ATHENE

Variable Universal Life Request for Service Form

Athene Annuity & Life Assurance Company PO Box 19086 Greenville, SC 29602-9086   1.800.423.9398 ■ Variable Life
Overnight Address: 2000 Wade Hampton Blvd. Greenville, SC 29615-1064

1. Policy Information

Policy Number

Name of Insured	Social Security No.
Name of Policyowner *(If different than Insured)*	Social Security No. or Tax I.D. No.
Name of Joint Policyowner (*If applicable*)	Social Security No. or Tax I.D. No.

Address	City	State	Zip Code	( ) Telephone Number

2. Telephone Transfer Authorization

☐ I hereby authorize Athene Annuity & Life Assurance Company to accept transfer instructions from me by telephone.

☐ I hereby authorize Athene Annuity & Life Assurance Company to accept telephone transfer instructions related to the above-referenced insurance policy or annuity with the person or persons who can verbally confirm policy information outlined above as well as personal information listed below.

Name	Driver's License, SSN. or TIN No.			Date of Birth
Address	City	State	Zip Code	( ) Telephone Number
Name	Driver's License, SSN. or TIN No.			Date of Birth
Address	City	State	Zip Code	( ) Telephone Number

Any authorization provided to transfer funds is subject to the terms and provisions in the policy and prospectus. I accept any liability that may occur as a result of any telephone transfer or reallocation and hold Athene Annuity & Life Assurance Company ("the Company") harmless against any loss, cost, or expense rising out of that telephone transfer or reallocation. I understand (a) that this authorization can be terminated by me at any time by supplying written notification to the Company; and (b) that the Company reserves the right, in its sole discretion, to terminate this authorization at any time.

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3. Asset Rebalancing

This program permits you to automatically rebalance the values in your subaccounts to return to their original percentage allocations.

If telephone transfer privileges have been authorized, you may select or change this program by calling our service center. This program is subject to the terms and provisions of the policy and prospectus.

The minimum allowable period to participate in this program is 6 months and you must have an un-loaned accumulation value of at least $5,000 to participate. The Fixed Account option is not part of the asset rebalancing. Asset rebalancing is not available if dollar cost averaging is in effect.

Rebalance portfolios to the original percentages: ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

Designated day: _________________ (withdrawal will occur on the 15th day of the month or any other day designated (other than the 29th, 30th, or 31st). If the designated day falls on a non-business day, the withdrawal will occur the next business day.)

Variable Portfolios:

Invesco Variable Insurance Funds	
V.I. Core Equity	____%
V.I. High Yield	____%
American Century Investments	
VP Disciplined Core Value	____%
VP Ultra®	____%
VP Value	____%
BNY Mellon Investment Portfolios	
Small Cap Stock Index Portfolio	____%
BNY Mellon Stock Index Fund, Inc.	____%
Janus Aspen Series	
Overseas	____%
Lazard Retirement Series, Inc.	
Lazard Retirement U.S. Small-Mid Cap Equity	____%
Lord Abbett Series Fund, Inc.	
Calibrated Dividend Growth Fund	____%
Bond Debenture	____%
Growth & Income	____%
Mid Cap Stock	____%
T. Rowe Price Equity Series, Inc.	
Blue Chip Growth	____%
Equity Income Portfolio-II	____%
Health Sciences Portfolio-II	____%
Personal Strategy Balanced	____%
Vanguard Variable Insurance	
VIF Capital Growth	____%
VIF Mid-Cap Index	____%
VIF Real Estate Index	____%
VIF Small Company Growth	____%
VIF Total Bond Market Index	____%
VIF Total Stock Market Index	____%
Fidelity Variable Insurance Products	
Fidelity VIP Contrafund®	____%
Fidelity VIP Growth	____%
Fidelity VIP Investment Grade Bond	____%
Fidelity VIP Mid Cap	____%
Fidelity VIP Government Money Market	____%
Fidelity VIP Overseas	____%
TOTAL	100%

4. Transfer Request

If telephone transfer privileges have been authorized, you may select or change this program by calling our service center. This program is subject to the terms and provisions of the policy and prospectus. If you intend to adjust future allocations, section 7 of this form must be completed. You are entitled to make free transfers during a policy year subject to the terms and provisions of the policy and prospectus. Additional transfers can be made at a cost of $25 each. Minimum transfer amount is $250 or whole percentages with a total value of more than $250. A minimum of $250 must remain in either a Variable or Fixed Account after a transfer. Only one transfer out of the Fixed Account is allowed each policy year.

