

## Individual Annuity Application Mail to: P.O. Box 79907, Des Moines, IA 50325-0907

Mail to: P.O. Box 79907, Des Moines, IA 50325-0907 Overnight to: 4350 Westown Pkwy, West Des Moines, IA 50266

Annuitant Gender: Male Female U.S. Citizen: Yes No
First Name MI Last Name Social Security Number/TIN
Street Address (P.O. Boxes are not allowed) <sup>1</sup> Birth Date (mm/dd/yyyy)  - London - L
City State Zip Phone
Joint Annuitant (if applicable must be spouse of annuitant)  Gender:   Male  Female  U.S. Citizen:  Yes  No
First Name MI Last Name Social Security Number/TIN
Address and Phone Number Same as Annuitant
Street Address (P.O. Boxes are not allowed) <sup>1</sup> Birth Date (mm/dd/yyyy)
City State Zip Phone
Owner (if different than annuitant) Gender:  Male Female
First Name MI Last Name Birth Date (mm/dd/yyyy)
If the owner is a Trust you must complete and submit the Certificate of Trust Agreement form with this application.  Trust/Corporation Name  Trust Date (mm/dd/yyyy)
Trust bare (min/ad/yyyy)
Street Address (P.O. Boxes are not allowed) <sup>1</sup> SSN/TIN/Employee ID No.
Street Address (P.O. Boxes are not allowed) <sup>1</sup> SSN/TIN/Employee ID No.
Street Address (P.O. Boxes are not allowed)  City  State  Zip  Phone  Joint Owner (if different than joint annuitant)
Street Address (P.O. Boxes are not allowed)  City  State  Joint Owner (if different than joint annuitant)  Gender:   Male  Female
Street Address (P.O. Boxes are not allowed)  City  State  Zip  Phone  Joint Owner (if different than joint annuitant)
Street Address (P.O. Boxes are not allowed)  City  State  Joint Owner (if different than joint annuitant)  Gender:   Male  Female
Street Address (P.O. Boxes are not allowed)¹  City  State  Zip  Phone  Joint Owner (if different than joint annuitant)  Gender:  Male  First Name  MI Last Name  Social Security Number/TIN
Street Address (P.O. Boxes are not allowed)¹  City  State  Zip  Phone  Joint Owner (if different than joint annuitant)  Gender:   Male  First Name  MI  Last Name  Social Security Number/TIN  Address and Phone Number Same as Owner

1. If your mailing address is different than your street address, please list on a separate piece of paper.



\$102148

\$1021480

Owner's Beneficiary Designation<sup>2</sup> - In the event of the owner's death, death benefit proceeds are payable to the owner's primary beneficiary. If there are joint owners, the death benefit is payable upon the first death. If there are joint owners, the surviving joint owner, if any, will be the designated primary beneficiary unless otherwise specified below. Note: Complete the Owner's Primary Beneficiary Section if you want to name someone other than the surviving owner to receive 100% of the death benefit. If the owner's primary beneficiary is no longer living at the time of the owner's death, the owner's contingent beneficiary will receive the death benefit proceeds.

Please designate if you want the beneficiary designation to be Per Stirpes or Per Capita. If an election is not made then by default it will be Per Capita. Per Stirpes designations require a listing of the children on a separate sheet of paper that is signed and dated. The list must include the children's names, addresses, phone numbers, dates of birth and social security numbers.

- Per Stirpes definition: A common way of distributing proceeds where if one or more beneficiaries has died, his or her children share equally in his or her share of the proceeds.
- Per Capita definition: Proceeds are split amongst the beneficiaries that survive the owner/annuitant. If one of the beneficiaries does not survive the owner/annuitant then the remaining beneficiaries receive the proceeds split equally.

☐ Primary ☐ Contingent	rpes 🗌 Per Capita				
First Name	MI Last Name	Social Security Number/TIN			
Birth Date (mm/dd/yyyy)	Relationship to Owner	Phone Number			
		Thore Number			
Beneficiary's Mailing Address (must be com	pleted)	Percentage <sup>3</sup>			
		. %			
City		State Zip Code			
☐ Primary ☐ Contingent ☐ Per Stir		Consint Consumity Number of TIN			
First Name	MI Last Name	Social Security Number/TIN			
Birth Date (mm/dd/yyyy)	Relationship to Owner	Phone Number			
-   -					
Beneficiary's Mailing Address (must be com	pleted)	Percentage <sup>3</sup>			
		. %			
City		State Zip Code			
Primary Contingent   Per Stir	rpes 🗌 Per Capita				
First Name	MI Last Name	Social Security Number/TIN			
Birth Date (mm/dd/yyyy)	Relationship to Owner	Phone Number			
		Thore Number			
Beneficiary's Mailing Address (must be com	pleted)	Percentage <sup>3</sup>			
City		State Zip Code			
☐ Trust⁴ ☐ Corporation ☐ Estate ☐ Other					
Full Name					
		☐ Primary ☐ Contingent			
Tax ID Number (TIN)	Trust Date (mm/dd/yyyy)	Percentage <sup>3</sup>			
		%			
2. In order to verify beneficiary identification, a request to obtain information will be sent to the Owner following issue of the contract.					

\$102149

\$1021490

3. Must equal 100%. 4. Certification of Trust Agreement form must be attached.

Annuitant's Beneficiary Designation <sup>2</sup> - Complete this section only if the owner(s) and annuitant(s) are not the same. In the event of the annuitant's death, death benefit proceeds are payable to the annuitant's primary beneficiary. If there are joint annuitants, the death benefit is payable upon the second death. If the annuitant's primary beneficiary is no longer living at the time of the annuitant's death, the annuitant's contingent beneficiary will receive the death benefit proceeds. If an election is not made then by default it will be Per Capita.					
☐ Primary ☐ Contingent │ ☐ Per Stirpes ☐ Per Capita					
First Name Social Security Number/TIN					
Birth Date (mm/dd/yyyy) Relationship to Annuitant Phone Number					
Beneficiary's Mailing Address (must be completed)  Percentage <sup>3</sup>					
City State Zip Code					
☐ Primary ☐ Contingent │ ☐ Per Stirpes ☐ Per Capita					
First Name MI Last Name Social Security Number/TIN					
Birth Date (mm/dd/yyyy) Relationship to Annuitant Phone Number					
Beneficiary's Mailing Address (must be completed)  Percentage <sup>3</sup>					
<u> </u>					
City State Zip Code					
☐ Primary ☐ Contingent │ ☐ Per Stirpes ☐ Per Capita					
First Name MI Last Name Social Security Number/TIN					
Birth Date (mm/dd/yyyy) Relationship to Annuitant Phone Number					
Beneficiary's Mailing Address (must be completed)  Percentage <sup>3</sup>					
City State Zip Code					
☐ Trust⁴ ☐ Corporation ☐ Estate ☐ Other					
Full Name					
☐ ☐ Primary ☐ Contingent					
Tax ID Number (TIN)  Trust Date (mm/dd/yyyy)  Percentage <sup>3</sup>					
2. In order to verify beneficiary identification, a request to obtain information will be sent to the Owner following issue of the contract.					

- ${\it 3. Must equal 100\%. 4. Certification of Trust Agreement form must be attached.}\\$



\$1021500

#### Verification of Identity

Note: The licensed representative must complete this section before submitting to the home office.

Number

**Employer Name** 

Owner: If Owner is a Natural Person, complete question 1. If Owner is a Trust or Business/Corporation, complete questions 1 and 2. 1. Natural Person/Trust Accounts (trustee information): Representative: Please indicate the form of ID presented and used to verify this owner's identity. Expired IDs are not acceptable. a. U.S. Citizen Resident Alien – Country of Citizenship: b. Driver's License ☐ State-Issued ID ☐ Military ID ☐ Passport Alien Registration Card c. State Number Country Exp. Date d. Occupation **Employer Name** Years Employed Retired 2. Non-Natural/Business or Corporation: a. Trust Agreement Certificate of Incorporation b. State Country Joint Owner: If Owner is a Natural Person, complete question 3. If Owner is a Trust or Business/Corporation, complete questions 3 and 4. 3. Natural Person/Trust Accounts (trustee information): Representative: Please indicate the form of ID presented and used to verify this owner's identity. Expired IDs are not acceptable. Resident Alien – Country of Citizenship: b. Driver's License ☐ State-Issued ID ☐ Military ID ☐ Passport Alien Registration Card

Л	Non	Matura	/Pucinoce	or Corporation:	
4.	Non-	-natura	I/Business	or Corporation:	:

Country

c. State

d. Occupation

. Let Trust	Agreement	☐ Certificate of Incorporation
Ctoto	Country	





Exp. Date

Years Employed

Retired

Product Selection:	
If electing Optional Benefit Riders an additional form(s) may be req	uired.
Tax Status	
□ Non-Qualified □ Roth IRA □ SEP IRA □ IRA □ TSA/403(b	) Inherited IRA (MGD0 form 8103Y required)
Complete if applicable - Contribution intended for the Tax Year:	
Premium Contract funded by:  Check - Amount \$	Direct Transfer - Amount \$ (Example: Qualified funds - IRA to IRA, Non-Qualified funds-CD or Mutual Fund to a Midland National Annuity.)
1035 Exchange - Amount \$	Qualified Rollover - Amount \$
Salary Reduction - Amount \$	per pay period (example: TSA)
Transfers Involving Multiple Checks: I have recently applied for a Midland National annuity with the plan type either through a personal check, Section 1035 Exchange, Qualified or No.	reflected above. This annuity is being funded with more than one premium on-Qualified transfer.
the annuity is index linked, the initial index will be set on the effectiv will be applied to the fixed account until the contract anniversary. (The	ements): I would like my contract issued with the first funds received. If e date of the annuity. I understand that any additional deposits after issue his option is not available for single premium contracts or Inherited IRAs.) understand that my interest will be credited from the date
the annuity becomes effective. If the annuity is index linked, the initial	
	annuity contract, please complete any state required replacement forms. printed sales material used in the sale of this product. Please retain all such
1. Do you have any existing or pending life insurance or annuity contracts	? □ Yes □ No
2. Will this annuity replace or change any existing life insurance or annuity	
If you answered "yes" to #2, please provide company name and contract	number below.
Company Name:	
Contract Number:	



#### Fraud Warnings and Other Disclosures

Any person who knowingly presents false statement in an application for insurance maybe guilty of a criminal offense and subject to penalties under state law. **Financial Institution Disclosure:** Insurance policies and annuities are not a deposit or other obligation of, or guaranteed by a bank, any affiliate of a bank, or savings association, and are not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States, a bank, any affiliate of a bank, or savings association.

