|   | Express Mail No. EL 638 689 949 US  |
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| To the Honorable Commissioner of Patents and Tradem   | 101584713 copy thereof.   |
| 1. Name of conveying party(ies):  Stephen H. Lewis Denis G. Schwartz  Additional name(s) of conveying party(ies) attached?Yes XX 1  3. Nature of Conveyance: X_AssignmentMergerSecurity AgreementChange of NameOther  Execution Date: January 2, 2001 | 2. Name and address of receiving party(ies):  Lincoln National Life Insurance Co. 200 E. Berry Street   |
| 4. Application number(s) or patent number(s):   |   |
| If this document is being filed together with a new application, the A. Patent Application Nos.(s) B. Patent No   |   |
| Additional  | numbers attached?Yes _XX_ No  |
| <ol> <li>Name and address of party to whom correspondence condocument should be mailed:</li> </ol>  | 6. Total number of applications and patents involved: 1   |
| BOBBY B. GILLENWATER BARNES & THORNBURG 600 ONE SUMMIT SQUARE FORT WAYNE, IN 46802  | 7. Total fee (37 CFR 3.41):   |
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PATENT REEL: 011422 FRAME: 0745

Attorney Docket No: 37168/82293

## **ASSIGNMENT**

(World Wide Patent Rights)

For good and valuable consideration, the sufficiency and receipt of which is hereby acknowledged, as a below named inventor, we hereby sell and assign to LINCOLN NATIONAL LIFE INSURANCE COMPANY, a corporation of Indiana, having its principal office at 200 East Berry Street, Fort Wayne, Indiana 46802, its successors and assigns or other legal representatives, all our rights, title and interest in and to the invention entitled

## METHOD AND SYSTEM FOR PROVIDING ACCOUNT VALUES IN AN ANNUITY WITH LIFE CONTINGENCIES

invented by us and to any United States and foreign patents to be obtained therefor, as described in the application for United States Letters Patent therefor, executed as indicated below, the said interest being the entire ownership of the invention, said U.S. Letters Patent and any foreign Letters Patent when granted, to be held and enjoyed by said LINCOLN NATIONAL LIFE INSURANCE COMPANY, its successors, assigns or other legal representatives, to the full end of the term for which said Letters Patents may be granted, as fully and entirely as the same would have been held and enjoyed by us if this assignment and sale had not been made.

And we hereby agree to sign and execute any further documents or instruments which may be necessary, lawful, and proper in the prosecution of the above-named application or in the preparation and prosecution of any continuing, continuation-in-part, substitute, divisional, renewal, reviewed or reissue applications or in any amendment, extension, or interference proceedings, as well as any papers necessary to procure foreign patents on said invention, or otherwise to secure the title thereto in said assignee;

And we do hereby authorize and request the Commissioner of Patents to issue said Letters Patent to said

LINCOLN NATIONAL LIFE INSURANCE COMPANY. Date January 2, 2001 Signature Steph W. Cu: Date Application Executed: January 2, 2001 Inventor Stephen H. Lewis Citizenship U.S.A. Post Office Address 14117 Peddlers Ford, Fort Wayne, Indiana 46804 Residence Fort Wayne, Indiana STATE OF INDIANA ) SS: COUNTY OF ALLEN On this \_\_\_\_\_ day of \_\_\_\_\_, 2001, before me, a Notary Public in and for the County and State aforesaid, appeared STEPHEN H. LEWIS, to me personally known to be the same person whose name is subscribed to the foregoing instrument, and acknowledged that he executed said instrument as his free and voluntary act and for the uses and purposes therein expressed. Notary Public Printed Name

My Commission Expires:

County of Residence:

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## EXPRESS MAIL # EL 638 689 949 US

| Date January 2, 2001                               | ISignature _             | Danis Is Schwart   |
|--|--------------------------|--|
|  | ited: January 2, 2001    | _  |
| Inventor   | Denis G. Schwartz        | Citizenship <u>U.S.A.</u>  |
| Post Office Address                                | 3715 South Washington Ro | ad, Fort Wayne, Indiana 46802  |
| Residence  | Fort Wayne, Indiana      |  |
| STATE OF INDIANA                                   | ,                        |  |
| COUNTY OF ALLEN                                    | ) SS:<br>)               |  |
| State aforesaid, appeare name is subscribed to the | ed DENIS G. SCHWARTZ, 1  | before me, a Notary Public in and for the County and to me personally known to be the same person who acknowledged that he executed said instrument as he therein expressed. |
|  |                          | Notary Public  |
| My Commission Expire                               | es:                      | Printed Name   |
| County of Residence: _                             |                          |  |

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