Life and Annuity Division Annuity New Business Checklist

Protective Life Insurance Company¹
West Coast Life Insurance Company¹
Protective Life and Annuity Insurance Company

AF	PPLICATION					
Customer information completed in its entirety where applicable.						
Beneficiary information completed in its entirety. Please note the following:						
	✓ Beneficiary allocations must equal 100% for both Primary and Contingent Beneficiaries.					
	✓ Percentage and Designation are required for each beneficiary.					
	✓ Any additional beneficiaries not included on the application must be submitted in writing with a					
	signature of the owner(s) and dated.					
	Plan Type. Please note the following:					
	✓ Include the plan type that we are to issue the contract and ensure that it is applicable to the					
	product being sold.					
	✓ Include the amount being submitted as well as any transfer and tax information applicable to this					
	contract.					
	Fund Allocations must equal 100%.					
	Replacement Questions completed in their entirety by both customer and agent.					
	Customer Signature. All owners must sign.					
	✓ Annuitant signature is required if different than the owner(s).					
	✓ Complete Date, City and State fields.					
	Agent Signature. To ensure timely processing, please include the following:					
	✓ Agent's name printed, Agency name, and Agent's phone number.					
	✓ Florida License ID # if applicable.					
SU	JITABILITY FORM					
	This form does not need to be completed if the suitability of this annuity transaction has been approved by a registered principal of your firm.					
RE	PLACEMENT FORM(S)					
	Please complete all applicable Replacement Forms.					
TR	ANSFER / ROLLOVER / EXCHANGE FORM					
	Please complete all applicable forms.					
TR	RUST DOCUMENTATION					
	If the owner is a Trust, we must receive a copy of the Trust Certification form or the first and last page of the trust in order to issue the contract.					
PC	OWER OF ATTORNEY DOCUMENTATION					
	If applicable, Durable POA documentation is required.					

FOR AGENT / BROKER DEALER INFORMATION ONLY. NOT FOR USE WITH CONSUMERS.

"Annuities are issued by Protective Life Insurance Company (PLICO) or West Coast Life Insurance Company (WCL) in all states except New York and in New York by Protective Life & Annuity Insurance Company (PLAICO); securities issued by Investment Distributors, Inc. (IDI) the principal underwriter for registered products issued by PLICO and PLAICO, its affiliates. All companies are located in Birmingham, AL. Product availability and features may vary by state. Each company is solely responsible for the financial obligations accruing under the products it issues. Product guarantees are backed by the financial strength and claims-paying ability of the issuing company."".

¹ Not authorized in New York

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For questions or assistance, please contact Customer Service at **1-800-456-6330**.

Protective Life refers to Protective Life Insurance Company (PLICO) and its affiliates, including Protective Life & Annuity Insurance Company (PLAICO). Life insurance and annuities are issued by PLICO in all states except New York and, in New York, by PLAICO. Securities issued by Investment Distributors, Inc. (IDI), principal underwriter for registered products issued by PLICO and PLAICO, its affiliates. All companies located in Birmingham, AL. Product availability and features may vary by state. Each company is solely responsible for the financial obligations accruing under the products it issues. Product guarantees are backed by the financial strength and claims-paying ability of the issuing company.



INDIVIDUAL VARIABLE ANNUITY APPLICATION

Select Product: X Protective Variable Annuity II B Series

CONTRACT#_

PROTECTIVE LIFE INSURANCE COMPANY

Send Applications to:

Overnight: 2801 Highway 280 South, Birmingham, Alabama 35223 U.S. Mail: P. O. Box 10648, Birmingham, Alabama 35202-0648

(800) 456-6330

	ress is a P.O. Box, please provide a			e Female
				9:
City:	State:	Zip:	SSN/Tax	x ID:
Email Address:			Phone:	
Owner 2 (If applicable.)			Mak	e Female
				e:
	State:			
-		-		x ID:
Email Address:			Pnone:	
Annuitant S	ame as Owner 1	Same as Owner 2		
(If not Owner 1 or 2, comple	,		Male	e Female
				e:
	State:			x ID:
-	State	-		
Email Address.			Filone.	
Beneficiary, if there	is no surviving Owner			
Use Administra	tive Form LAD-1225 to nar	ne or change a benefici	iary any time before t	he death of an owner.
	yment: \$ of Protective Income Manager is po			
•		,		
Funding Source:	Cash		_	Non-Insurance Exchange
	Direct Transfer	_ Direct Rollover	Indi	rect Rollover
Plan Type:	_ Non-Qualified IRA	Roth IRA	Other:	
Complete if an IRA and	d includes new contributions	: \$	(Amount)	(Tax Year)
		\$	(Amount)	(Tax Year)
Replacement:				
	an annuity contract or life in			Yes No
	e or replace an existing ann e company name and contract or p		nce policy?	Yes No
Company 1			Contract or Policy	#
			-	#
Company 3			Contract or Policy	#

An annuity contract is not a deposit or obligation of, nor guaranteed by any bank or financial institution. It is not insured by the Federal Deposit Insurance Corporation or any other government agency, and is subject to investment risk, including the possible loss of principal.

CONTRACT BENEFITS ARE VARIABLE, MAY INCREASE OR DECREASE, AND ARE NOT GUARANTEED AS TO FIXED DOLLAR AMOUNT.

CONTRACT #

ALLOCATE PURCHASE PAYMENTS – Allocation instructions remain in effect until you change them. *Use whole percentages*. 'Purchase Payment' and 'DCA Allocation' percentage totals <u>must</u> equal 100%, each. If using a Model Portfolio, allocate to the Guaranteed Account and <u>one Model Portfolio</u>, only.

If you are purchasing a protected lifetime income benefit your contract allocation is restricted to a <u>single</u> choice from among the following four options.

- 100% to the Janus/Clayton Street Protective Life Dynamic Allocation Series Conservative Sub-Account.
- 100% to the Janus/Clayton Street Protective Life Dynamic Allocation Series Moderate Sub-Account.
- 100% to <u>one</u> of the three permissible "Model Portfolios" (Conservative Growth; Balanced Growth & Income; <u>or</u>
 Balanced Growth).
- Create a portfolio, using: not less than 40% allocation among Category 1 (Conservative) Sub-Accounts; not more than 60% allocation among Category 2 (Moderate) Sub-Accounts; and, not more than 25% allocation among Category 3 (Aggressive) Sub-Accounts. Category 4 Sub-Accounts may not be used in this portfolio.

Dollar Cost Averaging from a DCA Account into one of these allocations is permitted.