#### **Owner's Statement**

All statements made in this application are true to the best of my/our knowledge and belief, and I/we agree to all terms and conditions as shown on this application. All statements and descriptions in this application are deemed to be representations not warranties. I/We further agree that this application shall be a part of the annuity and that the Annuitant is aware that he/she was designated as Annuitant. I understand that if I am applying for a Fixed Indexed Annuity that while the values of the contract may be affected by an external index, the annuity does not directly participate in any stock or equity investments. I understand that any values shown, other than guaranteed minimum values, are not guarantees, promises or warranties. I understand that if the contract being applied for contains an Interest Adjustment (also known as a Market Value Adjustment), the benefits and values of this contract may increase or decrease. Amounts payable under the contract being applied for will be subject to a Market Value Adjustment (if applicable) when the contract is surrendered or a partial surrender above the free surrender amount is taken prior to the date specified in the contract. Tax payer ID Certification - Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding, and 3. I am a U.S. Person (including an US Resident Alien). 4. I am exempt from Foreign Account Tax Compliance Act (FATCA) reporting.

#### **Applicant/Owner Signature**

By Signing this form, I certify that the information provided is accurate. I understand that Midland National Life Insurance Company will use this information to attempt to verify my identity. Midland National may request a copy of the articles of incorporation, trust certification or other similar documents solely for the purpose of attempting to verify my identity as required by federal law.

Owner's Signature	Joint Owner's Sign	ature Spouse's Signature <sup>5</sup>
Signed at City:	State	Date Signed
Owner's Email Address		Joint Owner's Email Address

5. If your spouse is not listed as 100% primary beneficiary and a spousal signature is not provided, you are stating that you are not married. If this transaction is subject to a community property interest, we strongly recommend that you obtain your spouse's signature on the line above to document his/her consent to this transaction. States that recognize community property interests in property held by married persons include Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, and Wisconsin. You understand and agree that Midland National may presume that no community property interest exists if you have not obtained your spouse's signature above. Further, you understand and agree that Midland National has no duty to inquire further about any such community property interest. As a result, you agree to indemnify and hold Midland National harmless from any consequences relating to community property interests and this transaction. Please note that the term "spouse" includes domestic partner or other partner as permitted by civil union, domestic partnerships, or similar law.



\$1021530

Agent's Certifica	ation (completed	by agent only)			
Replacement	Does the applica	nt have any existi	ng or pending life insurance or a	annuity contracts? $\square$ Y	es 🗆 No
<b>Information</b> Will this annuity replace or change any existing life insurance or annuity contracts? $\square$ Y					s 🗆 No
		vide the name of t			
applicant and recor the document did n modification or add an examination of t Applicant and have	ded full details as not appear altered litions made to the the interests of the not made any sta es about future va	required. I attest and the picture id application after Applicant and an tements which co	entification supplied appeared t it is submitted must be initialed assessment of the stated goals	e verification of identity o be that of the owner(s) by the client. This applic of the Applicant. I have	documentation. I also attest that I understand that any subsequent ation is being submitted after
Agent/Broker's Full N	ame (please print)	Agent	/Broker's Signature	Phone	Number
Agent's Email Address	S				
Agent 2 (if applicable	le)				For Agent Use Only <sup>6</sup>
Agent Number	,	Percentage <sup>7</sup>			For Agent Use Only <sup>6</sup>
Additional Agent Nam	ne (please print)				
Additional Algorit Hair	io (piodos print)				
Additional Agent's Em	noil Addroso				
Additional Agent's Em	iaii Auuless				
Agent 3 (if applicable	lo)				
Agent Number	i <i>c)</i>	Percentage <sup>7</sup>			For Agent Use Only <sup>6</sup>
Agent Number					
		<u> </u>			
A LUCE - LA - LA L					
Additional Agent Nam	ie (piease print)				
Additional Agent's Em	nail Address				
6. Commission option	n A does not offer a	trail commission			
7. Must total 100%.	u				





4350 Westown Parkway West Des Moines, IA 50266 www.MidlandNational.com



102155 Page 8 of 8



# MNL IncomeVantage® 10

## **Annuity Disclosure Statement**

Thank you for your interest in the MNL IncomeVantage® 10 Annuity from Midland National® Life Insurance Company. It is important for you to read and understand this summary before you decide to purchase the annuity. This summary will help you understand the features of the annuity and determine if it will help you meet your financial goals. Once you have read this summary, please sign pages 8 and 10 to confirm that you understand the annuity and submit this document with your application for the annuity. *Refer to the Contract for complete details*.

This Annuity Disclosure Statement must be signed by the applicant and agent, then return the Home Office copy to Midland National Life Insurance Company, Annuity Division with the application.

4350 Westown Parkway, West Des Moines, IA 50266 Phone: (877) 586-0240 • www.MidlandNational.com

For the state of: North Carolina

The MNL IncomeVantage® 10 is issued in North Carolina on form AS139A32 (contract), AS139A END, AR320A, AR153A, AR154A, AR163A-1, AR192A, AR194A, AR277A, AR278A, AR318A and AR324A (riders/endorsements) by Midland National® Life Insurance Company, West Des Moines, IA.

The MNL IncomeVantage 10 is a flexible premium deferred fixed index annuity from Midland National Life Insurance Company which offers lifetime income through Lifetime Payment Amounts (LPA). The MNL IncomeVantage 10 accumulates interest in the following ways: A) based on the change in the Index Account during each contract year, without the risk of losing premium due to market volatility, and/or B) a traditional Fixed Account. Those individuals who intend to take withdrawals prior to utilizing the Guaranteed Lifetime Withdrawal Benefit (GLWB) may not receive full benefit of the (GLWB) feature.

#### **Fixed Account**

The portion of premium allocated to this account will earn the current Fixed Account interest rate. This rate will be guaranteed for the first contract year and the rate for future contract years will be declared annually thereafter at the Company's discretion. This rate will never fall below the Minimum Guaranteed Fixed Account Interest Rate of 0.25%. Ask your sales representative for the current interest rate.

#### **Index Account**

The Index Account is the portion of your premium that you determine will earn interest based on one or more of the following crediting methods:

- · Daily Average Crediting Method with Index Margin
- · Monthly Point-to-Point Crediting Method with Index Cap Rate
- · Annual Point-to-Point Crediting Method with Index Cap Rate
- Annual Point-to-Point Crediting Method with Participation Rate
- Annual Point-to-Point Crediting Method with Index Margin
- Annual Point-to-Point Crediting Method with Threshold Participation Rate
- Two-Year Point-to-Point (also known as Term Point-to-Point) with Index Margin

Please see the MNL IncomeVantage 10 product brochure for specific details regarding these crediting methods.

Ask your sales representative for the current Index Cap Rates, Index Margins, and Participation Rates, including the Base and Enhanced Participation Rate and the Index Return Threshold.

#### **Threshold Participation Strategy**

The Threshold Participation Strategy (or Annual Point-to-Point with Threshold Participation Rate) may credit interest using both a Base Participation Rate and an Enhanced Participation Rate. The index-linked gain is compared to the declared Index Return Threshold. If the gain is less than or equal to the Index Return Threshold, the Base Participation Rate is applied to determine the interest credited. If the gain exceeds the Index Return Threshold, the Base Participation Rate is applied to the portion of the gain up to and including the Index Return Threshold and the Enhanced Participation Rate is applied to the portion of the gain that exceeds the Index Return Threshold. The Index Return Threshold, the Base Participation Rate, and the Enhanced Participation Rate are each declared annually at the Company's discretion. Each of these rates is guaranteed for the first contract year and declared annually thereafter at the Company's discretion, never to be less than 5% for the Base Participation Rate and 10% for the Enhanced Participation Rate. At no time will the Index Return Threshold be set higher than the Maximum Index Return Threshold of 10%.

#### **Index Cap Rate**

The Index Cap Rate is an upper limit used to determine Interest Credits. The Index Cap Rate applies to the Annual Point-to-Point and Monthly Point-to-Point Index Account options. It will always be declared on the Contract Anniversary by the Company at their discretion and is guaranteed for the following contract year. This cap may change annually. However, at no time will this cap ever fall below the minimum guarantees which are: 0.50% for the Annual Point-to-Point with Cap Index Account and 0.25% for Monthly Point-to-Point with Cap Index Account.

#### **Participation Rate**

The Participation Rate is the percentage of any index gain that will be credited to the Contract as the Interest Credit to the Annual Point-to-Point Index Account. The rate is guaranteed for the first year and declared annually thereafter at the Company's discretion, never to be less than 5% for Annual Point-to-Point with Participation Rate Index Account.

#### **Index Margin**

The Index Margin is subtracted from any index gain to determine any Interest Credit. For the Daily Average with Index Margin and the Annual Point-to-Point Index Margin Index Accounts, the Index Margin is subtracted on each contract anniversary. It is guaranteed for the first year and declared annually thereafter at the Company's discretion. For the Two-Year Point-to-Point with Index Margin Index Account, the Index Margin is multiplied by two (which is the term length) and then subtracted at the end of the two-year term. It is declared at the beginning of and guaranteed for each two-year term. The maximum Index Margin is 25% for the Daily Average with Index Margin Index Account and 15% for the Annual Point-to Point with Index Margin Index Account and the Two-Year Point-to-Point with Index Margin Account.

#### **Payment of Commission**

Midland National will pay a sales commission in connection with the sale of this product. This commission is one of many costs which Midland National considers and factors into the product's design and policy performance, including setting the guaranteed rates in the Contract and the manner in which non-guaranteed benefits may be offered. One-hundred percent of your premium deposit will be credited to your account, and no deductions from your premium payment or from your account value will be made due to the payment of this sales commission.

Midland National may enter into written sales agreements with other financial institutions ("selling firms") for the sale of the Contract. The selling firms and their representatives are independent of Midland National. In this case, the selling firms are responsible for evaluating product proposals or recommendations independently and for exercising independent judgment about these proposals. Midland National pays selling firms all or a portion of the commissions received for their sales of the Contract.

#### SURRENDER CHARGES AND INTEREST ADJUSTMENT

Please read the following information and sign the last page of this disclosure to acknowledge your understanding that Surrender Charges and Interest Adjustments will apply when withdrawals are taken from your Contract during the Surrender Charge Period.

#### **Surrender Charges**

A Surrender Charge is assessed on any amount withdrawn, whether as a partial withdrawal or full surrender, that is in excess of the applicable penalty-free amount. Surrenders and Surrender Charges assessed will have a negative impact on future lifetime income. A surrender during the Surrender Charge period may result in a loss of premium.

