

Personal Planning Questionnaire



What is the likelihood of:

- Dying too soon?
- Living too long?
- Becoming sick or hurt?

“You can’t escape
the responsibility of
tomorrow by
evading it today.”

–Abraham Lincoln

Quality of Life...Insurance®

Your Money. Your Insurance. Your Choice.

Policies issued by American General Life Insurance Company, Inc. (AGL).

FAMILY INFORMATION

Date _____ Tobacco User? _____
Name _____ Age/Date of Birth _____ Yes ___ No ___
Spouse's Name _____ Age/Date of Birth _____ Yes ___ No ___
Children's Names _____ Age/Date of Birth _____
_____ Age/Date of Birth _____
_____ Age/Date of Birth _____
Home Address _____
_____ Telephone # _____ E-mail _____
What is your most important personal or financial goal? _____

What are your most valuable possessions?

House ___

Car ___

Earnings ___

Other (list below)

Monthly rent \$ _____ or monthly mortgage payment \$ _____

If homeowner: Original mortgage amount \$ _____ Interest rate _____%

Original mortgage term _____ years Years remaining on mortgage _____

How do you feel about renting versus buying a home? _____

How do you feel about setting money aside for emergencies such as major repairs, unexpected illness, etc? _____

How do you feel about setting money aside for your children's education? _____

OCCUPATION INFORMATION

Your Employer _____ Occupation/Duties _____

Years in current occupation _____ Annual income \$ _____ Hours per week (average) _____

How do you feel about your career and benefits? _____

Spouse's Employer _____ Occupation/Duties _____

Years in current occupation _____ Annual income \$ _____ Hours per week (average) _____

How do you feel about your career and benefits? _____

RETIREMENT INFORMATION

How do you feel about planning for retirement? _____

What plans do you have in place at this time? _____

At what age do you wish to retire? _____ At what age does your spouse wish to retire? _____

When did you last review your Social Security benefits? You: Date _____

Spouse: Date _____

INSURANCE INFORMATION

If you could build the ideal professional insurance representative, what would he or she do for you? _____

Life Insurance					
With what companies do you own personal, permanent life insurance? Do you have any group life insurance? Do you have any term insurance?					
Insured	Company	Insurance Amount	Insurance Type	Cash Value	Premium

Total life insurance in force: You \$ _____ Spouse \$ _____

Child (name and amount) _____ Child (name and amount) _____

Child (name and amount) _____ Child (name and amount) _____

Which of the following alternatives are important to you when it comes to life insurance?

- Cash at death Yes ___ No ___
- Cash value to supplement retirement needs Yes ___ No ___
- Cash value for emergencies or to help meet education and other goals Yes ___ No ___
- Self-completion if you become disabled Yes ___ No ___

Accident & Health					
Do you have any group or individual medical coverage (HMO, PPO, major medical)? Any cancer or critical illness insurance? Any disability insurance or long term care insurance?					
Insured	Company	Insurance Amount	Insurance Type	Premium	

How long could you live on your assets if you were to suffer a critical illness or disability tomorrow? _____

Is there a history of cancer in your family? Yes ___ No ___

Are the following alternatives important to you when it comes to accident & health insurance?

- Cash to help you with the direct and indirect costs associated with surviving a critical illness Yes ___ No ___
- Cash for the direct and indirect costs associated with cancer Yes ___ No ___
- Cash for unexpected accidental injury or death Yes ___ No ___

What do you want your insurance to do for you? _____

What, if anything, has changed since you purchased your last insurance policy? _____

If you were to modify your insurance program in any way and do it today, what would that be? _____

FINANCIAL INFORMATION

Do you have any non-qualified annuity products?

Owner	Company	Approx. Value	Rate of Return	Maturity	Periodic Premium	Charge Data

What saving/investment programs do you have for retirement? (pension plan, IRA, 401k, TSA, Keogh, etc.)

Type	\$ Value	Return %

What other saving/investment programs do you have? (CD's, T-Bills, bonds, mutual funds)

Type	\$ Value	Return %	Maturity Date

Non-qualified Annuity Total
\$ _____

Retirement Total
\$ _____

Other Total
\$ _____

	You	Spouse
Savings and Investments ¹	\$ _____	\$ _____
Total Life Insurance (from page 2)	\$ _____	\$ _____
Total Non-qualified Annuities	\$ _____	\$ _____
Total Savings and Investments ¹ and Life Insurance	\$ _____	\$ _____

When investing money, would you take substantial risk, not any risk or somewhere in between? Why?

