EquiTrust Life Insurance Company®
West Des Moines, Iowa

Executive Office
7100 Westown Parkway, Suite 200
West Des Moines, Iowa 50266-2521
1-866-598-3692

California Department of Insurance
1-800-927-4357

In this Contract, "you" or "your" will refer to the Owner and "we", "our", or "us" will refer to EquiTrust Life Insurance Company®, a stock company.

We EquiTrust Life Insurance Company (the "Company") will pay the benefits of this Contract subject to all of its terms**. Read this Contract carefully.** This is a legal Contract between the Owner and the Company.

RIGHT TO EXAMINE AND RETURN THIS CONTRACT

If you are not satisfied, you may cancel your Contract by returning it by mail or other delivery method within 30 days after the date you receive it. Mail or deliver it to us at the address shown above or to your agent. (If you return the Contract by mail, it will be deemed returned when postmarked, properly addressed, and postage prepaid.) This Contract will then be void from its start. Any premium paid will be refunded.

IMPORTANT!
You have purchased an annuity contract, referred to below as a "policy". Carefully review it for limitations.
This policy may be returned within 30 days from the date you received it for a full refund by returning it to the insurance company or agent who sold you this policy. After 30 days, cancellation may result in a substantial penalty, known as a surrender charge.

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The surrender charge schedule is located on page 3, and additional surrender charge information starts on page 8 of this contract. The surrender charge period is 9 years.

Signed for and on behalf of EquiTrust Life Insurance Company, effective as of the Contract Date.

Vice President

Secretary

FLEXIBLE PREMIUM FIXED DEFERRED ANNUITY CONTRACT WITH INDEX-LINKED CREDITING OPTIONS

Contract features include:

- **Annuity benefit payable at Income Date**
- **Death benefit payable in event of the Owner's death prior to Income Date**
- **Dividends are not paid (Nonparticipating)**

Cash Surrender Values may increase or decrease based on the Index features of this Contract. While Contract values may be affected by an external index, the Contract does not directly participate in any stock, bond or equity investments. The initial interest rate in any fixed rate account is guaranteed for a limited period of time.

After the first Contract Year, Partial Surrenders of up to 10% of the Contract's Accumulation Value as of the last Contract Anniversary may be made without a Surrender Charge.

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Additional benefits and endorsements which apply to this Contract are described in the forms following the last page of this Contract.

CONTRACT DATA PAGE

ANNUITANT:	{John Doe}
ANNUITANT'S SEX :	{Male}
AGE:	{65}
OWNER:	{John Doe}
CONTRACT NUMBER:	{EQOOO1123456F}
CONTRACT DATE:	{01/01/2027}
INCOME DATE:	{01/01/2062}
INITIAL PREMIUM PAID:	${100,000}
MINIMUM GUARANTEED CONTRACT RATE:	Subject to Change
PAYMENT PLAN MINIMUM INTEREST RATE:	Subject to Change
PAYMENT PLAN MORTALITY TABLE:	Annuity 2000 Mortality Table
INITIAL MINIMUM PREMIUM AMOUNT:	$50,000
FIRST YEAR MAXIMUM PREMIUM AMOUNT:	{$1,000,000}
RENEWAL YEAR MAXIMUM PREMIUM AMOUNT:	$250,000

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Specific Premium Allocations are detailed on the following pages.

Nonforfeiture Values: The nonforfeiture value for this Contract is equal to 87.5% of premiums less Partial Surrenders, if any, accumulated at the Minimum Guaranteed Contract Rate, compounded annually.

The Surrender Charge is a percentage of the Accumulation Value surrendered or withdrawn and is measured from the beginning of each Contract Year. The percentage is shown below:

Contract Year	1	2	3	4	5	6	7	8	9	10 and later
Percentage	8.3	7.4	6.5	5.6	4.7	3.7	2.8	1.9	0.9	0

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FIXED ACCOUNT SPECIFICATIONS

FIXED ACCOUNT PREMIUM ALLOCATION	<<VARIABLE ITEM>>
INITIAL FIXED ACCOUNT INTEREST RATE	<<VARIABLE ITEM>>
FIXED ACCOUNT RATE GUARANTEE PERIOD	1 Year
MINIMUM GUARANTEED INTEREST RATE	1.0%

The Initial Fixed Account Interest Rate will be in effect for the Fixed Account Rate Guarantee Period shown above. Any interest rate applied to the Fixed Account will not be less than the Minimum Guaranteed Interest Rate.

Account Accumulation Date means every Contract Anniversary after the Premium or Transfer Amount is received into the Fixed Account.

Fixed Account Accumulation Value

The Account Accumulation Value equals:

(a) All Premium and Transfer Amounts allocated to this Account; less

(b) Adjustments for any Partial Surrenders or transfers out of the Account; plus

(c) Interest credited.

Interest is compounded annually. We may credit excess interest to the Fixed Account while the Contract is in force and before the Proceeds have been paid. Excess interest will be declared in advance and will not be changed more frequently than once during any 12-month period.

In case of full or Partial Surrender or transfers out of the Fixed Account, interest will be credited on the portion of the Account Accumulation Value surrendered or transferred up to the transaction date. The Account Accumulation Value at any date within a Contract Year will be determined by us with allowance for the time elapsed in the Contract Year.

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SPECIMEN

1. GENERAL DEFINITIONS

Accounts mean any of the Accounts available under the Contract, which may be attached as endorsements. When a Premium payment is made, you may specify the allocation of the Premium payment among the selected Accounts. We reserve the right to add Accounts as approved by the Insurance Department of the state in which the Contract is issued. We may cease to accept Premiums/Transfer Amounts to a specific Account at any time. Any new Premiums/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time.

Age means Age at the last birthday.

Annuitant means the person(s) on whose life the annuity benefit for this Contract is based.

Beneficiary means the person or entity you have chosen to receive the Proceeds of the Contract on the Owner's death, as shown in our records. There may be different classes of Beneficiaries, such as primary and contingent. These classes set the order of payment. There may be more than one Beneficiary in a class.

Contract is this document, issued to you in consideration of the payment of the Initial Premium. It includes any attached application, amendments, endorsements, or riders. Only our President, a Vice President or Secretary can change, modify or waive the provisions of the Contract.

Contract Anniversary(ies) means the same date in each year as the Contract Date.

Contract Date means the date on which the Contract is effective (Effective Date). Contract Years and Anniversaries are measured from the Contract Date. The Contract Date is shown on the Contract Data Page.

Contract Year means the 12-month period that begins on the Contract Date or on a Contract Anniversary.

Due Proof of Death is a certified copy of an official death certificate, a certified copy of a decree of a court of competent jurisdiction as to the finding of death, and information required to pay the claim as requested on the claim form provided by us.

Effective Date as it appears in any attachments to the Contract means the Contract Date, unless otherwise noted.

Income Date means the date the Contract's values are applied to a Payment Plan. The Income Date is calculated at issue as the Contract Anniversary after the Annuitant's 100th birthday (or the 100th birthday of the Joint Annuitant, if older) and cannot be changed. The Income Date is shown on the Contract Data Page.

Nonparticipating means this Contract will not pay dividends. It will not participate in any of our surplus or earnings.

Owner means the person (or persons) who owns the Contract, as shown in our records, and who is entitled to exercise all rights and privileges provided in the Contract. The original Owner is shown on the Contract Data Page. The term "person", includes a trust, corporation, partnership, association, or like entity for this purpose.

Proceeds mean the amount payable under the Contract.

Transfer Amount means the amount of Accumulation Value transferring from one Account to another.

SPECIMEN

2. PAYMENT OF PROCEEDS

On the Income Date, we will pay the Accumulation Value of the Contract to the Owner(s) if the Annuitant is living, unless Section 2.3 applies. You must elect, at least 30 days prior to the Income Date, to have the Proceeds paid under one of the Payment Plans set out in Section 6. If no election is made, Proceeds will be paid automatically as a monthly income for a minimum of 120 months and as long thereafter as the Annuitant lives.

2.1 Death of Annuitant

If the Owner is not the Annuitant, and any Annuitant (and any Joint Annuitants) dies while this Contract is in-force, all Owners must:

(a) notify us within 90 days; and

(b) choose a new Annuitant.

If all Owners do not choose a new Annuitant within 90 days of any Annuitant's death, the oldest of all Owners becomes the Annuitant.

For purposes of this section, if any Owner of this Contract is not a natural person, the death of the Annuitant shall be treated as the death of an Owner.

2.2 Surrender of Contract - Any time prior to the Income Date, you may ask to receive the Cash Surrender Value of the Contract. Proceeds payable to you on full surrender of the Contract will be the Cash Surrender Value as defined in Section 5.2. Proceeds payable on a Partial Surrender of the Contract will be as defined in Section 5.5. We may require the Contract to be returned to us when the Proceeds are paid.

2.3 Death of Contract Owner

Proceeds payable upon death will be the Death Benefit as defined in Section 5.4.

(a) If any Owner of the Contract dies before the Income Date, the following applies:

(i) If the sole, designated Beneficiary is the deceased Owner's spouse, the Contract will continue and, if the deceased Owner was also the Annuitant, the deceased Owner's spouse will also be the Annuitant.

(ii) If the designated Beneficiary of the deceased Owner's interest is someone other than the deceased Owner's spouse, the entire interest in the Contract must be distributed: (a) within 5 years of the deceased Owner's death; or (b) as to the portion of the deceased owner's interest in the Contract, over the life of the designated Beneficiary or over a period not extending beyond the life expectancy of the designated Beneficiary, with payments beginning within one year of the deceased Owner's death.

If the deceased Owner was the Annuitant, the new Owner will be the Joint Owner, if any, or the Beneficiary if there is no Joint Owner. If the deceased Owner was not the Annuitant, the new Owner will be the Joint Owner, if any, or the Annuitant if there is no Joint Owner. If the new Owner under Section 2.3(a)(ii) dies after the deceased Owner but before the entire interest has been distributed, any remaining distributions will be paid to the new Owner's estate.

(b) If any Owner dies on or after the Income Date, but before all Proceeds payable under the Contract have been distributed, we will continue payments to the Beneficiary under the payment method in effect at the time of the deceased Owner's death.

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(c) If anything in the Contract conflicts with the foregoing Death of Owner provisions, those provisions shall control. The foregoing Death of Owner provisions and the Contract shall, in all events, be construed in a manner consistent with Section 72(s) of the Internal Revenue Code of 1986, as amended.

2.4 Interest on Proceeds Payable at the Owner's Death - If Proceeds are not paid in one sum or applied under a Payment Plan within 30 days after we receive Due Proof of Death of the Owner, we will pay interest on the Proceeds. Interest will be paid at the rate required by applicable state law from the date we receive Due Proof of Death until the Proceeds are paid or applied under a Payment Plan.

2.5 Exemption of Proceeds - All payments of Proceeds under the Contract will be made from our Executive Office. To the extent allowed by law, the Proceeds will be free from creditors' claims or legal process.

3. OWNERSHIP, ASSIGNMENT AND BENEFICIARY(IES) PROVISIONS

3.1 Ownership - As an Owner, you can exercise the rights given by the Contract provided, however, that no Ownership rights will exist if Section 2.3(a)(ii) applies. You can change the Owner at any time during the Annuitant's life. Any change in Ownership must be requested at our Executive Office. The request must be in a form provided by us. Unless specified by the Owner, the change will go into effect on the date the notice of change is signed by the Owner, subject to any payments we make or actions we take before we record the change.

If the Contract is owned by a trust, corporation, partnership, association or other like entity the Annuitant is considered the Owner for purposes of the death benefit provision.

3.2 Assigning Your Contract - You can assign your rights under the Contract to someone else. Such an assignment is not a change of Ownership. Consent of any Irrevocable Beneficiaries is required before any such assignment is effective.

To assign your Contract, you must make a request to our Executive Office. Unless otherwise specified by the Owner, the change will go into effect on the date the notice of assignment is signed, subject to any payments we make or actions we take before we record the assignment. We are not responsible for the validity or effect of any assignment, including any tax consequences.

3.3 Beneficiary - You may name any Beneficiary to be an Irrevocable Beneficiary. The interest of an Irrevocable Beneficiary cannot be changed without his or her consent. Otherwise, Beneficiaries can be changed as explained below.

Unless you state otherwise, all rights of any Beneficiary, including an Irrevocable Beneficiary, will end if he or she dies before the Owner. If any Beneficiary dies before the Owner, that Beneficiary's interest will pass to any other Beneficiaries according to their respective interests. If all Beneficiaries die before the Owner, upon the Owner's death we will pay the Proceeds to your estate or legal successors.

You can change the Beneficiary at any time during the Annuitant's life. To do so, make a request to our Executive Office. Unless otherwise specified by the Owner, the change will go into effect on the date the notice of change is signed by the Owner, subject to any payments we make or actions we take before we record the change.

A change cancels all prior Beneficiaries; except, however, a change will not cancel any Irrevocable Beneficiary without his or her consent. The interest of the Beneficiary will be subject to:

(a) any assignment of the Contract, accepted and recorded by us prior to the Annuitant's death; and
(b) any Payment Plan in effect on the date of the Annuitant's death.

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3.4 Simultaneous Death of Beneficiary and Owner – Proceeds will be paid as though any Beneficiary died before the Owner if:
(a) the Beneficiary dies at the same time as the Owner; or
(b) within 24 hours of the Owner's death.

4. PREMIUM

The Initial Premium for the Contract is payable no later than the Contract Date. There is no Contract until the Initial Premium is paid. If any check presented as payment of any part of the Initial Premium for a Contract is not honored, the Contract will be void.