The Surrender Charges that apply for each Contract Year are based on the state where your Contract is issued and are shown as follows:

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
10%	10%	10%	10%	10%	9%	8%	6%	4%	2%

Surrender charges allow the Company to invest long-term, and in turn, generally credit higher yields.

Surrender charges and Interest Adjustments on IRS-Required Minimum Distributions that exceed the 5% penalty-free amount are waived by current company practice\*.

\*A feature offered "by current company practice" is not a contractual guarantee of this annuity Contract and can be removed or changed at any time.

#### Interest Adjustment (also known as Market Value Adjustment)

The MNL IncomeVantage 10 includes an Interest Adjustment that is applied only during the Surrender Charge period to full surrenders and to any partial surrender in excess of the applicable penalty-free partial surrender amount. This adjustment may decrease or increase the Surrender Value or the amount of a partial surrender depending on the change in interest rates during the period since you purchased this annuity.

#### **Example of Interest Adjustment (Market Value Adjustment-MVA) Formula**

The Interest Adjustment will be calculated by multiplying the portion of any full or partial surrender that exceeds any available penalty-free withdrawal amount before the reduction for any Surrender Charge by the formula\* described below.

\*The Interest Adjustment Factor is:  $(i_0-i_t-ADJ) x (T)$ 

 $i_0$  = The current interest rate when the contract was issued.

i, = The current interest rate offered for new contracts at time of the partial or full surrender.

ADJ = 0.005

The amount of the Interest Adjustment will never exceed the lesser of a) the total interest credited to the Accumulation Value since issue, less the sum of the absolute values of all Interest Adjustments on prior partial surrenders (i.e. all adjustments positive or negative added together), or b) the applicable Surrender Charge.

T = Time in years as follows: number of days from the date of the partial or full surrender to the end of the current contract year divided by 365; plus whole number of years remaining in the market value adjustment period.

Lower interest rates at time of issue may result in less opportunity for a positive Interest Adjustment in future contract years. In certain rate scenarios at the time of issue, it may not be possible to experience a positive Interest Adjustment.

See the "Understanding the Market Value Adjustment" brochure for more information.

#### **Accumulation Value**

Your Accumulation Value is equal to 100% of premium, plus any fixed and index account interest earned, minus withdrawals. The Accumulation Value is used to determine the Death Benefit as well as penalty-free withdrawals.

#### **Surrender Value**

The Surrender Value is the amount that is available at the time of surrender. The Surrender Value is equal to the Accumulation Value, subject to the Interest Adjustment (if any), less applicable Surrender Charges and state premium taxes where applicable. The Surrender Value will never be less than the minimum requirements set forth by state laws, at the time of issue, in the state where the Contract is issued.

## GUARANTEED LIFETIME WITHDRAWAL BENEFIT (GLWB) FEATURE

Please read the following information and sign the last page of this disclosure to acknowledge your understanding of purchasing this annuity product with the purpose of generating a lifetime income sometime in the future.

## What is the Guaranteed Lifetime Withdrawal Benefit (GLWB)?

The Guaranteed Lifetime Withdrawal Benefit feature provides you with a way to receive income payments for life without incurring a Surrender Charge or Interest Adjustment. This feature can provide you with a guaranteed lifetime income stream called a Lifetime Payment Amount (LPA). The LPA is an annual payment amount based on your age, your current GLWB Value, and LPA option elected at the time you elect to begin lifetime income.

When income is started by initiating the GLWB feature, you may modify, start, and stop LPAs. This is different from electing an annuity payout option under your Contract, which does not provide the same income flexibility. If you elect an annuity payout option, the GLWB feature is no longer available to you.

Once elected, the LPA is available even if your annuity's Accumulation Value and GLWB Value are later reduced to zero, provided no excess withdrawals are taken. You will need to notify us in writing to begin LPAs.

If you elect the level LPA option, your LPA will not increase. If you elect the increasing LPA option, your LPA may increase each year based on the weighted average percentage change in the fixed and indexed accounts.

The Lifetime Payment Amount may be reduced if total partial surrenders (including penalty-free withdrawals) during a contract year exceed the GLWB Value Partial Surrender Allowance.

By current company practice\*, if you are taking LPAs and the Required Minimum Distribution (RMD) for this Contract exceeds your LPA, we will allow withdrawal of the RMD without reducing your LPA.

\*A feature offered "by current company practice" is not a contractual guarantee of this annuity Contract and can be removed or changed at any time.

#### Will I be taxed on income payments?

Please see your tax advisor. Under current tax law, income payments from this GLWB feature may be taxed as ordinary income. Additionally, if taken prior to 59½, income payments may be subject to 10% IRS penalty tax.

#### What is the GLWB Value?

The GLWB Value is only used as the basis for calculating your Lifetime Payment Amount (LPA). It is not part of your annuity's Accumulation Value or a Death Benefit, and is only used to calculate the income available to you if you use the GLWB feature. This value cannot be taken as a surrender. Your initial GLWB Value is the initial premium plus any applicable GLWB Bonus. This value is increased by the GLWB Stacking Roll Up Credits described below, as well as subsequent premiums and applicable GLWB Bonus. Please note that all withdrawals (including LPAs) will reduce both your Accumulation Value and your GLWB Value.

#### **GLWB Bonus**

During the first five contract years, a 5% GLWB Bonus Percentage will be applied to all premiums received and will increase the GLWB Value. The GLWB Bonus does not apply to the Accumulation Value, it is only applied to the GLWB Value.

#### **GLWB Stacking Roll-Up Credit**

A 2% GLWB Stacking Roll-Up Credit may be added to the GLWB Value on each Contract Anniversary during the first 20 contract years. The GLWB Stacking Roll-Up credits compound annually. On each Contract Anniversary during the first 20 contract years, the current GLWB Value may be increased by 2% of the GLWB value plus 150% of the dollar amount of any interest credited (either Fixed or Index Interest Credits) to the Accumulation Value. In contract years when a withdrawal is taken, no GLWB Stacking Roll-Up Credit will apply, unless the withdrawal is used to satisfy a Required Minimum Distribution (RMD). This credit ends once you elect to begin receiving LPAs.

#### What happens to my GLWB should I die?

Your GLWB Value is not paid out as a Death Benefit.

#### **Individual Annuitant**

Upon the death of an individual annuitant, the GLWB feature will terminate. If the annuitant is the contract owner and the spouse is the sole beneficiary, the Contract may be continued under a Spousal Continuation provision, if applicable.

#### **Joint Annuitants**

Upon the death of the first joint annuitant, the GLWB will continue when the Contract continues and there will be no change to the Lifetime Payment Amount. Upon the death of the second joint annuitant, the GLWB will terminate.

#### **Death Benefit**

The Death Benefit is payable upon the death of the first owner, unless the sole beneficiary is the owner's spouse and he or she elects to continue this Contract under its spousal continuance provisions. If there are joint annuitants, and an annuitant who is not also the contract's owner dies, the death benefit will be paid upon the death of the second annuitant. The Death Benefit equals the Accumulation Value plus potential interest credits for the partial contract year as of the date of death. The calculation of the death benefit will vary depending on the Index Accounts to which the Accumulation Value is allocated at the time of death. The beneficiary may choose to receive the Death Benefit in either a lump sum or a series of income payments.

A death benefit is not available if an annuity payout option has been elected.

NOTE: The GLWB bonus is not applicable to the Accumulation Value, so it is not included in the Death Benefit. The GLWB Value is not available as a death benefit.

#### **Subsequent Premiums**

All subsequent premiums will be credited a fixed interest rate until the next Contract Anniversary. This interest rate will be declared at the time the subsequent premium is received. On each Contract Anniversary, Midland National will allocate any premium received since the prior Contract Anniversary according to your most recent instructions. Subsequent premiums added during the first five contract years will receive a GLWB Bonus which will be added to the GLWB Value.

#### **Transfer Options**

You may elect to transfer your values between the Fixed Account and Index Account options. You may also elect to transfer between crediting methods within the Index Account options on an annual basis for all annual crediting method options or at the end of each two-year term for the two-year crediting method. By current company practice\*, you will have 30 days following each contract anniversary to reallocate. Transfers are not allowed until your first contract anniversary. Based on current tax laws, transfers between options will not be taxable or subject to surrender penalties. Please refer to your MNL IncomeVantage 10 Additional Benefits Specifications Page, found in your Contract, for minimum transfer amounts.

#### **Additional Information**

The MNL IncomeVantage 10 is not a registered security and does not directly participate in stock or equity investments. Applicable index returns do not include dividends. Past index performance is not intended to predict future performance. Under current law, annuities grow tax-deferred. Annuities may be subject to taxation during the income or withdrawal phase. The tax-deferred feature is not necessary for a tax qualified retirement account. If purchasing this annuity as a qualified retirement account you should consider whether other features, such as the GLWB future income, death benefits, lifetime annuity payments and other riders will help meet your needs. Before purchasing this Contract you should obtain competent advice as to tax treatment of the Contract. Neither Midland National, nor any agents acting on its behalf in the sale of this product, should be viewed as providing legal, tax or securities advice.

#### **LIQUIDITY FEATURES**

Certain withdrawals before age 59½ may be subject to a 10% IRS penalty. Exercising the penalty-free withdrawals or annuity payout options explained below will impact future income payments of the Guaranteed Lifetime Withdrawal Benefit feature.

#### **Penalty-Free Withdrawals**

Once per year after the first Contract Anniversary, you may take up to 5% of your Accumulation Value as a penalty-free withdrawal (also known as a Penalty-Free Partial Surrender), without Surrender Charges or Interest Adjustment. Any withdrawal will result in a reduction of your Accumulation Value and GLWB Value. Please review the GLWB section for details on how the penalty-free withdrawals may impact your income payments.

#### **Nursing Home Confinement Waiver**

After the first Contract Anniversary, if the annuitant becomes confined to a qualified nursing home facility for at least 90 consecutive days, we will increase the penalty-free withdrawal amount to 10% of the Accumulation Value each year while the annuitant is confined. This waiver is only available for issue ages 75 and younger and is automatically included with your annuity at no additional charge.

#### **Required Minimum Distributions**

By current company practice\*, Required Minimum Distributions (RMD) that exceed the 5% penalty-free amount may be withdrawn without a Surrender Charge or Interest Adjustment.

#### **Annuity Payout Options**

You may select an annuity payout option at any time. If selected during the Surrender Charge period, your payout will be based on the Surrender Value. Available payout options include Life Income, Life Income with Period Certain, Joint and Survivor Life Income and Income for a Specified Period or Amount.