Please see list of funds on page 3

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FROM: VARIABLE PORTFOLIOS

Invesco Variable Insurance Funds			
V.I. Core Equity	$	Or	%
V.I. High Yield	$	Or	%
Fred Alger Management, Inc.			
Alger American LargeCap Growth, OS	$	Or	%
Alger American Capital Appreciation, OS	$	Or	%
Alger American MidCap Growth, OS	$	Or	%
Alger American SmallCap	$		%
American Century Investments			
VP Disciplined Core Value	$	Or	%
VP Ultra®	$	Or	%
VP Value	$	Or	%
BNY Mellon Investment Portfolios			
Small Cap Stock Index Portfolio	$	Or	%
Socially Responsible Growth	$	Or	%
Dreyfus Stock Index Fund, Inc.	$	Or	%
Janus Aspen Series			
Overseas	$	Or	%
Lazard Retirement Series, Inc.			
Lazard Retirement U.S. Small-Mid Cap Equity	$	Or	%
Lord Abbett Series Fund, Inc.			
Calibrated Dividend Growth Fund	$	Or	%
Bond Debenture	$	Or	%
Growth & Income	$	Or	%
Mid Cap Stock	$	Or	%
T. Rowe Price Equity Series, Inc.			
Blue Chip Growth	$	Or	%
Equity Income Portfolio-II	$	Or	%
Health Sciences Portfolio-II	$	Or	%
Moderate Allocation	$	Or	%
Vanguard Variable Insurance			
VIF Capital Growth	$	Or	%
VIF Mid-Cap Index	$	Or	%
VIF Real Estate Index	$	Or	%
VIF Small Company Growth	$	Or	%
VIF Total Bond Market Index	$	Or	%
VIF Total Stock Market Index	$	Or	%
Variable Insurance Products			
Fidelity VIP Contrafund®	$	Or	%
Fidelity VIP Growth	$	Or	%
Fidelity VIP Investment Grade Bond	$	Or	%
Fidelity VIP Mid Cap	$	Or	%
Fidelity VIP Government Money Market	$	Or	%
Fidelity VIP Overseas	$	Or	%
Federated Investment Management Company			
Federated Managed Volatility Fund II	$	Or	%
Neuberger Berman Advisers Management Trust			
Large Cap Value	$	Or	%
Wells Fargo			
VT Discovery	$	Or	%
VT Opportunity	$	Or	%
Fixed Account	$	Or	%
TOTAL	$	Or	100 %

TO: VARIABLE PORTFOLIOS

Invesco Variable Insurance Funds			
V.I. Core Equity	$	or	%
V.I. High Yield	$	or	%
American Century Investments			
VP Disciplined Core Value	$	or	%
VP Ultra®	$	or	%
VP Value	$	or	%
BNY Mellon Investment Portfolios			
Small Cap Stock Index Portfolio	$	or	%
BNY Mellon Stock Index Fund, Inc.	$	or	%
Janus Aspen Series			
Overseas	$	or	%
Lazard Retirement Series, Inc.			
Lazard Retirement U.S. Small-Mid Cap Equity	$	or	%
Lord Abbett Series Fund, Inc.			
Calibrated Dividend Growth Fund	$	or	%
Bond Debenture	$	or	%
Growth & Income	$	or	%
Mid Cap Stock	$	or	%
T. Rowe Price Equity Series, Inc.			
Blue Chip Growth	$	or	%
Equity Income Portfolio-II	$	or	%
Health Sciences Portfolio-II	$	or	%
Moderate Allocation	$	or	%
Vanguard Variable Insurance			
VIF Capital Growth	$	or	%
VIF Mid-Cap Index	$	or	%
VIF Real Estate Index	$	or	%
VIF Small Company Growth	$	or	%
VIF Total Bond Market Index	$	or	%
VIF Total Stock Market Index	$	or	%
Fidelity Variable Insurance Products			
Fidelity VIP Contrafund®	$	or	%
Fidelity VIP Growth	$	or	%
Fidelity VIP Investment Grade Bond	$	or	%
Fidelity VIP Mid Cap	$	or	%
Fidelity VIP Government Money Market	$	or	%
Fidelity VIP Overseas	$	or	%
Fixed Account	$	or	%
TOTAL	$	or	100%