Premiums after the Initial Premium may be paid while the Contract is in force prior to the Income Date or prior to the Owner's death. We may require that the initial premium be at least as high as the Initial Minimum Premium Amount. We may limit or restrict the amount of a premium payment that we will accept in the first contract year without prior approval to the First Year Maximum Premium Amount. Premiums received after the first Contract Anniversary may be limited to the Renewal Year Maximum Premium Amount per Contract year without prior approval.

4.1 Allocation of Premiums – You may allocate Premiums among the available Accounts. We may cease to accept new Premiums/Transfer Amounts to a specific Account(s) at any time. Any new Premiums/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time. The amount allocated to an Account must be at least $2,000.

All Premium payments are invested in the general account of the Company. Interest/earnings will be credited in accordance with the terms of the Contract. All Premiums after the Initial Premium will be allocated to the Fixed Account at the time of receipt. On each Contract Anniversary, the Accumulation Value associated with any Premium received since the prior Contract Anniversary will be reallocated among the Accounts according to your most recent instructions.

You may change your allocation instructions at any time by sending a written request on a form provided by us. Your written request must be received by us at least five business days prior to the Contract Anniversary to apply to premiums received during that Contract Year. The change to your allocations will be effective on the Contract Anniversary next following our receipt of written notice.

5. CONTRACT VALUES

5.1 Accumulation Value - On the Contract Date, the Contract's Accumulation Value equals the Initial Premium Paid. At any time after the Contract Date, the Contract's Accumulation Value equals the sum of the Accumulation Values(s) of the Account(s) chosen.

5.2 Cash Surrender Value - At any time on or prior to the Income Date, you may ask, in a form provided by us, to receive the Contract's full Cash Surrender Value in a single sum. The Cash Surrender Value of this Contract equals the greater of: (a) the Minimum Guaranteed Contract Value; or (b) the Accumulation Value less a Surrender Charge in effect at the time of surrender.

In no event will the Cash Surrender Value be less than the Minimum Guaranteed Contract Value defined in Section 5.3. Upon full Cash Surrender, this Contract will cease to have any further value.

5.3 Minimum Guaranteed Contract Value - The Minimum Guaranteed Contract Value equals 87.5% of the sum of each Premium Paid, less Partial Surrenders, if any, accumulated at the Minimum Guaranteed Contract Rate as defined in the Contract Data Pages, compounded annually.

5.4 Death Benefit Value – The death benefit is the larger of (a) the Contract's Accumulation Value; or (b) the amount that would have been payable in the event of a full surrender on the date of death, adjusted for any payments that may have been made since the date of death.

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5.5 Partial Surrender – You may make a Partial Surrender at any time prior to the Income Date by giving notice to Us. After the first Contract Year, Partial Surrenders of up to 10% of the Contract's Accumulation Value as of the last Contract Anniversary may be made without a Surrender Charge.

Partial Surrenders may be taken through a single withdrawal or multiple withdrawals. Any unused portion of the penalty free Partial Surrender amount in a Contract Year will not carry over to any subsequent Contract Year. Partial Surrenders in excess of 10% may be subject to a Surrender Charge. If the Contract is subsequently surrendered during the Contract Year, the Surrender Charge will be applied to any previously uncharged Partial Surrender amounts taken in the same Contract Year.

The amount withdrawn at any one time must be at least $250. If the Cash Surrender Value after a Partial Surrender is less than $2,000, We reserve the right to pay the remaining Cash Surrender Value to You as a full surrender. Partial Surrenders will be taken from the Accounts utilized by you at the time of surrender as chosen by us at our sole discretion.

5.6 Payment Deferral - We may delay payment of any amount surrendered or withdrawn for up to six months or the period allowed by applicable state laws. If we delay payment for more than 30 days, we will pay interest at the rate specified by state law as of the first day of deferral until payment of the payment.

5.7 Nonforfeiture Values –On the Income Date, the Contract will provide for a paid-up annuity benefit. Upon surrender of the contract on or before the Income Date, we will pay the Cash Surrender Value in lieu of a paid-up annuity benefit.

5.8 Discontinuation of or Substantial Change to an Index – If an index is discontinued or the calculation of an index is substantially changed, we may substitute a comparable index subject to approval by the Insurance Department of the state in which the Contract is issued. Before a substitute index is used, we shall notify the Owner and any assignee of the substitution.

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6. PAYMENT PLANS

On the Income Date, the Accumulation Value can be left with us and paid under a Payment Plan. You can choose a plan during the Annuitant's lifetime. This choice can be changed during the life of the Annuitant prior to the Income Date. If you have not chosen a plan prior to the Annuitant's death, the automatic option as described in Section 2 will be applied.

A plan is available only if the periodic payment is $100 or more.

Upon receipt of a request to our Executive Office, we will send you the proper forms to choose a plan. The plan will go into effect when the forms are recorded at our Executive Office.

If the person named to receive payments is other than a natural person (such as a trust or corporation), a plan will be available only with our consent. If, for any reason, the person named to receive payments is changed, the change will go into effect when notification is recorded by us subject to any payments we make or actions we take before we record the change.

The minimum amounts payable for each of the Payment Plans described below are based on the amount applied earning interest at the Payment Plan Minimum Interest Rate stated on the Contract Data Page. We may pay a higher interest rate at our discretion. Payments for Plan B are based on the Payment Plan Mortality Table state on the Contract Date Page. The minimum payments for Plans A and B assume annual payments with the first payment made one year after the Income Date.

Annuity benefits under a Payment Plan must be as least as great as those that would be provided by using the Cash Surrender Value to purchase a Single Premium Annuity contract offered by the Company on the Income Date.

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6.1 Plan A. Fixed Period - The Contract Proceeds will be paid until the Proceeds, plus interest, are paid in full. Payments may be paid monthly or annually. The payment period cannot be more than 30 years nor less than 10 years. The table below shows the annual payment for each $1,000 of Proceeds applied with payments starting one year after Proceeds have been applied to this Payment Plan.

Number of Years	Payments per $1,000 of Proceeds	Monthly
10	106.83	8.96
15	73.84	6.20
20	57.38	4.81
25	47.55	3.99
30	41.02	3.44

6.2 Plan B. Life Income - The Contract Proceeds will be paid in monthly or annual payments for as long as the Owner or Beneficiary, whichever is appropriate as stated under Section 2, lives. We have the right to require proof of the age and sex of such appropriate person and that such appropriate person is alive prior to making any payment. A minimum number of payments may be guaranteed, if desired.

Option B - Payment of Life Income Monthly Payments per $1,000 of Proceeds									
	Male			Female			Unisex		
Age	10 Years Guaranteed	15 Years Guaranteed	20 Years Guaranteed	10 Years Guaranteed	15 Years Guaranteed	20 Years Guaranteed	10 Years Guaranteed	15 Years Guaranteed	20 Years Guaranteed
55	3.64	3.58	3.48	3.35	3.32	3.27	3.49	3.45	3.37
56	3.73	3.66	3.55	3.43	3.40	3.34	3.58	3.52	3.44
57	3.82	3.74	3.62	3.51	3.47	3.40	3.66	3.60	3.51
58	3.92	3.83	3.69	3.60	3.55	3.47	3.75	3.69	3.58
59	4.02	3.92	3.76	3.69	3.63	3.54	3.85	3.77	3.65
60	4.13	4.01	3.83	3.78	3.72	3.62	3.95	3.86	3.72
61	4.24	4.11	3.90	3.89	3.81	3.69	4.06	3.95	3.79
62	4.36	4.20	3.97	3.99	3.91	3.77	4.17	4.05	3.86
63	4.49	4.30	4.04	4.10	4.01	3.84	4.29	4.15	3.94
64	4.62	4.41	4.10	4.22	4.11	3.92	4.41	4.25	4.01
65	4.76	4.51	4.17	4.35	4.21	4.00	4.54	4.36	4.08
66	4.90	4.62	4.24	4.48	4.32	4.07	4.68	4.46	4.15
67	5.05	4.73	4.30	4.62	4.43	4.15	4.82	4.57	4.22
68	5.20	4.83	4.36	4.76	4.55	4.22	4.97	4.68	4.29
69	5.36	4.94	4.41	4.92	4.66	4.29	5.13	4.80	4.35
70	5.53	5.04	4.47	5.08	4.78	4.36	5.29	4.91	4.41
71	5.70	5.15	4.51	5.25	4.90	4.42	5.46	5.02	4.47
72	5.87	5.25	4.56	5.43	5.02	4.48	5.64	5.13	4.52
73	6.05	5.35	4.60	5.62	5.14	4.53	5.82	5.24	4.56
74	6.23	5.44	4.63	5.81	5.25	4.58	6.01	5.34	4.60
75	6.41	5.53	4.67	6.01	5.36	4.62	6.19	5.44	4.64
80	7.31	5.88	4.77	7.03	5.81	4.75	7.16	5.84	4.76
85	8.06	6.08	4.81	7.93	6.06	4.80	7.99	6.07	4.81
90	8.57	6.17	4.81	8.52	6.17	4.81	8.54	6.17	4.81
95	8.86	6.19	4.81	8.83	6.19	4.81	8.84	6.19	4.81
100	8.95	6.20	4.81	8.95	6.20	4.81	8.95	6.20	4.81

Factors for ages not shown will be supplied upon request.

SPECIMEN

6.3 Other Options - Proceeds may be paid in any manner requested and agreed to by the Company, or under any other payment option(s) made available by the Company.

6.4 Death of Payee - If a payee dies, any remaining payments will be paid to a contingent payee. If no payee survives, we will pay the commuted value of any remaining payments to the estate of the last payee to die.

6.5 Claims of Creditors - Payments under any payment option will be exempt from the claims of creditors to the maximum extent allowed by law.

7. GENERAL TERMS

7.1 Your Contract With Us – Your Contract is a legal Contract with us. Only our President, a Vice President or Secretary is authorized to change, modify or waive the provisions of the Contract. The entire contract consists of:

- this Contract;
- any endorsements or additional benefit riders; and
- the attached copy of your Application which includes any amendments, supplemental Applications or other attached papers.

We rely on statements made in the Application for the Contract. These statements, in the absence of fraud, are deemed representations and not warranties. No statement will void this Contract or be used in defense of a claim unless:

- it is contained in the Application; and
- such Application is attached to this Contract.

The Contract is issued in consideration of the payment of the Initial Premium.

The provisions of the Contract shall, in all events, be construed to comply with the requirements of Section 72(s) of the Internal Revenue Code of 1986, as amended.

7.2 Incontestability - This Contract shall be incontestable from the Contract Date.

7.3 Valid Release for Payment - If Proceeds are payable to a person not legally competent to give a valid release, as determined by a Court of competent jurisdiction, we may pay Proceeds in monthly installments, not to exceed $1,000, to the person or persons who have, as determined by the Court, assumed custody and principal support of the person. Any payment made under this clause will be made in good faith. It will satisfy our responsibility to the extent of any payments made.

7.4 Annual Statement of Values - We will send you at least once a year, and without charge, a statement which shows the following values as of the statement date:

(a) the amount of Premiums paid;
(b) the amount of any Partial Surrenders;
(c) the dates of any Partial Surrenders;
(d) the Accumulation Value at the beginning and end of the period;
(e) the Cash Surrender Value;
(f) the Death Benefit;
(g) interest and/or index credits;
(h) charges for riders; and
(i) the beginning and ending dates of the reporting period.

Additional statements may be requested for a fee, which is not to exceed $25 per additional statement.

7.5 Mistake of Age or Sex - If any Annuitant's age or sex has been misstated, we will adjust the Proceeds. The Proceeds of the Contract will be those the Premiums would have bought at the correct age and sex. Any overpayment made by us will be deducted from the succeeding payments as necessary. By age, we mean the Annuitant’s age as of his or her last birthday on the Contract Date.

SPECIMEN

EquiTrust Life Insurance Company®

7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

1-YEAR POINT-TO-POINT CAP INDEX ACCOUNT

This Endorsement is attached to and becomes part of the Contract. This Endorsement adds a 1-Year Point-to-Point Cap Index Account to your Contract.

This Endorsement is subject to all of the provisions of the Contract, except as otherwise stated herein. If any provisions of the Contract conflict with the Endorsement, the provisions of the Endorsement will apply.

ACCOUNT SPECIFICATIONS

Contract Form Number:	ET-EIA-2000(11-21)
Contract Number:	[EQ0001123456F]
Premium Allocation (%):	<<VARIABLE ITEM>>
Premium Allocation ($)	<<VARIABLE ITEM>>
Initial Index Cap:	<<VARIABLE ITEM>>
Minimum Index Cap:	<<VARIABLE ITEM>>
Index:	S&P 500®
Initial Index Number:	<<VARIABLE ITEM>>

SPECIMEN

The Initial Index Cap is guaranteed for one Contract Year.

The Index used for this account is the Standard & Poor's 500® Index. It excludes any dividends that may be paid by the stocks of the firms that comprise the Index.

"Standard & Poor's 500®" is a trademark of The McGraw-Hill Companies, Inc. and has been licensed for use by EQUITRUST LIFE INSURANCE COMPANY®. The Product is not sponsored, endorsed, sold or promoted by Standard & Poor's and Standard & Poor's makes no representation regarding the advisability of purchasing the Product.

ALLOCATIONS AND TRANSFERS

You may transfer amounts in your accounts on each Contract Anniversary by sending a written request, on a form acceptable to us, to our Executive Office.

