SUITABILITY PROFILE (DEFERRED ANNUITIES ONLY)

ING USA Annuity and Life Insurance Company, Des Moines, IA ReliaStar Life Insurance Company of New York, Woodbury, NY ING Life Insurance and Annuity Company, Windsor, CT Members of the ING family of companies Customer Service Center: 909 Locust St., Des Moines, IA 50309-2899



The purpose of this profile is to help ensure that the annuity you are purchasing is appropriate based on your financial situation and long-term goals and that you understand certain features of the annuity. Please complete this profile in its entirety and submit it with your application.

RMATION			
		Are you actively employed? Yes No	
Current Age	Issue State	Anticipated Retirement Age	
Joint Owner NameSSN/TIN			
come Features	e Income		
be used for the purchase of Individual Variable Annu Certificate of Deposit	uities Individual Fixed Annuities (CD) Savings/Checking/Money M		
ty or life insurance policy, ple	ase explain how this new annuity bette	r meets your objectives	
	eing replaced? Contract 1 %		
Income/Expenses)			
isehold income salary, Social Security payme ntly earned on the money that isehold living expenses	at will be used to purchase this annuity	\$/mo	
hly household income minus	current monthly household expenses)	\$/mo	
nuity applied for is	s or decrease in your household's month	years nly income during Yes No nent	
to 5.b., please explain. (If pos	ssible, approximate when you anticipate	e changes in income, living expenses, and	
	Current Age	Current Age Issue State	

D.	FINANCIAL INFORMATION (Net Worth/Liquid Assets)	
1.	Approximate household net worth	\$
	• Total current value of household assets, including the purchase payment for the annuity to be purchased, but excluding	
	primary residence and any personal belongings or personal property such as jewelry, furnishings, and vehicles	
	Minus total debt (not including mortgage(s) or debt owed on the primary residence)	
2.	In purchasing this annuity, what percentage of your net worth (excluding your home) will be used?	%
_	(Divide the annuity purchase amount by the amount in question 1 above to calculate this percentage.)	ė.
3.	 Approximate household liquid assets Include assets that can be easily converted to cash without penalty, such as checking, savings, money market accounts, 	\$
	and securities that can be sold without fees or penalty	
	• Do not include any personal belongings or personal property such as jewelry, furnishings, and vehicles	
4.	What percentage of your liquid assets does this annuity represent?	%
	(If liquid assets were used to purchase the annuity, divide the annuity purchase amount by the amount in question 3 above to calculate this percentage.)	
5.	After purchasing this annuity, how much of your liquid assets will remain?	\$
6.	 Do you anticipate any significant changes in your liquid assets or net worth during the surrender period? If "Yes," please explain the anticipated changes (include, if possible, when you anticipate the changes to occur and the approximate amount of the anticipated changes in income, living expenses or liquid assets). 	Tyes No
7.	Total value of all annuities (include the purchase of this annuity)	\$
	• What is the total accumulation/annuitization value of all annuities you own with this and other companies?	
 3. 4. 	 Nursing home or assisted living facility Does the owner reside in a nursing home or assisted living facility? Do you understand that if you take money out of this annuity in excess of the penalty-free withdrawal amount in the contract due the surrender charge period, you will incur a surrender charge? If there is any additional relevant information the producer should know before making a final recommendation (i.e., expected beneficiary needs, anticipated future changes in income and expenses, etc.), please explain. 	uring No
F.	OWNER ACKNOWLEDGEMENT	
By an tha its	signing below, I acknowledge that I reviewed the product-specific disclosure form with my producer and that I understand the cosnuity I am purchasing. In addition, I acknowledge the information I provided is complete and accurate to the best of my knowledge. It neither ING USA Annuity and Life Insurance Company, ReliaStar Life Insurance Company of New York, or ING Life Insurance and representatives offer legal or tax advice. I have been advised to consult my personal tax adviser or lawyer with any questions or consulty I am applying for is suitable based on my insurance needs and financial objectives.	I further acknowledge Annuity Company no
	Owner Signature Date	
	Joint Owner Signature (If applicable) Date	
G.	PRODUCER ACKNOWLEDGEMENT	
By ow	signing below, I acknowledge that I believe that the annuity for which the owner(s) is applying is suitable to the financial needs (ner(s). I base this belief on the information the owner(s) provided and on everything I know at this time. In addition, I have verificater(s) and believe that the identity information the owner(s) provided to me is true and accurate.	
	Producer Signature Date	