

**For filings with the FSA include the annex
For filings with issuer exclude the annex**

TR-1: Notifications of Major Interests in Shares

1. Identity of the issuer or the underlying issuer of existing shares to which voting rights are attached:	Mid-States PLC
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2. Reason for notification (yes/no)	
An acquisition or disposal of voting rights	X
An acquisition or disposal of financial instruments which may result in the acquisition of shares already issued to which voting rights are attached	
An event changing the breakdown of voting rights	
Other (please specify): _____	

3. Full name of person(s) subject to notification obligation:	David Macdonald
4. Full name of shareholder(s) (if different from 3):	
5. Date of transaction (and date on which the threshold is crossed or reached if different):	31 March 2009
6. Date on which issuer notified:	31 March 2009
7. Threshold(s) that is/are crossed or reached:	16%

8: Notified Details							
A: Voting rights attached to shares							
Class/type of shares <small>If possible use ISIN code</small>	Situation previous to the triggering transaction		Resulting situation after the triggering transaction				
	Number of shares	Number of voting rights	Number of shares	Number of voting rights		Percentage of voting rights	
				Direct	Indirect	Direct	Indirect
GB0002683034	17,928,288	17,928,288	18,248,288	18,248,288		15.72	

B: Financial Instruments

Resulting situation after the triggering transaction

Type of financial instrument	Expiration date	Exercise/ conversion period/date	No. of voting rights that may be acquired (if the instrument exercised/converted)	Percentage of voting rights

Total (A+B)

Number of voting rights	Percentage of voting rights
18,248,288	15.72

9. Chain of controlled undertakings through which the voting rights and /or the financial instruments are effectively held, if applicable:**Proxy Voting:****10. Name of proxy holder:****11. Number of voting rights proxy holder will cease to hold:****12. Date on which proxy holder will cease to hold voting rights:****13. Additional information:****14 Contact name:****David Macdonald****15. Contact telephone number:****01280 828500***For notes on how to complete form TR-1 please see the FSA website.*