Transfers out of an Account into the Fixed Account and/or Index Account are allowed on each Account Accumulation Date, which is every Contract Anniversary after the Premium or Transfer Amount is received into the applicable Account.

A transfer will be effective on the Account Accumulation Date next following receipt of the request. All requests are subject to the following:

a. Your written request for transfer is received at least five business days prior to the next Account Accumulation Date;

b. the amount transferred is not less than $2,000; and

c. any remaining Account Accumulation Value after a transfer is not less than $2,000.

Subject to the terms of the Contract, we may cease to accept new Premiums/Transfer amounts to a specific Account(s) at any time. Any new Premium/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time.

DEFINITIONS

Account Accumulation Date means the date on which the Account Accumulation Value was last calculated. The initial Account Accumulation Date is the Contract Date and is the Contract Anniversary each year thereafter.

Index means the measure used for determining the Index Number. If the index is discontinued or if the calculation of the Index is substantially changed, we will substitute a comparable Index, subject to approval by the proper regulatory authority. Prior to the use of a substitute Index, we will notify the Owner and any assignee in writing. The Index for this account is shown in the Specifications section of this Endorsement.

Index Cap means the maximum Index Increase that may be applied to the Accumulation Value of this Account. The Index Cap is declared at issue and guaranteed for one year. The Index Cap for future durations will be declared on each Contract Anniversary and is guaranteed for the following Contract Year. The minimum Index Cap is shown on the Specifications section of this Endorsement.

Index Credit is the amount, if any, added to the Account Accumulation Value at the end of each Contract Year. The Index Credit in any Contract Year will never be less than zero.

Index Credit Factor is the percentage multiplied by the current Account Accumulation Value at the end of a Contract Year to determine Index Credits. The formula for the Index Credit Factor is on the following page.

Index Increase means the percentage excess of the end-of-year Index Number over the beginning-of-year Index Number. Year refers to Contract Year.

Index Number means the published value of the Index. The Index Number on any specified date is the closing value on the previous trading day associated with the Index. If the Index Number is not published on any day for which a calculation is made, the first preceding published Index Number will be used. The Initial Premium amount plus any Premium Bonus allocated to this Account will be assigned an Initial Index Number which is shown in the Specifications section of this Endorsement.

SPECIMEN

ACCOUNT VALUES

Account Accumulation Value

Account Accumulation Value is calculated as follows:

1. On the Contract Date, the Account Accumulation Value equals the Initial Premium Paid and any Premium Bonus allocated to this Account.

2. On each Contract Anniversary, your Account Accumulation Value equals:

   (a) The Account Accumulation Value on the last Contract Anniversary; less
   (b) Adjustments for any Partial Surrenders from the Account during the Contract Year; plus
   (c) The Index Credit; plus (minus)
   (d) Any transfers into (out) of the Account.

3. On any other date, the Account Accumulation Value equals:

    (a) The Account Accumulation Value on the last Contract Anniversary (which has been adjusted for any transfers into or out of the Account on the last Contract Anniversary); less
    (b) Adjustments for any Partial Surrenders from the Account during the Contract Year.

Index Credit Methodology

The Index Credit is equal to:

(a) The Account Accumulation Value on the last Contract Anniversary; less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year; multiplied by
(c) The Index Credit Factor.

The Index Credit Factor is equal to:

(a) The Index Number for the current Contract Anniversary Date, minus the Index Number on the last Contract Anniversary; divided by
(b) The Index Number on the last Contract Anniversary date; adjusted
(c) To not be greater than the Index Cap; but not less than
(d) Zero.

The Index Credit Factor uses the Index Cap applicable for the 1-Year Point-to-Point Cap Index Account.

GENERAL PROVISIONS

This Endorsement terminates upon termination of the Contract to which it is attached.

We may elect to terminate this Endorsement at any time by sending you a written notice stating the effective date of termination to your last known address. Such notice will be sent at least 60 days in advance of the effective date of this Endorsement's termination. On and after the effective date of the termination, you will not be allowed to transfer amounts to this account. We reserve the right to move values from this account to the Fixed Account as of the effective date of termination.

SPECIMEN



Vice President

EquiTrust Life Insurance Company®

7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

1-YEAR POINT-TO-POINT PARTICIPATION INDEX ACCOUNT

This Endorsement is attached to and becomes part of the Contract. This Endorsement adds a 1-Year Point-to-Point Participation Index Account to your Contract.

This Endorsement is subject to all of the provisions of the Contract, except as otherwise stated herein. If any provisions of the Contract conflict with the Endorsement, the provisions of the Endorsement will apply.

ACCOUNT SPECIFICATIONS

Contract Form Number:	ET-EIA-2000(11-21)
Contract Number:	[EQ0001123456F]
Premium Allocation (%):	<<VARIABLE ITEM>>
Premium Allocation ($)	<<VARIABLE ITEM>>
Initial Participation Rate:	<<VARIABLE ITEM>>
Minimum Participation Rate:	<<VARIABLE ITEM>>
Index:	S&P 500®
Initial Index Number:	<<VARIABLE ITEM>>

The Participation Rate is guaranteed for one Contract Year.

The Index used for this account is the Standard & Poor's 500® Index. It excludes any dividends that may be paid by the stocks of the firms that comprise the Index.

"Standard & Poor's 500®" is a trademark of The McGraw-Hill Companies, Inc. and has been licensed for use by EQUITRUST LIFE INSURANCE COMPANY®. The Product is not sponsored, endorsed, sold or promoted by Standard & Poor's and Standard & Poor's makes no representation regarding the advisability of purchasing the Product.

SPECIMEN

ALLOCATIONS AND TRANSFERS

You may transfer amounts in your accounts on each Contract Anniversary by sending a written request, on a form acceptable to us, to our Executive Office.

Transfers out of an Account into the Fixed Account and/or Index Account are allowed on each Account Accumulation Date, which is every Contract Anniversary after the Premium or Transfer Amount is received into the applicable Account.

A transfer will be effective on the Account Accumulation Date next following receipt of the request. All requests are subject to the following:

a. Your written request for transfer is received at least five business days prior to the next Account Accumulation Date;

b. the amount transferred is not less than $2,000; and

c. any remaining Account Accumulation Value after a transfer is not less than $2,000.

Subject to the terms of the Contract, we may cease to accept new Premiums/Transfer amounts to a specific Account(s) at any time. Any new Premium/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time. We reserve the right to move values from this account to the Fixed Account on the Account Accumulation Date.

DEFINITIONS

Account Accumulation Date means the date on which the Account Accumulation Value was last calculated. The initial Account Accumulation Date is the Contract Date and is the Contract Anniversary each year thereafter.

Index means the measure used for determining the Index Number. If the Index is discontinued or if the calculation of the Index is substantially changed, we will substitute a comparable Index, subject to approval by the proper regulatory authority. Prior to the use of a substitute Index, we will notify the Owner and any assignee in writing. The Index for this Account is shown on the Specification section of this Endorsement

Index Credit is the amount, if any, added to the Account Accumulation Value at the end of each Contract Year. The Index Credit in any Contract Year will never be less than zero.

Index Credit Factor is the percentage multiplied by the current Account Accumulation Value at the end of a Contract Year to determine Index Credits. The formula for the Index Credit Factor is on the following page.

Index Increase means the percentage excess of the end-of-year Index Number over the beginning-of-year Index Number. Year refers to Contract Year.

Index Number means the published value of the Index. The Index Number on any specified date is the closing value on the previous trading day associated with the Index. If the Index Number is not published on any day for which a calculation is made, the first preceding published Index Number will be used. The Initial Premium amount plus any Premium Bonus allocated to this Account will be assigned an Initial Index Number which is shown on the Specification section of this Endorsement.

Participation Rate is the percentage of the Index Increase which will be recognized in calculating the Index Value. The Participation Rate is declared at issue and guaranteed for one year. The Participation Rate for future durations will be declared on each Contract Anniversary and is guaranteed for the following Contract Year. The minimum Participation Rate is shown on Specification section of this Endorsement.

SPECIMEN

ACCOUNT VALUES

Account Accumulation Value

Account Accumulation Value is calculated as follows:

1. On the Contract Date, the Account Accumulation Value equals the Initial Premium Paid and any Premium Bonus allocated to this Account.

2. On each Contract Anniversary, your Account Accumulation Value equals:

   (a) The Account Accumulation Value on the last Contract Anniversary; less
   (b) Adjustments for any Partial Surrenders from the Account during the Contract Year; plus
   (c) The Index Credit; plus (minus)
   (d) Any transfers into (out) of the Account.

3. On any other date, the Account Accumulation Value equals:

    (a) The Account Accumulation Value on the last Contract Anniversary (which has been adjusted for any transfers into or out of the Account on the last Contract Anniversary); less
    (b) Adjustments for any Partial Surrenders from the Account during the Contract Year.

Index Credit Methodology

The Index Credit is equal to:

(a) The Account Accumulation Value on the last Contract Anniversary; less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year; multiplied by
(c) The Index Credit Factor.

The Index Credit Factor is equal to:

(a) The Index Number for the current Contract Anniversary Date, minus the Index Number on the last Contract Anniversary; divided by
(b) The Index Number on the last Contract Anniversary date; multiplied by
(c) The Participation Rate; but not less than
(d) Zero.

The Index Credit Factor uses the Participation Rate applicable for the 1-Year Point-to-Point Participation Index Account.

GENERAL PROVISIONS

This Endorsement terminates upon termination of the Contract to which it is attached.

We may elect to terminate this Endorsement at any time by sending you a written notice stating the effective date of termination to your last known address. Such notice will be sent at least 60 days in advance of the effective date of this Endorsement's termination. On and after the effective date of the termination, you will not be allowed to transfer amounts to this account. We reserve the right to move values from this account to the Fixed Account as of the effective date of termination.

SPECIMEN



Vice President

EquiTrust Life Insurance Company®

7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

1-YEAR AVERAGE PARTICIPATION INDEX ACCOUNT

This Endorsement is attached to and becomes part of the Contract. This Endorsement adds a 1-Year Average Participation Index Account to your Contract.

This Endorsement is subject to all of the provisions of the Contract, except as otherwise stated herein. If any provisions of the Contract conflict with the Endorsement, the provisions of the Endorsement will apply.

ACCOUNT SPECIFICATIONS

Contract Form Number:	ET-EIA-2000(11-21)
Contract Number:	[EQ0001123456F]
Premium Allocation (%):	<<VARIABLE ITEM>>
Premium Allocation ($)	<<VARIABLE ITEM>>
Initial Participation Rate:	<<VARIABLE ITEM>>
Minimum Participation Rate:	<<VARIABLE ITEM>>
Index:	S&P 500®
Initial Index Number:	<<VARIABLE ITEM>>

The Participation Rate is guaranteed for one Contract Year.

The Index used for this account is the Standard & Poor's 500® Index. It excludes any dividends that may be paid by the stocks of the firms that comprise the Index.

"Standard & Poor's 500®" is a trademark of The McGraw-Hill Companies, Inc. and has been licensed for use by EQUITRUST LIFE INSURANCE COMPANY®. The Product is not sponsored, endorsed, sold or promoted by Standard & Poor's and Standard & Poor's makes no representation regarding the advisability of purchasing the Product.

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ALLOCATIONS AND TRANSFERS

You may transfer amounts to this Account on each Contract Anniversary by sending a written request, on a form acceptable to us, to our Executive Office.

Transfers out of this Account into the Fixed Account and/or Index Account are allowed on each Account Accumulation Date, which is every Contract Anniversary after the Premium or Transfer Amount is received into this Account.

A transfer will be effective on the Account Accumulation Date next following receipt of the request. All requests are subject to the following:

a. Your written request for transfer is received at least five business days prior to the next Account Accumulation Date;

b. the amount transferred is not less than $2,000; and

c. any remaining Account Accumulation Value after a transfer is not less than $2,000.

Subject to the terms of the Contract, we may cease to accept new Premiums/Transfer amounts to a specific Account(s) at any time. Any new Premium/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time.

DEFINITIONS

Account Accumulation Date means the date on which the Account Accumulation Value was last calculated. The initial Account Accumulation Date is the Contract Date and is the Contract Anniversary each year thereafter.

Index means the measure used for determining the Index Number. If the Index is discontinued or if the calculation of the Index is substantially changed, we will substitute a comparable Index, subject to approval by the proper regulatory authority. Prior to the use of a substitute Index, we will notify the Owner and any assignee in writing. The Index for this Account is shown on the Specification section of this Endorsement.

Index Average for a Contract Year equals the sum of the Index Numbers from each month during the Contract Year divided by 12.

Index Credit is the amount, if any, added to the Account Accumulation Value at the end of each Contract Year. The Index Credit in any Contract Year will never be less than zero.

Index Credit Factor is the percentage multiplied by the current Account Accumulation Value at the end of a Contract Year to determine Index Credits. The formula for the Index Credit Factor is on the following page.

Index Increase means the percentage excess of the end-of-year Index Average over the beginning-of-year Index Number. Year refers to Contract Year.

Index Number means the published value of the Index. The Index Number on any specified date is the closing value on the previous trading day associated with the Index. If the Index Number is not published on any day for which a calculation is made, the first preceding published Index Number will be used. The Initial Premium plus any Premium Bonus amount allocated to this Account will be assigned an Initial Index Number which is shown on the Specification section of this Endorsement.