Protective Life Guaranteed Account

Purchase Payment		Investment Option				
%		Guaranteed Account – <i><mark>not available</mark> if y</i> o	chase a protected lifetime income benefit			
	. % I	DCA Account 1 – Make DCA transfers on	the day $(1^{st} - 28^{th})$ of the month for months $(3 - 6 \text{ months})$.			
	. %	DCA Account 2 – Make DCA transfers on	the day $(1^{st} - 28^{th})$ of the month for months $(7 - 12 \text{ months})$.			
		Sub-Accounts of the Protective	ve Variable Annuity Separate Account			
		Category	/ 1 - Conservative			
Purchase	DCA					
<u>Payment</u>	<u>Allocation</u>	<u>Manager</u>	Investment Option			
%	%	American Funds	Bond			
%	%	American Funds	U.S. Government/AAA-Rated Securities			
%	%	Fidelity Management & Research	Investment Grade Bond			
%	%	Franklin Templeton Investments	Franklin U.S. Government Securities			
%	%	Goldman Sachs Asset Management	Core Fixed Income			
% %	%	Invesco Advisers	Government Securities			
%	%	Janus	Clayton Street Protective Life Dynamic Allocation Series – Conservative			
%	%	OppenheimerFunds	Government Money			
%	%	PIMCO	Low Duration			
%	%	PIMCO	Short-Term			
%	%	PIMCO	Total Return			
		Catego	ory 2 – Moderate			
%	%	American Funds	Asset Allocation			
%	%	American Funds	Capital Income Builder			
% %	%	Franklin Templeton Investments	Franklin Income			
%	%	Franklin Templeton Investments	Franklin Strategic Income			
%	%	Goldman Sachs Asset Management	Global Trends Allocation			
%	%	Invesco Advisers	Balanced Risk Allocation			
	%	Invesco Advisers	Equity and Income			
% % %	%	Janus	Clayton Street Protective Life Dynamic Allocation Series – Moderate			
%	%	Legg Mason	QS Dynamic Multi-Strategy			
%	%	Lord Abbett	Bond Debenture			
%	%	OppenheimerFunds	Global Strategic Income			
%	%	PIMCO	All Asset			
%	%	PIMCO	Global Diversified Allocation			
%	%	PIMCO	Long-Term U.S. Government			
%	%	PIMCO	Real Return			
%	%	Franklin Templeton Investments	Templeton Global Bond			
		Categor	ry 3 – Aggressive			
%	%	American Funds	Blue Chip Income & Growth			
/ / / / / / / / / / / / / / / / / / /	—— /°	American Funds American Funds	Global Growth			
	—— /°	American Funds American Funds	Global Growth and Income			
%	—— %	American Funds American Funds	Growth			
%	%	American Funds	Growth-Income			
%	%	Fidelity Management & Research	Contrafund®			
%	%	Fidelity Management & Research	Index 500			
		,a.agoo acoodion				

CONTRACT # _____

Sub-Accounts of the Protective Variable Annuity Separate Account (continued)						
Category 3 – Aggressive (continued)						
Purchase Payment	DCA Allocation	<u>Manager</u>	Investment Option			
%		Fidelity Management & Research Franklin Templeton Investments Franklin Templeton Investments Franklin Templeton Investments Goldman Sachs Asset Management Invesco Advisers Invesco Advisers Invesco Advisers Invesco Advisers Invesco Advisers Janus Lord Abbett Lord Abbett OppenheimerFunds OppenheimerFunds OppenheimerFunds Fategory 4 – Not available if you p American Funds American Funds Franklin Templeton Investments	Mid Cap Franklin Mutual Global Discovery Franklin Mutual Shares Franklin Rising Dividends			
%	%	Franklin Templeton Investments	Templeton Growth			
% % %	% % %	Goldman Sachs Asset Management Goldman Sachs Asset Management Goldman Sachs Asset Management Invesco Advisers	Growth Opportunities International Equity Insights Mid Cap Value Global Real Estate			
% % %	% % %	Invesco Advisers Invesco Advisers Legg Mason	Mid Cap Growth Small Cap Equity ClearBridge Mid Cap			
% % %	% % %	Legg Mason Lord Abbett Lord Abbett	ClearBridge Small Cap Growth Growth Opportunities Mid Cap Stock			
% %	% %	OppenheimerFunds Royce & Associates	Global Small-Cap			
		Protective L	ife Model Portfolios			
Purchase <u>Payment</u>	DCA Allocation		Purchase DCA Payment Allocation			
% %	% %	Conservative Growth Balanced Growth and Income	% Balanced Growth% Growth Focus - <u>not available if you</u> purchase a protected lifetime incomebenefit			
I autho	orize the Comp		er Authorization al instructions for transfers among the investment options.			
I autho	I authorize the Company to honor my agent's instructions for transfers among the investment options.					

INDIVIDUAL VARIABLE ANNUITY APPLICATION

PROTECTIVE LIFE INSURANCE COMPANY

CONTRACT#		
CUNIKACI#		

OPTIONAL BENEFITS AND FEATURES - Select the options to be required forms. If Protective Income Manager (with required Portfolia)	
Optional Management Tools Availa	ble Without Charges or Fees
Automatic Purchase Plan - Complete form LAD-1128. Not available	le if Partial Automatic Withdrawals are selected.
Partial Automatic Withdrawals – Complete forms LAD-1147 and	LAD-1133. Not available if Automatic Purchase Plan is selected.
Portfolio Rebalancing - Required, if SecurePay 5 or Protecti	ve Income Manager is selected.
Rebalance to my current Variable Account allocation quart 28 th) of the month.	erly semi-annually annually on the day (1 st -
Optional Benefits Offered with a Sepa	rate, Additional Charge or Fee
Enhanced Death Benefits - <u>Do not</u> select more than one enhance	ed death benefit.
Maximum Anniversary Value Death Benefit - Not available if aMaximum Quarterly Value Death Benefit - Not available if any	· ·
Protected Lifetime Income Benefits – <u>Do not</u> select more than one	e protected lifetime income benefit.
 SecurePay 5 - Not available if any Owner or Annuitant is young Protective Income ManagerSM - Not available if any Covered Pe Please indicate: one covered person or two covered persons, and 	rson is younger than age 60 or older than age 80.
SUITABILITY Did you receive an Annuity Buyers Guide and a current prospectus Do you believe the annuity meets your financial needs and objective	
APPLICANT SIGNATURES I understand this application will be part of the annuity contract. I information it contains is true and correct to the best of my representations and not warranties. If this application includes two Owner on behalf of both Owners.	knowledge and belief. However, these statements are
Variable annuities involve risk, including the possible loss of termination values, when based upon the investment experie guaranteed as to any fixe	ence of the separate account, are variable and are not ed dollar amount.
ANY PERSON WHO KNOWINGLY PRESENTS A FALSE STATE GUILTY OF A CRIMINAL OFFENSE AND SUBJE	
Application signed at: (City & State)	on (Date)
Owner 1: Owner 2:	Annuitant:
Federal law requires the following notice: We may request or obtain Remarks:	* -
PRODUCER REPORT - This section <u>must</u> be completed and signed To the best of your knowledge and belief Does the applicant have any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing annuity contract or life Does this annuity change or replace any existing	o incurance policy?
Type of unexpired government issued photo I.D. used to verify applicant	's identity: #
I have determined this annuity is suitable based on information I obtifinancial and tax status, investment objectives, and other relevant in	tained from the applicant after reasonable inquiry into their
I certify that I have truly and accurately recorded on this application	
Agent Signature:	Print Agent Name:
Agent #	Brokerage:
State Agent License #	Phone #
-	

Life and Annuity Division

Protective Life Insurance Company ¹ West Coast Life Insurance Company 1 **Protective Life and Annuity Insurance Company** Post Office Box 1928 / Birmingham, AL 35201-1928 Toll Free: 800-456-6330 / Fax: 205-268-6479

Beneficiary Information Request

Use this form for initial beneficiary designations.

