Fidelity Growth and Guaranteed Income℠* Trustee Statement and Agreement Form

Use this form to establish a Trust as the Owner and Beneficiary on a Fidelity Growth and Guaranteed Income℠ annuity contract. To avoid possible adverse tax consequences, we require that when a Trust is designated as the owner of an annuity contract, the Trust also be the designated Beneficiary. By signing this form, you consent to the Beneficiary change. This Statement voids all previous Trustee Statements filed with the Company.[1] If you have questions when filling out this form, please call the Annuity Service Center at 800-634-9361, Monday through Friday, 8 am to 8 pm Eastern Time. Faxes are not accepted.

NOTE: Not all annuity contracts owned by a Trust will qualify for tax deferral. A contract will not qualify for tax deferral unless the Trust holds the contract as "an agent for a natural person" (Internal Revenue Code 72(u)(1)). We will not issue an annuity contract, or change the ownership to a Trust unless all trustees agree to the terms below by providing their signatures in Section 3.

1 Trust Information

Full Name of Trust

Tax Identification Number

Date of Trust Agreement

Trustee #1 Name

Date of Birth

Social Security Number

Address

City State Zip

Phone Number

Trustee #2 Name

Date of Birth

Social Security Number

Address

City State Zip

Phone Number

2 Acknowledgement

I hereby certify that this new annuity application or existing annuity contract number ☐☐☐☐☐☐☐☐☐☐ will be held under a Revocable Living (Grantor) Trust, with the Grantor as the Lifetime Beneficiary of the Trust, and the Grantor registered as an Annuitant.

I/We do hereby represent that the Trust will hold the annuity contract "as an agent for a natural person" in accordance with provisions of 72(u)(1) of the Internal Revenue Code of 1986, as amended. The Trust will be both the owner and the beneficiary of the annuity contract.

3 Trustee(s) Signature(s)

The undersigned trustee(s) certifies that it/he/she is a trustee of the named Trust in Section 1 of this form and that it/he/she is authorized to exercise ownership rights under the contract in accordance with the terms of the Trust. The trustee(s) agree(s) that all transactions made in reliance upon the statements in Section 2 of this form shall be the sole responsibility of the trustee. The Company does not assume responsibility for the status of the contract as an annuity under current federal tax law. The undersigned trustee(s) accept(s) all responsibility for any taxes which may arise from the ownership of this annuity including the 10% early withdrawal penalty tax.

X SIGNATURE OF TRUSTEE #1

X DATE

X SIGNATURE OF TRUSTEE #2

X DATE

NAME AND TITLE OF OFFICER, IF TRUSTEE IS AN INSTITUTION

Please mail this form to: **Fidelity Investments Life Insurance Company, P.O. Box 770001, Cincinnati, OH 45277-0050**
Or in New York: **Empire Fidelity Investments Life Insurance Company, P.O. Box 770001, Cincinnati, OH 45277-0051**

* In New York, Growth and Guaranteed Income℠
This product may not be available in all states.

[1] "The Company" refers to Fidelity Investments Life Insurance Company, or in NY, Empire Fidelity Investments Life Insurance Company,® NY, NY.

Fidelity Investments Life Insurance Company is licensed in all states except New York. In New York, insurance products are issued by Empire Fidelity Investments Life Insurance Company. Products may not be available in all states. The contract's financial guarantees are solely the responsibility of the issuing insurance company.

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