Participation Rate is the percentage of the Index Increase which will be recognized in calculating the Index Value. The Participation Rate is declared at issue and guaranteed for one year. The Participation Rate for future durations will be declared on each Contract Anniversary and is guaranteed for the following Contract Year. The minimum Participation Rate is shown on the Specification section of this Endorsement.

ACCOUNT VALUES

Account Accumulation Value

Account Accumulation Value is calculated as follows:

1. On the Contract Date, the Account Accumulation Value equals the Initial Premium Paid and any Premium Bonus allocated to this Account;

2. On each Contract Anniversary, your Account Accumulation Value equals:

SPECIMEN

(a) The Account Accumulation Value on the last Contract Anniversary; less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year; plus
(c) The Index Credit; plus (minus)
(d) Any transfers into (out) of the Account.

3. On any other date, the Account Accumulation Value equals:

(a) The Account Accumulation Value on the last Contract Anniversary (which has been adjusted for any transfers into or out of the Account on the last Contract Anniversary); less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year.

Index Credit Methodology

The Index Credit is equal to:

(a) The Account Accumulation Value on the last Contract Anniversary; less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year; multiplied by
(c) The Index Credit Factor.

The Index Credit Factor is equal to:

(a) The Index Average for the current Contract Anniversary Date, minus the Index Number on the last Contract Anniversary; divided by
(b) The Index Number on the last Contract Anniversary date; multiplied by
(c) The Participation Rate; but not less than
(d) Zero.

The Index Credit Factor uses the Participation Rate applicable to the 1-Year Average Participation Index Account.

GENERAL PROVISIONS

This Endorsement terminates upon termination of the Contract to which it is attached.

We may elect to terminate this Endorsement at any time by sending you a written notice stating the effective date of termination to your last known address. Such notice will be sent at least 60 days in advance of the effective date of this Endorsement's termination. On and after the effective date of the termination, you will not be allowed to transfer amounts to this account. We reserve the right to move values from this account to the Fixed Account as of the effective date of termination.



Vice President

SPECIMEN

EquiTrust Life Insurance Company®

7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

1-YEAR POINT-TO-POINT PARTICIPATION INDEX ACCOUNT

This Endorsement is attached to and becomes part of the Contract. This Endorsement adds a 1-Year Point-to-Point Participation Index Account to your Contract.

This Endorsement is subject to all of the provisions of the Contract, except as otherwise stated herein. If any provisions of the Contract conflict with the Endorsement, the provisions of the Endorsement will apply.

ACCOUNT SPECIFICATIONS

Contract Form Number:	ET-EIA-2000(11-21)
Contract Number:	[EQ0001123456F]
Premium Allocation (%):	<<VARIABLE ITEM>>
Premium Allocation ($)	<<VARIABLE ITEM>>
Initial Participation Rate:	<<VARIABLE ITEM>>
Minimum Participation Rate:	<<VARIABLE ITEM>>
Index:	Barclays Focus50 Index
Initial Index Number:	<<VARIABLE ITEM>>

The Participation Rate is guaranteed for one Contract Year.

SPECIMEN

Neither Barclays Bank PLC, or Barclays Capital Inc., nor any affiliate (collectively "Barclays") is the issuer or producer of Bridge Index Annuity - an index annuity contract – (“the contract”) and Barclays has no responsibilities, obligations or duties to investors in the contract. The Barclays Focus50 Index (the “Index”) including as applicable any component indices that form part of the Index is a trademark owned by Barclays Bank PLC, or Barclays Capital Inc., and licensed for use by EquiTrust Life Insurance Company (“EquiTrust”) as the Issuer of the contract. While EquiTrust as the issuer of the contract may for itself execute transaction(s) with Barclays in or relating to the Index in connection with the contract investors acquire the contract from EquiTrust and investors neither acquire any interest in the Index nor enter into any relationship of any kind whatsoever with Barclays upon making an investment in the contract. The contract is not sponsored, endorsed, sold or promoted by Barclays and Barclays makes no representation regarding the advisability of the contract or use of the Index or any data included therein. Barclays shall not be liable in any way to EquiTrust, investors or to other third parties in respect of the use or accuracy of the Index or any data included therein.

Bloomberg Index Services Limited is the official index calculation and maintenance agent of the Index, an index owned and administered by Barclays. Bloomberg Index Services Limited does not guarantee the timeliness, accurateness, or completeness of the Index calculations or any data or information relating to the Index. Bloomberg Index Services Limited makes no warranty, express or implied, as to the Index or any data or values relating thereto or results to be obtained therefrom, and expressly disclaims all warranties of merchantability and fitness for a particular purpose with respect thereto. To the maximum extent allowed by law, Bloomberg Index Services Limited, its affiliates, and all of their respective partners, employees, subcontractors, agents, suppliers and vendors (collectively, the “protected parties”) shall have no liability or responsibility, contingent or otherwise, for any injury or damages, whether caused by the negligence of a protected party or otherwise, arising in connection with the calculation of the Index or any data or values included therein or in connection therewith.

ALLOCATIONS AND TRANSFERS

You may transfer amounts in your accounts on each Contract Anniversary by sending a written request, on a form acceptable to us, to our Executive Office.

Transfers out of an Account into the Fixed Account and/or Index Account are allowed on each Account Accumulation Date, which is every Contract Anniversary after the Premium or Transfer Amount is received into the applicable Account.

A transfer will be effective on the Account Accumulation Date next following receipt of the request. All requests are subject to the following:

a. Your written request for transfer is received at least five business days prior to the next Account Accumulation Date;

b. the amount transferred is not less than $2,000; and

c. any remaining Account Accumulation Value after a transfer is not less than $2,000.

Subject to the terms of the Contract, we may cease to accept new Premiums/Transfer amounts to a specific Account(s) at any time. Any new Premium/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time. We reserve the right to move values from this account to the Fixed Account on the Account Accumulation Date.

DEFINITIONS

Account Accumulation Date means the date on which the Account Accumulation Value was last calculated. The initial Account Accumulation Date is the Contract Date and is the Contract Anniversary each year thereafter.

Index means the measure used for determining the Index Number. If the Index is discontinued or if the calculation of the Index is substantially changed, we will substitute a comparable Index, subject to approval by the proper regulatory authority. Prior to the use of a substitute Index, we will notify the Owner and any assignee in writing. The Index for this Account is shown on the Specification section of this Endorsement

Index Credit is the amount, if any, added to the Account Accumulation Value at the end of each Contract Year. The Index Credit in any Contract Year will never be less than zero.

Index Credit Factor is the percentage multiplied by the current Account Accumulation Value at the end of a Contract Year to determine Index Credits. The formula for the Index Credit Factor is on the following page.

Index Increase means the percentage excess of the end-of-year Index Number over the beginning-of-year Index Number. Year refers to Contract Year.

Index Number means the published value of the Index. The Index Number on any specified date is the closing value on the previous trading day associated with the Index. If the Index Number is not published on any day for which a calculation is made, the first preceding published Index Number will be used. The Initial Premium amount plus any Premium Bonus allocated to this Account will be assigned an Initial Index Number which is shown on the Specification section of this Endorsement.

Participation Rate is the percentage of the Index Increase which will be recognized in calculating the Index Value. The Participation Rate is declared at issue and guaranteed for one year. The Participation Rate for future durations will be declared on each Contract Anniversary and is guaranteed for the following Contract Year. The minimum Participation Rate is shown on Specification section of this Endorsement.

SPECIMEN

ACCOUNT VALUES

Account Accumulation Value

Account Accumulation Value is calculated as follows:

1. On the Contract Date, the Account Accumulation Value equals the Initial Premium Paid and any Premium Bonus allocated to this Account.

2. On each Contract Anniversary, your Account Accumulation Value equals:

   (a) The Account Accumulation Value on the last Contract Anniversary; less
   (b) Adjustments for any Partial Surrenders from the Account during the Contract Year; plus
   (c) The Index Credit; plus (minus)
   (d) Any transfers into (out) of the Account.

3. On any other date, the Account Accumulation Value equals:

   (a) The Account Accumulation Value on the last Contract Anniversary (which has been adjusted for any transfers into or out of the Account on the last Contract Anniversary); less
   (b) Adjustments for any Partial Surrenders from the Account during the Contract Year.

Index Credit Methodology

The Index Credit is equal to:

(a) The Account Accumulation Value on the last Contract Anniversary; less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year; multiplied by
(c) The Index Credit Factor.

The Index Credit Factor is equal to:

(a) The Index Number for the current Contract Anniversary Date, minus the Index Number on the last Contract Anniversary; divided by
(b) The Index Number on the last Contract Anniversary date; multiplied by
(c) The Participation Rate; but not less than
(d) Zero.

The Index Credit Factor uses the Participation Rate applicable for the 1-Year Point-to-Point Participation Index Account.

SPECIMEN

GENERAL PROVISIONS

This Endorsement terminates upon termination of the Contract to which it is attached.

We may elect to terminate this Endorsement at any time by sending you a written notice stating the effective date of termination to your last known address. Such notice will be sent at least 60 days in advance of the effective date of this Endorsement's termination. On and after the effective date of the termination, you will not be allowed to transfer amounts to this account. We reserve the right to move values from this account to the Fixed Account as of the effective date of termination.

Rosemary Jackson
Vice President

EquiTrust Life Insurance Company®

7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

1-YEAR POINT-TO-POINT PARTICIPATION INDEX ACCOUNT

This Endorsement is attached to and becomes part of the Contract. This Endorsement adds a 1-Year Point-to-Point Participation Index Account to your Contract.

This Endorsement is subject to all of the provisions of the Contract, except as otherwise stated herein. If any provisions of the Contract conflict with the Endorsement, the provisions of the Endorsement will apply.

ACCOUNT SPECIFICATIONS

Contract Form Number:	ET-EIA-2000(11-21)
Contract Number:	[EQ0001123456F]
Premium Allocation (%):	<<VARIABLE ITEM>>
Premium Allocation ($)	<<VARIABLE ITEM>>
Initial Participation Rate:	<<VARIABLE ITEM>>
Minimum Participation Rate:	<<VARIABLE ITEM>>
Index:	S&P MARC 5% Excess Return Index
Initial Index Number:	<<VARIABLE ITEM>>

SPECIMEN

The Participation Rate is guaranteed for one Contract Year.

The "S&P Multi-Asset Risk Control 5% Excess Return Index" and "S&P 500®" Indices ("Indices") are products of S&P Dow Jones Indices LLC or its affiliates ("SPDJI") and have been licensed for use by EquiTrust ("the Company"). Standard & Poor's® and S&P® are registered trademarks of Standard & Poor's Financial Services LLC ("S&P"); Dow Jones® is a registered trademark of Dow Jones Trademark Holdings LLC ("Dow Jones"); and these trademarks have been licensed for use by SPDJI and sublicensed for certain purposes by the Company. The products are not sponsored, endorsed, sold or promoted by SPDJI, Dow Jones, S&P, or their respective affiliates and none of such parties make any representation regarding the advisability of investing in such product(s) nor do they have any liability for any errors, omissions, or interruptions of the Indices.

ALLOCATIONS AND TRANSFERS

You may transfer amounts in your accounts on each Contract Anniversary by sending a written request, on a form acceptable to us, to our Executive Office.

Transfers out of an Account into the Fixed Account and/or Index Account are allowed on each Account Accumulation Date, which is every Contract Anniversary after the Premium or Transfer Amount is received into the applicable Account.

A transfer will be effective on the Account Accumulation Date next following receipt of the request. All requests are subject to the following:

a. Your written request for transfer is received at least five business days prior to the next Account Accumulation Date;

b. the amount transferred is not less than $2,000; and

c. any remaining Account Accumulation Value after a transfer is not less than $2,000.

Subject to the terms of the Contract, we may cease to accept new Premiums/Transfer amounts to a specific Account(s) at any time. Any new Premium/Transfer Amounts accepted are subject to the terms and conditions in existence for any Account(s) available at that time. We reserve the right to move values from this account to the Fixed Account on the Account Accumulation Date.

DEFINITIONS

Account Accumulation Date means the date on which the Account Accumulation Value was last calculated. The initial Account Accumulation Date is the Contract Date and is the Contract Anniversary each year thereafter.

Index means the measure used for determining the Index Number. If the Index is discontinued or if the calculation of the Index is substantially changed, we will substitute a comparable Index, subject to approval by the proper regulatory authority. Prior to the use of a substitute Index, we will notify the Owner and any assignee in writing. The Index for this Account is shown on the Specification section of this Endorsement

Index Credit is the amount, if any, added to the Account Accumulation Value at the end of each Contract Year. The Index Credit in any Contract Year will never be less than zero.

Index Credit Factor is the percentage multiplied by the current Account Accumulation Value at the end of a Contract Year to determine Index Credits. The formula for the Index Credit Factor is on the following page.

Index Increase means the percentage excess of the end-of-year Index Number over the beginning-of-year Index Number. Year refers to Contract Year.

Index Number means the published value of the Index. The Index Number on any specified date is the closing value on the previous trading day associated with the Index. If the Index Number is not published on any day for which a calculation is made, the first preceding published Index Number will be used. The Initial Premium amount plus any Premium Bonus allocated to this Account will be assigned an Initial Index Number which is shown on the Specification section of this Endorsement.

Participation Rate is the percentage of the Index Increase which will be recognized in calculating the Index Value. The Participation Rate is declared at issue and guaranteed for one year. The Participation Rate for future durations will be declared on each Contract Anniversary and is guaranteed for the following Contract Year. The minimum Participation Rate is shown on Specification section of this Endorsement.