Owner's Name:		Annuitant's Name:	Annuitant's Name:			
Contract Number:		Owner's SSN/TIN:	Owner's SSN/TIN:			
if non-material owner)	unless instructed otherwise. If a	roceeds will be paid equally to all primary beneficiaries survivi Il primary beneficiaries have predeceased the owner, proceeds wise. If there are no surviving beneficiaries, proceeds will be p	s will be paid to the	named		
BENEFICIARY INFOR	RMATION:					
Beneficiary Type:	Name:	Social Security Number:				
(select one)	Address:					
Primary		Telephone Number:				
□ Contingent	Relationship to Owner:	(select one) Spouse Non-spouse	Percentage:	%		
Beneficiary Type:	Name:	Social Security Number:				
(select one)	Address:					
Primary	Date of Birth:	Telephone Number:				
Contingent	Relationship to Owner:	(select one) Spouse Non-spouse	Percentage:	%		
Beneficiary Type:	Name:	Social Security Number:				
(select one)	Address:					
Primary			Telephone Number:			
Contingent	·	(select one) Spouse Non-spouse				
Beneficiary Type:	Name:	Social Security Number:				
(select one)	Address:					
Primary		Telephone Number:				
□ Contingent	Relationship to Owner:	(select one) Spouse Non-spouse	Percentage:	%		
Beneficiary Type:	Name:	Social Security Number:				
(select one)	Address:					
Primary	Date of Birth:	Telephone Number:				
□ Contingent	Relationship to Owner:	(select one) Spouse Non-spouse	Percentage:	%		
Beneficiary Type:	Name:	Social Security Number:				
(select one)	Address:					
Primary		Telephone Number:				
Contingent	Relationship to Owner:	(select one) Spouse Non-spouse	Percentage:	%		
SPECIAL INSTRUCTI	<u>ONS:</u>					
SIGNATURES:						
Owner's Name (please print)		Owner's Signature	Date			
Joint Owner's Name (p	please print)	Joint Owner's Signature	Date			
1 Not authorized in	n New York	Page 1 of 1	LAD-1225 R:7/13			

NAIC Buyer's Guide for Deferred Annuities

It's important that you understand how annuities can be different from each other so you can choose the type of annuity that's best for you. The purpose of this Buyer's Guide is to help you do that. This Buyer's Guide isn't meant to offer legal, financial, or tax advice. You may want to consult independent advisors that specialize in these areas.

This Buyer's Guide is about deferred annuities in general and some of their most common features. The annuity you select may have unique features this Guide doesn't describe. It's important for you to carefully read the material you're given or ask your annuity salesperson, especially if you're interested in a particular annuity or specific annuity features.

This Buyer's Guide includes questions you should ask the insurance company or the annuity salesperson (the agent, producer, broker, or advisor). Be sure you're satisfied with the answers before you buy an annuity.

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What Is an Annuity?

An annuity is a contract with an insurance company. All annuities have one feature in common, and it makes annuities different from other financial products. With an annuity, the insurance company promises to pay you income on a regular basis for a period of time you choose—including the rest of your life.

When Annuities Start to Make Income Payments

Some annuities begin paying income to you soon after you buy it (an **immediate** annuity). Others begin at some later date you choose (a **deferred** annuity).

How Deferred Annuities Are Alike

There are ways that most deferred annuities are alike.

- They have an accumulation period and a payout period. During the accumulation period, the
 value of your annuity changes based on the type of annuity. During the payout period, the annuity
 makes income payments to you.
- They offer a basic death benefit. If you die during the accumulation period, a deferred annuity with a basic death benefit pays some or all of the annuity's value to your survivors (called beneficiaries) either in one payment or multiple payments over time. The amount is usually the greater of the annuity account value or the minimum guaranteed surrender value. If you die after you begin to receive income payments (annuitize), your chosen survivors may not receive

Sources of Information

Contract: The legal document between you and the insurance company that binds both of you to the terms of the agreement.

Disclosure: A document that describes the key features of your annuity, including what is guaranteed and what isn't, and your annuity's fees and charges. If you buy a variable annuity, you'll receive a prospectus that includes detailed information about investment objectives, risks, charges, and expenses.

Illustration: A personalized document that shows how your annuity features might work. Ask what is guaranteed and what isn't and what assumptions were made to create the illustration.

anything *unless*: 1) your annuity guarantees to pay out at least as much as you paid into the annuity, or 2) you chose a payout option that continues to make payments after your death. For an extra cost, you may be able to choose enhanced death benefits that increase the value of the basic death benefit.

- You usually have to pay a charge (called a surrender or withdrawal charge) if you take some or all of your money out too early (usually before a set time period ends). Some annuities may not charge if you withdraw small amounts (for example, 10% or less of the account value) each year.
- Any money your annuity earns is tax deferred. That
 means you won't pay income tax on earnings until
 you take them out of the annuity.
- You can add features (called riders) to many annuities, usually at an extra cost.
- An annuity salesperson must be licensed by your state insurance department. A person selling a variable annuity also must be registered with FINRA¹ as a representative of a broker/dealer that's a FINRA member. In some states, the state securities department also must license a person selling a variable annuity.

^{1.} FINRA (Financial Industry Regulatory Authority) regulates the companies and salespeople who sell variable annuities.

- Insurance companies sell annuities. You want to buy from an insurance company that's financially sound. There are various ways you can research an insurance company's financial strength. You can visit the insurance company's website or ask your annuity salesperson for more information. You also can review an insurance company's rating from an independent rating agency. Four main firms currently rate insurance companies. They are A.M. Best Company, Standard and Poor's Corporation, Moody's Investors Service, and Fitch Ratings. Your insurance department may have more information about insurance companies. An easy way to find contact information for your insurance department is to visit www.naic.org and click on "States and Jurisdictions Map."
- Insurance companies usually pay the annuity salesperson after the sale, but the payment doesn't
 reduce the amount you pay into the annuity. You can ask your salesperson how they earn money
 from the sale.

How Deferred Annuities Are Different

There are differences among deferred annuities. Some of the differences are:

- Whether you pay for the annuity with one or more than one payment (called a premium).
- The types and amounts of the fees, charges, and adjustments. While almost all annuities have some fees and charges that could reduce your account value, the types and amounts can be different among annuities. Read the Fees, Charges, and Adjustments section in this Buyer's Guide for more information.
- Whether the annuity is a fixed annuity or a variable annuity. How the value of an annuity changes
 is different depending on whether the annuity is fixed or variable.

Fixed annuities guarantee your money will earn at least a minimum interest rate. Fixed annuities may earn interest at a rate higher than the minimum but only the minimum rate is guaranteed. The insurance company sets the rates.

Fixed indexed annuities are a type of fixed annuity that earns interest based on changes in a market index, which measures how the market or part of the market performs. The interest rate is guaranteed to never be less than zero, even if the market goes down.

Variable annuities earn investment returns based on the performance of the investment portfolios, known as "subaccounts," where you choose to put your money. The return earned in a variable annuity isn't guaranteed. The value of the subaccounts you choose could go up or down. If they go up, you could make money. But, if the value of these subaccounts goes down, you could lose money. Also, income payments to you could be less than you expected.

Some annuities offer a premium bonus, which usually is a lump sum amount the insurance company adds to your annuity when you buy it or when you add money. It's usually a set percentage of the amount you put into the annuity. Other annuities offer an interest bonus, which is an amount the insurance company adds to your annuity when you earn interest. It's usually a set percentage of the interest earned. You may not be able to withdraw some or all of your premium bonus for a set period of time. Also, you could lose the bonus if you take some or all of the money out of your annuity within a set period of time.

How Does the Value of a Deferred Annuity Change?