Are you satisfied with the amount of money you have accumulated for your financial security? Yes ___ No ___

Do you find it difficult to put money aside on a regular basis? Yes ___ No ___

What additional amount can you set aside for your financial security over and above what you are currently doing?
\$ _____ Weekly ___ Monthly ___

What is the most important thing to you in this world? _____

¹Discuss the pros and cons of using retirement assets to provide funds for the survivor(s).
In the event of one spouse's premature death, the surviving spouse will still need funds for retirement.

Financial Underwriting: The chart below shows the maximum amount of life insurance that may be considered acceptable under normal circumstances for wage earning adults. Multiply the income factor by the applicant's annual income to determine the maximum amount. The maximum includes all life insurance in force plus the insurance applied for. For proposed amounts in excess of the maximum, send documentation to New Business justifying the amount applied for, such as the completed Factfinder (all applicable pages) and copies of financial statements or tax forms.

Age	Income Factor	Age	Income Factor	Age	Income Factor
≤ 40	25*	51 - 55	15	66 - 70	5
41 - 50	20*	56 - 65	10	≥ 71	Individual Consideration

*The maximum multiple for individuals under age 50 with incomes under \$25,000 is 10.

BUSINESS PLANNING INFORMATION

Company Name _____ Telephone _____

Address _____ E-mail _____

Type "C" Corporation "S" Corporation Partnership Sole Proprietor LLC/LLP
Tax Bracket _____%

BUSINESS OWNERS

Name	Age	Sex	Tobacco User?	% of Ownership	Tax Bracket	Relationship to Others
_____	_____	_____	Yes ___ No ___	_____	_____	_____
_____	_____	_____	Yes ___ No ___	_____	_____	_____
_____	_____	_____	Yes ___ No ___	_____	_____	_____
_____	_____	_____	Yes ___ No ___	_____	_____	_____

BUSINESS VALUE

If you were to sell your business today, what would the price be? _____

When was the last time you had your business appraised or valued? _____

How is your business protected in the event of property, liability, or other loss? _____

BUSINESS BENEFITS

Are there any special benefit plans just for Owners or Key Employees? Yes ___ No ___

If yes, describe _____

If no, have you considered any? _____

KEY EMPLOYEES

Are there Key Employees whose death or disability would jeopardize company profits? Yes ___ No ___

What has been done to protect the business in the event of death or disability of one of these Key Employees?

If Key Employees are insured, who are insured? _____

If not insured, who should be? _____

COMPANY ADVISORS

Accountant _____

Attorney _____

Other (banker, etc.) _____

CASH AND INCOME NEEDS ANALYSIS



Final Expenses Fund

- To provide for expenses your survivors will face at your death, such as funeral expenses, medical bills, administrative costs, and legal fees

	YOU	SPOUSE
	\$ _____	\$ _____

Debt Fund

- To help pay all outstanding bills, loans, and credit card balances

	\$ _____	\$ _____
--	----------	----------

Emergency Fund

- Prepare for the unexpected with an emergency fund of 3-6 month's expenses

	\$ _____	\$ _____
--	----------	----------

Mortgage/Rent Fund

- Mortgage balance \$ _____ or
- Monthly rent of \$ _____ for _____ years

	\$ _____	\$ _____
--	----------	----------

Education Fund

- To provide for education of your children or grandchildren in the event of your death

	\$ _____	\$ _____
--	----------	----------

Income Replacement¹

- To provide an income for your survivors
- Monthly income of \$ _____ for _____ years

	\$ _____	\$ _____
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Legacy

- To provide for your favorite charity, non-profit organization or school in the event of your death
- To leave a legacy for your family

	\$ _____	\$ _____
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Subtotal	\$ _____	\$ _____
-----------------	-----------------	-----------------

Subtract Savings, Investments, Non-Qualified Annuities and Existing Life Insurance	\$ _____	\$ _____
--	----------	----------

Total Dollars Required	\$ _____	\$ _____
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¹To take into consideration Social Security benefits, go to Social Security website, www.ssa.gov.

Quality of Life...Insurance®

Your Money. Your Insurance. Your Choice.

What if you suffer a major heart attack, stroke or invasive cancer and don't die? Would your family be able to maintain their standard of living if you were financially impacted by a serious illness?

Quality of Life...Insurance is designed to help provide security for your loved ones in the event of your premature death...but it is also life insurance you don't have to die to use.

