

MoneyGuard Fixed Advantage® (2025)

Fact sheet

Universal life insurance policy with a long-term care rider designed to pay for qualified long-term care expenses.

Product features and benefits

Issue ages and classes

Ages 40-80 (age last birthday), male/female, couples discount,1 standard

 Couples discount applies to individuals who are legally married (traditional or same-sex) or have a partner in a civil union or domestic partnership or are in a common-law marriage as recognized in the state where the policy is issued.

Premiums

May be paid as a single premium or as flexible premiums. Premiums are split between life insurance and long-term care. The LTC portion of your premium may be tax deductible. Flexible premiums available to be paid up to 10 years; could be lower for higher issue ages.

 Premium Modes: Annual, Semiannual, Quarterly, Monthly (requires EFT)

Amount of coverage

Minimum specified amount of death benefit: \$50,000 Maximum specified amount of death benefit: \$500,000

Inflation protection options

Help protect your wealth with optional compound inflation protection that will increase your long-term care benefits. Choose a compound increase of 3% or 5% for an additional cost.

Long-term care benefits will continue to grow while on claim and receiving benefits.

No-lapse guarantee

This feature guarantees that your policy will not lapse if the minimum monthly no-lapse premium is paid. The no-lapse guarantee is provided through the Value Protection Endorsement.

Benefits available

At time of LTC claim, you can elect to receive long-term care benefits via reimbursement or indemnity. You choose reimbursement or indemnity at time of first LTC Claim with that choice being irrevocable (this remains for future claims). The indemnity choice option provides 80% of the Monthly Maximum Benefit Amount. Your total long-term care benefits will not be impacted by the decision. Additional tax filing requirements may apply to the indemnity option. You should discuss with a tax professional prior to election.

Return of premium options

If your situation changes, you are eligible for return of premium. This benefit begins from the time of first premium payment. You choose a Return of Premium option at the time of purchase and it cannot be changed.

Option 1 - Basic

Choose higher long-term care benefits

A return of 70% of paid premiums

Option 2 - Vested

Choose full return of premium for an additional cost

 A return of 100% of paid premiums is available after year 10. Please see vesting schedule below.

Vesting schedule

Year 1	70%	Year 5	82%	Year 9	94%
Year 2	73%	Year 6	85%	Year 10	97%
Year 3	76%	Year 7	88%	Year 11+	100%
Year 4	79%	Year 8	91%		

¹ In Montana, you receive a couples discount underwriting class if you have a partner. A partner is the one person with whom you share a common permanent residence. Please see the *MoneyGuard*® Application For Individual Life Insurance and Individual Long-Term Care – Part I for complete definition.

This is only a summary. Please see policy for complete details.

Terminal illness rider

Provides a one-time claim for 25% to 75% of the current specified amount of death benefit, up to \$250,000. This rider is included in your policy. If you receive benefits under this rider it will terminate the long-term care rider and you will not receive any further long-term care benefits.

Elimination period

Once eligible, there is no deductible or waiting period for long-term care benefits to begin.

Benefit Transfer Rider (BTR)

Included at issue for no additional cost. This rider provides beneficiaries, who are also the Insured on a separate policy with BTR, the ability to increase their benefits using a portion of or all of their death claim proceeds.²

In order to use this rider, both the insured and beneficiary, must be included on existing policies, the BTR must be active on both policies and the beneficiary is the insured on their policy. Benefit Transfers do not create any additional ROP value.

Covered services

Adult day care

Social and health-related services by a state-licensed or certified program in a group setting.

Alternative care services

These services are an alternative to services otherwise covered but are prescribed in the plan of care from a licensed health care practitioner.

Assisted living facility

A residential facility that provides ongoing assistance.

Bed reservation benefit

Your policy will pay for bed reservations for up to 30 days during each calendar year.

Care planning services

Your policy will reimburse expenses for care plan services provided by a care planning agency.

