ForeCare

Fixed Annuity
with Long-Term Care Benefits

Issued by Forethought Life Insurance Company

Global Atlantic FINANCIAL GROUP

Thinking Ahead

Product Highlights

Product Description	Single-premium, tax-deferred annuity with qualified long-term care benefits, for non-qualified funds only.
Issue Ages[1]	Ages: Insured 50-80, Owner/Annuitant 0-85. Ownership may be single or joint, insured must be the owner and/or the owner's spouse.[2] If the Owner is not a living person, then the Owner must be a Grantor Trust and the Insured(s) must be the grantor or Spouse of the grantor. If the Owner is not a living person, an Insured must be the Annuitant or the Spouse of the Annuitant.
Premium Amount[3]	Single $35,000–$400,000 Joint $35,000–$600,000 (state variations may apply)
Current Interest Rate	Guaranteed fixed interest rate declared annually on the contract anniversary.
Guaranteed Minimum Interest Rate	The declared interest rate is guaranteed never to be less than 1% during the Withdrawal Charge Period (0.10% thereafter).
Tax Advantages	• Tax-deferred growth • Benefits received for qualified long-term care expenses are typically federal income tax-free[4]
Benefits	• Rider for Long-Term Care Benefits[5] • Optional Nonforfeiture Benefit[6] • Optional Inflation Protection Benefit[6]
Simplified Underwriting	Completed at point-of-sale
Covered Care	Home Care, Home Health Aide, Homemaker Services, Chore Services, Nurse and Therapist, Personal Care, Respite Care, Adult Day Care, Assisted Living Facility, Bed Reservation, Nursing Home Facility, and Hospice Care

Long-Term Care Benefits

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.

An Accelerated Benefit is paid first from the contract value until exhausted, at which point the Extended Benefit takes effect. Qualified expenses are paid by reimbursement.

Single Life

Rating	Total Duration	Accelerated Benefit	Extended Benefit
Standard	72 Months	36 Months	36 Months
Premier	72 Months	24 Months	48 Months

Joint Life[2]

Rating	Total Duration	Accelerated Benefit	Extended Benefit
Standard	84 Months	42 Months	42 Months
Premier	90 Months	30 Months	60 Months

Fees and Additional Considerations

There is a monthly benefit fee associated with the long-term care protection that ForeCare provides. Your realized crediting return will be less than the declared interest rate due to the fee. However, even after deduction of the benefit fee, the contract value at month end will not be less than the contract value at the prior month end, less any applicable withdrawals.

Death Benefit

Any contract value not used for long-term care expenses can be passed to your beneficiaries as a death benefit.

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

1 Spouse is as defined for Federal tax purposes.
2 Subject to state variations. Joint coverage not available in AZ.
3 Net of any optional rider charges if elected.
4 Pay no taxes on investment income growth assuming all funds are used to pay for qualified long-term care services, no non-qualified withdrawals are taken and no death benefit is paid.
5 The monthly rider charge rate is locked in for the life of the contract. Charges are waived when withdrawals are made for qualified long-term care reimbursements.
6 There is an up-front charge for this benefit which is deducted from the contract value at issue. Please speak with your advisor for more details.

This is a solicitation of long-term care insurance by **Forethought Life Insurance Company** and an agent/insurance producer may contact you.

Benefit Qualification	To qualify for benefits, receipt of proof is required from a licensed health care practitioner stating you are chronically ill and are incapable of performing, without substantial assistance, two Activities of Daily Living (ADLs) for at least 90 days, and/or you have a cognitive impairment that requires substantial supervision. The ADLs include: Bathing, Continence, Dressing, Eating, Using a Toilet, Transferring/Mobility. Covered Long-Term Care Services must be provided in conjunction with a written Plan of Care submitted by a Licensed Health Care Practitioner, and approved by Forethought Life Insurance Company.
Elimination Period	90 days of covered care within 270 consecutive days, waived for home health care with qualifying plan of care.
Waiting Period	None
Withdrawal Charges	9-year schedule: 8%, 8%, 7%, 6%, 5%, 4%, 3%, 2%, 1%, 0% thereafter (state variations apply)
Free Withdrawals	10% of the beginning of year contract value can be withdrawn annually, free of charge. Long-term care benefit claims will reduce this amount. A free withdrawal followed by a complete surrender in the same contract year will result in the above charge being applied to both the amount previously taken as "free", in that contract year, and the remaining contract value withdrawn. (state variations apply) Note: Withdrawals, taken for purposes other than qualified long-term care benefits and Rider for Long-Term Care Benefit costs, will reduce the total amount available for long-term care benefits on a proportionate basis. A tax advisor should be consulted prior to taking withdrawals. If you withdraw an amount in excess of this Free Withdrawal amount (other than for long-term care benefits and costs), you may be subject to Withdrawal Charges and Market Value Adjustments (state variations apply). Withdrawals of taxable amounts are subject to ordinary income tax and may be subject to a 10% federal income tax penalty if taken before age 59½. Cash withdrawals and an elected annuitization option will impact subsequent long-term care benefits.
Market Value Adjustment (MVA)	A Market Value Adjustment, which may be positive or negative, applies during the Withdrawal Charge period to any withdrawals that are subject to withdrawal charges. (state variations may apply)
Free Look Period	Contract may be returned within 30 days for a return of the annuity premium, less withdrawals.

Important Note: Repositioning of assets from an existing product into a ForeCare fixed annuity contract may not be suitable for all clients. Clients should carefully consider factors such as remaining surrender charge schedule, possible market value adjustments and any other charges before determining if repositioning and/or exchanging of an existing annuity contract is right for their particular situation. State insurance replacement regulations may also apply.

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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 your 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.

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.

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

A fixed annuity is intended for retirement or other long-term needs. It is intended for a person who has sufficient cash or other liquid assets for living expenses and other unexpected emergencies, such as medical expenses. A fixed annuity is not a registered security or stock market investment and does not directly participate in any stock or equity investments or index.

Taxable distributions (including certain deemed distributions) are subject to ordinary income taxes, and if made prior to age 59½, may also be subject to a 10% federal income tax penalty.

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.

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