Variable Annuities

Money in a variable annuity earns a return based on the performance of the investment portfolios, known as "subaccounts," where you choose to put your money. Your investment choices likely will include subaccounts with different types and levels of risk. Your choices will affect the return you earn on your annuity. Subaccounts usually have no guaranteed return, but you may have a choice to put some money in a fixed interest rate account, with a rate that won't change for a set period.

The value of your annuity can change every day as the subaccounts' values change. If the subaccounts' values increase, your annuity earns money. But there's no guarantee that the values of the subaccounts will increase. If the subaccounts' values go down, you may end up with less money in your annuity than you paid into it.

An insurer may offer several versions of a variable deferred annuity product. The different versions usually are identified as **share classes**. The key differences between the versions are the fees you'll pay every year you own the annuity. The rules that apply if you take money out of the annuity also may be different. Read the prospectus carefully. Ask the annuity salesperson to explain the differences among the versions.

What Other Information Should You Consider?

Fees, Charges, and Adjustments

Fees and charges reduce the value of your annuity. They help cover the insurer's costs to sell and manage the annuity and pay benefits. The insurer may subtract these costs directly from your annuity's value. Most annuities have fees and charges but they can be different for different annuities. Read the contract and disclosure or prospectus carefully and ask the annuity salesperson to describe these costs.

A surrender or withdrawal charge is a charge if you take part or all of the money out of your annuity during a set period of time. The charge is a percentage of the amount you take out of the annuity. The percentage usually goes down each year until the surrender charge period ends. Look at the contract and the disclosure or prospectus for details about the charge. Also look for any waivers for events (such as a death) or the right to take out a small amount (usually up to 10%) each year without paying the charge. If you take all of your money out of an annuity, you've surrendered it and no longer have any right to future income payments.

Annuity Fees and Charges

Contract fee – A flat dollar amount or percentage charged once or annually.

Percentage of purchase payment – A front-end sales load or other charge deducted from each premium paid. The percentage may vary over time.

Premium tax – A tax some states charge on annuities. The insurer may subtract the amount of the tax when you pay your premium, when you withdraw your contract value, when you start to receive income payments, or when it pays a death benefit to your beneficiary.

Transaction fee – A charge for certain transactions, such as transfers or withdrawals.

Mortality and expense (M&E) risk charge – A fee charged on variable annuities. It's a percentage of the account value invested in subaccounts.

Underlying fund charges – Fees and charges on a variable annuity's subaccounts; may include an investment management fee, distribution and service (12b-1) fees, and other fees. Some annuities have a Market Value Adjustment (MVA). An MVA could increase or decrease your annuity's account value, cash surrender value, and/or death benefit value if you withdraw money from your account. In general, if interest rates are *lower* when you withdraw money than they were when you bought the annuity, the MVA could *increase* the amount you could take from your annuity. If interest rates are *higher* than when you bought the annuity, the MVA could *reduce* the amount you could take from your annuity. Every MVA calculation is different. Check your contract and disclosure or prospectus for details.

How Annuities Make Payments

Annuitize

At some future time, you can choose to **annuitize** your annuity and start to receive guaranteed fixed income payments for life or a period of time you choose. After payments begin, you can't take any other money out of the annuity. You also usually can't change the amount of your payments. For more information, see "Payout Options" in this Buyer's Guide. If you die before the payment period ends, your survivors may not receive any payments, depending on the payout option you choose.

Full Withdrawal

You can withdraw the cash surrender value of the annuity in a lump sum payment and end your annuity. You'll likely pay a charge to do this if it's during the surrender charge period. If you withdraw your annuity's cash surrender value, your annuity is cancelled. Once that happens, you can't start or continue to receive regular income payments from the annuity.

Partial Withdrawal

You may be able to withdraw *some* of the money from the annuity's cash surrender value without ending the annuity. Most annuities with surrender charges let you take out a certain amount (usually up to 10%) each year without paying surrender charges on that amount. Check your contract and disclosure or prospectus. Ask your annuity salesperson about other ways you can take money from the annuity without paying charges.

Living Benefits for Variable Annuities

Variable annuities may offer a benefit at an extra cost that guarantees you a minimum account value, a minimum lifetime income, or minimum withdrawal amounts regardless of how your subaccounts perform. See "Variable Annuity Living Benefit Options" at right. Check your contract and disclosure or prospectus or ask your annuity salesperson about these options.

Variable Annuity Living Benefit Options

Guaranteed Minimum
Accumulation Benefit (GMAB) —
Guarantees your account value will
equal some percentage (typically
100%) of premiums less withdrawals,
at a set future date (for example, at
maturity). If your annuity is worth
less than the guaranteed amount at
that date, your insurance company
will add the difference.

Guaranteed Minimum Income Benefit (GMIB) – Guarantees a minimum lifetime income. You usually must choose this benefit when you buy the annuity and must annuitize to use the benefit. There may be a waiting period before you can annuitize using this benefit.

Guaranteed Lifetime Withdrawal Benefit (GLWB) – Guarantees you can make withdrawals for the rest of your life, up to a set maximum percentage each year.

How Annuities Are Taxed

Ask a tax professional about your individual situation. The information below is general and should not be considered tax advice.

Current federal law gives annuities special tax treatment. Income tax on annuities is deferred. That means you aren't taxed on any interest or investment returns while your money is in the annuity. This isn't the same as tax-free. You'll pay ordinary income tax when you take a withdrawal, receive an income stream, or receive each annuity payment. When you die, your survivors will typically owe income taxes on any death benefit they receive from an annuity.

There are other ways to save that offer tax advantages, including Individual Retirement Accounts (IRAs). You can buy an annuity to fund an IRA, but you also can fund your IRA other ways and get the same tax advantages. When you take a withdrawal or receive payments, you'll pay ordinary income tax on all of the money you receive (not just the interest or the investment return). You also may have to pay a 10% tax penalty if you withdraw money before you're age 59½.

Payout Options

You'll have a choice about how to receive income payments. These choices usually include:

- · For your lifetime
- For the longer of your lifetime or your spouse's lifetime
- · For a set time period
- For the longer of your lifetime or a set time period

Finding an Annuity That's Right for You

An annuity salesperson who suggests an annuity must choose one that they think is right for you, based on information from you. They need complete information about your life and financial situation to make a suitable recommendation. Expect a salesperson to ask about your age; your financial situation (assets, debts, income, tax status, how you plan to pay for the annuity); your tolerance for risk; your financial objectives and experience; your family circumstances; and how you plan to use the annuity. If you aren't comfortable with the annuity, ask your annuity salesperson to explain why they recommended it. Don't buy an annuity you don't understand or that doesn't seem right for you.

Within each annuity, the insurer *may* guarantee some values but not others. Some guarantees may be only for a year or less while others could be longer. Ask about risks and decide if you can accept them. For example, it's possible you won't get all of your money back or the return on your annuity may be lower than you expected. It's also possible you won't be able to withdraw money you need from your annuity without paying fees or the annuity payments may not be as much as you need to reach your goals. These risks vary with the type of annuity you buy. All product guarantees depend on the insurance company's financial strength and claims-paying ability.