By current company practice\*, you may receive an income from the Accumulation Value after the first contract year (without Surrender Charges or Interest Adjustment) if you choose a Life Income Option. You can also receive an income based on the Accumulation Value if your annuity has been in force for at least five years and you elect to receive payments over at least a five year period

Once a payout option is elected it cannot be changed and all other rights and benefits under the annuity end. The GLWB feature of this annuity will terminate upon electing an annuity payout option.

<sup>\*</sup>A feature offered "by current company practice" is not a contractual guarantee of this annuity Contract and can be removed or changed at any time.

The following are example calculations when withdrawals are taken, demonstrating the impact of withdrawals on the Accumulation Value (AV), Guarantee Lifetime Withdrawal Benefit (GLWB) Values, and Lifetime Payment Amount (LPA) (Note: The following examples are hypothetical examples and are not intended to predict or project actual contract values.)

# Example #1 Impact of Penalty-Free Withdrawal (WD) Prior to Lifetime Payment Election Date (LPED) Beginning Values

Assume an Accumulation Value (AV) of \$100,000 and a Guaranteed Lifetime Withdrawal Benefit (GLWB) Value of \$150,000

#### Withdrawal Details

A penalty-free withdrawal (WD) equal to 5% of the AV (\$5,000) is taken.

A penalty-free WD prior to the LPED will reduce the GLWB Value by the same percentage that the AV was reduced by that WD. In this example, this means the GLWB Value will be reduced by 5%. 5% of the GLWB Value = 5% x \$150,000 = \$7,500

#### **Ending Values**

AV after WD = \$100.000 - \$5.000 = \$95.000

GLWB Value after pro-rata reduction for WD = \$150,000 - \$7,500 = \$142,500

Note that the GLWB Value was reduced by more than the dollar amount of the WD from the AV.

# Example #2 Impact of Withdrawals (WD) in Excess of Penalty-Free Withdrawal Prior to Lifetime Payment Election Date (LPED)

#### **Beginning Values**

Assume an Accumulation Value (AV) of \$100,000 and a Guaranteed Lifetime Withdrawal Benefit (GLWB) Value of \$150,000

#### Withdrawal Details

A Withdrawal (WD) in excess of the penalty-free withdrawal WD amount is taken. The WD amount is \$10,000, or 10% of the AV. A WD prior to the LPED will reduce the GLWB Value by the same percentage that the AV was reduced by that WD. In this example, this means the GLWB Value will be reduced by 10%. 10% of the GLWB Value = 10% x \$150,000 = \$15,000

#### **Ending Values**

AV after WD = \$100,000 - \$10,000 = \$90,000

GLWB Value after pro-rata reduction for WD = \$150,000 - \$15,000 = \$135,000

Note that the GLWB Value was reduced by more than the dollar amount of the WD from the AV.

# Example #3 Impact of Withdrawal (WD) in Excess of Lifetime Payment Amount after Lifetime Payment Election Date (LPED)

#### **Beginning Values**

Assume an Accumulation Value (AV) of \$100,000; a Guaranteed Lifetime Withdrawal Benefit (GLWB) Value of \$150,000; an LPA of \$7500; and a Lifetime Payment Percentage of 5.00%

#### **Withdrawal Details**

A Withdrawal (WD) in excess of the LPA is taken. The total WD amount is \$16,750.

A WD after the LPED that is in excess of the LPA will reduce the GLWB Value by the same percentage that the AV was reduced by the excess WD.

A WD after the LPED that is in excess of the LPA may also reset the LPA.

In this example, the excess WD is \$16,750 - 7,500 = 9,250

#### **Ending Values**

AV after LPA = \$100.000 - \$7.500 = \$92.500

The excess WD of \$9,250 is 10% (\$9,250 / \$92,500) of the remaining AV, after the LPA is deducted but prior to the excess WD being deducted.

AV after excess WD = \$92,500 - \$9,250 = \$83,250

GLWB Value after LPA = \$150,000 - \$7,500 = \$142,500

The remaining GLWB Value will then be reduced by the same percentage the excess WD reduced the AV. In this example, this means the remaining GLWB Value will be reduced by 10%. 10% of the GLWB Value (after the LPA) =  $10\% \times 142,500 = 14,250$ 

GLWB Value after pro-rata reduction for the excess WD = \$142,500 - \$14,250 = \$128,250

Note that the GLWB Value was reduced by more than the dollar amount of the excess WD from the AV.

The LPA may also be reset as a result of the excess WD. The LPA is reset to equal the lesser of (1) the LPA before the excess WD or (2) the Lifetime Payment Percentage multiplied by the greater of (a) the AV after the WD or (b) the GLWB after the WD.

- (1) is the LPA before the excess WD = \$7.500
- (2) is \$6,412.50, which is the greater of
  - (a), which is Lifetime Payment Percentage (5%) multiplied by the AV after the excess WD (\$83,250) = \$4,162.50 or
- (b), which is Lifetime Payment Percentage (5%) multiplied by the GLWB Value after the excess WD (\$128,250) = \$6,412.50

LPA is reset to the lesser of (1) and (2); in this case, LPA is reduced from \$7,500 to \$6,412.50.

## Example #4 Impact of an Excess Withdrawal (WD) after the Lifetime Payment Election Date (LPED) and when Accumulation Value (AV) is near Zero

#### **Beginning Values**

Assume an Accumulation Value (AV) of \$10,000 and a Guaranteed Lifetime Withdrawal Benefit (GLWB) Value of \$60,000 and a Lifetime Payment Amount (LPA) of \$5,000 and a Lifetime Payment Percentage of 5.00%

#### Withdrawal Details

A withdrawal (WD) in excess of the LPA is taken. The total WD amount is \$9,000.

A WD after the LPED that is in excess of the LPA will reduce the GLWB Value by the same percentage that the AV was reduced by the excess WD.

A WD after the LPED that is in excess of the LPA may also reset the LPA.

In this example, the excess WD is \$9,000 - \$5,000 = \$4,000

#### **Ending Values**

AV after LPA = \$10,000 - \$5,000 = \$5,000

The excess WD of 4,000 is 80% (4,000 / 5,000) of the remaining AV, after the LPA is deducted but prior to the excess WD being deducted.

AV after excess WD = \$5,000 - \$4,000 = \$1,000

GLWB Value after LPA = \$60,000 - \$5,000 = \$55,000

The remaining GLWB Value will then be reduced by the same percentage the excess WD reduced the AV. In this example, this means the remaining GLWB Value will be reduced by 80%. 80% of the GLWB Value (after the LPA) = 80% x 55,000 = \$44,000

GLWB Value after pro-rata reduction for the excess WD = \$55,000 - \$44,000 = \$11,000

Note that the GLWB Value was reduced by more than the dollar amount of the excess WD from the AV.

The LPA may also be reset as a result of the excess WD. The LPA is reset to equal the lesser of (1) the LPA before the excess WD or (2) the Lifetime Payment Percentage multiplied by the greater of (a) the AV after the WD or (b) the GLWB after the WD.

- (1) is the LPA before the excess WD = \$5,000
- (2) is \$550, which is the greater of
  - (a), which is Lifetime Payment Percentage (5%) multiplied by the AV after the excess WD (\$5,000) = \$250 or
  - (b), which is Lifetime Payment Percentage (5%) multiplied by the GLWB Value after the excess WD (\$11,000) = \$550

LPA is reset to the lesser of (1) and (2); in this case, LPA is reduced from \$5,000 to \$550.

## MNL IncomeVantage 10 Applicant Authorization and Acknowledgement Statements:

By initialing and signing below, I certify that:

- I have read this Annuity Disclosure and have been provided a brochure that explains the Annuity Product's benefits, features and limitations.
- The features of this Annuity Product have been explained to me by the Agent.
- I understand that this Contract is not effective and interest does not begin to accrue until the date the annuity becomes effective, not the date premium is submitted or received by the Company.
- I understand my agent will receive a commission for the sale of this Contract.
- I understand I should consult my tax advisor about possible tax implications related to the purchase of this Contract and its features.

Owner(s) Initials REQUIRED in Box Above	My initials confirm that:  The MNL IncomeVantage 10 annuity is a long-well as an Interest Adjustment (if applicable in Charge Period to any full surrender or any par surrender amount.  I have reviewed page 3 of this Disclosure and Interest Adjustment Formula applicable based.  I understand a surrender during the Surrender.	my state) will apply duri tial surrender taken that affirmatively acknowledo l on the state of issue.	ng the 10-year Surrender exceeds the penalty-free partial ge the Surrender Charges and
<ul> <li>I understand</li> <li>That exerce of a divorce GLWB Both</li> <li>The all GLWB Standard</li> </ul>	FEATURE ACKNOWLEDGEMENT: the following about the GLWB Benefit feature: sising any liquidity features, such as partial withdraw e settlement or decree, will reduce the GLWB Value onus and the GLWB Stacking Roll-Up Credit do re nuity's Accumulation Value acking Roll-Up Credit does not apply to the follo in which a withdrawal is taken (except RMDs)	e and adversely impact funct apply to the followin The Contract's Death Beowing:	uture income. ng: nefit
	an to begin using the GLWB income feature of this produ 6-10 years 10 + years Unknown	ıct within (Please check on	e of the following):
	nark an "X" in the box to the left if your agent providence the box an illustration		
shown, other that and understand	aware that an Annuity Buyer's Guide is available on the guaranteed minimum values, are not guarant the intent of this Annuity Product and agree that it nor living and other related expenses, and this Contra	ees, promises, or warrant neets my needs. I have a	ties. I have reviewed the features ssessed my financial situation,
	Annuitant's/Owner's Original Signature		
	Joint Owner's Original Signature		Date Signed (mm/dd/yyyy)
presented to the	edgement: By signing below, I certify that the produced applicant. A copy of this signed disclosure was produced an assessment of the stated goals of the applic	vided to the applicant afte	er an examination of the interests



guaranteed elements.

Not FDIC/NCUA Insured	Not A Deposit Of A Bank	Not Bank Guaranteed	
May Lose Value	Not Insured By Any Federal Government Agency		

2422010

Date Signed (mm/dd/yyyy)

25358Y-32 Page 8 of 10 6-17

Buyer's Guide on the Company website. I certify that I believe this product to be appropriate for the applicant based on his or her individual needs. I have discussed this product with the applicant and have not made any statements which contradict the materials provided to the applicant. I have not made any promises or given any assurances about the future value of any non-

Agent's Original Signature

This page left intentionally blank.

Please see pages 8 and 10 for acknowledgement, election and signatures.

