

TROUBLESHOOTING GUIDE

New York Life Troubleshooting Guide for Fixed Annuity Applications

Annuity Plan Type & 1035 Exchange

What to fill in

- Sections in red need to be filled out. Go over the section with your mouse, and it will explain how to correct the issue
- Sections that are greyed out do not need to be filled out.

NEW YORK LIFE APPLICATION For Individual Single Premium Deferred Fixed Annuity
New York Life Secure Term Choice Fixed Annuity II
New York Life Insurance and Annuity Corporation (NYLIAC) (A Delaware Corporation)

Regular Mail Address: NYL Annuities – TPO, Mail Code 7390, PO Box 7247, Philadelphia, PA 19170-7390
Overnight/Express Mail Address: NYL Annuities – TPO, 400 White Clay Center Drive, 4th Floor, Newark, DE 19711

Ownership Type: Individual ANNUITY COMMENCEMENT DATE AT THE LATER OF AGE 95 OR 10 YEARS

Please print or type

1. ANNUITY PLAN TYPE
Choose ONE Plan Type and complete the appropriate selection.

☐ Non-Qualified Is this a 1035 Exchange? ☐ Yes ☐ No * \$ ☐ Check to Carrier \$
☐ Exchange / Transfer / Other

☐ Inherited Non-Qualified Exchange Amount \$

☐ Traditional IRA Current Year Contribution \$ Year Year Prior Year Contribution \$ Year Year ☐ Transfer ☐ Rollover * \$

☐ SEP IRA \$ Year Year \$ \$ ☐ Check to Carrier \$

☐ Roth IRA \$ Year Year \$ \$ ☐ Other # \$

☐ Inherited IRA Transfer \$

☐ Inherited Roth IRA \$

NOTE: If this is a Traditional IRA, SEP IRA, or Roth IRA transfer/rollover, submit Qualified Transfer/Direct Rollover Form. If this is an inherited IRA transfer or inherited Roth IRA transfer, submit Inherited IRA Information/Transfer Form. If this is an inherited Non-Qualified exchange, submit Inherited Non-Qualified Information/Exchange Form.

2. ANNUITY PREMIUM PAYMENT AMOUNT and INITIAL INTEREST RATE GUARANTEE PERIOD AND SURRENDER CHARGE PERIOD

A. Premium Payment Amount \$ If paying by check directly to New York Life, make payable to NYLIAC. Indicate total estimated amount including cash with application and anticipated transfer/exchange amounts.

Compensation Disclosures

What to fill in

- For compensation, please write in **Commission.**

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☐ Variable Annuities
☐ Life Insurance
 Your Agent needs a separate license to provide advice about or to sell non-insurance financial products. Your Agent affirms below the types of non-insurance financial products that he/she is licensed and authorized to provide advice about or to sell:
☐ Mutual Funds
☐ Stocks/Bonds
☐ Certificates of Deposits
 Your Agent confirms they are authorized to sell:
☒ Annuities from Only One (1) Insurer
☐ Annuities from Two or More Insurers
☐ Annuities from Two or More Insurers although I primarily sell annuities from: _____

III. Compensation Disclosures
 It's important for you, the client, to understand how your Agent is paid for his/her work. Depending on the particular annuity you purchase, he/she may be paid a commission or a fee. Commissions are generally paid to your Agent by the Insurance Company while fees are generally paid to your Agent by the customer. If you have a question about how your Agent is paid, please ask your Agent.

Depending on the particular annuity you buy, your Agent will or may be paid cash compensation as follows:

☒ Commission, which is usually paid by the insurance company or other sources. If other sources, describe: _____
☐ Other source description is required. _____
☐ Fees (such as a fixed amount, an hourly rate, or a percentage of your payment), which are usually paid directly by the customer.
☐ Other (Describe): _____

Your Agent may also receive other indirect compensation resulting from this transaction (sometimes called "non-cash" compensation), such as health or retirement benefits, office rent and support, or other incentives from the insurance company or other sources.

If you have any questions about the above compensation your Agent will be paid for this transaction, please discuss with your Agent.

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Client Profile: Areas to Complete

What to fill in

- Please fill out all areas that apply to the transfer.
- If a section is not applicable, check off **N/A**.
- For example, when transferring a fixed annuity, the **M&E** section will be **N/A**.

1 DATA ENTRY **2 SIGNATURES** **3 FINALIZE** **4 CONTINUE**

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b. Applicable surrender percentage (%) on next reset premium ☐ N/A

Total Policy Charges on the Annuity

c. Total charges on the annuity (including rider charges) (%) ☐ N/A

Current Interest Rate and Guarantee Period (Fixed Annuities Only)

d. Current Interest Rate of the annuity ☐ N/A

e. Current Guarantee Period remaining (year) ☐ N/A

Mortality and Expense Risk Charge (M&E)

f. M&E charge (%) ☐ N/A

g. Rule for Charge (If Premium Based, provide current loads for charge) ☐ N/A ☐ Account Value ☐ Premiums

Guaranteed Minimum Accumulation Benefit (GMAB)

h. GMAB Charge (%) ☐ N/A

i. Projected Benefit (dollar amount) ☐ N/A

j. Number of years remaining until the benefit eligibility/maturity date ☐ N/A

Guaranteed Minimum Income Benefit (GMIB)

k. GMIB Charge (%) ☐ N/A

l. Income Base (dollar amount) ☐ N/A

m. Number of years remaining until the benefit can be exercised ☐ N/A

Guaranteed Lifetime Withdrawal Benefit (GLWB)

n. GLWB Charge (%) ☐ N/A

o. Guaranteed annual income ☐ N/A

p. Verbal Withdrawal/Reset Rule (dollar amount) ☐ N/A

q. Amount of guaranteed income currently available (annually) ☐ N/A

r. Number of years remaining until the benefit can be exercised ☐ N/A

Guaranteed Minimum Death Benefit (GMDB)

s. Current Guaranteed Minimum Death Benefit (1x or 2x) ☐ N/A

t. Death Benefit Charge (ADBE for Internal NYL accumulation) ☐ N/A

Current Account Value

Guaranteed Minimum Interest Rate (GMIR) and Fixed Account

u. GMIR of fixed annuity or fixed account option on variable annuity ☐ N/A

v. Percentage of Account balance allocated to the fixed interest account (for resetting variable annuity products) ☐ N/A