Questions You Should Ask

- Do I understand the risks of an annuity? Am I comfortable with them?
- · How will this annuity help me meet my overall financial objectives and time horizon?
- Will I use the annuity for a long-term goal such as retirement? If so, how could I
 achieve that goal if the income from the annuity isn't as much as I expected it to be?
- What features and benefits in the annuity, other than tax deferral, make it appropriate for me?
- . Does my annuity offer a guaranteed minimum interest rate? If so, what is it?
- If the annuity includes riders, do I understand how they work?
- Am I taking full advantage of all of my other tax-deferred opportunities, such as 401(k)s, 403(b)s, and IRAs?
- Do I understand all of the annuity's fees, charges, and adjustments?
- Is there a limit on how much I can take out of my annuity each year without paying a surrender charge? Is there a limit on the total amount I can withdraw during the surrender charge period?
- Do I intend to keep my money in the annuity long enough to avoid paying any surrender charges?
- Have I consulted a tax advisor and/or considered how buying an annuity will affect my tax liability?
- How do I make sure my chosen survivors (beneficiaries) will receive any payment from my annuity if I die?

If you don't know the answers or have other questions, ask your annuity salesperson for help.

When You Receive Your Annuity Contract

When you receive your annuity contract, carefully review it. Be sure it matches your understanding. Also, read the disclosure or prospectus and other materials from the insurance company. Ask your annuity salesperson to explain anything you don't understand. In many states, a law gives you a set number of days (usually 10 to 30 days) to change your mind about buying an annuity after you receive it. This often is called a **free look** or **right to return** period. Your contract and disclosure or prospectus should prominently state your free look period. If you decide during that time that you don't want the annuity, you can contact the insurance company and return the contract. Depending on the state, you'll either get back all of your money or your current account value.

P.O. Box 10648

Birmingham, AL 35202-0648 Phone: 1-800-456-6330

OUT-OF-STATE VERIFICATION

"Ap	"Application State" is the state where the owner signs the application and where the contract is solicited and delivered.						
Owner/Entity Name SSN/TIN							
Anı	nuitant Name	SSN					
1.	REASON FOR EXCEPTION (Select one.) The applicant has a residence address in the state where the product is being solicited.						
	The applicant works or has a business address in the state where the product is being	solicited.					
	The applicant is an existing customer or the producer has an existing relationship with twhere the product is being solicited.	the owner in the state					
	The applicant is a relative of the producer who is licensed in the state where the producer	ct is being solicited.					
	The owner is not the annuitant and the application was signed in the annuitant's state of	of residence.					
	This sale is to a New York resident and complies with New York laws for issuing contra	cts in a non-resident state.					
2.	ACKNOWLEDGEMENT AND SIGNATURE						
In c	connection with the above referenced application, the undersigned acknowledges and af	firms:					
A.	All communications, solicitation and negotiation of the application occurred in the Application	cation State.					
В.	The application was signed by the owner and the producer in the Application State.						
C.	The owner will take delivery of the contract issued in the Application State.						
D.	The applicable Insurer will rely on this verification in issuing a contract under the applica-	ation.					
E.	I am properly licensed and appointed in the state where the applicant/owner has a residuely (Please check with your agency or state laws to see if dual registration is required.)	dent address.					
F.	I am also properly licensed and appointed in the state where the solicitation was made, and where the contract will be delivered.	the application was taken,					
G.	I have advised the applicant/owner of the differences (if any) between the product as apowner's primary state of residence or place of business, and the product as approved in execution of application and contract issue.						
	I hereby represent and warrant to the Company that, after conducting a reasonable inquiry into the validity of the representations set forth herein, the representations set forth herein are true and correct to the best of my knowledge.						
Pro	oducer Signature	Date					

¹ Not Authorized in New York

² Authorized to sell in New York

Life and Annuity Division

Request for Transfer or Exchange of Assets

Protective Life Insurance Company ¹
West Coast Life Insurance Company ¹
Protective Life and Annuity Insurance Company
Post Office Box 10648 / Birmingham, AL 35202-0648
Toll Free: 800-456-6330 / Fax: 205-268-3151

Existing Protective Contract Number: _____ (for additional payments only) ☐ Check here and complete Box 4 if this is being submitted for a Rate Lock only. (If Rate Lock request is for a CD, you **must** include proof of maturity from the Financial Institution.) Please do not select this option for the Protective Indexed Annuity, because the interest crediting elements for that product are determined as of the date the contract is purchased. Complete this form to transfer assets to Protective Life Insurance Company, West Coast Life Insurance Company or Protective Life and Annuity Insurance Company (each, the "Company") for the issuance of a new annuity contract. **EXISTING ACCOUNT, CONTRACT OR POLICY TO BE TRANSFERRED** Company Name Telephone Number Company (Overnight) Address Contract/Account Owner's Name Contract/Account Number Owner's SSN/Tax ID The contract is: ■ attached ■ lost or destroyed ☐ Please check this box if the existing contract being surrendered is a Fixed Annuity. (If box is checked, and your new Protective Life annuity is being issued in the state of Nevada, please complete form A-1128-NEV-Annuity.) **EXISTING ACCOUNT, CONTRACT OR POLICY TO BE TRANSFERRED** Non-Qualified: Qualified: ■ 1035 Exchange Transfer Type: Plan Type: □ IRA ■ Trustee Transfer ■ Non-1035 Exchange □ CD ■ Mutual Fund □ 401(k) ■ Roth IRA ■ Direct Rollover ☐ Mutual Fund ☐ 403(b)/TSA ■ Bank CD ■ Other Non-1035 Exchanges □ Other _____ □ Other **Proposed Plan Type:** ■ Non-Qual □ IRA ☐ Roth IRA TRANSFER INSTRUCTIONS 1. Amount to be transferred: ☐ Complete: Liquidate and transfer all assets in my account, contract or policy ☐ Partial: Liquidate and transfer assets totaling \$ 2. When should transfer occur: ■ Immediately ☐ Upon maturity date of / / (mm/dd/yy) 3. Current estimated value of the assets to be transferred are \$ 4. RATE LOCK □ I wish to lock in the interest rate that is in effect when this signed form is received by the Company. If this box is not checked, you will receive the interest rate in effect on the day we receive the transferred amounts. (Please do not select this option for the Protective Indexed Annuity, because the interest crediting elements for that product are determined as of the date the contract is purchased.)

¹ Not authorized in New York

Complete 1035 Exchange: I hereby make a complete and absolute assignment and transfer all rights, title and interest of every nature in the above contract to the accepting insurance company indicated below.

Partial 1035 Exchange: I hereby direct the issuer of the above-referenced existing annuity contract to process a partial 1035 exchange to the accepting insurance company indicated below. I intend for this transaction to qualify as a tax-free exchange for Federal income tax purposes.

Based on our understanding of IRS guidance in Rev. Proc. 2011-38, if a contract is involved in a tax-free partial exchange under Internal Revenue Code section 1035 that is completed on or after October 24, 2011, and an amount is withdrawn from or received in surrender of either contract within 180 days of the exchange, the IRS will apply general tax principles to determine the substance, and hence the treatment of the partial exchange and the subsequent withdrawal or surrender. Such a withdrawal or surrender could affect how the partial exchange and the withdrawal or surrender is reported to you and the IRS.

For Other Transfers: Unless it is noted above to hold for a future date, I request the surrendering company to immediately complete the transfer or rollover. Do not withhold any amount for taxes from the proceeds.