## Agent Instructions: Page 8 and 10 must both be signed.

Return page 10 to the Home Office with the Applicant's original signature. Retain a permanent copy in your file. Leave pages 1-8 with signatures with the Applicant.

# MNL IncomeVantage 10 Applicant Authorization and Acknowledgement Statements:

By initialing and signing below, I certify that:

- I have read this Annuity Disclosure and have been provided a brochure that explains the Annuity Product's benefits, features and limitations.
- · The features of this Annuity Product have been explained to me by the Agent.
- I understand that this Contract is not effective and interest does not begin to accrue until the date the annuity becomes effective, not the date premium is submitted or received by the Company.
- I understand my agent will receive a commission for the sale of this Contract.
- I understand I should consult my tax advisor about possible tax implications related to the purchase of this Contract and its features.

	My initials confirm that:					
Owner(s) Initials	The MNL IncomeVantage 10 annuity is a long-term contract and a Surrender Charge up to 10% as well as an Interest Adjustment (if applicable in my state) will apply during the 10-year Surrender Charge Period to any full surrender or any partial surrender taken that exceeds the penalty-free partial surrender amount.					
REQUIRED in Box Above	I have reviewed page 3 of this Disclosure Interest Adjustment Formula applicable by	pased on the state of issue.	_			
	I understand a surrender during the Surre	ender Charge Period may res	ult in loss of premium.			
<ul> <li>I understand</li> <li>That exert of a divorce</li> <li>GLWB Both</li> <li>The a</li> <li>GLWB Standard</li> </ul>	TEATURE ACKNOWLEDGEMENT: the following about the GLWB Benefit feature sising any liquidity features, such as partial with sesttlement or decree, will reduce the GLWB shus and the GLWB stacking Roll-Up Credit anuity's Accumulation Value acking Roll-Up Credit does not apply to the in which a withdrawal is taken (except RMDs)	hdrawals or surrenders, includ Value and adversely impact fut to not apply to the followin • The Contract's Death Be following:	uture income. ng: enefit			
At this time, I pl	an to begin using the GLWB income feature of this	product within (Please check on	ne of the following):			
0-5 years	6-10 years 10 + years Unknown					
	nark an "X" in the box to the left if your agent promeVantage 10. By checking this box an illustra					
shown, other that and understand	aware that an Annuity Buyer's Guide is availal in the guaranteed minimum values, are not gu the intent of this Annuity Product and agree tha or living and other related expenses, and this C	arantees, promises, or warran at it meets my needs. I have a	ties. I have reviewed the features ssessed my financial situation,			
	Annuitant's/Owner's Original Signature	e				
	Joint Owner's Original Signature		Date Signed (mm/dd/yyyy)			
presented to the	edgement: By signing below, I certify that the applicant. A copy of this signed disclosure warnd an assessment of the stated goals of the a	s provided to the applicant after	er an examination of the interests			



guaranteed elements.

Not FDIC/NCUA Insured	Not A Deposit Of A Bank	Not Bank Guaranteed
May Lose Value	Not Insured By Any Federal	Government Agency

Date Signed (mm/dd/yyyy)

**2 4 2 2 0 1** 2422010

Buyer's Guide on the Company website. I certify that I believe this product to be appropriate for the applicant based on his or her individual needs. I have discussed this product with the applicant and have not made any statements which contradict the materials provided to the applicant. I have not made any promises or given any assurances about the future value of any non-

Agent's Original Signature



### **Index Disclosure Supplement:**

S&P 500<sup>®</sup> Low Volatility Daily Risk Control 5% Index S&P 500<sup>®</sup> Low Volatility Daily Risk Control 8% Index

(Please see your Annuity Disclosure for details.)

Thank you for considering a Fixed Index Annuity from Midland National® Life Insurance Company. Upon issue, this is an annuity contract/certificate between you and Midland National. It is an insurance contract/certificate filed with the state insurance department and governed by state insurance laws and your state insurance department.

A Midland National Fixed Index Annuity contract/certificate offers you flexibility to choose how to allocate your premiums to determine the manner in which your contract/certificate will earn interest. A Fixed Index Annuity is not a direct investment in the stock market. It is a long term insurance product with guarantees backed by Midland National and provides the potential for interest to be credited based in part on the performance of specific indexes without the risk of loss of premium due to market downturns or fluctuations. Midland National annuity products offer you, flexibility and choices in determining how you wish to have your contract/certificate premiums allocated. You may earn Interest Credits by allocating to an external index and by selecting from various interest crediting methods or by allocating your premium to the Fixed Account. If you elect to place your premium in the Index Options your Interest Credit will never be less than zero. If you elect to place your premium in the Fixed Account a set rate of interest will be credited each year.

A Midland National Fixed Index Annuity contains a minimum guaranteed interest rate, backed by the financial strength of Midland National. The minimum guaranteed interest rate is set at issue and guaranteed for the life of the contract/certificate.

It is critical you understand how the components of your Fixed Index Annuity work. There are two main aspects that factor in to determining the Interest Credits; the Index Account (Crediting Method) option and the index itself. If you elect to allocate your premiums and credited interest to an external index, those values are never invested directly in the external index itself. The investment performance of the external index to which your contract/certificate premiums and credited interest are allocated does not pass through to you like a security investment. If it is a stock based index you do not receive dividends. By allocating to an external index you merely select the manner used to measure what your credited interest will be. You ultimately decide how to allocate your premiums and credited interest.

**S&P 500**® **Low Volatility Daily Risk Control 5% Index Option** – *Ask your sales representative for availability in your state.* The S&P 500 Low Volatility Index is a separate index, which measures performance of the 100 least volatile stocks in the S&P 500. The S&P 500 Low Volatility Daily Risk Control 5% Index strives to create stable performance through managing volatility to a 5% target (i.e. risk control) on the S&P 500 Low Volatility Index. The S&P 500 Low Volatility Daily Risk Control 5% Index adds an element of risk control by allocating between stocks, as represented by the S&P 500 Low Volatility Index, and cash. Because this index is managed to a volatility target, the index performance will not match the underlying performance of the S&P 500 Low Volatility Index (typically the volatility control tends to reduce the rate of negative performance and positive performance of the underlying S&P 500 Low Volatility Index – thus creating more stabilized performance).

Annual Point-to-Point with Index Margin Crediting Method – Ask your sales representative for availability in your state. The S&P 500 Low Volatility Daily Risk Control 5% Index uses the Annual Point-to-Point with Index Margin crediting method. Annual Point-to-Point measures index growth using two points in time; the beginning index value and the ending index value for each contract/certificate year. Index linked gains are calculated based on the difference between these two values on an annual basis. The Index change if any, is then subject to an Index Margin. The resulting final value will be the amount of interest credited (Interest Credit) at the contract/certificate anniversary.



**S&P 500**® **Low Volatility Daily Risk Control 8% Index Option** – *Ask your sales representative for availability in your state.* The S&P 500 Low Volatility Index is a separate index which measures performance of the 100 least volatile stocks in the S&P 500. The S&P 500 Low Volatility Daily Risk Control 8% Index strives to create stable performance through managing volatility to an 8% target (i.e. risk control) on the S&P 500 Low Volatility Index. The S&P 500 Low Volatility Daily Risk Control 8% Index adds an element of risk control by allocating between stocks, as represented by the S&P 500 Low Volatility Index, and cash. Because this index is managed to a volatility target, the index performance will not match the underlying performance of the S&P 500 Low Volatility Index (typically the volatility control tends to reduce the rate of negative performance and positive performance of the underlying S&P 500 Low Volatility Index – thus creating more stabilized performance).

Two-Year Point-to-Point with Index Margin Crediting Method – Ask your sales representative for availability in your state. The S&P 500 Low Volatility Daily Risk Control 8% Index uses the Two-Year Point-to-Point with Index Margin crediting method. Two-Year Point-to-Point measures index growth using two points in time; the beginning index value and the index value at the end of the 2-year term. Index-linked gains are calculated based on the growth between these two values less the annual Index Margin multiplied by two (which is the term length). The resulting final value will be the amount of interest credited (Interest Credit) at the end of the 2-year term.

# Please call 1-877-858-1364 for additional details on the S&P 500 Low Volatility Daily Risk Control 5% Index and S&P 500 Low Volatility Daily Risk Control 8% Index.

We feel it's important to offer you, several options to allocate your premium. We also offer annual transfer options that give you the opportunity to re-allocate your Accumulation Value in the various options on an annual or biennial basis. Please contact your agent or Midland National for additional information. The S&P 500 Low Volatility Daily Risk Control 5% and S&P 500 Low Volatility Daily Risk Control 8% Index values are available at the website <a href="https://www.bloomberg.com">www.bloomberg.com</a> and www.us.spindices.com under the ticker symbol SPLV5UT for the S&P 500 Low Volatility Daily Risk Control 5% and SPLV8UT for the S&P 500 Low Volatility Daily Risk Control 8%. For complete details on the S&P 500 Low Volatility Daily Risk Control 5% Index and S&P 500 Low Volatility Daily Risk Control 8% Index, reference our product brochures.

#### **Index Disclosure Supplement:**

#### S&P 500® Low Volatility Daily Risk Control 5% Index and 8% Index

(Please see your Annuity Disclosure for details.)

The "S&P 500®", "S&P 500® Low Volatility Daily Risk Control 5% Index", "S&P 500® Low Volatility Daily Risk Control 8% Index", "S&P MidCap 400®", and "DJIA®", Indices ("Indices") are products of S&P Dow Jones Indices LLC or its affiliates ("SPDJI") and have been licensed for use by Midland National ("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.



## **Index Disclosure Supplement:**

### S&P Multi-Asset Risk Control 5% Excess Return Index (S&P MARC 5% ER)

(Please see your Annuity Disclosure for details.)

Thank you for considering a Fixed Index Annuity from Midland National<sup>®</sup> Life Insurance Company. Upon issue, this is an annuity contract between you and Midland National. It is an insurance contract filed with the state insurance department. Therefore, this contract is governed by state insurance laws and your state insurance department.

A Midland National Fixed Index Annuity contract offers you flexibility to choose how to allocate your premiums to determine the manner in which your contract will earn interest. You may earn Interest Credits by linking to an external index and by selecting from our various interest crediting methods or by allocating your premium to the Fixed Account. Midland National annuity products offer you, the customer, flexibility and choice in determining how you wish to have your contract premiums allocated. If you elect to place your premium in the Index Account, your Interest Credit will never be less than zero. If you elect to place your premium in the fixed account, a declared rate of interest will be credited each year.

A Midland National Fixed Index Annuity contains a minimum guaranteed interest rate, backed by the financial strength of Midland National. The fixed account minimum guaranteed interest rate is set at issue and guaranteed for the entire term of the contract.

