

Retirement Stages Select<sup>SM</sup>

## **Fixed Index Annuity State Availability**

Issued by Delaware Life Insurance Company (Zionsville, IN)

## ▶ Current as of 03/17/2023

Product specific training is required prior to solicitation in all states.

State	Retirement Stages Select <sup>SM</sup>	Product Specific Training (PST) Required	Annuity Training (AT) Required
AK	<b>✓</b>	✓	<b>√</b>
AL	<b>✓</b>	<b>√</b>	<b>√</b>
AR	/	1	1
AZ	/	1	1
CA <sup>1,3,4</sup>	<b>✓</b>	<b>√</b>	<b>√</b>
СО	/	<b>√</b>	1
СТ	<b>✓</b>	<b>√</b>	<b>√</b>
DC	/	<b>√</b>	1
DE <sup>1</sup>	<b>✓</b>	<b>√</b>	1
FL <sup>1</sup>	<b>✓</b>	<b>√</b>	
<b>GA</b> <sup>1, 2</sup>	<b>✓</b>	<b>√</b>	1
HI	<b>✓</b>	<b>√</b>	1
IA	<b>✓</b>	<b>√</b>	<b>√</b>
ID¹	<b>✓</b>	<b>√</b>	<b>√</b>
IL <sup>1</sup>	<b>✓</b>	<b>√</b>	1
IN¹	<b>✓</b>	✓	<b>√</b>
KS <sup>1</sup>	1	<b>√</b>	1
KY	<b>✓</b>	✓	<b>√</b>
LA	<b>/</b>	<b>√</b>	<b>√</b>
MA <sup>1</sup>	<b>√</b>	<b>√</b>	<b>√</b>
MD	<b>/</b>	<b>√</b>	<b>√</b>
ME	1	<b>√</b>	1
MI	<b>/</b>	<b>√</b>	1
MN¹	<b>√</b>	<b>√</b>	<b>√</b>
MO <sup>1</sup>	<b>√</b>	<b>√</b>	<b>√</b>
MS	<b>✓</b>	✓	✓

State	Retirement Stages Select <sup>SM</sup>	Product Specific Training (PST) Required	Annuity Training (AT) Required
MT <sup>2</sup>	1	✓	1
NC¹	/	<b>√</b>	
ND	/	<b>√</b>	<b>√</b>
NE	1	<b>√</b>	1
NH	/	<b>√</b>	√ √
NJ	/	<b>√</b>	1
NM	<i>J J</i>	√ ✓	
NV¹	1	<b>√</b>	
ОН	/	✓	1
OK¹	1	<b>√</b>	1
OR	/	✓	<b>√</b>
<b>PA</b> <sup>1, 2</sup>	/	<b>√</b>	
PR <sup>1</sup>		N/A	
RI	/	<b>√</b>	<b>√</b>
SC	/	✓	1
SD <sup>1</sup>	<i>J</i>	<b>√</b>	<i>J</i>
TN¹	/	<b>√</b>	1
TX <sup>2</sup>	<i>J</i>	√ ✓	1
UT	/	<b>√</b>	
VA	/	1	1
VT	/	<b>√</b>	
WA <sup>1</sup>	/	<b>√</b>	<b>✓</b>
WI	/	<b>√</b>	<b>✓</b>
WV	1	<b>√</b>	<b>√</b>
WY <sup>1</sup>	/	1	<b>√</b>

<sup>&</sup>lt;sup>1</sup> State specific replacement requirements.

<sup>&</sup>lt;sup>2</sup> Pre-appointment is required prior to the solicitation of business.

<sup>&</sup>lt;sup>3</sup> Product Variations exist for this product. Consult the State-specific Application and Disclosure Statement for more information.

<sup>&</sup>lt;sup>4</sup>No Terminal Illness/Nursing Home Waiver.

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