Single premium deferred annuity with long-term care (LTC) benefits

**Issue ages** 45 – 74

**Available market** Nonqualified

**Minimum premium**
The minimum single premium is $50,000.

**Maximum premium** *(without prior Home Office approval)*
Triple Leverage Option (2+4 benefit duration): $400,000
Double Leverage Option (3+3 benefit duration): $600,000
The maximum premium limit is per contractowner, including previous *Lincoln Long-Term Care* Fixed Annuity contracts involving the same individual.

**Interest rate**
Contract’s interest rate will be the interest rate in effect on the day the contract is issued.

**Interest rate guarantee period**
Initial: Seven years  Subsequent: One year

**Guaranteed minimum interest rate**
During the guarantee period: 1.25%
After the initial guarantee period: Between 1.00% and 3.00%

**Accumulation value (contract value)**
Before annuity payments begin: The single premium plus interest, and less LTC benefits paid, LTC benefit charges, partial surrenders, surrender charges, Market Value Adjustment (MVA), and any deductions for taxes if Lincoln is required to pay them.

**Surrender charges** *(percentage of accumulation value surrendered)*
Surrender charges and an MVA apply to the amount of contract value withdrawn, other than for LTC benefits, or surrendered in excess of the free withdrawal amount.

<table>
<thead>
<tr>
<th>Contract year</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8+</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8%</td>
<td>8%</td>
<td>7%</td>
<td>6%</td>
<td>5%</td>
<td>4%</td>
<td>3%</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Market Value Adjustment (MVA)**
If you access more than the 10% free withdrawal amount before the end of the surrender charge period, it may be subject to a surrender charge and an MVA. The MVA is a positive or negative adjustment, based on the current interest rate environment at the time of the surrender. The MVA does not apply to: LTC benefits, withdrawals after the surrender charge period, 10% free withdrawals, the death benefit, and annuitization.

**Partial surrenders**
Beginning in the first contract year, up to 10% (known as the free withdrawal amount) of contract value may be withdrawn each contract year without incurring surrender charges.

**Note:** Withdrawals taken for purposes other than for LTC benefits will reduce total LTC benefits on a pro rata basis, which means the amount of the reduction may be more than the amount withdrawn.

**Death benefit (prior to annuitization)**
Upon the death of the contractowner or annuitant, beneficiaries receive the contract value.

**Scheduled maturity date**
Later of the 10th contract anniversary or the contract anniversary on or immediately following the annuitant’s 95th birthday. Maturity date may be changed after the fifth contract year to any date earlier than the 95th birthday.

**Choice of income payment options (annuitization)**
After the fifth contract year, the contract value without surrender charges or an MVA may be received under a number of income payment options, including an income that cannot be outlived.

**Long-term care (LTC) benefits**
Monthly LTC benefits are paid when the covered life:

- Has been given and follows a plan of care prescribed by a licensed healthcare practitioner.
- Has been certified by a licensed healthcare practitioner as being chronically ill, which is the incapacity to perform two of six activities of daily living (ADLs) for at least 90 days; and/or has a severe cognitive disability that requires the covered life to have substantial supervision; and is receiving qualified long-term care services. The ADLs include bathing, continence, dressing, eating, toileting and transferring. Qualified long-term care services include maintenance or personal care service or any diagnostic, preventive, therapeutic, curing, treating, mitigating and rehabilitative service.

Total LTC benefits are paid over a minimum of six years. Maximum monthly LTC benefits are available after the fifth contract anniversary. Lower monthly LTC benefit payments may be received after the first contract anniversary; lower monthly payments are spread over longer than six years, but total LTC benefits remain the same.

(continued on next page)
Before LTC benefit payments are received, a 90-day deductible period must first be satisfied.

Primary LTC benefits: An acceleration benefit is paid first from the contract value during the acceleration benefit duration and an extension benefit is then paid from Lincoln funds during the extension benefit duration.

An additional growth benefit may also be available.