SPECIMEN

ACCOUNT VALUES

Account Accumulation Value

Account Accumulation Value is calculated as follows:

1. On the Contract Date, the Account Accumulation Value equals the Initial Premium Paid and any Premium Bonus allocated to this Account.

2. On each Contract Anniversary, your Account Accumulation Value equals:

   (a) The Account Accumulation Value on the last Contract Anniversary; less
   (b) Adjustments for any Partial Surrenders from the Account during the Contract Year; plus
   (c) The Index Credit; plus (minus)

(d) Any transfers into (out) of the Account.

3. On any other date, the Account Accumulation Value equals:

   (a) The Account Accumulation Value on the last Contract Anniversary (which has been adjusted for any transfers into or out of the Account on the last Contract Anniversary); less
   (b) Adjustments for any Partial Surrenders from the Account during the Contract Year.

Index Credit Methodology

The Index Credit is equal to:

(a) The Account Accumulation Value on the last Contract Anniversary; less
(b) Adjustments for any Partial Surrenders from the Account during the Contract Year; multiplied by
(c) The Index Credit Factor.

The Index Credit Factor is equal to:

(a) The Index Number for the current Contract Anniversary Date, minus the Index Number on the last Contract Anniversary; divided by
(b) The Index Number on the last Contract Anniversary date; multiplied by
(c) The Participation Rate; but not less than
(d) Zero.

The Index Credit Factor uses the Participation Rate applicable for the 1-Year Point-to-Point Participation Index Account.

SPECIMEN

GENERAL PROVISIONS

This Endorsement terminates upon termination of the Contract to which it is attached.

We may elect to terminate this Endorsement at any time by sending you a written notice stating the effective date of termination to your last known address. Such notice will be sent at least 60 days in advance of the effective date of this Endorsement's termination. On and after the effective date of the termination, you will not be allowed to transfer amounts to this account. We reserve the right to move values from this account to the Fixed Account as of the effective date of termination.



Vice President

EquiTrust Life Insurance Company®

7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

Long-Term Care Rider

This Rider is attached to and made part of the Contract to which it is attached. If any provisions of the Contract conflict with the Rider, the provisions of the Rider will apply.

This is a Long-Term Care Insurance Rider that provides monthly insurance benefits for Qualified Long-Term Care Services in the event the Owner becomes Chronically Ill. Such services include Home Care Services, Residential Care Facility Services, Nursing Home Facility Services and Adult Day Care Services. The Rider provides Long-Term Care benefit payments from the Annuity Contract value. After the Annuity Contract value is exhausted, payments will be continued under the LTC Benefit Base is exhausted, subject to ongoing eligibility.

Tax Consequences: This Rider is intended to be a federally tax-qualified Long-Term Care Insurance contract under Section 7702B(b) of the Internal Revenue Code of 1986, as amended. We consider Rider Charges for this Rider that are deducted from the Contract, to be charges paid for tax-qualified Long-Term Care Insurance, which are excluded from gross income under section 72(e)(11) of the Internal Revenue Code. We also consider the benefits paid under this Rider to be benefits payable from tax-qualified Long-Term Care Insurance that generally should be excludable from gross income. **TAX TREATMENT OF LONG-TERM CARE COVERAGE MAY CHANGE, AND YOU SHOULD ALWAYS CONSULT AND RELY ON THE ADVICE OF A QUALIFIED TAX ADVISOR.**

Notice to Buyer: This Rider may not cover all of the costs associated with long-term care incurred by the buyer during the period of coverage. The buyer is advised to review carefully all contract limitations.

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This Rider is non-cancellable. The Company may not unilaterally change the terms of coverage. The Company may not, on its own, cancel or reduce coverage and may not change the Rider Charge Percentages from those shown on the Rider Data Page. Subject to the Rider Termination provisions, this Rider will remain inforce for as long as the Contract remains inforce and the required charges for this Rider are paid.

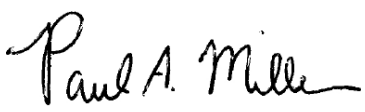
Right to Return : If you are not satisfied with the Rider for any reason, you may cancel it within 30 days after receiving it. Cancellation must be in writing to the Company, and the Rider and Annuity Contract must be returned. Upon receipt of this information, this Rider will be deemed void from the beginning and the Premium less any Withdrawals will be refunded to you.

THIS RIDER IS AN APPROVED LONG-TERM CARE INSURANCE RIDER UNDER CALIFORNIA LAW AND REGULATIONS. HOWEVER, THE BENEFITS PAYABLE BY THIS RIDER WILL NOT QUALIFY FOR MEDI-CAL ASSET PROTECTION UNDER THE CALIFORNIA PARTNERSHIP FOR LONG-TERM CARE.

FOR INFORMATION ABOUT POLICIES AND CERTIFICATES QUALIFYING UNDER THE CALIFORNIA PARTNERSHIP FOR LONG-TERM CARE, CALL THE HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM AT THE TOL-FREE NUMBER, 1 (800) 434-0222.

This Rider is nonparticipating.





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RIDER DATA PAGE

CONTRACT NUMBER:	{EQ0001123456F }
RIDER DATE:	{01/01/2027}
OWNER:	{JOHN DOE}
AGE:	{65}
RISK CLASS:	<<VARIABLE ITEM>>
COVERAGE RATIO:	<<VARIABLE ITEM>>
COVERAGE RATIO PERIOD:	5 YEARS
INITIAL LTC BENEFIT BASE:	<<VARIABLE ITEM>>
ROLLUP RATE:	3.00% ANNUALLY
ROLLUP PERIOD:	20 YEARS
MINIMUM LTC BENEFIT PERIOD:	5 YEARS
PREMIUM LOAD PERCENTAGE:	1.00%
BENEFIT BASE VESTING PERCENTAGES:	20% CONTRACT YEAR 1 40% CONTRACT YEAR 2 60% CONTRACT YEAR 3 80% CONTRACT YEAR 4 100% CONTRACT YEARS 5+

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MONTHLY RIDER CHARGE PERCENTAGES:

{Monthly Rider Charge Percentages vary by Issue Age and Risk Class. See your Illustration for projected rider charges.}

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1. GENERAL DEFINITIONS

Accumulation Period means the period of time before LTC Benefit Payments begin. The Accumulation Period starts on the Rider Date and ends on the date of the first LTC Benefit Payment.

Activities of Daily Living (ADL) are: (1) eating; (2) toileting; (3) transferring; (4) bathing; (5) dressing; and (6) continence.

Eating means feeding oneself by getting food into the body from a receptacle (such as a plate, cup or table) or by a feeding tube or intravenously.

Toileting means getting to and from the toilet, getting on and off the toilet, and performing associated personal hygiene.

Transferring means moving into or out of a bed, chair or wheelchair.

Bathing means washing oneself by sponge bath or in either a tub or shower, including the task of getting into or out of the tub or shower.

Dressing means putting on and taking off all items of clothing and any necessary braces, fasteners or artificial limbs.

Continence means the ability to maintain control of bowel and bladder function or when unable to do so, the ability to perform associated personal hygiene including caring for catheter or colostomy bag.

Chronically Ill means a person who has been certified within the preceding 12-month period by a Licensed Health Care Practitioner as: (1) having the inability to perform, without substantial assistance, at least two of six Activities of Daily Living (ADL) for at least 90 days due to a loss of functional capacity; or (2) requiring substantial supervision to protect the individual from threats to health and safety due to Severe Cognitive Impairment.

Contract means the Contract to which this Rider is attached.

Excess Withdrawal means any Partial Surrender exceeding the LTC Benefit Payment Amount in any Contract Year during the LTC Benefit Period.

Generally Accepted Standards means formal or informal guidelines that are accepted in the medical community and considered best practice.

Hands-on Assistance means the physical assistance of another person without which the Owner would not be able to perform the Activities of Daily Living.

Home Care Services means medical and non-medical services, provided to ill, disabled or infirm persons in their residences. Such services may include home health care, adult day care, personal care, homemaker services, hospice services and respite care services.

Home Health Care means skilled nursing or other professional services in the residence, including, but not limited to, part-time and intermittent skilled nursing services, home health aide services, physical therapy, occupational therapy, or speech therapy and audiology services, and medical social services by a social worker.

Adult Day Care means a state licensed or certified program for a specified number of individuals providing social and/or health-related services during the day in a community group setting for the purpose of supporting frail, impaired, elderly or other disabled adults who are in need of personal services, supervision, protection, or assistance in sustaining daily needs, including eating, bathing, dressing, ambulating, transferring, toileting, and taking medications.

Personal Care means assistance with the activities of daily living, including the instrumental activities of daily living, provided by a skilled or unskilled person under a Plan of Care developed by a physician or multidisciplinary team under medical direction.

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"Instrumental activities of daily living" include using the telephone, managing medications, moving about outside, shopping for essentials, preparing meals, laundry and light housekeeping.

Homemaker Services means assistance with activities necessary to or consistent with the insured's ability to remain in his or her residence, that is provided by a skilled or unskilled person under a Plan of Care developed by a physician or a multidisciplinary team under medical direction.

Hospice Services means outpatient services not paid by Medicare, that are designed to provide palliative care, alleviate the physical, emotional, social, and spiritual discomforts of an individual who is experiencing the last phases of life due to the existence of a terminal disease, and to provide supportive care to the primary care giver and the family. Care may be provided by a skilled or unskilled person under a Plan of Care developed by a physician or a multidisciplinary team under medical direction.

Respite Care is short-term care provided in an institution, in the home, or in a community-based program, that is designed to relieve a primary care giver in the home. This is a separate benefit with its own conditions for eligibility and maximum benefit levels.

LTC Benefit Base means a value used to determine the LTC Benefit Payment Amount and is the amount available under the Rider for payment of Qualified Long-Term Care Services.

LTC Benefit Period starts on the date of the first LTC Benefit Payment and is the number of years the Owner may receive monthly LTC Benefit Payments, subject to continued eligibility. The LTC Benefit Period may be less than the Minimum LTC Benefit Period on the Rider Data Page in the event that the LTC Benefit Base is exhausted due to the $1,500 minimum per month requirement.

LTC Benefit Payment means a Partial Surrender equal to the LTC Benefit Payment Amount.

LTC Benefit Payment Amount means the maximum amount that can be withdrawn monthly during the LTC Benefit Period, even if the Accumulation Value is zero. If the calculated LTC Benefit Payment Amount is less than $1,500, the payment will be increased to $1,500 per month and will be payable until the LTC Benefit Base is exhausted. The final payment may be less than $1,500 if the remaining LTC Benefit Base is less than $1,500.

LTC Rider Charge means the monthly charge for this Rider, which is deducted from the Accumulation Value.

Licensed Health Care Practitioner may include physicians, registered professional nurses, licensed social workers or other individuals who meet requirements prescribed by the Secretary of the Treasury.

Maintenance or Personal Care Services means any care the primary purpose of which is the provision of needed assistance with any of the disabilities as a result of which the individual is Chronically Ill (including the protection from threats to health and safety due to Severe Cognitive Impairment.

Nursing Home Care means nursing care and related services, including room and board and ancillary supplies and services, provided on an in-patient basis by a state licensed or certified facility, other than a hospital, except for an area of a hospital or unit that is licensed or certified as a nursing care facility and that is not providing acute care.

Plan of Care means a written, individualized plan for qualified long-term care and support services, including the type, frequency, and providers of all formal and informal long-term care services required by the insured, that has been developed as a result of a personal assessment by a Licensed Health Care Practitioner. The Plan of Care must address the Owner's long-term care needs and services in a fair, accurate and appropriate manner and be in accordance with

SPECIMEN

accepted relevant standards of practice and care for individuals who are Chronically Ill.

Qualified Long-Term Care Services means services that meet the requirements of Section 7702B(c)(1) of the Internal Revenue Code of 1986, as amended, as follows: necessary diagnostic, preventative, therapeutic, curative, treatment, mitigation and rehabilitative services, and Maintenance or Personal Care Services, which are required by a Chronically Ill individual, and are provided pursuant to a written Plan of Care prescribed by a Licensed Health Care Practitioner. These include Home Care Services, Residential Care Facility Services, and Nursing Home Care.

Residential Care Facility Services means a facility licensed as a residential care facility for the elderly or a residential care facility as defined in the Health and Safety Code. Outside California, eligible providers are facilities that meet applicable licensure standards, if any, and are engaged primarily in providing ongoing care and related services sufficient to support needs resulting from impairment in activities of daily living or impairment in cognitive ability and which also provide care and services on a 24-hour basis, have a trained and ready-to-respond employee on duty in the facility at all times to provide care and services, provide three meals a day and accommodate special dietary needs, have agreements to ensure that residents receive the medical care services of a physician or nurse in case of emergency, and, have appropriate methods and procedures to provide necessary assistance to residents in the management of prescribed medications.

Rollup Period means the maximum number of years the LTC Benefit Base will accumulate at the Rollup Rate. The Rollup Period stops when LTC Benefit Payments begin.

Rollup Rate means the annual rate at which the LTC Benefit Base accumulates during the Rollup Period.

Severe Cognitive Impairment means the loss or deterioration in intellectual capacity that is (a) comparable to (and includes) Alzheimer's disease and similar forms of irreversible dementia, and (b) measured by clinical evidence and standardized tests that reliably measure impairment in the individual's (i) short-term or long-term memory, (ii) orientation as to people, places or time, and (iii) deductive or abstract reasoning.

Standby Assistance means the presence of another person, within arm's reach of the Owner, which is necessary to prevent, by physical intervention, the Owner's injury while the Owner is performing an Activity of Daily Living.

