



## Performance Lock Election for Index Frontier 5 Plus

**Registered index-linked annuities:** PO Box 5423, Cincinnati OH 45201/800-789-6771/800-807-9777 Fax/RILAProcessing@mmascend.com  
**Overnight Address:** 191 Rosa Parks Street, Cincinnati, OH 45202  
**Website:** MassMutualAscend.com

### Owner / Contract Information

Owner Name	Contract Number

Joint Owner Name (as applicable):	Owner's Social Security Number:

### Performance Lock Election

#### Cap Indexed Strategies

I elect a Performance Lock for the following Cap Indexed Strategies:

a).  S&P 500® 1-Year -10% Floor with Cap

All Current Terms

Only those Term(s) ending:

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Date

Date

Date

Date

b).  S&P 500® 1-Year 10% Buffer with Cap

All Current Terms

Only those Term(s) ending:

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Date

Date

Date

Date

c).  S&P 500® 1-Year 20% Buffer with Cap

All Current Terms

Only those Term(s) ending:

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Date

Date

Date

Date

d).  S&P 500® 5-Year 10% Buffer with Cap All Current Terms Only those Term(s) ending:

Date

Date

Date

Date

e).  S&P 500® 5-Year 20% Buffer with Cap All Current Terms Only those Term(s) ending:

Date

Date

Date

Date

f).  First Trust Barclays Edge Index 1-Year 10% Buffer with Cap All Current Terms Only those Term(s) ending:

Date

Date

Date

Date

**Upside Participation Rate Indexed Strategies***I elect a Performance Lock for the following Upside Participation Rate Indexed Strategies:*a).  S&P 500® 5-Year 10% Buffer with Upside Participation Rate All Current Terms Only those Term(s) ending:

Date

Date

Date

Date

**Upside Participation Rate & Cap Indexed Strategies**

*I elect a Performance Lock for the following Upside Participation Rate & Cap Indexed Strategies:*

a).  S&P 500® 5-Year 10% Buffer with Upside Participation Rate & Cap

All Current Terms

Only those Term(s) ending:

Date

Date

Date

Date

b).  S&P 500® 5-Year 20% Buffer with Upside Participation Rate & Cap

All Current Terms

Only those Term(s) ending:

Date

Date

Date

Date

*If there is more than one current Term of an Indexed Strategy, and you do not specify the Terms to which your election is to apply, your Performance Lock election will apply to all current Terms of that Indexed Strategy.*

## Acknowledgement and Agreement

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### I understand and agree:

- (a) This election will lock the Daily Value Percentage used to calculate the Strategy value for the remainder of the Term. The locked Daily Value Percentage will also be used to calculate the Strategy value at the end of the Term.
- (b) The locked Daily Value Percentage will be fixed on the second Market Close following receipt of this election at the MassMutual Ascend Life home office. When I submit this election, I will not know in advance the locked Daily Value Percentage that will apply. It may be higher or lower than the Daily Value Percentage when I submit this election.
- (c) On any date, the Daily Value Percentage will almost always be lower than the value suggested by the rise or fall of the Index. This is because it is calculated by subtracting the Amortized Option Cost and Trading Cost from the Net Option Value. This difference will be more pronounced for a Performance Lock election made early in the Term.
- (d) Once the Daily Value Percentage is locked, my Strategy value will no longer be affected by a rise or fall in the Index or by a change in the Net Option Value, Amortized Option Cost, or Trading Cost.
- (e) A Performance Lock election for a 5-year Strategy will mean that the Term will end on the next anniversary of the Term start date.
- (f) This Performance Lock election cannot be changed or revoked.

I agree that MassMutual Ascend is authorized to process this election and I agree to hold MassMutual Ascend harmless against any and all claims made by reason of this election. If this Contract has joint owners, either both must sign this election, or I certify that I have the authority to act on behalf of both owners.

Signature of Owner

Date (MM/DD/YYYY)

Signature of Joint Owner (if applicable)

Date (MM/DD/YYYY)

Signature of Power of Attorney(s)/Authorized Representative(s) signing on behalf of Owner/Annuitant/Participant

Date (MM/DD/YYYY)

### IMPORTANT NOTES

- For requests signed by a Power of Attorney we must receive a copy of the Power of Attorney document. The Affidavit Related to Power of Attorney, Form #AAG2816, must also be completed or a valid affidavit must be on file. In addition, if this form is signed using a Power of Attorney, then a Beneficiary designation naming the attorney in fact will be subject to additional review.
- For contracts owned by a Trust, the acting Trustee(s) must sign. In addition, if there has been a change of Trustee(s) from the Trustee(s) on file, then either a new trust certification form (#X6017907NW) or trust pages showing the Successor trustee(s) together with documentation of the resignation, removal, incapacity, or death of the prior trustee(s) must be submitted.