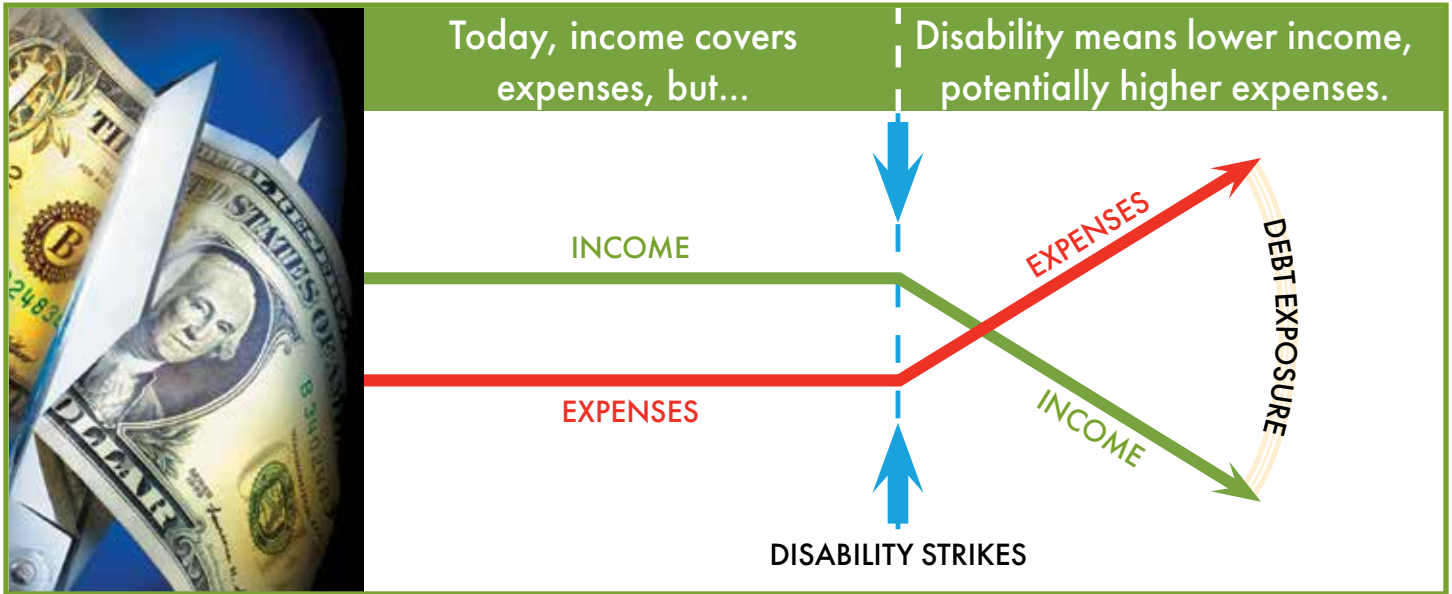
You choose how to use your life insurance:

- Life insurance to help take care of loved ones
- Customer Choice Lifestyle Income Solution to help protect against outliving your retirement income
- Accelerated Benefit Riders to help with the cost of qualifying critical or chronic illnesses or conditions
- Disability Income Rider to help pay bills if you are unable to work
- Cash Value to help supplement your retirement income, or help with other financial goals



Quality of Life...Insurance
is Changing The Way
Americans Think About,
Purchase and Use
Life Insurance.®

IF YOU BECOME DISABLED, WHAT MAY HAPPEN?



Consider the Facts:

- One in eight workers will be disabled for five years or more during their working careers.¹
- 61% of surveyed wage earners personally know someone who has been disabled and unable to work for 3 months or longer.²
- 69% of workers in the private sector have no private long-term disability insurance.³
- The average monthly benefit paid by Social Security Disability Insurance (SSDI) is \$1,130.⁴

¹Commissioner's Disability Insurance Tables A and C, assuming equal weights by gender and occupation class

²Council for Disability Awareness, Consumer Disability Awareness Survey, 2010

³U.S. Social Security Administration, Fact Sheet, February 7, 2013

⁴U.S. Social Security Administration, Disabled Worker Beneficiary Data, December 2012

Despite all this, isn't it amazing that most Americans have little or no disability coverage?

OPTIONS OPTIONS OPTIONS OPTIONS OPTIONS OPTIONS



Deplete Your Savings



Sell Your Assets



Ask Others For Assistance

IF YOU BECOME CRITICALLY ILL, HOW WOULD YOU PAY?