Caregiver training

Up to \$500 lifetime maximum to train a primary caregiver.

Home health care

Services provided by a licensed home health care agency in your home.

Hospice

Provide benefits for the terminal phase of life.

Noncontinual services

Services received on a one-time basis, such as durable medical equipment or modifications to your residence.

Nursing home

A licensed facility that provides continual nursing care.

Respite care

Short-term services provided to relieve your primary caregiver.

Benefit eligibility

When you contact our claims department to file a claim, we will request an assessment to be performed by a licensed health care practitioner to determine your benefit eligibility. If we provide the assessor, it will be provided at our expense. We may also choose to accept the assessment of your licensed health care practitioner. To be eligible for benefits, the licensed health care practitioner who performs the assessment must certify that you are chronically ill and unable to perform at least two activities of daily living (bathing, continence, dressing, eating, toileting, and transferring) for at least 90 days. You are also considered chronically ill if you require substantial supervision to protect you from threats to health and safety caused by severe cognitive impairment. Recertification of your benefit eligibility is required at least annually. If you have chosen Indemnity, you can adjust the amount of the claim benefit within limits at time of required recertification.

The policy and rider are subject to medical underwriting.

² Benefits can be utilized without needing to go through Underwriting

General exclusions and limitations

The Long-Term Care Benefits Rider (LTCBR) will not provide benefits for:

- A) Treatment or care due to alcoholism or drug addiction;
- **B)** Treatment arising out of an attempt (whether sane, mentally or psychologically impaired or insane) at suicide or an intentionally self-inflicted injury;
- C) Treatment provided in a Veterans Administration or government facility, unless the Insured or the Insured's estate is charged for the confinement or services or unless otherwise required by law;
- **D)** Loss to the extent that benefits are payable under any of the following:
 - Medicare or any other governmental programs (except Medicaid);
 - 2. State or federal workers' compensation laws;
 - 3. Employer's liability laws;
 - 4. Occupational disease laws; and
 - 5. Any motor vehicle no-fault laws;
- E) Confinement or care received outside the United States or its territories and possessions, other than benefits for Nursing Home Care Services and Assisted Living Facility Services as described in the International Benefits provision;

- F) Services provided by a facility or an agency that does not meet the Rider definition for such facility or agency as described in the Covered Services section of this Rider, except as provided in the Alternative Care Services provision above;
- **G)** Services provided by an Immediate Family Member, except as described in this Rider, unless:
 - The Immediate Family Member is a regular employee of the service or care provider furnishing the service or care;
 - 2. The service or care provider receives the payment for the service or care; and
 - 3. The Immediate Family Member receives no compensation other than the normal compensation for an employee in his or her job category; and
- **H)** Services for which no charge is or would normally be made in the absence of insurance.

Important facts about your policy

Pre-existing conditions

We will not deny benefits for pre-existing conditions. This does not preclude us from exercising other remedies available at law, in equity or in contract because of misrepresentations. A pre-existing condition is a condition of the insured for which medical advice or treatment was discussed with, recommended by, or received from, any provider of health, psychological or other care services within six months preceding the issue date.

Policy loans and withdrawals

Long-term care benefits and death benefit will be reduced if any withdrawals or loans are taken. Taking loans or withdrawals may jeopardize your policy's performance and guarantees. The surrender charge duration is 15 years, and is per thousand dollars of Specified Amount. The surrender charge set in any given year is level throughout the policy year. Any additional surrender benefit provided will be adjusted by any loans/loan interest/loan repayments, withdrawals taken, and claim payments made.

Interest credits and tax-deferred growth

Your policy cash value will increase each month due to a guaranteed 2% credited interest rate and will decrease due to policy charges, receipt of benefits and/or partial withdrawals of policy value. Current interest rate may be higher.



Discover how to add a long-term care funding solution to your future plans. Talk with your financial professional today.

