Annuity Forms Information Cover Sheet



Thank you for choosing Talcott Resolution. Enclosed you will find the form(s) you recently requested from one of our Annuity Service Specialists. Before completing the form(s), please read all instructions carefully.

Also keep in mind the following:

- Many forms can be faxed back to Talcott Resolution. If a transaction type is eligible, the fax number listed below may used to submit your request. NOTE: Once your document has been faxed, please allow 2-3 hours for it to become available for viewing.
- In most cases, a notarization is not required. We may, however, request this once your form is received if the signature on the form does not match the signature we have on file or we do not have a signature on file for comparison.

Processing Time Frames

Variable Annuity Liquidation/Annuitization

If your completed form is received in good order prior to the close of the New York Stock Exchange, it will be processed the same day it is received and funds will leave Talcott Resolution the following business day. Please allow 7-10 business days for delivery via regular mail. Funds sent via EFT or wire should be posted to your bank account within 2-3 business days.

Fixed Annuity Liquidation/Annuitization

Once your completed form is received in good order, it will be processed within 7-10 business days and the funds will leave Talcott Resolution the following business day. Please allow 7-10 business days for delivery via regular mail. Funds sent via EFT or wire should be posted to your bank account within 2-3 business days.

Enrollment Forms (Automatic Income, Required Minimum Distribution, InvestEase)

Once your completed form is received in good order, it will be processed within 30 business days.

All Other Forms

Once your completed form is received in good order, it will be processed within 2-4 business days.

NOTE: Confirmations for all transaction types will be generated on the business day following the day your request is processed.

Fax Number and Mailing Addresses

We must receive your signed request in Good Order at our Administrative Office. If you choose to fax your request, use the fax number below. If you choose to mail overnight, please use our street address below. If you choose to use regular mail, we recommend using the PO Box address below.

Fax: For private express mail with tracking number: For standard mail delivery without tracking number:

1-860-380-3280 Talcott Resolution - Annuity Service Operations Talcott Resolution - Annuity Service Operations

1338 Indian Mound Drive P.O. Box 14293 Mt. Sterling, KY 40353 Lexington, KY 40512-4293

Contact Information

Clients: Investment Professional: Online:

Call 1-800-862-6668 Call 1-800-862-7155 www.talcottresolution.com

Talcott Resolution consists of Talcott Resolution Life, Inc., a holding company for a group of insurance and non-insurance subsidiaries that administers life and annuity products previously sold or acquired. These insurance companies include Talcott Resolution Life Insurance Company, Talcott Resolution Life and Annuity Insurance Company, American Maturity Life Insurance Company and Talcott Resolution International Life Reassurance Corporation.

Annuities issued by Union Security Insurance Company or Union Security Life Insurance Company of New York are administered by Talcott Resolution Life and Annuity Insurance Company and Talcott Resolution Life Insurance Company, respectively.

Please do not return this page with the forms you are submitting.

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Registered Representative Individual Annuity Change Request



Use this form if you want to change the registered representative on a block of business, a list of contracts or an individual contract.

Important information about customer identification: To help the government fight the funding of terrorism and money laundering activities, you may be asked to provide your name, address, date of birth, social security number and other information that identifies you. The information you provide may also be validated through various public databases. Please rest assured that this process is in compliance with Talcott Resolution's privacy policy. For additional information about our privacy policy, please visit our internet site at www.talcottresolution.com.

Section A - Select line of business (required)						
☐ Individual annuity business						
Group annuity business						
Section B - Select type of change (r	equired)					
☐ Individual contract (please go to Section C)						
Block transfer of all Registered Representative's contracts (please go to Section D)						
List of contacts attached (please go to Section	E)					
Section C - Contract owner inform	ation (re	quired)				
Please note, this section is for individual contract ch manager signature is required in Section E. If you a below.	~ .		_			
Contract number	Firm customer	account number	Annuitant's nan	ne (if different from the contract owner)		
Contract owner's name		Contract owner's	Social Security of	r Tax Identification Number		
			-	-		
Joint Contract owner's name		Contract owner's	s telephone numbe	r (area code first)		
Contract owner's email address						
Contract owner signature				Date (mm/dd/yyyy)		
Joint contract owner signature (if applicable)				Date (mm/dd/yyyy)		
Medallion signature guarantee (required for POA)				Date (mm/dd/yyyy)		
				·		
Section D - Previous registered rep	resentati	ve informat	tion (block	k transfers only)		
Previous registered representative's name	Social S	Security Number		Name of firm		

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Section E - New registered representative information (required)

Note: Commission percentages will be distributed evenly between representatives unless otherwise noted. If more than one registered representative is assigned to the contract, please fill in the commission percentage for each.

Name	Social Security Number	NPN or CRD Number	Commission percentage
1.			%
2.			%
3.			%
Branch Manager (print name)	Branch Manager signature		Date (mm/dd/yyyy)
Zimin imme)	2 and 1 and 2 and		Date (min ad yyyy)

Firm name Email address Firm's telephone number (area code first) Street address City State ZIP Code						
	Firm name					
	Email address	Firm's t	elephone number (area code first)	Fir	rm's fax nu	mber (area code first)
	Street address		City	s	State	ZIP Code

Section G - Authorized signatures for block transfers

Please note, if requesting a block transfer and client signatures have not been provided, the releasing firm must comply with FINRA Rule 04-72 and authorized signatures from both the Accepting and Releasing Firms must be provided below.

Releasing firm authorization		Accepting firm authorization		
Authorized signature *	Date (mm/dd/yyyy)	Authorized signature	Date (mm/dd/yyyy)	
Authorized name and title (please print)		Authorized name and title (please print)		
Firm name		Firm name		

^{*}This transfer meets FINRA Rule 04-72 requirements

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Annuities issued by Union Security Insurance Company or Union Security Life Insurance Company of New York are administered by Talcott Resolution Life and Annuity Insurance Company and Talcott Resolution Life Insurance Company respectively.

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