Substantial Assistance means either Hands-on Assistance or Standby Assistance.

Substantial Supervision means continual supervision (which may include cueing by verbal prompting, gestures, or other demonstrations) by another person that is necessary to protect the Owner from threats to the Owner's health or safety (including, but not limited to, such as threats that may result from wandering.)

Withdrawals mean any Partial Surrenders taken under the Contract, as well as LTC Benefit Payments or Excess Withdrawals taken under the Rider.

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2. OWNERSHIP PROVISIONS

For the purposes of this Rider, the Owner and the Annuitant must be the same person, unless the Owner is a non-natural entity. If the Contract is owned by a trust, the Annuitant is considered the Owner for purposes of the Rider.

To qualify for the Rider, Joint Owners are not permitted.

The Rider will terminate if any modification results in a change of Annuitant or Owner.

3. PREMIUM

Premiums after the Initial Premium may be paid during the Accumulation Period, according to the terms of the Contract. No Premium payments are allowed during the LTC Benefit Period. Once the Accumulation Value becomes zero, no further Premium payments are allowed.

4. RIDER PROVISIONS

4.1 LTC Benefit Base

During the Accumulation Period
On the Rider Date, the LTC Benefit Base is equal to the Initial Premium multiplied by the Coverage Ratio shown on the Rider Data Page. After the Rider Date, the LTC Benefit Base will accumulate at the Rollup Rate for the duration of the Rollup Period. For any additional Premiums received during the Coverage Ratio Period, the LTC Benefit Base will be increased by the amount of the additional Premium multiplied by the Coverage Ratio. After the Coverage Ratio Period, the LTC Benefit Base will be increased by the amount of the additional Premium. The LTC Benefit Base will be decreased for any Withdrawals. Any Withdrawals during the Accumulation Period will reduce the LTC Benefit Base in proportion to the decrease in the Accumulation Value.

During the LTC Benefit Period
On the date of the first LTC Benefit Payment, if the Accumulation Value is greater than the LTC Benefit Base, the LTC Benefit Base will be increased to the Accumulation Value. This is called a step-up feature and will only happen once. The Rollup of the LTC Benefit Base stops permanently at the beginning of the LTC Benefit Period, unless you have elected the Inflation Version of the Long-Term Care Rider.

The LTC Benefit Base will be decreased dollar-for-dollar by the amount of any LTC Benefit Payments. Excess Withdrawals will decrease the LTC Benefit Base in proportion to the decrease in the Accumulation Value.

If the Accumulation Value is zero, there may still be a Benefit Base. This Rider is considered to be in an extended benefit period when the Accumulation Value of the Contract is zero, but Long-Term Care Benefits are payable.

4.2 LTC Benefit Payment Amount

The LTC Benefit Payment Amount is the amount that can be withdrawn monthly under the terms of the Rider, without being considered an Excess Withdrawal. LTC Benefit Payments reduce the Accumulation Value and are considered Partial Surrenders. LTC Benefit Payments can only be taken in equal monthly installments.

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The initial monthly LTC Benefit Payment Amount is equal to:

(a) The LTC Benefit Base, less the Accumulation Value, multiplied by
(b) The current contract year Benefit Base Vesting Percentage, plus
(c) The Accumulation Value, divided by
(d) The number of months in the LTC Benefit Period.

If the calculated LTC Benefit Payment Amount is less than $1,500, the payment will be increased to $1,500 per month and will be payable until the LTC Benefit Base is exhausted.

Once this amount is determined, it will not change except for any subsequent Excess Withdrawals taken. Additional Premiums will not be accepted into the contract after LTC Benefits begin.

Withdrawals of the LTC Benefit Payment Amount will not be subject to a Surrender Charge, even if the total amount of LTC Benefit Payments and other Partial Surrender Amounts exceed the Penalty-free Partial Surrender Amount in a given contract year. Partial Surrender provisions are described in the Contract. LTC Benefit Payments include, and are not in addition to, the Partial Surrender amount that is available without a Surrender Charge, as outlined in the Contract. Partial Surrenders taken under the Contract may be subject to a Surrender Charge if the total amount of LTC Benefit Payments and other Partial Surrenders exceed the penalty-free Partial Surrender Amount in a Contract Year.

LTC Benefit Payments will continue monthly until the LTC Benefit Base is exhausted, as long as the Owner continues to meet the Eligibility Requirements.

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4.3 Rider Charge

The Rider Charge will be deducted monthly from the Accumulation Value. When the charge falls on the Contract Anniversary, the charge will occur after the application of any Interest Earned or Index Credits.

The monthly Rider Charge will be calculated as:

(a) The monthly Rider Charge Percentage, as found on the Rider Data Page, multiplied by
(b) The current LTC Benefit Base, less the current Accumulation Value, multiplied by
(c) The current contract year Benefit Base Vesting Percentage.

The Rider Charge Percentage is level and is based on Issue Age and Underwriting Class. The Rider Charge will be deducted proportionately from each Account Accumulation Value (as defined in the Contract). The Rider Charge is also deducted from the Minimum Guaranteed Contract Value. The Rider Charge is not deducted from the Benefit Base. The Rider Charge is not considered a Partial Surrender under the Contract.

In the event that the Accumulation Value is greater than the LTC Benefit Base at the time of the Rider Charge deduction, the Rider Charge will be equal to zero. In the event that the Rider is terminated, but the Contract continues, Rider Charges will cease. There are no Rider Charges if the Accumulation Value is zero.

4.4 Premium Load

Section 5.1 Accumulation Value of the base contract will be revised to read as follows.
On the Contract Date, the Contract's Accumulation Value equals the Initial Premium Paid, less the Premium Load Percentage multiplied by the Initial Premium Paid. At any time after the Contract Date, the Contract's Accumulation Value equals the sum of the Accumulation Value(s) of the Account(s) chosen.

Subsequent premiums received in the first year will also be reduced by the Premium Load Percentage multiplied by the subsequent premium amount.

4.5 LTC Benefit Period

The LTC Benefit Period starts on the date of the first LTC Benefit Payment and is the number of years chosen by the Owner to receive LTC Benefit Payments, subject to the Owner meeting the Eligibility Requirements. The LTC Benefit Period may not be less than the Minimum LTC Benefit Period on the Rider Data Page.

4.6 Excess Withdrawals

Excess Withdrawals are defined as Withdrawals exceeding the LTC Benefit Payment Amount in any Contract Month during the LTC Benefit Period. Excess Withdrawals may or may not incur a Surrender Charge, depending on whether or not the total Withdrawal exceeds the Partial Surrender amount that is available without a Surrender Charge, as outlined in the Contract.

Excess Withdrawals will decrease the LTC Benefit Base and LTC Benefit Payment Amount in proportion to the decrease in the Accumulation Value.

If Excess Withdrawals reduce the LTC Benefit Base to zero, this Rider terminates.

5. ELIGIBILITY REQUIREMENTS FOR THE PAYMENT OF BENEFITS

If the Owner meets all of the Eligibility Requirements stated below, they are eligible to start LTC Benefit Payments.

On the date that LTC Benefit Payments begin,

(a) This Rider and the underlying Base Contract must be inforce; and
(b) The Owner meets the definition of Chronically Ill; and
(c) Benefits are used for Qualified Long-Term Care Services provided pursuant to a Plan of Care; and
(d) The Owner is a U.S. resident.

SPECIMEN

The definition of a Chronically Ill person is one who has been certified within the preceding 12-month period by a Licensed Health Care Practitioner as: (1) having the inability to perform, without substantial assistance, at least two of six Activities of Daily Living (ADL) for at least 90 days due to a loss of functional capacity; or (2) requiring substantial supervision to protect the individual from threats to health and safety due to Severe Cognitive Impairment.

Contractholders may obtain a certification of chronic illness and Plan of Care at their own expense, from a licensed health care practitioner of their choosing, or they may submit a notice of claim and request for the insurer to arrange for an assessment from an independent licensed health care practitioner. We reserve the right to request review of the Plan of Care at our discretion, but not more frequently than once every 90 days. No more than one Plan of Care may be in effect at any given time.

To verify the Insured is Chronically Ill, the Company has a right to require a physical examination of the Insured. This examination must be performed by an independent Licensed Health Care Practitioner. If the Licensed Health Care Practitioner determines the existing Plan of Care is inappropriate, the Licensed Health Care Practitioner may develop a new Plan of Care to replace the existing Plan of Care. In order to be considered independent, the Licensed Health Care Practitioner conducting the assessment must not be an employee of the Company or compensated in any manner that is linked to the outcome of the assessment of the insured.

If a Licensed Health Care Practitioner determines that the Insured is not Chronically Ill, and the Licensed Health Care Practitioner did not personally examine the Insured, the Insured is entitled to a second assessment which shall be conducted in person. If the Company arranges for the assessment, the costs to certify the insured or develop a Plan of Care shall not count against the contract values (e.g., the LTC Benefit Base or Accumulation Value). The

assessments of Chronic Illness shall be performed promptly and certifications of Chronic Illness shall be completed as quickly as possible to ensure that an Insured's benefits are not delayed.

To continue to be eligible to receive LTC Benefit Payments during the LTC Benefit Period, a Licensed Health Care Practitioner's statement must be provided annually certifying that the Owner continues to be Chronically Ill. LTC Benefit Payments will discontinue if the annual certification requirement is not met.

LTC Benefit Payments will discontinue at the end of the LTC Benefit Period once the LTC Benefit Base becomes zero. In this case, LTC Benefit Payments cannot be re-started and the Contract and Rider will be terminated.

6. RE-STARTING LTC BENEFIT PAYMENTS

If LTC Benefit Payments are discontinued due to the Owner no longer being Chronically Ill, they may be re-started at a later date. The re-started LTC Benefit Payment Amount will be equal to the last LTC Benefit Payment Amount taken, reduced pro-rata for any withdrawals taken since the last payment. Payments will be paid over the remaining number of months in the LTC Benefit Period.

The Owner must meet all of the Eligibility Requirements stated below to be eligible to re-start LTC Benefit Payments.

On the date that re-started LTC Benefit Payments begin,

(a) This Rider and the underlying Base Contract must be inforce; and
(b) The Owner meets the definition of Chronically Ill; and
(c) Benefits are used for Qualified Long-Term Care Services provided pursuant to a Plan of Care; and
(d) The Owner is a U.S. resident.

Upon re-starting, the LTC Benefit Payment Amount may be the same or lower than the prior amount. Any Withdrawals taken will decrease both the LTC Benefit Payment Amount and the LTC Benefit Base in proportion to the decrease in the Accumulation Value. Otherwise, the LTC Benefit Payment Amount will be equal to the previous amount. The LTC Benefit Payment Amount will be paid over the number of unused months remaining in the LTC Benefit Period.

To continue to be eligible to receive LTC Benefit Payments during the remaining LTC Benefit Period, a Licensed Health Care Practitioner's statement must be provided annually certifying that the Owner continues to be Chronically Ill. LTC Benefit Payments will discontinue if the annual certification requirement is not met.

LTC Benefit Payments will discontinue at the end of the remaining LTC Benefit Period once the LTC Benefit Base becomes zero. In this case, LTC Benefit Payments cannot be re- started and the Contract and Rider will be terminated.

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7. RIDER TERMINATION

The Rider may be terminated at the Owner's request. Once the Rider has terminated, it may not be restarted at any time. To request termination of the Rider, you must make a request to our Executive Office. The termination will go into effect when we receive the request to terminate the Rider, and the request is accepted and recorded by us.

The Rider automatically terminates and LTC Benefit Payments cease in the event of the following:

- Upon the death of the Owner; or
- Upon the request for a full surrender of the Contract; or
- Upon election of a Payment Plan under the Contract; or
- If the Accumulation Value becomes zero due to non-LTC partial withdrawals; or
- A change in ownership; or
- A change in Annuitant; or
- Spousal Continuation of the Contract; or
- Once all the LTC Benefit Payments have reduced the LTC Benefit Base to zero

Upon the death of any Owner, or Annuitant if the Owner is a non-living entity, the underlying Contract and this Rider will terminate. LTC Benefit Payments payable under this Rider will cease at that time.

This Rider has no Cash Surrender Value or other non-forfeiture benefits.

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8. MISSTATEMENT OF AGE

If the Owner's age has been misstated, we will adjust the LTC Benefits and Rider Charges. The LTC Benefits will be those that the Premium would have bought at the correct age. The Rider Charges will be adjusted to the schedule of charges for the correct age. Any underpayment made by us will be made up immediately. Any overpayment made by us will be deducted from the succeeding payments as necessary. By age, we mean the Owner's age as of his or her last birthday on the Rider Date.

9. CLAIMS PROVISIONS

9.1 Notice of Claim

The Owner must provide written notice of claim to the Company. Notice given by or on behalf of the Owner to the Company, or any authorized agent of the Company, with information sufficient to identify the Owner, shall be deemed notice to the Company. If the Owner has designated an irrevocable Beneficiary, that Beneficiary must sign off on the claim.

Once notice of claim is received by the Company, we will send the Owner the necessary claim forms. If the Owner does not receive our claim forms within 15 days after written notice of claim is sent, the Owner can send us written Proof of Loss without waiting for the forms.