SIGNATURES:						
Owner's Signature		Da	ate	Joint Owner's S	ignature	Date
Annuitant's Signatu	re	Da	ate	_		
described above.	EPTA	E ONLY NCE: The Company wompany has received an				
transaction. Authorized Signatu	re		tle			 Date
SETTLEMENT: PI	ease	make check payable for th	he proc	eeds and mail to:		
	0	Protective Life Insurance Protective Life and Anni West Coast Life Insurar	uity Ins	urance Company (Ne	ew York Only)	
Mailing Address:	Attr	Box 10648 n: 3-1 Annuity New Busine mingham, AL 35202-0648	ess	Overnight Address:	2801 Highway 280 Sou Attn: 3-1 Annuity New Birmingham, AL 35223	Business

PROTECTIVE LIFE INSURANCE COMPANY

P.O. Box 10648 • Birmingham, AL 35202-0648 Telephone: 1-800-456-6330

IMPORTANT NOTICE: REPLACEMENT OF LIFE INSURANCE OR ANNUITIES

This document must be signed by the applicant and the insurance producer/agent, 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 life insurance policy or annuity contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing life insurance policy or annuity contract, or an existing life insurance policy or annuity 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 life insurance policy values, including accumulated dividends, of an existing life insurance policy, to pay all or part of any premium or payment due on the new life insurance policy. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interests. You will pay acquisition costs and there may be surrender costs deducted from your life insurance policy or annuity contract. You may be able to make changes to your existing life insurance policy or annuity contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing life insurance policy and may reduce the amount paid upon the death of the insured.

We want you to understand the effects of replacements and ask that you answer the following questions and consider the questions on the back of this form.

1. Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the

	insurer, or otherwis	se terminating your existing life insuranc	e policy or annuity contr	act? ☐ Yes ☐ No			
	Are you considering using funds from your existing policies or annuity contracts to pay premiums due on the new life insurance policy or annuity contract? \Box Yes \Box No						
you polid	are contemplating by or annuity contra	to either of the above questions, list eac replacing (include the name of the insur act number if available) and whether ea source of financing:	er, the insured or annuit	tant, and the life insurance			
	INCLIDED	ANNUITY CONTRACT	INSURED	REPLACED (R)			
	INSURER NAME	OR LIFE INSURANCE POLICY #	OR ANNUITANT	OR FINANCING (F)			
1.							
2.							
3.							
abo polic all s	ut the old life insur by summary or ava	he facts. Contact your existing compartance policy or annuity contract. If you ilable disclosure documents must be sell by the insurance producer/agent in the	request one, an in-force on to you by the existing	e illustration, life insurance insurer. Ask for and keep			
The	existing life insura	nce policy or annuity contract is being re	placed because				
I cei	tify that the respon	ses herein are, to the best of my knowle	edge, accurate:				
Арр	licant's Signature a	and Printed Name	Date				
Insu	rance Producer's/A	Agent Signature and Printed Name	Date				

I do not want this notice read aloud to me. ____ (Applicants must initial only if they do not want the 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 life insurance policy or annuity contract and the proposed life insurance policy or annuity contract. One way to do this is to ask the company or insurance producer/agent that sold you your existing life insurance policy or annuity contract to provide you with information concerning your existing life insurance policy or annuity contract. This may include an illustration of how your existing life insurance policy or annuity 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 annuity 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 life insurance policy?

How long will you have to pay premiums on the new life insurance policy? On the old life insurance policy? POLICY VALUES:

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

Acquisition costs for the old life insurance policy may have been paid; you will incur costs for the new one.

What surrender charges do the policies have?

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

Does the new life insurance policy provide more insurance coverage?

INSURABILITY:

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

You may need a medical exam for a new life insurance 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 coverage.)

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

How are premiums for both policies being paid?

How will the premiums on your existing life insurance policy be affected?

Will a loan be deducted from death benefits?

What values from the old life insurance 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 annuity contract?

What are the interest rate guarantees for the new annuity contract?

Have you compared the annuity contract charges or other life insurance policy expenses?

OTHER ISSUES TO CONSIDER FOR ALL TRANSACTIONS:

What are the tax consequences of buying the new life insurance policy?

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

Is there a benefit from favorable "grandfathered" treatment of the old life insurance policy under the Federal Internal Revenue Tax Code?

Will the existing insurer be willing to modify the old life insurance policy?

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

PROTECTIVE LIFE INSURANCE COMPANY

P.O. Box 10648 Birmingham, AL 35202-0648 Telephone: 1-800-456-6330

SALES LITERATURE CERTIFICATION FORM

I certify that I used only insurer-approved sales materials and copies of all sales materials used were left with the applicant.

Producer's Signature, Printed Name & Date

Life and Annuity Division

Protective Life Insurance Company¹ West Coast Life Insurance Company¹

Protective Life and Annuity Insurance Company

Toll Free: 800-456-6330 / Fax: 205-268-6479

Post Office Box 1928 / Birmingham, AL 35201-1928

Pre-Determined Death Benefit Payout Election Form

Owner's Name:		Contract Number:				
necessary to comply with applicable law	vs and regulations in After we receive and	reserves the right to modify or disregard effect at the time of the Owner's death (clacknowledge this form, a copy will be rous for special cases.)	or the Annuitant's			
		TE: This form does not change your curred designation or this election will have no	•			
Beneficiary Name:		Date of Birth:				
Address & Telephone No:						
Relationship:	Percentage:	Social Security No:				
Beneficiary Type: Primary	☐ Contingent					
The Beneficiary named may take up (Whole percentages only) The balar		np sum withdrawal immediately upon prosignated below.	oof of death.			
3. Apply this option to the remaining p ☐ Payments guaranteed for		enefit payable to the Beneficiary named a	above:			
☐ Payments for a Fixed Amount \$ _	(Fixed a	mount payments may not be made for lest to adjust the payment amount to meet the				
☐ Payments for the Beneficiary's life	etime.					
☐ Life with Cash Refund (not available)	lable with Single Pre	emium Whole Life products)				
☐ Life with Installment Refund (no	ot available with Single Premium Whole Life products)					
☐ Payments for the Beneficiary's lif	etime and guarantee	d for years. (5 - 30 years)*				
4. Payment Mode (Please select one):	☐ Monthly	☐ Semi-Annually				
	☐ Quarterly	☐ Annually				
Beneficiary's life expectancy, we wil	ll adjust the payout p	pectancy. If the selected payout period exercion to the longest allowable period. (If terly, semi-annually or annually at the C	^c monthly			
•	fy this election excep	y to act on this election. I understand that the Company may modify or disregard a effect at the time of Owner's death.				
Owner's Signature	Date	Spouse or Joint Owner's Signature	Date			
Registrar	Date Recorded					
this cancellation removes any pre-deter	mined death benefit	pect to the Beneficiary named above. I/payout option election made for this Beneficiary named above and the payout option may now be made on a new	eficiary prior to			
Owner's Signature	Date	Spouse or Joint Owner's Signature	Date			
Registrar	Date Recorded					

Life and Annuity Division

Protective Life Insurance Company¹ West Coast Life Insurance Company¹ Protective Life and Annuity Insurance Company Post Office Box 1928 / Birmingham, AL 35201-1928

