

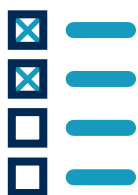
2X to 3X more money for long-term care needs^{1,2,3}

ForeCare fixed annuity with long-term care benefits may help people maximize dollars to fund their long-term care costs. ForeCare can be an alternative for those who aren't interested in traditional long-term care insurance. ForeCare offers a streamlined application process and unique benefits.

No medical exam. Just a simple application.

The average ForeCare application process takes 30 minutes to determine the level of benefits a client may receive. Once the height and weight requirements are met, there are only three steps to apply for ForeCare:

94%
of applicants
are approved
for ForeCare.⁴



Complete a brief medical history questionnaire to determine the qualification level.

2x
3x

Run a ForeCare illustration based on the qualification level provided by the Global Atlantic underwriting team:

- Standard level provides double the amount of the contract value.
- Premier level provides triple the amount of the contract value.^{1,2,3}



Complete part II (Medical Questionnaire) of the application and submit to Global Atlantic.

It's really that simple.

Scan here
to learn
more about
ForeCare



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It is FLIC's understanding that an individual who owns a ForeCare policy would be exempt from the **Washington** LTC payroll tax. FLIC cannot provide specific recommendations on legal requirements or exemptions from such legal requirements, however, so each individual must consult with his or her own legal counsel for specific recommendations.

¹ The ForeCare Multiplier provides two or three times (depending on underwriting eligibility) the amount of contract value in long-term care coverage to spend on qualified long-term care expenses. Benefits are subject to a maximum monthly benefit. The additional coverage in excess of the Contract Value is only available to use for a qualified long-term care benefit and will not become part of the contract value or the death benefit. Withdrawals, other than for qualified long-term care expenses, will adversely affect the amount of coverage for long-term care benefits in the future.

² Initial premium in CA.

³ There is a monthly cost associated with the long-term care benefits rider, which is based on the insured's issue age. The contract value at month-end is never reduced below the contract value at the prior month-end (less any applicable withdrawals) due to the cost for the long-term care benefits rider.

⁴ Based on 2019 results; 80% approved Premier, 14% approved Standard.

Guarantees are based on the claims-paying ability of Forethought Life Insurance Company and assume compliance with the product's benefit rules, as applicable.

Exclusions and limitations

The qualified long-term care insurance rider has exclusions and limitations. In addition to the above, no payment will be made for any room and board, care, treatment, services, equipment or other items:

Arizona - For expenses incurred for services or items to the extent that the expenses are reimbursable under Title XVIII of the Social Security Act or would be reimbursable but for the application of the deductible or coinsurance amount; or

Nebraska - The monthly payment of Long-Term Care Benefits upon an Insured's receipt of Qualified Long-Term Care Services, is subject to the applicable Elimination Period and Waiting Period, if any, while he or she is a Chronically Ill Individual. A waiting period is the period of time that this Rider must be in force before any Long-Term Care Benefits become payable under this Rider. The elimination Period is the days of care, as specified for each type of Covered Service, that an Insured must be a Chronically Ill Individual and must be receiving any Qualified Long-Term Care Services other than Respite Care Services, before We will pay Long-Term Care Benefits.

Other Information - For costs and further details of the coverage, including exclusions, any reductions or limitations and terms under which the contract may be continued in force, talk to an agent. No payment will be made for any room and board, care, treatment, services, equipment or other items: (1) Provided by a member of an Insured's Immediate Family, unless: (a) He or she is a regular employee of the organization that is providing the services; and (b) Such organization receives payment for the services; and (c) He or she receives no compensation other than the normal compensation for employees in her or his job category; (2) For which no charge is normally made in the absence of insurance; (3) Provided outside of the United States of America, and its territories and possessions; (4) Provided by or in a Veterans Administration or federal government facility, unless required by law; (5) Due to an Insured's alcoholism or addiction to drugs or narcotics; but not addiction that results from the administration of those substances in accordance with the advice and written instructions of a duly licensed physician; or (6) Resulting, directly or indirectly, from: (a) War or act of war, whether declared or not; or (b) Attempted suicide or an intentionally self-inflicted injury.

The Rider for Long-Term Care Benefits may be terminated by a written request from the Owner within the 30-day period following a Contract Anniversary. The Rider will also terminate: when the requirements specified for the insured are no longer met, when the Owner is changed, when the Contract is surrendered, upon the death of the last surviving insured, upon annuitization (if elected prior to the Maturity Date), on the Maturity Date, except 1) when annuitization is elected on the Maturity Date; and 2) when the Contract Value is \$0 but unused Long-Term Care Extended Benefit coverage is still available, or upon the date all Long-Term Care Benefits available under the rider have been paid.

This information is written in connection with the promotion or marketing of the matter(s) addressed in this material. The information cannot be used or relied upon for the purpose of avoiding IRS penalties. These materials are not intended to provide tax, accounting or legal advice. As with all matters of a tax or legal nature, you should consult a tax or legal counsel for advice.

ForeCare fixed annuity is issued by Forethought Life Insurance Company, 10 West Market Street, Suite 2300, Indianapolis, Indiana. Available in most states with contract FA1101SPDA-01 (certificate series GA1101SPDA-01, as applicable) with Rider for Long-Term Care Benefits Form LTC2000-01, Optional Inflation Protection Benefit Rider Form LTC2001-01 and Optional Nonforfeiture Benefit Rider Form LTC2002-01 (certificate series LTCG2000-01, LTCG2001-01 and LTCG2002-01, as applicable). This is a solicitation of Long-Term Care insurance.

Products and features are subject to state variations and availability. Read the contract for complete details.

Global Atlantic Financial Group (Global Atlantic) is the marketing name for The Global Atlantic Financial Group LLC and its subsidiaries, including Forethought Life Insurance Company and Accordia Life and Annuity Company. Each subsidiary is responsible for its own financial and contractual obligations. These subsidiaries are not authorized to do business in New York.

Not a bank deposit. Not FDIC/NCUA insured. Not insured by any federal government agency. No bank guarantee. May lose value. Not a condition.

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