9.2 Proof of Loss

The Owner must provide Proof of Loss in order for the Owner's claim to be approved. The Proof of Loss must include detailed written documentation describing and confirming the Insured's status as Chronically Ill. The Proof of Loss documentation must include the following:

- A claim form provided by us, if applicable.
- The certification by a Licensed Health Care Practitioner that the Owner is Chronically Ill. Such certification must include the date the Owner became Chronically Ill and a description of the Owner's Chronic Illness.
- Documentation establishing that the Eligibility Requirements for the Payment of Benefits have been met. The Company may obtain additional information, including the Plan of Care, from the Owner's Licensed Health Care Professional, in order to determine the validity of the claim.

9.3 Payment of Claims

Once Proof of Loss is received by the Company in good order, LTC Benefit Payments will start within 30 days, payable to the Owner.

9.4 Appeals

The Owner will be informed in writing if the claim is denied. In such event, we will provide the Owner with the reason for such denial. The Owner will then have the right to appeal our claims decision. The Owner may request that we make all information directly related to such denial available to the Owner, including any decisions regarding benefit eligibility, care plans, services and providers, and reimbursement payments. We will provide the Owner with such requested information within 60 days from the date we receive the appeal request. The Owner must request the appeal within one year from the date we provide notice of the denial of such claim.

The appeal should state why the Owner disagrees with our determination and include any other factors/information the Owner feels that we should take into consideration. The Owner is responsible for the expense of securing such additional information. The Owner may authorize someone else to act for the Owner in this appeals process.

During our review of the appeal, we may request that the Owner provide additional information. If this additional information is not provided, the appeal may be denied. We will inform the Owner of our decision regarding the appeal. If the claim denial is overturned, we will pay any LTC Benefit Payments due.

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9.5 Claim Overpayment

If for any reason, benefits have been paid for a period for which the Owner was not entitled to benefits, repayment of the overpayment must be made to us within 45 days of notice to the Owner. Any amounts not repaid may be recovered by us by offsetting against any amounts otherwise payable to the Owner under this Rider or by other reasonable means.

9.6 Independent Third Party Review

The Owner has the right to request an Independent Third Party Review if we upheld our denial of the Owner's claim based upon a determination from an independent Licensed Health Care Practitioner that the Owner is not Chronically Ill. We will provide the Owner with written instructions of the right to request an Independent Third Party Review and the process pertaining to such review when we notify the Owner of our decision on the Owner's appeal

The Independent Third Party will review the relevant material related to the denial of the claim that we provide. The Owner will not be required to undergo an additional exam or assessment. The Owner may provide us with additional information that the Owner wishes to be included in the Independent Third Party Review.

The decision of the Independent Third Party is final and binding on us. We will pay the Independent Third Party for their time spent reviewing the information. The Independent Third Party must be state approved or certified to conduct such reviews, if the state requires such approvals or certifications. The Independent Third Party must be mutually agreed upon by you and us.

10. GENERAL PROVISIONS

10.1 Representations

In the absence of fraud, any statement made by the Owner will be deemed a representation and not a warranty.

10.2 Incontestability Period

A misrepresentation by the Owner in the Application or underwriting interview may be used to rescind or cancel this Rider or deny an otherwise valid claim. During the first six months following the Rider Date, we may take such action upon proof of misrepresentation that was material to the issuance of the Rider. After the first six months, but before the end of the first twenty-four months after the Rider Date, we may take such action upon proof of misrepresentation that is both material to the issuance of the Rider and pertains to the condition for which benefits are being applied for. After twenty-four months past the Rider Date, we can take such action only if it can be proven that the Owner knowingly and intentionally misrepresented relevant facts relating to their health. No LTC Benefits will be paid under this Rider if it is rescinded or cancelled. In the event this Rider is rescinded after we have paid LTC Benefits, we may not recover the payments already made.

10.3 Pre-Existing Conditions

Except as described in the Incontestability Period and Misstatement of Age sections, claims under this Rider will not be denied due to a sickness, medical condition or physical condition in existence prior to the Rider Date.

10.4 Conformity with Internal Revenue Code

If we must make changes to the Rider due to subsequent changes in the Internal Revenue Code, we will offer those changes in writing to the Owner. The Owner may accept or reject those changes. If the Owner rejects the changes, this Rider may no longer be tax-qualified under the Code and a tax advisor should be consulted. If the Owner accepts the changes, the Rider will be construed to comply with the changes in the Code**. Tax treatment of Long- Term Care Coverage may change and you should consult a qualified tax advisor for guidance.**

10.5 Exclusions and Limitations

Claim payment will not be made if any of the following apply:

1. A claim for treatment of the Owner's alcoholism or addiction to drugs or narcotics; or
2. A claim resulting from attempted suicide; or
3. A claim resulting from an intentional self-inflicted injury.

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10.6 Right to Reduce Coverage

Prior to Notice of Claim, you may reduce the LTC Benefit Base to an amount not to be less than the Accumulation Value of the Contract. A reduction in coverage will reduce the Rollup Rate to 0% and the Rollup Period will stop immediately. The LTC Benefit Base cannot be increased following a reduction in coverage.

10.7 Cross Border Rules

Benefits will be paid for services obtained in a state other than the state of issue, if benefits would have been paid in the state of issue, irrespective of facility licensing, certification or registration requirement (or similar requirements) differences between the states.

10.8 Notification and Offer of New Benefits or Benefit Eligibility

If we introduce new benefits, benefit eligibility criteria, or riders to the Contract containing the aforementioned information, that are not included in the previously issued Rider, current holders of the Rider who are not receiving benefits will be granted the following rights:

You will be notified of the availability of such new benefits, eligibility criteria, or riders within 12 months of their introduction. We will offer you access to these new benefits or benefit eligibility in one of the following ways:

1. By adding an endorsement to the existing Rider with the new benefits or eligibility, subject to a separate charge based on the insured's attained age. The original Rider cost will remain unchanged and based on the insured's age at issuance.
2. By replacing the existing Rider for the Contract with a new Rider that includes the updated benefits or eligibility. In this case, the charge for the replacement Rider will reflect the issue age of the original Rider, recognizing the insured's prior status.

Underwriting may be required for access to new benefits or eligibility. Any underwriting will be consistent with the standards applied to new applicants for the same Rider.

10.9 Legal Action

No action at law or in equity shall be brought to recover on this Rider prior to the expiration of 60 days after written proof of loss has been furnished in accordance with the requirement of this Rider. No such action shall be brought after the expiration of three years after the time written proof of loss is to be furnished.

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7100 Westown Pkwy, Suite 200, West Des Moines, Iowa 50266-2521

Wellness Rider

This Rider provides the Owner with individualized tools to encourage healthy aging as well as providing incentives for incorporating such healthy changes into the Owner's everyday lifestyle.

This Rider is attached to and made part of the Contract to which it is attached. The Rider becomes effective on the Rider Date. This Rider is only available if the Contract has the Long-Term Care Rider attached. If any provisions of the Contract or the Long-Term Care Rider conflict with the Rider, the provisions of the Rider will apply.

Benefits provided and charges assessed under the terms and conditions of this Rider are described on the following pages.

RIDER SPECIFICATIONS

CONTRACT NUMBER:	{EQ0001123456F}
RIDER DATE:	{01/01/2027}
QUALIFICATION PERIOD:	2 YEARS
LTC CREDIT PERIOD:	20 YEARS
WELLNESS RIDER CHARGE:	$100 ANNUALLY
ADDITIONAL LTC BENEFIT BASE FACTOR:	<<VARIABLE ITEM>>

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1. GENERAL DEFINITIONS

Additional LTC Benefit Base Factor means the percentage used in the calculation of the Wellness Rider Credit.

LTC Credit Period means the maximum number of Contract Years in which the Owner may earn Wellness Rider Credits that can be applied to the Additional LTC Benefit Base.

Provider means a provider designated by us to administer program features available under the Wellness Program. We reserve the right to administer the Wellness Program, designate a third-party Provider, or change Provider at any time.

Qualification Period means the period of time in which the Owner must meet the goals and complete the actions identified in the Wellness Plan. The first Qualification Period begins on the Contract Date. Subsequent Qualification Periods will begin on the day after the prior Qualification Period ends. The Qualification Period is shown in the Rider Specifications.

Wellness Plan means an individualized plan developed for the Owner by the Provider. The Wellness Plan includes goals, recommendations and actions that the Owner can undertake during a Qualification Period so to promote aging in a healthy manner. The Wellness Plan will be developed in accordance with accepted relevant standards of practice and appropriate to the Owner's goals and needs. Only one Wellness Plan may be in effect at any given time. The Wellness Plan may be updated during a

Qualification Period based upon a change in health, lifestyle or care needs. We will pay the costs associated with the development of all Wellness Plans. Participation in the activities of the Wellness Plan is voluntary during any given Qualification Period.

Wellness Rider Charge means the fee that will be assessed for this Rider. The Wellness Rider Charge is shown in the Rider Specifications and will not change.

Wellness Rider Credit means the amount that may be added to the Additional LTC Benefit Base in each Qualification Period upon completion of the goals and actions outlined in the Wellness Plan. The maximum amount of Wellness Rider Credits in each Qualification Period is determined prior to the beginning of each period and will be included in the Wellness Plan.

2. OWNERSHIP PROVISIONS

For the purposes of this Rider, the Owner and the Annuitant must be the same person, unless the Owner is a non-natural entity. If the Contract is owned by a trust, corporation, partnership, association, or other like entity, the Annuitant is considered the Owner for purposes of the Rider.

To qualify for the Rider, Joint Owners are not permitted.

The Rider will terminate if any modification results in a change of Annuitant or Owner.

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3. BENEFIT PROVISIONS

3.1 Wellness Benefits

Wellness Benefits are available to the Owner under this Rider. Wellness Benefits may include, but are not limited to:

- Access to a wellness and healthy aging website, supportive mobile applications, educational tools and resource programs;
- Access to special offers, subscriptions and discounts for wellness and aging programs and services;
- Availability of individualized health and aging risk assessments and Wellness Plans;
- Access to a wellness and aging concierge customer service number;
- Access to professional advisors who can link the Owners' care and service needs to service providers; and
- Tools and incentives to promote continued engagement with the Wellness Program and earning of Wellness Rider Credits.

Wellness Benefits may be accessed as long as this Rider has not been terminated.

3.2 Wellness Plan and Wellness Rider Credits

After the Rider is issued, the Owner will complete a questionnaire so the Provider may understand the Owner's health status, goals and needs for healthy aging. Once completed and all necessary information is provided, an individualized Wellness Plan for the current Qualification Period will be created by the Provider and presented to the Owner.

The Wellness Plan will provide recommendations for goals and actions the Owner may undertake to promote a healthy lifestyle and earn Wellness Rider Credits. Completion of any or all of the Wellness Plan during a given Qualification Period is completely voluntary. A new Wellness Plan will be developed by the Provider for each subsequent Qualification Period.

Within the 60-day period prior to the end of each Qualification Period, the Provider will:

- Track the progress in meeting the goals and actions specified in the Wellness Plan; and
- Revisit the Wellness Plan and update as necessary the Owner's health status, lifestyle status, care needs and overall assessment; and
- Determine any changes to the Wellness Plan if necessary for the next Qualification Period.

By completing all goals and actions specified in the Wellness Plan, the Owner can earn Wellness Rider Credits in each Qualification Period. The maximum amount of Wellness Rider Credits that may be earned in each Qualification Period will be detailed in the Wellness Plan for that Qualification Period and is equal to: (a) The LTC Benefit Base at the beginning of the Qualification Period, multiplied by (b) The Additional LTC Benefit Base Factor as shown in the Rider Specifications. If not all goals are met, the Owner may earn a portion of the Wellness Rider Credits based upon the percentage of Wellness Plan goals and actions that were satisfied in that Qualification Period. Any unearned Wellness Rider Credits available at the end of a Qualification Period will not be available on any future date. No Wellness Rider Credits may be earned for a Qualification Period without a Wellness Plan.

The Owner may request a revision or update to their Wellness Plan during a Qualification Period based upon a change in health, lifestyle or care needs. The Provider will work with the Owner to determine if a revision or update is necessary. If the Provider determines that a change to the Wellness Plan is warranted, a revised Wellness Plan will be implemented for the remainder of the Qualification Period.

Wellness Rider Credits may not be earned after LTC Benefits begin under the Long-Term Care Rider or after the LTC Credit Period.

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3.3 Additional LTC Benefit Base

The Additional LTC Benefit Base will start at zero on the Rider Date. The Owner must meet requirements set forth in the Wellness Plan during each Qualification Period in order to earn Wellness Rider Credits. Wellness Rider Credits will be added to the Additional LTC Benefit Base at the end of each Qualification Period during the LTC Credit Period.

The maximum amount of Wellness Rider Credits available in any Qualification Period is equal to:

(a) The LTC Benefit Base at the beginning of the Qualification Period, multiplied by
(b) The Additional LTC Benefit Base Factor as shown in the Rider Specifications.

At the time of claim, the Additional LTC Benefit Base will be used to calculate the LTC Benefit Payment Amount. The initial monthly LTC Benefit Payment Amount is equal to:

(a) The LTC Benefit Base, plus
(b) The Additional LTC Benefit Base, less
(c) the Accumulation Value, multiplied by
(d) The current Contract Year Benefit Base Vesting Percentage, plus
(e) The Accumulation Value, divided by
(f) The number of months in the LTC Benefit Period.

If the claim occurs in the middle of a Qualification Period, no Wellness Rider Credits will be earned during that period.

Once the LTC Benefit Payment Amount is determined, it will not change except for any subsequent Excess Withdrawals taken. Additional Premiums will not be accepted into the contract after LTC Benefits begin.