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5. Interest Sweep (*Available for Duo only*)

If telephone transfer privileges have been authorized, you may select or change this program by calling our service center. This program is subject to the terms and provisions of the policy and prospectus.

This program permits you to automatically transfer the interest earned in the Fixed Account to another subaccount(s). The amounts allocated into dollar cost averaging are excluded from this program.

Transfer interest in Fixed Account ☐ Monthly ☐ Quarterly into the following sub account(s):

______________________________	________%
______________________________	________%
TOTAL	100 %

Designated day: _______________ (transfer will occur on the 15th day of the month or any other day you designate (other than the 29th, 30th, or 31st). If the designated day falls on a non-business day, the transfer will occur the next business day.)

6. Dollar Cost Averaging

If telephone transfer privileges have been authorized, you may select or change this program by calling our service center. This program is subject to the terms and provisions of the policy and prospectus.

You must have an un-loaned accumulation value of at least $5,000 to participate. You must participate in dollar cost averaging for at least 6 or 12 months (please select below). If you participate in dollar cost averaging, you may not select or participate in the asset rebalancing program. Dollar cost averaging automatically terminates if the policy value in the selected transfer portfolio is zero.

Designated day: _______________ (withdrawal will occur on the 15th day of the month or any other day you designate (other than the 29th, 30th, or 31st). If the designated day falls on a non-business day, the transfer will occur the next business day.)

A. Please elect either ☐ 6 month OR ☐ 12 month dollar cost averaging

B. Select Portfolio to transfer FROM one of the following: ☐ Money Market ☐ Fixed Account* ☐ Other ______________

C. ▪ Select the % or $ amount to be transferred (minimum $250) ____________ % or $ ____________

D. ▪ Indicate total % or $ amount to be transferred (minimum $1,500) ____________ % or $ ____________

To:

Fund	$	or	%
Invesco Variable Insurance Funds			
V.I. Core Equity	$	or	%
V.I. High Yield	$	or	%
American Century Investments			
VP Disciplined Core Value	$	or	%
VP Ultra®	$	or	%
VP Value	$	or	%
BNY Mellon Investment Portfolios			
Small Cap Stock Index Portfolio	$	or	%
BNY Mellon Stock Index Fund, Inc.	$	or	%
Janus Aspen Series			
Overseas	$	or	%
Lazard Retirement Series, Inc.			
Lazard Retirement U.S. Small-Mid Cap Equity	$	or	%
Lord Abbett Series Fund, Inc.	$	or	%
Calibrated Dividend Growth Fund	$	or	%
Bond Debenture	$	or	%
Growth & Income	$	or	%
Mid Cap Stock	$	or	%
T. Rowe Price Equity Series, Inc.			
Blue Chip Growth	$	or	%
Equity Income Portfolio-II	$	or	%
Health Sciences Portfolio-II	$	or	%
Moderate Allocation	$	or	%
Vanguard Variable Insurance			
VIF Capital Growth	$	or	%
VIF Mid-Cap Index	$	or	%
VIF Real Estate Index	$	or	%
VIF Small Company Growth	$	or	%
VIF Total Bond Market Index	$	or	%
VIF Total Stock Market Index	$	or	%
Fidelity Variable Insurance Products			
Fidelity VIP Contrafund®	$	or	%
Fidelity VIP Growth	$	or	%
Fidelity VIP Investment Grade Bond	$	or	%
Fidelity VIP Mid Cap	$	or	%
Fidelity VIP Government Money Market	$	or	%
Fidelity VIP Overseas	$	or	%
TOTAL	$	or	%

* *Not available in AL, MA or WA.*

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7. Allocation of Future Premium Payments

If telephone transfer privileges have been authorized, you may select or change this program by calling our service center. This program is subject to the terms and provisions of the policy and prospectus. Must be in whole percentages and total 100%.