If you elect to link your premiums and credited interest to an external index, your premiums are never invested directly in the external index. The investment performance of the external index that your premiums are linked to does not pass through to you as a security investment does. If it is a stock-based index you do not receive dividends. By linking to an external index you merely select the manner used to measure what your credited interest will be. You ultimately decide how to allocate your premiums and decide how interest credits to your contract will be calculated. It is critical you understand how the components of your Fixed Index Annuity work. There are two main aspects that factor in to determining the Interest Credits, the Index Account (Crediting Method) option and the index itself.

#### S&P Multi-Asset Risk Control 5% Excess Return Index Option

The S&P MARC 5% ER index is a multi-asset excess index that tends to create more stable returns through diversification, an excess return methodology, and by managing volatility. The index covers major asset classes which represent equities, U.S. Treasuries, gold, and cash. The index applies established rules to allocate amongst those asset classes. The S&P MARC 5% ER index value is available at the following website: http://us.spindices.com/indices/strategy/sp-marc-5-excess-return-index.

We reserve the right to add, remove or revise availability of the S&P MARC 5% ER index, or to substitute a different published benchmark should the Company, in its discretion, determine that the use of the S&P MARC 5% ER index no longer is commercially reasonable. The S&P MARC 5% ER index does not constitute a purchase of or direct investment in the index, or in the underlying components of the index. All references to S&P MARC 5% ER index values are used with the permission of S&P Down Jones Indices and have been provided for informational purposes only. S&P Dow Jones Indices accepts no liability or responsibility for the accuracy of the prices or the underlying components to which the prices may be referenced.

#### **Annual Point-to-Point Index Account**

The S&P MARC 5% ER index is available with the Annual Point-to-Point Index Account option. Annual Point-to-Point measures index growth using two points in time, the beginning index value and the ending index value for each contract year. Index-linked gains are calculated based on the difference between these two values on an annual basis. The index growth, if any, is then subject to an Index Margin that is subtracted to determine your interest credit. No Cap Rate is applied. The annual interest credit will never be less than zero.

#### **Additional Options**

We feel it's important to offer you several options to which you can allocate your premium. We also offer annual transfer options that give you the opportunity to re-allocate your Accumulation Value to the various Fixed and Index Account options on an annual basis. Please contact your agent or Midland National for additional information.

# Fixed Index Annuity Allocation Form for MNL IncomeVantage®

**INSTRUCTIONS:** Make sure all allocations equal 100%, and complete all applicable signatures.



Mail to: P.O. Box 79907, Des Moines, IA 50325-0907

Daily Average (Subject to an Index Margin)	Annual Point-to-Point (Subject to an Index Margin)
S&P 500® Index	S&P 500® Low Volatility Daily Risk Control 5% Index  %
Monthly Point-to-Point (Subject to an Index Cap Rate)	S&P Multi-Asset Risk Control
S&P 500® Index	5% Excess Return Index* (S&P MARC 5% ER) %
Annual Point-to-Point (Subject to an Index Cap Rate)	Annual Point-to-Point – Threshold Participation Strategy
S&P 500® Index	(subject to Base and Enhanced Participation Rates)  S&P 500® Low Volatility Daily Risk
Annual Point-to-Point (Subject to a Participation Rate)	Control 5% index*  Two-Year Point-to-Point (Subject to an Index Margin)
S&P 500® Index %	S&P 500° Low Volatility Daily Risk Control 8% Index*  %
	Fixed Account %
	Allocation percentages must be whole numbers and equal 100%
	* Not available in all states.  Ask your sales representative for availability in your state.
Signatures	
Signed at: City State	
City State	
Annuitant/Owner Signature:	Date:
Joint Owners Signature:	Date:
Agents Signature:	Date:
The "S&P 500°". "S&P Multi-Asset Risk Control 5% Excess Return Index". "S&F	P 500° Low Volatility Daily Risk Control 5% Index". "S&P 500° Low Volatility

The "S&P 500®", "S&P Multi-Asset Risk Control 5% Excess Return Index", "S&P 500® Low Volatility Daily Risk Control 5% Index", "S&P 500® Low Volatility Daily Risk Control 5% Index", "S&P 500® Low Volatility Daily Risk Control 8% Index" Indices ("Indices") are products of S&P Dow Jones Indices LLC or its affiliates ("SPDJI") and have been licensed for use by Midland National Life Insurance Company ("the Company"). Standard & Poor's® and S&P® are registered trademarks of Standard & Poor's Financial Services LLC ("S&P"); and these trademarks have been licensed for use by SPDJI and sublicensed for certain purposes by the Company. Midland National's MNL IncomeVantage is not sponsored, endorsed, sold or promoted by SPDJI, 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..



102265

1022650



# IMPORTANT NOTICE: REPLACEMENT OF LIFE INSURANCE OR ANNUITIES

This document must be signed by the applicant and the producer, if there is one, and a copy left with the applicant.

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases, this purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A replacement occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financed purchase.

A financed purchase occurs when the purchase of a new contract involves the use of funds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, including accumulated dividends, of an existing policy or contract to pay all or part of any premium or payment due on the new contract. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interest. You will pay acquisition costs and there may be surrender costs deducted from your policy or contract. You may be able to make changes to your existing policy or contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing policy and may reduce the amount paid upon the death of the insured.

We want you to understand the effects of replacements before you make your purchase decision and ask that you answer the following questions and consider the questions on the back of this form.

Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the insurer, or otherwise terminating your

existing policy or contract? YE	.S NO		
2. Are you considering using funds from	your existing policies or cor	ntracts to pay premiums due on the ne	w contract? YES NO
If you answered "yes" to either of the above the insurer, the insured or annuitant and the a source of financing:	e questions, list each existir ne policy or contract number	ng policy or contract you are contempla if available) and whether each policy of	ating replacing (include the name of or contract will be replaced or used as
Make sure you know the facts. Contact you in-force illustration, policy summary or ava material used by the agent in the sales pro	ailable disclosure documents	must be sent to you by the existing in	
Insurer Name	Policy or Contract #	Annuitant or Insured Name	Replaced (R) or Financing (F)
1.			
2.			
3.			
The existing policy or contract is being rep	placed because		
I certify that the responses herein are, to t		ccurate:	
I do not want this notice read aloud to me	(Applicants must init	ial only if they do not want the notice rea	id aloud.)
Applicant's Signature and Printed Name			Date
Joint Applicant's Signature and Printed Name	<del></del> ;		Date
I do not want this notice read aloud to me	(Applicants must init	ial only if they do not want the notice rea	d aloud.)
	<u>Produc</u>	er's Statement	
I certify that only sales materials approved b Important Notice were left with the applicant than at the time of policy or contract delivery	i. If applicable, electronically pr		
I certify that the responses herein are, to the	ne best of my knowledge, acc	curate:	
Producer's Signature and Printed Name			Date
l.	1 188181 11881 1181	116779	

Return this signed original to the Home Office, Leave a signed copy with the Applicant and retain a permanent copy in your file.

A replacement may not be in your best interest, or your decision could be a good one. You should make a careful comparison of the costs and benefits of your existing policy or contract and the proposed contract. One way to do this is to ask the company or agent that sold you your existing policy or contract to provide you with information concerning your existing policy or contract. This may include an illustration of how your existing policy or contract is working now and how it would perform in the future based on certain assumptions. Illustrations should not, however, be used as a sole basis to compare policies or contracts. You should discuss the following with your agent to determine whether replacement or financing your purchase makes sense:

#### PREMIUMS:

Are they affordable? Could they change?

You're older--are premiums higher for the proposed new policy?

How long will you have to pay premiums on the new policy? On the old policy?

#### POLICY VALUES:

New policies usually take longer to build cash values and to pay dividends.

Acquisition costs for the old policy may have been paid; you will incur costs for the new one.

What surrender charges do the policies have?

What expense and sales charges will you pay on the new policy?

Does the new policy provide more insurance coverage?

#### INSURABILITY:

If your health has changed since you bought your old policy, the new one could cost you more,

or you could be turned down.

You may need a medical exam for a new policy.

Claims on most new policies for up to the first two years can be denied based on inaccurate statements.

Suicide limitations may begin anew on the new coverage.

#### IF YOU ARE KEEPING THE OLD POLICY AS WELL AS THE NEW POLICY:

How are premiums for both policies being paid?

How will the premiums on your existing policy be affected?

Will a loan be deducted from death benefits?

What values from the old policy are being used to pay premiums?

#### IF YOU ARE SURRENDERING AN ANNUITY OR INTEREST SENSITIVE LIFE PRODUCT:

Will you pay surrender charges on your old contract?

What are the interest rate guarantees for the new contract?

Have you compared the contract charges or other policy expenses?

#### OTHER ISSUES TO CONSIDER FOR ALL TRANSACTIONS:

What are the tax consequences of buying the new policy?

Is this a tax-free exchange? (See your tax advisor.)

Is there a benefit from favorable "grandfathered" treatment of the old policy under the federal tax code?

Will the existing insurer be willing to modify the old policy?

How does the quality and financial stability of the new company compare with your existing company?

RIGHT TO EXAMINE POLICY - It is important to us that you are satisfied with your policy and that it meets your insurance goals. Read it carefully. If you are not satisfied with it, you may return it to our Executive Office or to your agent within 30 days after you receive it. We will then void it and refund all premiums paid including any policy fees or charges. In the case of a variable or market value adjustment policy, we will refund the Policy Fund plus the sum of all charges deducted from your premiums, the Policy Fund and the Investment Divisions.

