

### ADVISOR AUTHORIZATION AGREEMENT

This form must be completed for each variable annuity contract under advisory management. NOTE: If more than one advisor (or TPIA) is associated with a contract, a separate form should be submitted for each.

#### Agreement

##### 1. General/Transfer Authorization

Each adviser executing this Agreement below, either as an individual, partnership, corporation or other business entity, along with the employees that act on its behalf ("Advisor"), is licensed with all applicable regulatory authorities necessary to provide the services it is providing related to the Contract(s) (as defined below). Owner hereby (i) authorizes Company to release information regarding Owner's annuity contract(s) or the contract(s) to be issued pursuant to applications enclosed herewith (collectively, the "Contract(s)") to Advisor; (ii) designates Advisor as Owner's advisor and attorney-in-fact; and (iii) instructs Company to comply with written, telephone, faxed or online financial or non-financial instructions from Advisor without obtaining Owner's approval, counter-signature or co-signature. Any contractual limitations applicable to the Owner relating to instructions for the Contracts apply to the Advisor to the same extent as they apply to the Owner.

##### 2. Payment of Advisory Fees

Owner hereby authorizes Company to act upon instructions, if any, from Advisor to pay from the Contract(s) the advisory fees charged by Advisor pursuant to a written advisory agreement between Owner and Advisor. Company has no responsibility or liability to determine that instructions received from Advisor are in compliance with such agreement. The Company is not responsible for verifying that the amount of fees charged is as set forth in any agreement between the Owner and Advisor. The payment of such fees will be treated as a withdrawal under the terms of the Contract. Owner acknowledges that a withdrawal from the Contract to pay such fees may incur a withdrawal charge, if applicable, during the surrender charge period defined in the Contract, and thus may require Company to liquidate a larger dollar amount than the advisory fees. Owner further acknowledges that withdrawals may negatively impact any guarantees associated with certain optional benefit riders and that Owner should consult their Advisor about the overall impact of withdrawals on the Contract.

All the parties hereto agree that, if the first box is checked in the in the Advisor Certification signature block below and the Owner has signed this form, the Company will withdraw part of the contract value from the Contract to pay such fees to Advisor. Advisor agrees that such fees shall only be for investment advisory services related to the Contract and shall comply in all respects with applicable law. If the Contract is not the source for payment of the Advisor's fees or if no contract value is available for withdrawal, the Company will not separately bill the owner, and Advisor is responsible for separately collecting Advisor's fees from Owner.

##### 3. Term/Assignability/Conflict Agreements

- This Agreement shall remain in full force and effect until Company receives written notice of its termination from Owner or Advisor. Company may, in its sole discretion, terminate the Agreement at any time.
- This Agreement may not be assigned or transferred by Owner or Advisor. Company may assign this Agreement to its successor in interest under the Contract(s).
- Owner and Advisor acknowledge that they have entered into other agreements relating to investment advisory services; however, it is agreed that in the event any terms of such other agreements conflict with the terms of this Agreement, then the terms of this Agreement shall control.

##### 4. Federal Tax Status

Generally, the IRS has determined that investment advisory fees paid directly from a qualified annuity contract or annuity issued in connection with an Individual Retirement Account/Annuity (IRA) to an investment advisor are not taxable withdrawals from the contract. As such, the Company has no information reporting or withholding responsibility relating to the payment of these fees and no IRS Form 1099R will be issued for the fees. However, investment advisory fees paid directly from a non-qualified annuity contract to an investment advisor are considered a withdrawal, may be taxable and are reportable to the IRS. A 1099R will be issued to the owner of a non-qualified contract in the year the investment advisory fee is withdrawn from the account. Furthermore, if the owner of a non-qualified annuity contract is under age 59 ½, a 10% penalty for early withdrawal may be assessed by the IRS. The Company is not responsible for filing any income tax forms for the Advisor in relation to fees paid from any contract.

##### Important Notice About Partial Section 1035 Exchanges and Split Annuities

The Internal Revenue Code permits a taxpayer to transfer an annuity contract from one insurance company to another without recognizing a taxable event. The Internal Revenue Service (IRS) has permitted exchanges of a partial portion of an annuity contract to another company without recognizing a taxable event. The IRS has also allowed a single annuity to be split into two new annuities through such a tax-free exchange. However, the IRS has issued Rev. Proc. 2008-24 that indicates, in the case of a Non-Qualified Contract, if a withdrawal is taken from either the existing or new contract(s) within the 12 month period following a partial 1035 exchange, adverse tax consequences will result. In such a case, the partial 1035 exchange will not receive tax-free treatment and the exchange will be retroactively treated as a taxable withdrawal (on the lesser of the earnings in the original contract or the amount exchanged). There are some exceptions to this rule and we strongly encourage anyone who wishes to make a partial 1035 exchange, and who may take a withdrawal or annuitize a contract within 12 months, to consult with their tax professional to review their particular situation and determine if the exchange is appropriate. By signing this form, you agree and understand the Jefferson National and its affiliates shall not be held responsible for any adverse tax consequences or rulings resulting from such a partial 1035 exchange.