The maximum monthly LTC benefit is recalculated on each contract anniversary and each time a withdrawal other than for LTC benefits is made. The monthly amount of coverage is based on the amount of the single premium paid, the leverage option chosen and when LTC benefits are taken.

The chart below shows the amounts of LTC benefits that may be received for a single premium payment of $50,000. The amounts assume no growth, no withdrawals taken, and no LTC benefits paid before the fifth contract anniversary.

The contractowner chooses the leverage option at contract issue.

<table>
<thead>
<tr>
<th>Acceleration benefit duration</th>
<th>Extension benefit duration</th>
<th>Guaranteed monthly maximum benefit</th>
<th>Total long-term care benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triple Leverage Option</td>
<td>2 years</td>
<td>4 years</td>
<td>$2,083.33</td>
</tr>
<tr>
<td>Double Leverage Option</td>
<td>3 years</td>
<td>3 years</td>
<td>$1,388.89</td>
</tr>
</tbody>
</table>

If the covered life is not in a nursing home or is not receiving hospice care, the monthly benefit is reduced by 50%; the total benefits payable are the same, but are paid over a period longer than six years.

An optional nonforfeiture benefit may be elected.

### LTC benefit charges

<table>
<thead>
<tr>
<th>Acceleration charge</th>
<th>Currently zero</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extension charge</td>
<td>The cost of the LTC benefits Lincoln provides</td>
</tr>
<tr>
<td>Nonforfeiture charge</td>
<td>Only if the optional nonforfeiture benefit is elected</td>
</tr>
</tbody>
</table>

Charges are based on the contractowner’s age at contract issue and the leverage option chosen.

It is possible that the annual charge may exceed the amount of interest credited in a contract year.

The Lincoln Long-Term Care™ Fixed Annuity may not cover all of the long-term care expenses incurred during the period of coverage. Accordingly, Lincoln strongly advises that all contract terms, conditions, limitations and exclusions be carefully reviewed.

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Lincoln Long-Term Care® Fixed Annuity (Contract Form 09-612, or state variation) with Long-Term Care Benefits Rider (Form AE-227, or state variation), Long-Term Care Coverage Endorsement (Form AE-235, or state variation; endorsement covered under form AE-227 in the state of Maryland) and Contract Amendment for Long-Term Care Benefits (Form AE-236, or state variation) is issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, and distributed by Lincoln Financial Distributors, Inc., a broker/dealer. The Lincoln National Life Insurance Company does not solicit business in the state of New York, nor is it authorized to do so. Contractual obligations are backed by the claims-paying ability of The Lincoln National Life Insurance Company.

The exact terms of the annuity are contained in the contracts and any attached riders, endorsements and amendments, which will control the issuing company’s contractual obligations. For more information about the annuity, please also read the Disclosure Statement and Client Guide, or contact your Lincoln representative.

Income taxes are due upon withdrawal other than for LTC Benefits and, if withdrawn before age 59½, a 10% federal penalty tax may apply. Withdrawals other than for LTC Benefits and surrenders may be subject to surrender charges and an MVA.

Product and features are subject to state availability. Limitations and exclusions may apply. Limitations and exclusions on eligibility of Long-Term Care Benefits include: receiving treatment for nervous or mental disorders (excluding Alzheimer’s disease or dementia), receiving treatment for alcoholism or drug addiction (unless the drug addiction is a result of medication taken in doses as prescribed by a physician), receiving treatment arising out of an attempt at suicide or an intentionally self-inflicted injury, or receiving treatment provided in a Veteran’s Administration or other government facility. Anyone receiving qualified long-term care services for which benefits are available under Medicare or other governmental programs (except Medicaid), workers compensation laws (unless the exclusion extends to only specific medical charges for which the employee, employer, or carrier is liable or responsible according to a final adjudication of the claim), employer’s liability laws, occupational disease laws, or motor vehicle no-fault laws will also not be eligible. Additionally, this includes qualified long-term care services provided by members of the covered life’s immediate family, whether paid or unpaid.