VL Time Horizon/Intended Use/Objective/Risk Tolerance

Previous Next

Producer Statement & Signature

What to fill in

- Please fill out the producer information.
- If more than one advisor is on the ticket, use the drop-down under **Number of Agents**.

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2. Is Joint Owner a U.S. Citizen? (if applicable)	☐ Yes ☐ No
3. Does the applicant have any existing life insurance or annuity policies?	☒ Yes ☐ No
4. Is this intended to replace or change any life insurance or annuity policy?	☒ Yes ☐ No
5. Is the Owner of the Policy a Trust?	☐ Yes ☒ No

If you have answered "Yes" to either question #3 or #4 of the Producer's Statement, please follow state replacement regulations and attach any required replacement forms.

If you have answered "Yes", please attach pages of the Trust Agreement, including a copy of the title page, signature page, and any applicable trustee designation pages and amendments to the Trust.

All of the answers to questions and statements in this application are true to the best of the knowledge and belief of those who made and recorded them. I have used only company-approved sales material in connection with this application, and copies of all sales material used were left with the applicant.

☒ Representative's/Agent's Signature ☒ DATE SIGNED ☐ No

Representative's/Agent's Name Telephone Number

Representative's/Agent's Email Address Representative's SSN

State License Number NYLAC Code Number

Firm/Agency Name Firm/Agency Telephone Number

Firm/Agency Address Street City State Zip Code

Number of Agents (08/2020)

Printing for signatures & sending document

- Once the application is completed in Firelight, advisors can generate a PDF that they can print, or send to the client

The screenshot displays the New York Life Firelight application interface. At the top, a navigation bar includes the New York Life logo, the user name 'John Taramaccia', and a 'Log Out' button. Below this, a progress bar shows four steps: 1. 'Sales Agent' (highlighted in yellow), 2. 'SIGNATURES', 3. 'FINALIZE', and 4. 'CONTINUE'. The main content area is titled 'Fixed Annuities e-Business Cover Page' and features the New York Life logo, input fields for 'Primary Owner' and 'Primary Annuity Owner', and a 'New York Life Fixed Annuities e-Business' section. This section contains instructions for submitting paperwork and checks, contact information for the 'Responsible Firm' (NYL Annuities - TRG) and 'Company/Service Firm' (NYL Annuities - TRG), and a 'General Information' section with bullet points regarding W-9 forms, Large Case Questionnaires, and Non-Qualified Trusts. A 'Cash/Funded Sales' section is at the bottom. On the right side, a sidebar menu lists various actions: 'Resume Summary', 'Display Print PDF', 'History', 'Documents', 'Requests', 'Manage Optional Forms', 'Request Client to Fill App', 'Copy Activity', and 'Transfer'.

Application completion

Please make sure application says 100% complete before submission

Fixed Annuity II

1 DATA ENTRY 100% 2 SIGNATURES 3 FINALIZE CONTINUE

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☐ Mutual Funds*
☐ Individual Retirement Accounts (excluding employer sponsored retirement plans)*
☐ Pension/Retirement Plan Rollovers*

If you are rolling over proceeds from a retirement plan to purchase this annuity, is it
"In-Service Plan" rollover (indicating you are still currently employed with the plan sponsor)? ☐ Yes ☐ No

☐ Reverse Mortgages/Income from an Income product/Loan from Life Insurance
☐ Other: _____

***Life Insurance, Annuities, Mutual Funds and Retirement plan rollovers**
All fields below must be completed if you are using proceeds from Life Insurance, Annuities, Mutual Funds or Retirement plan rollover, or if your pension plan or retirement account is held in one of these products, or if these proceeds have been held in one of these products in the last 12 months. Using funds from existing products may subject you to certain sales or surrender charges, tax consequences, or other penalties. You should contact the company that issued/sold your existing product, review the prospectus/annual statement for the product, or consult with your Registered Representative, tax/legal adviser to assess the impact of using these proceeds to purchase this new annuity.
Individuals who are rolling over proceeds from a retirement plan (including 401K, 403b, pensions, etc) should carefully consider the benefits of remaining in their existing plan (e.g., available investment and distribution options or services). Employer sponsored retirement plans may provide additional benefits and advantages, flexibility and protections that are not available under an IRA and you should consult with your financial and tax advisers and experts, as well as resources provided or made available by your current/former employer, prior to the rollover.
For each replaced policy, please include a copy of the most recent account statement with this form.

1. Product (Select One)	☐ Life Insurance	☒ Annuities	Product Type (Select one)	☒ Variable	☐ Fixed
Type of Surrender (Select one)	☒ Full ☐ Partial ☐ Surrender Free Only				
Issuing Company	Policy Number	Purchase Date	Estimated Net	Estimated	

BEFORE YOU SUBMIT

Submission checklist



Complete every **red field**; mark sections that don't apply as **N/A**.



For compensation, write in **Commission**.



Fill out producer info; use **Number of Agents** for multiple advisors.



Attach the right transfer form — 1035 Exchange or Qualified Transfer / Direct Rollover.



Verify all signatures and dates before submitting.



Clients can sign with a **wet signature**.