Monthly Obligations

Mortgage/Rent	_____	Auto Loan	_____
Credit Card Bills	_____	Loan Payments	_____
Utilities (Electric, Gas, Water)	_____	Phone/Cable (Internet/Cell Phone)	_____
Car Expenses (Gas, Maintenance, Insurance)	_____	Insurance (Home, Life, Other)	_____
Medical (Prescriptions, Dental)	_____	Food	_____
Clothing, Gifts	_____	Taxes	_____
Education	_____	Other	_____
		Total Monthly Obligation	\$ _____
		Number of Months Needed	X _____
		Total	\$ _____

Don't let the potential financial devastation caused by a Critical Illness:

- Threaten your lifestyle
- Destroy your sense of security
- Hinder your recovery

OPTIONS OPTIONS OPTIONS OPTIONS OPTIONS OPTIONS



Rely On Spouse's Income



Collect Social Security Disability Payments



AGI Solution

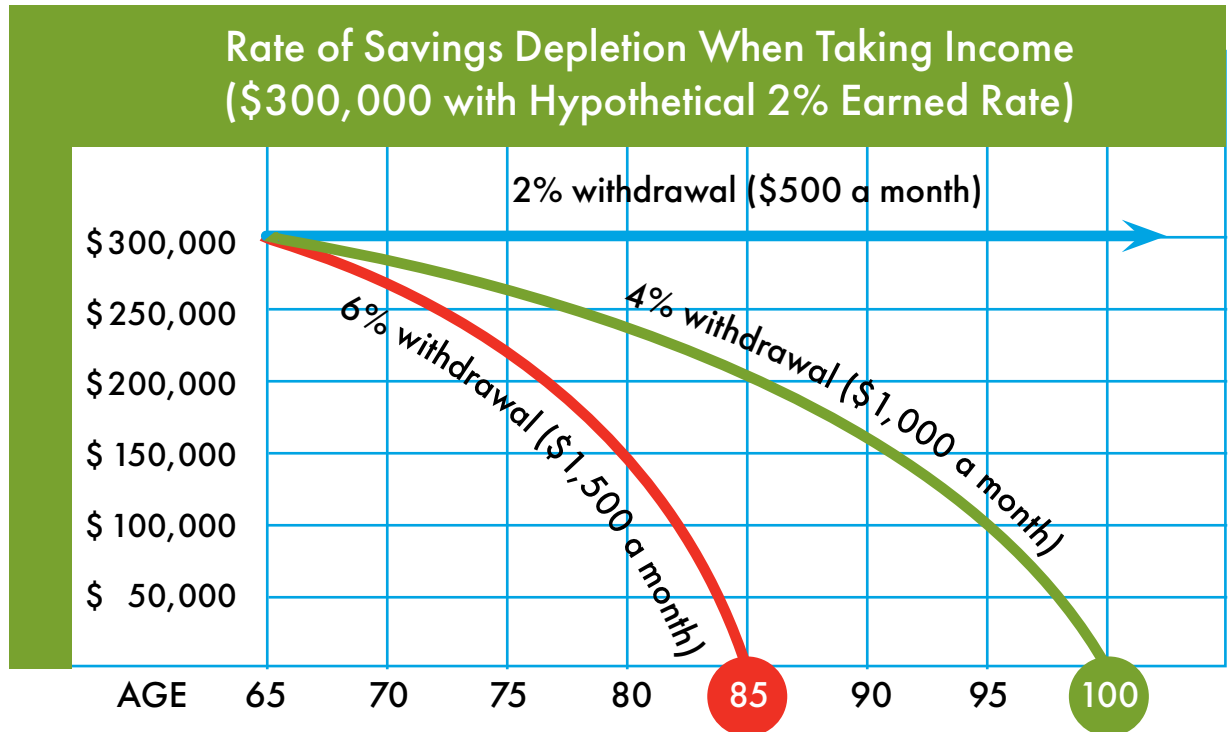
IF YOU OUTLIVE YOUR ASSETS, WHO PAYS THE BILLS?

At retirement, earning power shrinks

Generally, Americans depend on three sources of retirement income:

- Personal Savings
- Employer Provided Plans
- Social Security

Even retirees with a large nest egg run the risk of depleting their assets.



48% of Americans ages 45–70 have no financial plans in place to protect themselves against outliving their assets and the rising cost of healthcare should they live longer than expected.¹

¹State of the Insured Retirement Industry: 2012 recap and a 2013 Outlook, Insured Retirement Institute.





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