## **CERTIFICATION OF TRUST AGREEMENT**

Midland National® Life Insurance Company P.O. Box 79907, Des Moines, IA 50325-0907

Overnight: 4350 Westown Parkway, West Des Moines, IA 50266

## MIDLAND NATIONAL® Life Insurance Company

## Instructions

NOTICE: If this is a Charitable Trust, please use Charitable Trust Certification Form (26742Y)

Use this form:

- · When submitting new annuity applications owned by a Trust
- When accigning or changing a Reneficiary to a Truct

• Upon change of Trustee(s) of an existing annuity contract owned

<ul> <li>When assigning or changing a Beneficiary to a free</li> <li>Upon change of ownership of an existing annuity of</li> </ul>	-	a claimant statement for death claim proceeds
1. Contract Information		
Contract Number (if assigned)		
Owner's Name (first, middle initial, last)		SSN
Joint Owner's Name (if applicable) (first, middle initial, last)		SSN
Non-Natural Owner (If applicable)		TIN/EIN
lease complete using information from the Trust document.		
2. Trust Information		
Full Trust Name		
Tax ID Number	Trust governed by the State of:	Trust Effective Date:
Is the Trust one of the following types of Trust? Sp Employee Benefit, A-B, Residuary, or Structured Se		ns, Gifting, Income Only, Pension,
Trust Types Accepted as Owner-select one: (For Tru		Office. <b>If using this form for a trust listed as a</b>
beneficiary only you may leave this section blan  ☐ A/B Trust	nk.) □ Asset Protection Trust	☐ Bypass/Credit Shelter Trust
☐ Discretionary/Sprinkle Trust	☐ Educational Trust	☐ Family Trust
☐ Inter Vivos Trust	☐ Irrevocable Life Insurance Trust	☐ Living Trust
☐ Qualified Terminable Interest Property Trust☐ Veterans Eligibility Trust	☐ Residuary Trust	☐ Savings Trust
Is the Trust a Grantor Trust? $\square$ Yes $\square$ No		
If the Trust is a Grantor Trust, is/are the grantor(s) of	of the Trust also the Annuitant(s) on the annui	ty contract? $\square$ Yes $\square$ No
<ul> <li>The Beneficiary(ies) of the Trust is/are each a nature</li> <li>□ Yes □ No</li> </ul>	ral person and the Trustee(s) do(es) not have	discretion to pay Trust benefits to any entity.
Please be advised that a Testamentary Trust cannot be an Own	er. If the Testamentary Trust will be the sole Primary	Beneficiary, we will require a Contingent Beneficiary.
3. Grantor/Settlor Information		
Grantor/Settlor Name (first, middle initial, last)		
Grantor/Settlor Name (first, middle initial, last)		
		<u>\$132315</u>

\$1323150

**REV 9-18** 19306Y Page 1 of 4

4. Trustee Information				
Trustee Name (first, middle initial, last)				
Date of Birth		Social Security Number		
Mailing Address			Apartment/Suite Number	
City	State ZIP		Phone	
Trustee Name (first, middle initial, last)				
Date of Birth		Social Security Number		
Mailing Address	Apartment/Suite Number			
City	State	ZIP Phone		
If more than two Trustees, please attach another page with signatures and date.	!	·		
5. Successor Trustee Information				
Successor Trustee Name (first, middle initial, last)				
Date of Birth Social Security Number				
Mailing Address	iling Address			
City	State ZIP		Phone	
Successor Trustee Name (first, middle initial, last)				
Date of Birth Social Security Number				
Mailing Address	Mailing Address Apartment/Suite Number			
City	State	ZIP	Phone	

If more than two successor Trustees, please attach another page with signatures and date.  $\label{eq:continuous}$ 



\$132316

1. The above-referenced Trust Agreement (the "Trust") requires that:
☐ All Trustees ☐ A majority of Trustees ☐ Any Trustee ☐ Trust only has one Trustee
Must sign documents pertaining to the above-referenced annuity contract which require a signature.
2. The agent/representative or any person affiliated with the agent/representative is not a Beneficiary of the above-referenced Trust.
□ Agree □ Disagree*
*If marked disagree, please attach an explanation of why your agent/representative or person affiliated with your agent/representative is named as a Beneficiary of the Trust.
Note: Under the laws of most states, an agent/representative is restricted in, or prohibited from, having a beneficial interest in an annuity sold by that agent/representative, unless that agent/representative is a family member, or has a recognized insurable interest. Additionally, our Company policy prohibits our agents/representatives from serving in any capacity that may be construed as creating a direct or indirect conflict of interest with regard to an annuity contract(s) for which they are or have been the agent(s)/representative(s) of record.
3. The relationship of the Trust Beneficiary(ies) to the Annuitant is:
□ Spouse □ Child(ren) □ Grandchild(ren) □ Estate □ Other (please describe)
4. Was the Trust validly executed, and is it in full force and effect? $\square$ Yes $\square$ No
5. The Trustee acknowledges that this annuity contract is in no way required in conjunction with the establishment of a Trust and that any fees, costs and/or expenses associated with the establishment or maintenance of the Trust are independent of any premium paid for this annuity contract. $\square$ Yes $\square$ No
6. The Trustee acknowledges that if the annuity contract contains a Guaranteed Lifetime Withdrawal Benefit, upon the death of the Annuitant/Covered Person, Lifetime Payment Amounts terminate. $\square$ Yes $\square$ No
7. Is this Trust partially or fully funded by a replacement? $\square$ Yes $\square$ No
7. Declaration by Trustee(s) and Signatures

Owner/Reneficiary Information

#### NOTICE: THIS SECTION CONTAINS A WAIVER AND RELEASE OF LIABILITY. PLEASE READ CAREFULLY.

This section is to be completed and signed by ALL Trustees required by the response to Question 1 in Section 6. For purposes of this section, "Trust" and "Trustees" refer to the Trust and its Trustee(s) identified on the first page of this form. "Annuity contract" refers to the annuity contract(s) referenced on the first page of this form together with any associated riders. "Owner," "Beneficiary," and "Annuitant" have the same meaning as defined in the annuity contract, and include multiple or joint Owners, Beneficiaries, or Annuitants where applicable. When not capitalized, "owners" and "beneficiaries" refer to the designated legal owners or beneficiaries of the Trust.

The undersigned persons ("the Trustees") represent, certify, and agree as follows:

- A. The Trustees are the authorized Trustees of the Trust identified above, and are authorized and legally capable of purchasing the annuity contract. Midland National may rely upon the signatures of the Trustees on behalf of the Trust as if they were the actual Owner or Beneficiary of the annuity contract.
- B. If the Trust is to be named the Owner of the annuity contract, the Trust is authorized under the terms of the Trust to purchase and hold the annuity contract, and if the Trust is to be named the Beneficiary of the annuity contract, the Trust is authorized under the terms of the Trust to receive the annuity contract proceeds.
- C. No additional authorizations are necessary to purchase the annuity contract.
- D. The Trustees acknowledge and agree that Midland National has no responsibility for reviewing or interpreting Trust or Trust-related documents, that Midland National will issue and administer the contract based solely upon the representations made by the Trustees in this form, and that any consequence of any error, inaccuracy, or misunderstanding in interpreting the Trust will be borne solely by the Trustees.
- E. The Trustees have reviewed all provisions of the Trust and annuity contract. By accepting the annuity contract, the Trustees certify they have determined that:
  - i. None of the provisions of the Trust (including income and corpus distribution requirements) conflict or will interfere with the terms and operation of the annuity contract; and
  - ii. None of the provisions of the annuity contract (including distribution requirement(s) under Section 72(s) of the Internal Revenue Code as incorporated into the terms of the annuity contract and applicable surrender charges) conflict or will interfere with the terms and operation of the Trust.

Section 7 continued on page 4 ▶

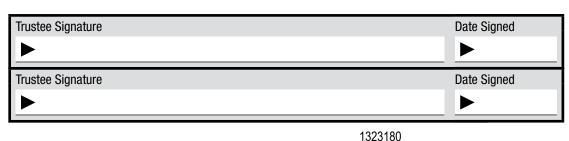


#### 7. Declaration by Trustee(s) and Signatures, continued

- F. Neither Company nor any of its agents/representatives, officers, or employees has made to the Trustees any representations regarding the potential tax liabilities or implications associated with the purchase of the annuity contract. The Trustees agree that they independently made a determination as to the suitability of the annuity contract for the Trust's purposes as well as the potential tax liabilities or implications which may result from the purchase of the annuity contract, and certify that they have had the opportunity to consult with their own independent tax, legal, and financial advisors regarding the purchase of the annuity contract. The Company may conduct its own evaluation as to suitability of the purchase of the annuity contract consistent with any requirements that may be imposed under state or federal law and may reject any application to purchase the annuity contract based upon its own review, if conducted. The Trustees expressly waive any claims against Company and its agents/representatives, officers, and employees related to the purchase of the annuity contract, and fully release from liability Company and its agents/representatives, officers, and employees from any such claims.
- G. The Trustees further acknowledge and agree that:
  - i. Midland National does not make and has not made any recommendations regarding the use of a Trust for any purpose, Midland National's agents/representatives are not authorized to recommend or sell Trusts while acting in their capacity as an agent/representative for Midland National, and any Trust recommendation should be provided by a qualified tax or legal advisor;
  - ii. Midland National's agents/representatives may also be duly licensed professionals (e.g. attorneys or accountants). However, any tax, estate/probate, or other legal or financial advice provided by such individuals is solely in their capacity as independent professionals, and not in their capacity as an agent/representative of Midland National;
  - iii. The Trustees have not relied upon any representation or advice of any of Midland National's agents/representatives, employees with respect to the validity, terms, or utilization of the Trust as the Owner or Beneficiary of the annuity contract; and
  - iv. The establishment of the Trust is not required in conjunction with the purchase of the annuity contract, and that any fees, costs, and/or expenses associated with the establishment of the Trust are independent of any premium paid for the purchase of the annuity contract.
- H. The Beneficiary(ies) of the Trust is/are each a natural person. No Beneficiary of the Trust is an entity, such as a corporation, another Trust, educational or religious institution, or charity, and the Trustees do not have discretion to pay Trust benefits to any entity. Based on independent advice received from a qualified tax or legal advisor, the Trustees have determined that the Trust will be holding the annuity policy/contract as an agent/representative solely for a natural person (or solely for natural persons) within the meaning of section 72(u)(1) of the Internal Revenue Code.
- I. If the Trust is a testamentary Trust, the Trust currently exists and all required probate proceedings have been completed.
- J. The Trust is not a Welfare Benefit Trust or a Trust set up as part of a Non-qualified Deferred Compensation Plan.
- K. The Trustees understand that the annuity contract will terminate in accordance with the terms of the annuity contract upon the death of the Annuitant, resulting in a mandatory distribution of funds from the annuity contract in accordance with its terms.
- L. The Trustees agree that Midland National shall have no responsibility with respect to the use or application of any funds paid to the Trust or the Trustees.
- M.The Trustees agree that each and every Trustee and successor Trustee is bound by the declarations of the Trustees signing this form. The Trustees further agree that Midland National may rely upon the directions of the Trustees identified in this form and any named successor Trustees until Midland National receives at its Executive Office written notification of a change of Trustee in a form acceptable to Midland National. The Trustees agree to notify Midland National of any change in Trustee within a reasonable time. The Trustees further agree to promptly notify Midland National if there is any change of facts that would affect any of the representations, or agreements contained in this form.
- N.The Trustees agree to release and hold harmless Midland National, its officers, employees, agents/representatives, and affiliates from and against all claims, liabilities, costs, and expenses which may arise or result from:
  - i. any action taken by Midland National at the direction of the Trustees or their successors;
  - ii. any tax, estate/probate, or other legal or financial liability or consequences associated with the Trust's purchase or ownership of the annuity contract;
  - iii. any error, inaccuracy, or misunderstanding in interpreting the Trust, and
  - iv. Midland National's reliance on the Trustee's representations regarding the Trust or their authority with respect to the Trust.