##### 5. Disclaimer/Indemnification



Company will not follow requests or instructions from Advisor until it has received this Agreement signed by all parties. Company has no responsibility or liability to determine the frequency, accuracy, suitability or reasonableness of any instruction from Advisor or to advise the Owner with respect to the terms of any underlying agreement with the Advisor. Company does not make any representation or warranty, by accepting instructions or by executing this Agreement or otherwise, concerning the tax treatment of payment of fees under Federal tax law, or otherwise. Furthermore, Company has no responsibility or liability for any taxes, penalties and/or interest that may be assessed by the Internal Revenue Service or other administrative tribunal or court arising out of this Agreement, including any amounts relating to taxes that may be due by the Advisor in relation to the fees. Owner hereby agrees to indemnify and hold Company, its directors, officers, employees, affiliates and agents, harmless from and against any and all claims, losses, liabilities or damages, costs or expenses, including but not limited to taxes, penalties, interest and/or reasonable attorneys' fees (individually and collectively referred to as "Loss") arising out of any Advisor instructions pertaining to the Contract(s). Company is not responsible and has no liability for any Loss incurred by Owner as a result of the transactions contemplated by this Agreement except in the event that Owner suffers any such Loss as a result of the willful misconduct of Company in processing instructions given by Advisor.

In Witness Whereof, this Agreement has been executed as of the latest date set in following certification.

Advisor Certification – Please Print			
Check one: <input type="checkbox"/> I intend to withdraw fees from this Contract. <input type="checkbox"/> I do <u>not</u> intend to withdraw fees from this Contract.			
Name of Advisory Firm		SSN/EIN	
Name of Advisor		SSN/EIN	
Address	City	State	Zip
Email	Phone (      )      --	Date of Birth (if applicable) ____ / ____ / ____	
Advisor/Firm Authorized Signature <b>X</b>			Date

Third Party Investment Advisor Certification – Please Print			
Check one: <input type="checkbox"/> I intend to withdraw fees from this Contract. <input type="checkbox"/> I do <u>not</u> intend to withdraw fees from this Contract.			
Name of Advisory Firm		SSN/EIN	
Address	City	State	Zip
Email	Phone (      )      --	Date of Birth (if applicable) ____ / ____ / ____	
Advisor/Firm Authorized Signature <b>X</b>			Date

Owner Certification		
Name of Owner (Print Name)	SSN/EIN	Contract Number (if available)
Owner Signature <b>X</b>	-- --	Date
Name of Joint Owner (Print Name)	SSN/EIN	
Joint Owner Signature <b>X</b>	-- --	Date

Jefferson National Life Insurance Company	
President <b>X</b> 	Secretary <b>X</b> 

Jefferson National Life Insurance Company  
 Regular Delivery: P.O. Box 36750, Louisville, KY 40233  
 Overnight: 9920 Corporate Campus Drive, Louisville, KY 40223 P: 866.667.0561 F: 866.667.0563

**ADVISOR FEE INSTRUCTIONS**

**ADVISOR INFORMATION** Please complete appropriate sections for Advisory Fee Distribution. This form does not give client authorization to withdrawal fees. Complete Advisor Authorization Agreement for client authorization. Form # VA122

<b>Advisor/Firm Name</b>	<b>Jefferson National ID#</b>
<b>Address (all payment by check will be sent to this address unless noted below)</b>	
<b>Phone</b>	<b>E-mail</b>
<b>Alternate Address for Payment by Check</b>	

**FEE SCHEDULE/DETAILS**

1. **Advisor fee to be assessed on:**
  - Specific Contracts listed here (if contract number is not known, use owner's social security number)\_\_\_\_\_
  - All Contracts (Advisor Authorization Agreement must be on file)
2. **Frequency: Start Date:**\_\_\_\_\_
  - One Time             Semi-Annually
  - Monthly               Annually
  - Quarterly
3. **Amount: Enter amount (all fees are limited to 4% of contract value)**
  - % \_\_\_\_\_     \$ \_\_\_\_\_
4. **Allocation Options:**
  - Pro Rata     Money Market
  - Per Fund (*\*\* if choosing this option, you must write implicit instructions including % and \$ per fund and fax to 1-866-667-0563*)
5. **Payment Options:**
  - Check     EFT (please complete section below)

**EFT Instructions**

<b>Name of Financial Institution</b>	<b>Phone Number</b>
<b>Address of Financial Institution</b>	
<b>Type of Account:</b> <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
<b>Bank Routing/ABA#</b>	<b>Account #</b>
<b>Name Listed on Account</b>	<b>SSN/EIN</b>

I hereby authorize the Company to deposit all requested management fees into my account indicated above and to direct my financial institution to appropriately credit/debit my account in the case of deposit error. I understand that this authorization is to remain in effect until the Company has received written notification from me of its termination and in such time and manner as to afford the Company and Financial Institution a reasonable opportunity to act on it.

**ADVISOR SIGNATURE** - This form must be signed by the person or persons who have appropriate authority or rights of ownership

<b>Advisor Signature</b>	<b>Date</b>
<b>X</b>	