Toll Free: 800-456-6330 / Fax: 205-268-6479

Telephone Withdrawal Authorization

Owner's Name:	Contract Number:
and mailed to th either owner, an Power of Attorn from the broker We will verify y	Checks issued for withdrawals requested over the telephone will always be made payable to the owner e owner's address according to our records. Requests on contracts owned jointly may be made by d will be made payable to both owners, if owners share a common address of record. A party with ey (POA) will be allowed to make a request as an owner. Requests on custodial accounts must come of record, and checks will be made payable to and mailed to the broker / dealer. Our date of birth and social security (or tax id) number prior to processing a withdrawal request. We
• •	procedures to confirm that telephone instructions are genuine. We will not be liable for losses or from telephone instructions reasonably believed to be genuine.
1. We must rece	eive this signed form before we will honor a telephone withdrawal request.
•	ithdrawals are allowed from fixed, indexed and variable annuities, and may be subject to a surrender or a market value adjustment, according to the terms of your contract.
withdrawal n	m telephone withdrawal is 25% of your current contract value up to \$50,000.00. The allowable hay be further limited according to the minimum required remaining contract value, if applicable, as your contract.
4. Withdrawals specified.	from your annuity contract will be taken pro-rata from the investment options unless otherwise
5. Full surrende	ers must be requested in writing.
6. Automatic w	ithdrawals must be requested in writing, and may not be available on all products.
_	ents are not authorized to make a telephone withdrawal requests on behalf of an owner unless the t is the owner and custodian.
	with a SecurePay rider, an Excess Withdrawal during the Benefit Period may significantly reduce or value of the SecurePay benefit.
	N - We reserve the right to modify, suspend, or terminate telephone withdrawal privileges at any time n an individual case basis.
ELECTION:	☐ I/We wish to authorize telephone withdrawals. I/we have read and agree to the terms and conditions specified on this form.
	☐ I / We wish to revoke telephone withdrawals.

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IMPORTANT FOR WITHDRAWAL OR SURRENDER REQUESTS FROM A CONTRACT INVOLVED IN A TAX FREE PARTIAL EXCHANGE UNDER INTERNAL REVENUE SECTION 1035.
Please consult your tax advisor about whether a withdrawal from, or surrender of, a contract involved in partial exchange could cause the exchange to be treated as a taxable distribution or have other adverse federal income tax consequences.

For Contracts Involved in a Partial Exchange on or after October 24, 2011

¹ Not authorized in New York.

Based on our understanding of IRS guidance in Rev. Proc 2011-38, if a contract is involved in a tax-free partial exchange under Internal Revenue Code section 1035 that is completed on or after October 24, 2011, and an amount is withdrawn from or received in surrender of either contract within 180 days of the exchange, the IRS will apply general tax principles to determine the substance, and hence the treatment of the partial exchange and the subsequent withdrawal or surrender. Such a withdrawal or surrender could affect how the partial exchange and the withdrawal or surrender is reported to you and the IRS.

SIGNATURES - By signing below I aut	thorize the Com	pany to act on the instructions indicated a	bove.
Owner's Signature	Date	Joint Owner's Signature	Date
Irrevocable Beneficiary's Signature	Date		

Page 2 of 2

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OWNER MUST COMPLETE AND SUBMIT APPROPRIATE TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION OR W-8 (Foreign Individual or Entity) WITH REQUEST. SEE BELOW FOR INFORMATION ON WHICH FORM TO COMPLETE

REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION – OWNER IS:

- 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)

Other Important Information For U.S. Citizens – If you are a U.S. Citizen and reside outside of the United States, you may not elect out of Federal Withholding. We are required to withhold at least 10% federal withholding on the taxable income of any distribution.

W-8BEN Certificate of Foreign Status of Beneficial Owner for US Tax Withholding and Reporting – owner is:

• An individual that is not a U.S. citizen or U.S. resident alien and is not required to complete W-8BEN-E (for an entity); W-8ECI, 8233, or W-8IMY

The Taxpayer Identification Number and Certification has been included with this form request. Taxpayer Identification Number and Certification form and W-8BEN are also available on our forms site at www.myaccount.protective.com.

For any other applicable forms go to www.irs.gov. Consult your tax professional if neither of these situations pertain to you.

Life and Annuity Division

SecurePay Benefit Election

Protective Life Insurance Company ¹ Protective Life and Annuity Insurance Company Post Office Box 1928 Birmingham, AL 35201-1928

Toll Free: 800-456-6330 / Fax: 205-268-6408

Owner's Name:				Contract Numb	per:
Instruction	ons:				
				contract's Benefit Period.	Please refer to your Contract
	I want to start	my Partial Auton	natic Withdrawal		
	I want to mak	e a change to my	existing Withdrawa	al	
	I want to cand	cel my existing Wi	thdrawal		
	I want to take	a One-Time With	drawal in the amo	unt of \$	_
Payout O	option:				
	Single Payout	t (based on t	he owner's life only	/)	
		•	•	,	ner or the oldest joint owner.
	Joint Payout	(based on t	he owner and spou	use's life)	
	-	is elected please	•	,	
	, , ,	·	•		
	Covered Pers	on 1	Date of Birth	SSN/Tax ID	
	Covered Pers		Date of Birth	SSN/Tax ID	Relationship to Owner
					y beneficiary of the custodial
					before submitting the form.
How muc	ch do you want	:			
	-		withdrawal amoun	t allowed	
		· \$			
Any Ai	_			he vear is not cumulative t	rom year to year. If you begin
taking	your AWA at a	point between c	ontract anniversar		t a one-time withdrawal of the
	Please check	here if you want	a one-time withdra	wal of the amount available	Э.
When do	you want it:				
Select	One:	Monthly	Quarterly	Semi-Annually	Annually
		-	-	-	•
Beginn	ning Date:		mm/dd (selec	t a date between the 1 st –	28 th)

¹ Not authorized in New York

			rawals are treated as distributions, N vithholding does reduce the amount of	
Federal Do Not W	ithhold	Specify	% or Dollar Amount	
State *Do Not V	Vithhold	**Speci	fy % or Dollar Amount	
*Some states require mandat withhold based on the state re		ne tax wher	n federal income tax is withheld. For the	nese states we will
**Some states do not allow st the state.	ate income tax	withholding.	We will withhold according to your inst	ructions allowed by
receive, even if I choose not to specify the tax withholding I w	have federal in have federal in have federal in have federal in have been been been been been been been be	ncome tax w payment da	ral income tax on the taxable portion ovithheld from my withdrawal. I also unde te, 10% federal income tax and applicate until I make a different election.	rstand that if I don't
I want my funds sent electro	nically to my b	ank (EFT):		
	PLEASE A	TTACH A V	OIDED CHECK	
Routing Number:			_ Bank Account Number:	
SIGNATURES:				
Owner's Signature		Date	Joint Owner's Signature	Date
Owner's SSN / Tax ID Numbe			Joint Owner's SSN / Tax ID Number	-
Annuitant's Signature (if Custo	dially Owned)	Date		

