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 genworth.com

# Allocation and transfer change form for individual index life insurance products

- Genworth Life and Annuity Insurance Company
- Genworth Life Insurance Company

If we receive this change form by the 1st of a calendar month, the change will take effect on the 15th of the same month. We will process any change received after the 1st but before the 15th of the same calendar month as soon as possible, but the change may not take effect until the 15th of the following month. Any index is a pricing index. Changes may be made via genworth.com.

**Complete and sign this form and return both pages.**

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## 1. Policy information

Policy number

.....

**Insured full name**

Insured birth date

Insured SSN

Insured address

Insured Telephone

**Owner full name**

Owner birth/ trust date

Owner SSN/TIN

Owner address

Owner Telephone

**All strategies shown in the following sections may not be available for your policy. Please refer to your policy's schedule.**

## 2. Net premium allocation *Visit genworth.com to view your current allocations*

Net premiums are credited to the Fixed Account Value, then allocated on the 15<sup>th</sup> of each month to the Index Interest Crediting Strategies as you select.

This change of net premium allocation will apply to all future net premiums received unless and until you again change your allocation.

**Use whole percentages only. Total percentages, including Fixed Account Value allocation must equal 100%.**

I direct the following changes to my net premium allocations; percentages must equal 100%:

<b>Fixed Account Value</b>	.....%
<b>Index Interest Crediting Strategies</b>	
<input type="radio"/> 1-Year Cap Base Strategy	.....%
<input type="radio"/> 1-Year Cap Plus Strategy	.....%
<input type="radio"/> 2-Year Cap Base Strategy	.....%
<input type="radio"/> 2-Year Cap Plus Strategy	.....%
<input type="radio"/> Monthly Average Strategy	.....%
<b>Total</b>	<b>100</b> %

## 3. Allocations of additional amounts from the Fixed Account Value

This change applies to the amounts shown.

Future allocations of additional amounts from the Fixed Account Value will require completion of new forms.

You may elect to allocate an amount from the Fixed Account Value to one or more Index Interest Crediting Strategies.

Allocate the following amount from the Fixed Account Value to Index Interest Crediting Strategies:

- \$\_\_\_\_\_ 1-Year Cap Base Strategy
- \$\_\_\_\_\_ 1-Year Cap Plus Strategy
- \$\_\_\_\_\_ 2-Year Cap Base Strategy
- \$\_\_\_\_\_ 2-Year Cap Plus Strategy
- \$\_\_\_\_\_ Monthly Average Strategy

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**4. Fund transfers from maturing Segments** Visit [genworth.com](http://genworth.com) to view your current Segment information.

Please use this section when you want segment value to be transferred at segment maturity to the Fixed Account Value and/or a new segment or segments of Index Interest Crediting Strategies different from the matured segment's Index Interest Crediting Strategy.

**You may allocate amounts from the Fixed Account Value (by completing Section 4 above in addition to this Section) at the same time that you make a transfer from one or more maturing Segments, to create in the aggregate, new Segments.**

I direct the following changes to the processing of maturing Segments:

Segment Values of all matured segments will be transferred as specified in the section unless and until you elect otherwise.

<b>Maturing Segments</b>	<b>Transfer % of Segment Value</b>	<b>Transfer to:</b>
○ 1- Year Cap Base Strategy	○ ____%	Fixed Account Value
	○ ____%	1-Year Cap Base Strategy
	○ ____%	1-Year Cap Plus Strategy
	○ ____%	2-Year Cap Base Strategy
	○ ____%	2-Year Cap Plus Strategy
	○ ____%	Monthly Average Strategy
○ 1-Year Cap Plus Strategy	○ ____%	Fixed Account Value
	○ ____%	1-Year Cap Base Strategy
	○ ____%	1-Year Cap Plus Strategy
	○ ____%	2-Year Cap Base Strategy
	○ ____%	2-Year Cap Plus Strategy
	○ ____%	Monthly Average Strategy
○ 2-Year Cap Base Strategy	○ ____%	Fixed Account Value
	○ ____%	1-Year Cap Base Strategy
	○ ____%	1-Year Cap Plus Strategy
	○ ____%	2-Year Cap Base Strategy
	○ ____%	2-Year Cap Plus Strategy
	○ ____%	Monthly Average Strategy
○ Monthly Average Strategy	○ ____%	Fixed Account Value
	○ ____%	1-Year Cap Base Strategy
	○ ____%	1-Year Cap Plus Strategy
	○ ____%	2-Year Cap Base Strategy
	○ ____%	2-Year Cap Plus Strategy
	○ ____%	Monthly Average Strategy

**5. Signatures** You should discuss any changes made on this form with your tax advisor.

<b>Owner</b> Required	Date	<b>Capacity</b> If applicable
<b>X</b>	▪	○ Trustee ○ Attorney-in-fact ○ Title/officer:
<b>Joint owner</b> If applicable	Date	<b>Capacity</b> If applicable
<b>X</b>	▪	○ Trustee ○ Attorney-in-fact ○ Title/officer:
<b>Other required signature</b> If applicable	Date	<b>Capacity</b> If applicable
<b>X</b>	▪	○ Trustee ○ Attorney-in-fact ○ Title/officer:

Send completed form to:

**Regular Mail**  
 P.O. Box 10720  
 Lynchburg, VA 24506-0720  
 Fax: 888 325.3299

**Overnight delivery**  
 Attn: Customer Service  
 3100 Albert Lankford Drive  
 Lynchburg, VA 24501-4996