Variable Portfolios:

Invesco Variable Insurance Funds	
V.I. Core Equity	%
V.I. High Yield	%
American Century Investments	
VP Disciplined Core Value	%
VP Ultra®	%
VP Value	%
BNY Mellon Investment Portfolios	
Small Cap Stock Index Portfolio	%
BNY Mellon Stock Index Fund, Inc.	%
Janus Aspen Series	
Overseas	%
Lazard Retirement Series, Inc.	
Lazard Retirement U.S. Small-Mid Cap Equity	%
Lord Abbett Series Fund, Inc.	
Calibrated Dividend Growth Fund	%
Bond Debenture	%
Growth & Income	%
Mid Cap Stock	**%**
T. Rowe Price Equity Series, Inc.	
Blue Chip Growth	%
Equity Income Portfolio-II	%
Health Sciences Portfolio-II	%
Moderate Allocation	%
Vanguard Variable Insurance	
VIF Capital Growth	%
VIF Mid-Cap Index	%
VIF Real Estate Index	%
VIF Small Company Growth	%
VIF Total Bond Market Index	%
VIF Total Stock Market Index	%
Fidelity Variable Insurance Products	
Fidelity VIP Contrafund®	%
Fidelity VIP Growth	%
Fidelity VIP Investment Grade Bond	%
Fidelity VIP Mid Cap	%
Fidelity VIP Government Money Market	%
Fidelity VIP Overseas	%
Fixed Account	%
TOTAL	100%

8. Full Surrender or Partial Surrender or Loan

☐ Full Surrender ☐ Partial Surrender ☐ Loan

☐ If partial surrender or loan, remit to Policyowner the amount of $_____________________ or complete the following amounts or fund percentage(s).

A Signature Guarantee is required if you request a surrender payable to a party other than yourself, if you request the check be mailed to an address other than the address we have on record for you, or if your address of record has been changed within 30 days of a withdrawal request.

NOTES:

- The distributions you receive may be subject to Federal Income Tax Withholding.
- Must withdraw a minimum of $250
- Cost for each partial surrender is $25
- $500 of cash surrender value in the policy must remain in your account.
- Maximum of 2 partial surrenders per policy year permitted
- Surrender/Loan will be pro-rata unless otherwise indicated
- **If Full Surrender requested, the original policy must be returned or a Lost Policy Affidavit completed**

Please see list of funds on page 6

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FROM:

Fund	$	or	%
Invesco Variable Insurance Funds			
V.I. Core Equity	$	or	%
V.I. High Yield	$	or	%
Fred Alger Management, Inc.			
Alger American LargeCap Growth, OS	$	or	%
Alger American Capital Appreciation, OS	$	or	%
Alger American MidCap Growth, OS	$	or	%
Alger American SmallCap	$	or	%
American Century Investments			
VP Disciplined Core Value	$	or	%
VP Ultra®	$	or	%
VP Value	$	or	%
BNY Mellon Investment Portfolios			
Small Cap Stock Index Portfolio	$	or	%
Socially Responsible Growth	$	or	%
BNY Mellon Stock Index Fund, Inc.	$	or	%
Janus Aspen Series			
Overseas	$	or	%
Lazard Retirement Series, Inc.			
Lazard Retirement U.S. Small-Mid Cap Equity	$	or	%
Lord Abbett Series Fund, Inc.			
Calibrated Dividend Growth Fund	$	or	%
Bond Debenture	$	or	%
Growth & Income	$	or	%
Mid Cap Stock	$	or	%
T. Rowe Price Equity Series, Inc.			
Blue Chip Growth	$	or	%
Equity Income Portfolio-II	$	or	%
Health Sciences Portfolio-II	$	or	%
Moderate Allocation	$	or	%
Vanguard Variable Insurance			
VIF Capital Growth	$	or	%
VIF Mid-Cap Index	$	or	%
VIF Real Estate Index	$	or	%
VIF Small Company Growth	$	or	%
VIF Total Bond Market Index	$	or	%
VIF Total Stock Market Index	$	or	%
Fidelity Variable Insurance Products			
Fidelity VIP Contrafund®	$	or	%
Fidelity VIP Growth	$	or	%
Fidelity VIP Investment Grade Bond	$	or	%
Fidelity VIP Mid Cap	$	or	%
Fidelity VIP Government Money Market	$	or	%
Fidelity VIP Overseas	$	or	%
Federated Investment Management Company			
Federated Managed Volatility Fund II	$	or	%
Neuberger Berman Adivsers Management Trust			
Large Cap Value	$	or	%
Wells Fargo			
VT Discovery	$	or	%
VT Opportunity	$	or	%
Fixed Account	$	or	%
TOTAL	$	or	100%

Please Check ☑ One (*If no election is made; Federal income tax will automatically be withheld*.)

- ☐ Withhold 10%
- ☐ Withhold another amount: $ ____________, or __________%
- ☐ Do not withhold Federal Income Tax

State income tax will be withheld if Federal Income Tax is withheld and you live in one of the following states: **CA, DE, GA, IA, KS, ME, MA, NC, OK, OR, VT, VA**

__Notice__: Federal law requires withholding a minimum of 10% Federal Income Tax from taxable distributions, unless you elect not to have taxes withheld or specify a different withholding amount. Withholding will only apply to that portion of your distribution that is includable in your income subject to Federal Income Tax. You may revoke this withholding election at any time by contacting Athene Annuity & Life Assurance Company in writing. Electing not to withhold at this time does not release the liability for payment of Federal and, if applicable, State Income Tax on the taxable portion of your payment. You may incur tax penalties if your withholding and tax payments are not adequate.

__Note:__ Athene Annuity & Life Assurance Company is unable to render tax advice, and therefore, we suggest that you consult your tax counsel or tax advisor regarding your financial situation.

NOTE: A delay in processing and/or backup withholding may result if the tax withholding option is not indicated above.

As owner of the Policy shown on page 1, I warrant and represent that I have the right under the policy to make this requested withdrawal or loan. I certify that the said Policy is not assigned or pledged as collateral to any person or corporation and that no proceedings in bankruptcy or insolvency, voluntary or involuntary, have now or ever been instituted.

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9. Death Benefit Option Change

- If owner is other than the insured, owner and insured signatures are required in Section 13.
- Evidence of insurability may be required.

☐ Level Death Benefit to Adjustable Death Benefit (Complete the following sections on an application A1028 (in Oregon use A1020): 1, 8 & 13. Submit the application with a completed Variable Life Request for Service Form.)

☐ Adjustable Death Benefit to Level Death Benefit

10. Change Premium

Please change my Modal Premium **FROM**: ☐ Monthly ☐ Semi-Annual ☐ Annual

TO: ☐ Monthly ☐ Semi-Annual ☐ Annual

Please change my Planned Premium from $______________________ to $______________________

11. Change Specified Amount

- If owner is other than the insured, owner and insured signatures are required in Section 13.
- Evidence of insurability may be required.

Please INCREASE my Specified Amount to $_____________________________________.

Please DECREASE my Specified Amount to $_____________________________________.

12. Other Information

____

____

____

13. Signature of Owners

I submit this request for the proposed changes with a full and complete understanding of each and every requested change. I hereby request that such changes be made.

*X*____
Signature of Owner Date

*X*____
Signature of Joint Owner Date

*X*____
Signature of Owner's Spouse Date
(*Required if resident of Community Property State*)

____
Printed Name of Owner's Spouse

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