Protective Life Insurance Company

Protective Life and Annuity Insurance Company

Post Office Box 1928 / Birmingham, AL 35201-1928

Toll Free: 800-456-6330 / Fax: 205-268-6408

Protective Income Manager Withdrawal Form

* If you do not wish to begin taking Protective Income Manager Benefit withdrawals within the next 60 days skip to Section F.							
			to Section F.				
Owner's Nam	e:		Conti	ract Number:			
spouses, OR	if ther	at Option - The Joint Life Covere is one Owner and a spouse we and enter Covered Person(s) in	ho is the SOLE Primary	e selected if both Owners of the Contract are Beneficiary.			
Select one:		☐ Single Life Coverage Option	on				
		☐ Joint Life Coverage Option	า				
is elected, Co elected, Cove	vered ered P	Person 1 must be the single F	Primary Owner or oldest	mation below. (If Single Life Coverage Option Joint Owner. If Joint Life Coverage Option is Single Owner with SOLE spouse Beneficiary.)			
Covered Pers	on 1		Date of Birth	SSN / Tax ID			
Covered Pers	on 2 ((Joint Life Coverage Options on	ly) Date of Birth	SSN / Tax ID Relationship to Owner			
		you have verified that the spou e confirm that this is an available		ciary on the Firm held Custodial Account. Firm's Custodial Accounts.			
(Please contir	nue to	Section C for automatic withdra	awals, or Section E for a	One-Time withdrawal.)			
investment al	location		f your Optimal Withdrav	will be taken on a pro-rata basis from your wal Amount (OWA) may result in significantly dditional information.			
		<u>process your request, you m</u> ion" form (LAD-1133).	ust also complete the	"Notice of Federal Tax Withholding on Non-			
	ithdra	awn in future years. You may		nts not withdrawn during any contract year of any remaining OWA at any time prior to			
-		ake an additional amount to e Form (LAD-1163).	o satisfy the RMD for	this contract, please complete the RMD			
Select one:		I wish to set up OWA withdraw	wals using the Partial Au	itomatic Withdrawal (PAW) program.			
		I wish to make a change to m	y existing withdrawal ele	ection.			
		I wish to cancel my existing w	rithdrawal election. (Plea	ase continue to Section F)			

Section C: (0	Contir	nued)
Select one:		Please withdraw an amount of \$ per period based on the frequency selected in Section D below. (The maximum allowed without causing an excess withdrawal is the OWA remaining for the current contract year / number of modes in a year.) I understand this will be the set payment amount and will not change unless I instruct differently. (Continue to Section D and then section F.)
		Please withdraw the OWA allowable without causing an excess withdrawal and using the PAW program with the amount based on the OWA divided by the frequency selected in Section D below. Remember that the Optimal Withdrawal Amount is calculated from contract anniversary to contract anniversary. Any OWA amount not taken during the year is not cumulative from year to year. If you begin taking your OWA at a point between contract anniversary dates, you may request a one-time withdrawal of the amount that is available from the most recent contract anniversary to the first modal withdrawal scheduled in Section D below.
		Please initial here to request this additional amount in a "one-time" withdrawal.
		I wish to withdraw an amount other than the maximum OWA. Please indicate the percentage: % (50%, 75%, etc) of the OWA.
		(Continue to Section D and then Section F.)
made via Elec	ctronic	Automatic Withdrawal - All PAWs are taken pro-rata from your investment elections and must be Funds Transfer (EFT). Enclose a voided check with this request. *(Distributions must begin he date this form is signed.)
Select one:		Monthly □ Quarterly □ Semi-Annually □ Annually
* Beginning [Date:	mm / dd (1st - 28th)
	days f	te" is the date on which your Partial Automatic Withdrawal will be processed by Protective. Please or receipt of funds into your account since acceptance and processing of the funds is at the discretion titution.)
Section E: "(One-T	ime" Withdrawal
		I wish to take a "one-time" withdrawal of \$ from my contract. (Please note that withdrawals taken in excess of your OWA may result in a significantly lower OWA in the future.) If you are enrolled in the PAW program, your "one-time" withdrawal will terminate your PAW program.
Payment Instrequest.	tructio	ons - If you wish to have your withdrawal sent via EFT, please enclose a voided check with this
Select one:		Payment to Owner or both Joint Owners
		Payment to third party or only one Joint Owner indicated below:
		Name:
Select one:		Use address of record.
		Use alternate address indicated below:
		Mailing Address:
		-

IMPORTANT FOR WITHDRAWAL OR SURRENDER REQUESTS FROM A CONTRACT INVOLVED IN A TAX-FREE PARTIAL EXCHANGE UNDER INTERNAL REVENUE SECTION 1035.

Please consult your tax advisor about whether a withdrawal from, or surrender of, a contract involved in partial exchange could cause the exchange to be treated as a taxable distribution or have other adverse federal income tax consequences.

For Contracts Involved in a Partial Exchange prior to October 24, 2011

Based on our understanding of IRS guidance in Rev. Proc 2008-24, if a contract is involved in a tax-free partial exchange under Internal Revenue Code section 1035 that is completed prior to October 24, 2011, and an amount is withdrawn from or received in surrender of either contract involved within 12 months of the exchange, the exchange is to be treated as a taxable distribution unless an exception, such as the occurrence of one of the following events, applies as of the date of the withdrawal or surrender.

	indicate which, if any awal or surrender.	, of the folio	wing even	ts applies	to the taxpaye	er as of the	date of thi	s requested
	Age 59 1/2	☐ Dis	abled		Divorced		Loss of	Employment
month exchai	If none of the above s of a partial exchan nge under Internal Re e IRS as a taxable dist	ge involving venue Code	g this con section 10	ntract, the 035, and t	exchange wi	ill no longe	er be treat	ted as a tax-free
For Co	ntracts Involved in a I	Partial Excha	ange on or	after Octo	ober 24, 2011			
under I from or to dete surrend reporte	on our understanding on ternal Revenue Code received in surrender cermine the substance, der. Such a withdraward to you and the IRS.	section 1035 of either cont and hence or surrende	that is con ract within f the treatmon or could affo	npleted on 180 days c ent of the ect how th	or after Octobe of the exchange of partial exchance of partial exchance	er 24, 2011, e, the IRS winge and thange and th	and an am ill apply ger e subsequ e withdraw	nount is withdrawn neral tax principles ent withdrawal or val or surrender is
Sectio	n F: SIGNATURES - B	y signing belo	ow I authori	ze the Cor	npany to act on	the instruct	ions indicat	ted above.
	At this time I do not next 60 days.	want the Pr	otective In	come Mar	nager Benefit v	withdrawals	s to start w	ithin the
Owner'	s Signature		Date *		oint Owner's Sig	nature		Date *
Annuita	ant's Signature (if Custo	dial Owned)	Date *					

¹ Not authorized in New York Page 3 of 3 LAD-1216 R:10/12

Taxpayer Identification Number and Certification

Business name/disregarded entity name, if different from above								
□ Individual/sole proprietor or □ C Corporation □ S Corporation □ Partnership □ Trust/estate single-member LLC □ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the circle member owner.	Exemptions (certain entitle: Exempt payer Exemption fro code (if any) (Applies to a outside the led) ddress (option	ccounts	dividua if any) ₋ CA repo	s): orting	_			
City, State, and ZIP code								
List account number(s) here (optional)								
Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions of the W-9 instructions at website listed below. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN on the W-9 instructions at website listed below.	ber							
Note. If the account is in more than one name, please refer to the W-9 instructions for guidelines on whose number to enter. Also, see What Name and Number to Give the Requester for guidelines on whose number to enter.								
Employer identification	Employer identification 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 I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Interest 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 long I am a U.S. citizen or other U.S. person, and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup we report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, accordingly, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and the certification, but you must provide your correct TIN.	ger subject to l withholding be equisition or a	oackup cause y bandon	withhol ou hav ment o	ding, and e failed to f secured				
Sign Signature of U.S. person ▶ Date ▶								

IMPORTANT – if any part of the payment made to you could be subject to backup withholding and we do not receive this completed form, we will do backup withholding of 24% on those amounts.