3.4 Additional Rider Conditions

We reserve the right to enhance or modify the Wellness Program over time based upon changes in the medical, wellness, geriatric, technological and provider landscape or other factors that impact any of the actuarial expectations for the Rider. Any change to the Wellness Program will be made on a prospective basis and will not unfairly discriminate within any class of Owners. If the Owner is not satisfied with any change, the Owner may terminate this Rider.

There may be additional costs associated with meeting the Wellness Plan goals or actions that will not be reimbursed by us including, but not limited to, the costs for medical provider visits, services and tests, medications, assistive devices, durable medical equipment, gym membership, exercise program fees, athletic gear, exercise equipment, home modifications and fitness monitoring devices.

3.5 Wellness Rider Charge

The Wellness Rider Charge will be deducted annually from the Accumulation Value, with the first charge occurring on the Rider Date. The Wellness Rider Charge will be deducted proportionately from each Account Accumulation Value (as defined in the Contract). The Wellness Rider Charge is not deducted from the LTC Benefit Base, the Additional LTC Benefit Base or the Minimum Guaranteed Contract Value. The Wellness Rider Charge is not considered a Partial Surrender under the Contract.

4. RIDER TERMINATION

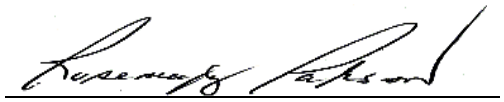
The Rider may be terminated at the Owner's request. To request termination of the Rider, you must make a request to our Executive Office. The request must be in a form acceptable to us. The termination will go into effect when we receive the request to terminate the Rider, and the request is accepted and recorded by us. Upon voluntary termination of the Rider, the Wellness Rider Charge and access to all Wellness Benefits will cease and no further Wellness Rider Credits can be earned. Any partial Wellness Rider Credits earned during the current Qualification Period will be forfeited. The Additional LTC Benefit Base at the time of Rider termination will remain available to and accessible by the Owner subject to the terms and conditions of the Wellness Program and the Long-Term Care Rider.

This Rider automatically terminates if the Provider is no longer offering wellness services and there is no suitable provider substitute. The Wellness Rider Charge and access to all Wellness Benefits will cease and no further Wellness Rider Credits can be earned. Any partial Wellness Rider Credits earned during the current Qualification Period will be applied at the end of the Qualification Period. The Additional LTC Benefit Base at the time of Rider termination will remain available to and accessible by the Owner subject to the terms and conditions of the Wellness Program and the Long-Term Care Rider.

This Rider automatically terminates upon termination of the Base Contract or the Long-Term Care Rider. The Wellness Rider charge will cease. Access to all benefits under this rider will be terminated, including the Wellness Rider Credits and the Additional LTC Benefit Base.

Once the Rider has terminated, it may not be restarted at any time.

This Rider has no Cash Surrender Value or other non-forfeiture benefits.



Vice President

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Nonforfeiture Benefit Rider

This Rider provides for an additional Nonforfeiture Benefit for Long-Term Care benefits provided under the Long-Term Care Rider.

This Rider is attached to and made part of the Contract to which it is attached. The Rider becomes effective on the Rider Date. This Rider is only available if the Contract has the Long-Term Care Rider attached. If any provisions of the Contract or the Long-Term Care Rider conflict with the Rider, the provisions of the Rider will apply.

This Rider must be added at the time of application.

1. NONFORFEITURE BENEFIT

After the Rider has been in-force for at least three years, an additional benefit will be available to the Owner in the form of a Nonforfeiture Benefit. This benefit is only available if the Long-Term Care Rider terminates for any of the following reasons:

- Upon the request for a full surrender of the base Contract; or
- Upon the request for a termination of the Long-Term Care Rider.

The Nonforfeiture Benefit will be equal to the sum of the Premium Load and the Rider Charges applied under the Long-Term Care Rider, reduced for any LTC Benefit Payment Amounts previously paid under the Long-Term Care Rider.

If the Owner meets all of the Eligibility Requirements stated below, they are eligible to start LTC Benefit Payments.

On the date that LTC Benefit Payments begin,

(a) This Rider must be inforce; and
(b) The Owner meets the definition of Chronically Ill; and
(c) Benefits are used for Qualified Long-Term Care Services provided pursuant to a Plan of Care; and
(d) The Owner is a U.S. resident.

The definition of a Chronically Ill person is one who has been certified within the preceding 12-month period by a Licensed Health Care Practitioner as: (1) having the inability to perform, without substantial assistance, at least two of six Activities of Daily Living (ADL) for at least 90 days due to a loss of functional capacity; or (2) requiring substantial supervision to protect the individual from threats to health and safety due to Severe Cognitive Impairment.

The initial monthly LTC Benefit Payment Amount under this Rider is equal to:

(a) The Nonforfeiture Benefit, divided by
(b) The number of months remaining in the LTC Benefit Period.

The LTC Benefit Payment Amount available under the Nonforfeiture Rider will never be less than $1500, except when the remaining Nonforfeiture Benefit is less than $1500.

To continue to be eligible to receive LTC Benefit Payments during the LTC Benefit Period, a Licensed Health Care Practitioner's statement must be provided annually certifying that the

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Owner continues to be Chronically Ill. LTC Benefit Payments will discontinue if the annual certification requirement is not met. Once LTC Benefit Payments are discontinued, they cannot be restarted and this Rider is terminated.

LTC Benefit Payments will discontinue at the end of the LTC Benefit Period or when the Nonforfeiture Benefit is exhausted and this Rider will automatically be terminated.

2. TERMINATION

This Rider may be terminated at the Owner's request. To request termination of the Rider, you must make a request to our Executive Office. The request must be in a form acceptable to us. The termination will go into effect when we receive the request to terminate the Rider, and the request is accepted and recorded by us.

The Rider will automatically be terminated upon the following:

(a) Death of the Owner, or
(b) When all benefits under the Long-Term Care Rider have been paid; or
(c) When all benefits under this Rider have been paid.

Once the Rider has terminated, it may not be restarted at any time.

This Rider has no Cash Surrender Value.

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EquiTrust Life Insurance Company
5400 University Avenue, West Des Moines, Iowa 50266-5997

Nursing Home Waiver

This rider is a part of the policy to which it is attached.

Section 1 - Policy Modifications

The policy is modified to add the provisions of this rider. All provisions of the policy not in conflict with this rider will apply to this rider. In the event of a conflict between the provisions of the policy and this rider, the provisions of this rider will prevail.

Section 2 - Definitions

2.1 Nursing Care Center

means a nursing care center that :

a. is licensed to operate according to the laws of its location;
b. provides skilled nursing care and/or 24-hour nursing care by or under the supervision of a licensed physician, licensed registered nurse or a licensed practical nurse;
c. keeps a daily medical record of each patient.

Nursing Care Center does not include:

a. drug or alcohol treatment centers;
b. home for the aged or mentally ill, community living centers, or places that primarily provide domiciliary, residency or retirement care; or
c. places owned or operated by a member of the Owner's immediate family.

2.2 Hospital

means a center:

a. that operates for the care and treatment of sick or injured persons as inpatients;
b. that provides 24-hour nursing care by, or supervised by, a registered nurse;
c. that is supervised by a staff of licensed physicians; and
d. that has medical, diagnostic, and major surgery capabilities or access to such capabilities.

Section 3 - Waiver of Surrender Charge

3.1 Waiver of Surrender Charge

After the first policy year, You may make a partial withdrawal or a full surrender without incurring a Surrender Charge or Market Value Adjustment if You become eligible for waiver of the Surrender Charge. You become eligible for waiver of surrender charge when You are confined in a Hospital or Nursing Care Center for at least 90 consecutive days. You remain eligible for waiver for the period you remain confined.

The waiver of the Surrender Charge is subject to the following rules:

a. We must receive a written request on a form acceptable to us signed by You;
b. the policy must be in force;
c. proof must be provided of Your eligibility for waiver of Surrender Charge, including an attending physician's statement and any other proof We may require. We reserve the right to seek a second medical opinion or have a medical examination performed at our expense by a physician We choose;
d. this benefit is not available during the first year following any change in ownership of the policy.

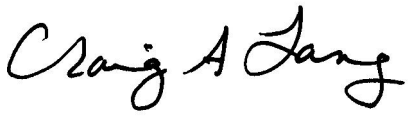
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3.2 Ownership by Trust, Corporation, Partnership, Association or Like Entity

If this policy is owned by a trust, corporation, partnership, association or other like entity, the Annuitant is considered the Owner when determining eligibility for waiver of surrender charges.

Section 4 - Effective Date

The effective date of this rider will be the Policy Date. This rider may be added only at policy issue.



President

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EquiTrust Life Insurance Company®

{West Des Moines, Iowa 50266}

Terminal Illness Rider

This rider is attached to and made part of the Contract to which it is attached. If any provisions of the Contract conflict with the Rider, the provisions of the Rider will apply.

Benefits provided under the terms and conditions of this Rider are described on the following pages.

RIDER SPECIFICATIONS

CONTRACT NUMBER:	{EQ0001123456F}
RIDER EFFECTIVE DATE:	{01/01/2027}
TERMINAL ILLNESS PERIOD:	12 MONTHS
TERMINAL ILLNESS WITHDRAWAL PERCENTAGE:	75%
TERMINAL ILLNESS WAITING PERIOD:	1 YEAR

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1. GENERAL DEFINITIONS

Contract means the Contract to which this Rider is attached.

Rider means this Terminal Illness Rider, in its entirety, which is attached to the Contract.

Physician means a licensed and qualified medical doctor, practicing within the scope of that license, who is not a member of Your immediate family.

Terminally Ill means an individual who has been certified by a Physician as having an illness or physical condition which can reasonably be expected to result in death within the Terminal Illness Period, after the date of certification.

2. BENEFIT PROVISIONS

2.1 Payment of Benefits

Benefits are not payable under this Rider until after the Terminal Illness Waiting Period, starting on the Rider Effective Date. You will receive the Terminal Illness Benefit as a one-time lump sum payment.

If the Contract is owned by a trust, corporation, partnership, association or other entity, the Annuitant is considered the Owner when determining eligibility for payments under this Rider.

2.2 Terminal Illness Benefit

If You qualify for benefits under the definition of Terminally Ill, You may take a Penalty Free Withdrawal up to an amount equal to the Terminal Illness Withdrawal Percentage multiplied by the Accumulation Value. If You elect to take 100% of the Accumulation Value under this provision, the Contract will terminate after the benefit has been paid.

If there are Joint Owners, the benefits under this Rider may only be elected once if either Joint Owner become Terminally Ill.

2.3 Benefit Election

To elect a benefit under this Rider:

- You must request payment of the Rider benefit during Your lifetime in a written form; and
- You must submit to us written proof that You qualify for the Rider benefit.

You may only elect to receive benefits under this Rider once.

If You are required by a government agency to use this Rider benefit in order to apply for, obtain, or keep a government benefit or entitlement, then You are not eligible to elect the benefit provided by this Rider.

If any Owner dies before We make any payment under the terms of this Rider, We will consider the election to be null and void. We will pay the Beneficiary the Death Benefit as provided in the Contract when We receive due proof of death.

Once a Terminal Illness payment has been paid, the election cannot by revoked. A payment under this Rider is considered made when sent from our Executive Office.

If the payment of the Rider benefit is denied by Us, the surrender proceeds shall not be disbursed until You are notified of the denial and are provided with the opportunity to accept or reject the surrender proceeds, including any surrender charges or Market Value Adjustment.

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2.4 Physical Examinations

At our expense, we may require an examination of You by a second Physician to verify any diagnosis or certification made by the initial Physician. The second Physician may be chosen by Us. If the opinion of the second Physician is different than the opinion of the initial Physician, the opinion of the second Physician will rule.

2.5 Notice of Claim

You may deliver notice of claim to Us at our home office address or by contacting us by telephone. Contact information can be found on the cover page of the Contract to which this Rider is attached. You may also make a notice of claim to any authorized agent. Notice given by a representative on behalf of the Owner will be deemed sufficient.

2.6 Claim Forms

We must receive a written request on a form acceptable to us signed by You. Proof must be provided for waiver of Surrender Charge, including an attending physician’s statement and any other proof We may require.

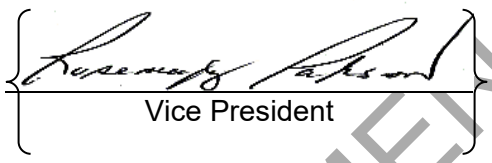
2.7 Reinstatement

This Rider may not be reinstated.

3. RIDER TERMINATION

The Rider automatically terminates in the event of the following:

- Upon written request from the Owner;
- The Base Contract terminates;
- The Death Benefit of the Contract has been paid; or
- You elect to take a one-time benefit under this Rider.



Vice President

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FLEXIBLE PREMIUM FIXED DEFERRED ANNUITY CONTRACT WITH INDEX-LINKED CREDITING OPTIONS

Contract features include:

- **Annuity benefit payable at Income Date**
- **Death benefit payable in event of the Owner's death prior to Income Date**
- **Dividends are not paid (Nonparticipating)**

Cash Surrender Values may increase or decrease based on the Index features of this Contract. While Contract values may be affected by an external index, the Contract does not directly participate in any stock, bond or equity investments. The initial interest rate in any fixed rate account is guaranteed for a limited period of time.

After the first Contract Year, Partial Surrenders of up to 10% of the Contract's Accumulation Value as of the last Contract Anniversary may be made without a Surrender Charge.