseteq \text{If "yes" what is the percentage?} \)	No 0/2	
f you answered "yes" to question 9 above, is the		sessed with the liquidation of the existing
a. If yes now long has the policy of cont	ract been in force?	
a. If "yes" how long has the policy or cont		☐ Yes ☐ No
Are you using funds from an existing life insura	nce policy or annuity co	ntract to purchase this annuity contract?
☐ Stocks/Bonds/Mutual Funds	☐ CD's	☐ Fixed Annuity
Checking	☐ Life Insurance	☐ Indexed Annuity
☐ Reverse Mortgage/Home Equity/Refinance	☐ Savings	Variable Annuity
Source of funds to purchase this annuity: (Check	c all that apply)	
a. Do you currently own any other annuitie	es in deferral? If yes, ple	ase give the amount: \$
☐ Certificate of Deposits	☐ Real Estate	
☐ Variable Annuities	☐ Index Annuities	
☐ Stocks/Bonds/Mutual Funds	☐ Fixed Annuities	wing.
Please indicate if you currently own or have eve	r owned any of the follow	wing:
	No Plans to Acc	ess
☐ Income Rider		
Penalty-free Withdrawal 72(t)(q) Income Rider	☐ Annuitization	iuiii Distribution
	□ /2(t)(q) □ 1 P:1	72(4)(-)

INVOLVES DISCONTINUING, MAKING A PARTIAL WITHDRAWAL, REMOVING MONEY, OR CHANGING AN EXISTING POLICY OR CONTRACT, A REPLACEMENT IS OCCURRING.

09.11.09

4106

Form (Rev. October 2007) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

e 2.	Name (as shown on your income tax return)						
on page	Business name, if different from above						
Print or type	Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=p ☐ Other (see instructions) ►	artnership) 🕨		Exempt payee			
	Address (number, street, and apt. or suite no.)	Requester's	name and ad	ddress (optional)			
P Specific	City, state, and ZIP code						
See	List account number(s) here (optional)						
Part	Taxpayer Identification Number (TIN)						
backu	Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident						
	alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.						
	If the account is in more than one name, see the chart on page 4 for guidelines on whoser to enter.	е	Employer ide	entification number			
Part	II Certification	•					

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Signature of U.S. person ▶ Date ▶	provide your correct TIN. See the instructions on page 4.				
	Sign Here		Date ▶		

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States.
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

• The U.S. owner of a disregarded entity and not the entity,

Form W-9 (Rev. 10-2007) Page **2**

• The U.S. grantor or other owner of a grantor trust and not the trust, and

• The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income.
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- 5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
- 3. The IRS tells the requester that you furnished an incorrect TIN, $\,$

- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

For an LLC classified as a partnership or a corporation, enter the LLC's name on the "Name" line and any business, trade, or DBA name on the "Business name" line.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the business name, sign and date the form.

Form W-9 (Rev. 10-2007) Page **3**

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
- 2. The United States or any of its agencies or instrumentalities,
- 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
- 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
- 5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

- 6. A corporation,
- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 - 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
- 12. A common trust fund operated by a bank under section 584(a),
 - 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for	THEN the payment is exempt for	
Interest and dividend payments	All exempt payees except for 9	
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker	
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5	
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 7	

See Form 1099-MISC, Miscellaneous Income, and its instructions.

However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

Form W-9 (Rev. 10-2007) Page **4**

- **3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
- **4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:		Give name and SSN of:	
1.	Individual	The individual	
Two or more individuals (joint account)		The actual owner of the account or, if combined funds, the first individual on the account	
3.	Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²	
a. The usual revocable savings trust (grantor is also trustee)		The grantor-trustee 1	
	b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹	
5.	Sole proprietorship or disregarded entity owned by an individual	The owner ³	
	For this type of account:	Give name and EIN of:	
6.	Disregarded entity not owned by an individual	The owner	
7.	A valid trust, estate, or pension trust	Legal entity ⁴	
8.	Corporate or LLC electing corporate status on Form 8832	The corporation	
9.	Association, club, religious, charitable, educational, or other tax-exempt organization	The organization	
10.	Partnership or multi-member LLC	The partnership	
11.	A broker or registered nominee	The broker or nominee	
12.	Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural	The public entity	

¹List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.consumer.gov/idtheft* or 1-877-IDTHEFT(438-4338).

Visit the IRS website at www.irs.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

program payments

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

²Circle the minor's name and furnish the minor's SSN.

³You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 1.

P.O. Box 71216 Des Moines, IA 50325 888-221-1234 Fax 515-221-9947 www.american-equity.com

FINANCIAL INVENTORY

Current Monthly Income Calculation

Current the state of the current curre		
\$		
\$		

Current Monthly Expense Calculation

\$
\$

Net Worth – not including primary residence, automobiles, personal belongings, such as jewelry or home furnishings

Thet worth - not including primary residence,	automobiles, personal octo	ingings, such as jeweny
Savings Accounts	\$	
Checking accounts		
Cd's, money market accounts		
Securities		
Annuities – not including this purchase		
Real Estate other than primary residence		
Retirement accounts		
Business Value		
Other		
Total Assets		\$
Outstanding loan balances(other than primary	\$	
residential mortgage)		
Other outstanding liabilities		
Total Outstanding Liabilities		\$
Net Worth (Total Assets minus Total		\$
Outstanding Liabilities)		

Liquid Assets – those easily converted to cash, without penalty. Does not include personal belongings such as jewelry, furnishings, vehicles

Savings Accounts, CD's,	\$
Money Market Accounts	
Checking Accounts	
Securities – without deferred sales charges –	
includes stocks, bonds, mutual funds	
Current penalty-free withdrawals from other	
annuities	
Cash Value or Loan amounts from Life	
Insurance	
Other	
Subtotal	\$
_	
Total Liquid Assets (less this annuity)	\$

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