

SOUTHEAST INVESTMENTS, N.C. INC. ANNUITY DISCLOSURE STATEMENT

APPLICANT NAME(S): _____ **REP:** _____
_____ **ANNUITY COMPANY:** _____

INITIAL ALL APPLICABLE REASONS FOR CHOOSING THIS ANNUITY:

_____ BETTER GUARANTEES FOR PRINCIPAL _____ BETTER LIVING BENEFIT OPTIONS
_____ BETTER GUARANTEES FOR INCOME _____ FAMILY PROTECTION THROUGH THE DEATH BENEFIT
_____ BETTER SELECTION OF INVESTMENT CHOICES

I PLAN TO USE THIS ANNUITY FOR THE FOLLOWING: (INITIAL ALL THAT APPLY)

_____ DRAW AN INCOME IMMEDIATELY _____ GROW MY SAVINGS FOR INCOME IN THE FUTURE
_____ ACCUMULATE WEALTH FOR MY BENEFICIARIES _____ TAKE ADVANTAGE OF TAX-DEFERRAL (NQ accounts only)
_____ PARTIALLY FUNDING RETIREMENT _____ OTHER (specify): _____

ACCOUNT FUNDING SOURCE: (INITIAL ALL THAT APPLY)

_____ 401K ROLLOVER _____ SALE OF ASSETS OR PROPERTY (specify assets or property sold):
_____ INCOME FROM EARNINGS _____
_____ INHERITANCE _____ TRANSFER OF FUNDS FROM ANOTHER INVESTMENT
_____ LEGAL/INSURANCE SETTLEMENT _____ OTHER (specify): _____

CLIENT DISCLOSURES: (INITIAL)

I/We have adequate funds for liquidity needs outside this investment. YES _____ NO _____
The surrender period and surrender charges, as well as the fees, of this new policy have been explained to me. YES _____ NO _____
Have you exchanged an annuity within the last 36 months? (if yes, attach explanation) YES _____ NO _____
Does this investment represent over 50% of your net worth or retirement savings? YES _____ NO _____
Are you replacing an existing annuity? YES _____ NO _____

If yes, initial the following:

_____ I/We understand there will be a surrender penalty charge of _____% for surrendering the current annuity from _____ (Company).
_____ The surrender period and surrender charges, as well as the fees, of the old policy have been explained to me.
_____ I/We have reviewed the death benefits of the old and new policies.

FOR BROKER USE ONLY: SUMMARIZE EXPLANATION FOR RECOMMENDATION OF ANNUITY PURCHASE (MANDATORY)

SIGNATURES:

I/We have received a copy of the prospectus for this annuity policy and feel that I/we have adequate funds for liquidity needs outside this investment.

If purchasing this annuity in an IRA or retirement account, I/we acknowledge that the tax deferred accrual feature of the variable annuity is unnecessary because the retirement account already provides this.

I/We hereby acknowledge that I/we received and read the above "Southeast Investments, N.C. Inc. Annuity Disclosure Statement" prior to signing the application for the new annuity contract. I/We acknowledge our agent has reviewed the features, benefits, and charges of this annuity prior to purchase.

I/we acknowledge receipt of the Southeast Investments Best Interest Disclosure as required by SEC Regulation Best Interest.

APPLICANT SIGNATURE _____ **DATE** _____

APPLICANT SIGNATURE _____ **DATE** _____

My signature below attests that the above client(s) initialed reasons for buying or replacing an annuity were discussed with the client and were determined by me to be appropriate for the client(s)

AGENT SIGNATURE _____ **DATE** _____

FIRM PRINCIPAL SIGNATURE _____ **DATE** _____