Not a deposit

Not FDIC-insured

Not insured by any federal government agency

Not guaranteed by any bank or savings association

Variable products may lose value

©2025 Lincoln National Corporation

Lincoln Financial.com

Lincoln Financial is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

ICC24LCN-7084867-100224 LCN-7084867-100224 PDF ADA 4/25 **Z01 Order code: MFA-FACT-FST001**



Tax information

All references to tax benefits are based on the Lincoln understanding of current tax laws and regulations. Consult your tax financial professional for additional information.

Income tax-free long-term care benefit

Benefits are generally paid income tax-free under Internal Revenue Code Section 104(a)(3). Choose between a minimum 3–6 years of long-term care benefits based on the duration of the Long-Term Care Benefits Rider (LTCBR) option that you choose. Long-term care coverage will continue as long as you remain eligible or until your entire long-term care benefit is exhausted. Additional tax filing requirements may apply to payments under the indemnity option. Clients should discuss with a tax professional prior to election.

Income tax-free death benefit

If you never need long-term care and all planned premiums are paid to keep your policy inforce, a death benefit is paid to your beneficiaries, income tax-free under Internal Revenue Code Section 101(a)(1). If your entire specified death benefit amount has been used to pay for long-term care, your beneficiaries receive a residual death benefit as outlined in your policy specifications pages, generally \$25,000 or more depending on Specified Amount.

Important information

Lincoln Financial® affiliates, their distributors, and their respective employees, representatives, and/or insurance agents do not provide tax, accounting, or legal advice. Please consult an independent financial professional as to any tax, accounting, or legal statements made herein.

This material is provided by the insurance company that issues the product described herein; it is intended for use with the general public. The issuing insurance company, as well as affiliated companies, has financial interests that are served by the sale of this product. Ask your financial professional for assistance with your situation.

MoneyGuard Fixed Advantage® (2025) is a universal life insurance policy issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, on Policy Form ICC24-MG893/24-MG893 and state variations with the following riders: Value Protection Endorsement (VPE) on form ICC24END-10538/END-10538; Long-Term Care Benefits Rider (LTCBR) on form ICC24LTCBR-897/LTCBR-897; Benefit Transfer Rider on form ICC24BTR-900/BTR-900.

The cost of riders will be deducted monthly from the policy cash value. Renewability, Termination and Cancelability: The LTCBR is noncancelable. This means you have the right, subject to the terms of your policy and rider(s), to continue these riders as long as your policy stays in-force.

The Lincoln National Life Insurance Company cannot change any of the terms of your policy and rider(s) on its own and cannot increase the monthly rider charges or monthly inflation charges. If your policy enters a grace period, we will allow 61 days to pay a premium sufficient to prevent your policy from lapsing. The insurance policy and riders have limitations, exclusions and reductions. Long-term care benefit riders may not cover all costs associated with long-term care costs incurred by the insured during the coverage period. All contract provisions, including limitations and exclusions, should be carefully reviewed by the owner. For costs and complete coverage details, contact your agent or producer.

Accelerated death benefits may be taxable and may affect public assistance eligibility.

In most cases, based on our understanding of applicable law, the policy will be a Modified Endowment Contract (MEC) as defined in section 7702A of the Internal Revenue Code. Distributions from a MEC may be subject to income tax, and an additional 10% federal income tax penalty applies to taxable distributions received before the policy owner reaches age 59½.

The Lincoln National Life Insurance Company does not solicit business in the state of New York, nor is it authorized to do so.

All guarantees and benefits of the insurance policy are subject to the claims-paying ability of the issuing insurance company. They are not backed by the broker-dealer and/or insurance agency selling the policy, or any affiliates of those entities other than the issuing company affiliates, and none makes any representations or guarantees regarding the claims-paying ability of the issuer.

It is possible coverage will expire when either no premiums are paid following the initial premium, or subsequent premiums are insufficient to continue coverage.

Not available in NY. Subject to state availability.