Note: The number of Trustees indicated in Section 6, Question 1 must sign below.

For Corporate Trustees, you must submit a Corporate Resolution verifying individuals authorized to sign on behalf of the entity.





132318



## 1035 EXCHANGE / ROLLOVER / TRANSFER eFORM

Name of Receiving Company							
Business Address	Mailing Addre	ess			Overnight	Address	
This form can be used to accomplish a <b>FUL</b> 1035. This form can also be used for <b>Tran</b> the existing policy and contract, check the a prospectus and any state required forms for surrendering company for form requirements	sfers of Fun ppropriate bo or additional	nds and D exes, and o important	date and	<b>ollovers</b> . Com d sign this form ures and inform	plete the Refer to nation. C	requested in the requested in the repulsion the requested in the requested	nformation concerning tion, and if applicable,
If you are considering a replacement you including, if available, an in force illustrat information is requested your existing comp existing carrier for additional information.	ion, policy s	summary,	premiur	m payment am	nounts or	the produc	t prospectus. If the
Complete one form for each surrendering	company a	nd contra	ct. Ple	ase apply fund	ls to:		
New / Existing Contract Number:			R	eceiving Carrie	er DTCC		
Without this contract number, the funds will	he applied to	a new cor	ntract			(for N	floney Settlement)
				41 6	- 4 4 '4		
The receiving company may not accept the	excnange / ro	ollover / tra	anster it	the funds do no	ot meet it	s minimum p	oremium requirements.
1. SURRENDERING COMPANY POLICY /	ACCOUNT /	CONTRA	CT INF	ORMATION			
Surrendering Company Name (Complete one form	n for each surr	endering co	ompany)	Surrendering Co	ompany A	ccount / Policy	/ Contract Number
Street Address Line 1	eet Address Line 1 Address Line 2						
City	State Zip Phone Number Ext		rt				
Surrendering Plan Type (Non-Qualified, IRA, Roth IRA, etc.)  Surrendering Product Type (Life, Annuity, CD, MF, Other, etc.)  Estimated Amount of Transfer			nount of Transfer				
Owner (First, Middle, Last) / Entity Name  Social Security Number / Tax ID #							
Joint Owner Name (First, Middle, Last) - Please confirm the availability of these options with the Receiving Company  Social Security Number							
Insured / Annuitant Name (First, Middle, Last) - if other than owner (applies to Life & Annuity products only)  Social Security Number							
Joint Insured / Annuitant Name (First, Middle, Last) - Please confirm the availability of these options with the Receiving Co.  Social Security Number							
Contingent Annuitant Name (First, Middle, Last) - Please confirm the availability of these options with the Receiving Co.  Social Security Number							
2. TRANSFER / ROLLOVER / 1035 EXCH	IANGE SUR	RENDERI	NG INS	TRUCTIONS			'
☐ Full ☐ Partial \$		or	%				
☐ Penalty Free Amount							
(This amount is subject to change based or the amount)	the product	provisions	s. Plea	se check with the	he surrer	ndering comp	pany to verify
By executing this form, I authorize the full or partial liquidation of my existing contract or account in accordance with the sections completed above. I hereby instruct the parties to process that liquidation:							
☐ As soon as possible after receipt of all necessary forms ☐ On a specific date:							
I / We also understand it is my / our responsibility to confirm with the surrendering company their processing guidelines to selecting a specific transfer date.							

#### 3. DISCLOSURES / ACKNOWLEDGMENTS

- I fully assign and transfer all claims, options, privileges, rights, title and interest to either all of the life insurance policy, all of the annuity contract or part of the annuity contract value identified in the Contract Information section on page 1 to the receiving company. The sole purpose of this assignment is to effect a tax-free exchange under Section 1035(a) of the Internal Revenue Code. All of the powers, elections, appointments, options and rights I have as owner of the contract, including the right to surrender, are now exercisable by the receiving company. Simultaneous with a full assignment, I also revoke all existing beneficiary designations under the Assigned Policy. Other than the above mentioned owner, no person, firm, or corporation other than myself and the insurer that issued the above numbered policy, has an interest in said policy. No proceedings in insolvency or bankruptcy have been instituted by or against me. I understand that the receiving company intends to surrender the contract for the cash value; or if this is a partial exchange, the portion assigned, subject to its terms and conditions, and to use the proceeds as the purchase payment for the new contract to be issued by the receiving company. I authorize the surrendering company to send the proceeds directly to the receiving company and understand that fees and surrender charges may apply. This exchange is subject to acceptance by the receiving company. Neither the receiving company nor the surrendering company is liable or responsible for changes in market value that may occur after the surrendering company has processed the transaction and before the proceeds are received by the receiving company in good order and allocated to the new contract. Prior to the date of receipt of the proceeds by the receiving company, no value will accrue or be earned on the receiving company contract.
- II. If this is a partial exchange, I understand that it is subject to Revenue Ruling 2003-76, which dictates how much of the original contract's cost basis must be allocated to the new contract. The cost basis should be allocated ratably between the two contracts based on the percentage of the value retained in the original contract and the percentage of the value transferred to the new contract. For example, if the contract value is \$100,000 and basis is \$50,000, and I assign 30% for a partial exchange, then \$15,000 (30% of \$50,000) of the basis would be applied to the new contract. I understand that the IRS has raised concerns about annuity contract owners using partial exchanges to avoid income tax, and I certify that I am not entering into this transaction for the purpose of reducing or avoiding income tax or the 10% penalty tax for early withdrawals.

I expressly represent that the sole purpose is to effect a partial 1035 exchange of an annuity contract. However, I acknowledge that Revenue Procedure 2011-38 states that withdrawals from annuitization, taxable owner or annuitant changes, or surrenders, other than an amount received as an annuity for a period of 10 years or more or during one or more lives, of either the original contract or the new contract during the 180 day period following the partial exchange, may affect the tax free status of the partial exchange.

Note: Other exceptions may apply and a subsequent direct transfer of all or a portion of either contract involved in the exchange could have tax and tax reporting consequences. Please consult your tax advisor. Please confirm with the carrier if they will support partial 1035 exchanges.

I acknowledge that the receiving company has made no representations concerning any tax treatment of this transaction. I understand that the receiving company has neither responsibility nor liability for the validity of this transaction or for my treatment under Section 1035(a) of the Internal Revenue Code or otherwise. Therefore, I agree to release and hold harmless the receiving company and its agents from any and all liability arising from, relating to, or in connection with, the taxation of a partial exchange of the above listed contract. I authorize the receiving company and the surrendering institution to share information necessary to maintain accurate records of the annuity cost basis and to ensure proper withholding and tax reporting. I have been directed to consult my tax or legal advisor before proceeding.

- III. I authorize the receiving company to rely upon the cost basis information provided by the surrendering company, but agree that the receiving company will assume no responsibility for determining or verifying cost basis. If cost basis is not provided, I acknowledge that more restrictive or less beneficial tax rules may apply to the amounts transferred. I acknowledge that the receiving company provides this form and participates in this transaction as an accommodation to me. The receiving company does not give tax or legal advice on the tax consequences for replacing one contract for another, and assumes no responsibility or liability for the validity of this assignment or for the tax treatment of this exchange under IRC Section 1035(a) or other laws or regulations.
- IV. I agree that if the receiving company, in its sole discretion, determines that it is unlikely to receive timely payment of the full contract cash surrender values, the receiving company may reassign ownership of the policy/contract back to me.
- V. RETURN OF LIFE INSURANCE POLICY OR ANNUITY CONTRACT Does not apply to partial 1035 exchanges on annuity contracts. Unless the surrendering company's policy or contract is attached, I affirm that the policy or contract has been destroyed or lost and that reasonable effort has been made to locate it. To the best of my knowledge no one else has any right, title or interest in the contract, nor has it been assigned, pledged or encumbered, unless this is a life insurance policy with a loan to carry forward.
- VI. MAXIMUM ISSUE AGE DISCLOSURE An annuity contract may not be issued should the funding requirements be received after reaching maximum issue age for the annuity contract applied for. If the funds are received after the maximum issue age, the contract may be rejected and the funds returned to their original source. The surrendering company may or may not take the funds back, which could result in a taxable event.
- VII. NON-QUALIFIED TRANSFER OF FUNDS (NON 1035 EXCHANGE) The receiving company will apply all such funds received to an annuity contract issued to me. I understand that the receiving company assumes no responsibility for tax treatment of this matter and I shall be responsible for payment of all federal, state and local taxes incurred with respect to the liquidation of such account. I acknowledge that the earnings credited under the annuity contract will begin to accrue when the receiving company receives these proceeds and all other necessary paperwork in good order. For index annuities, fixed account interest under the annuity contract will begin to accrue on the next Issue Day.
- VIII. TRANSFER / EXCHANGE OF FUNDS INTO A TSA/403(B) The TSA/403(b) owner / participant's employer or employer's third-party administrator must authorize and sign this transfer request in Section 5.
  - Authorization for a TSA/403(b) transfer / exchange to a TSA/403(b): This request is for the direct transfer / exchange of non-ERISA funds from the TSA/403(b) (annuity contract) or 403(b)(7) (custodial account) identified in Section 1 of this form to a TSA/403(b) (annuity contract) established on my behalf by the receiving company. I hereby agree to surrender my interest as indicated above and authorize the receiving company to take whatever action necessary to effect this transfer / exchange. I acknowledge that the transferred / exchanged funds shall be subject to the more stringent restrictions on distributions found in either the predecessor annuity contract or the receiving annuity contract. I intend this transaction to be a 403(b) transfer / exchange of funds pursuant to IRC section 403(b) and the final regulations. The transfer / exchange is to be executed from financial institution to financial institution in such a manner that it will not place me in actual or constructive receipt of all or any part of the transferred / exchanged funds. Because this transaction constitutes a direct rollover / transfer / exchange of funds and not a distribution, withholding does not apply. (Provide the receiving company with any records or documents they may request with respect to this transfer / exchange.)
  - IX. The IRS has provided limited guidance on the tax consequences of transferring a life insurance policy with values less than the investment in the contract to a new or existing annuity contract. If the owner surrenders the newly acquired annuity contract, it's not clear whether the annuity losses are fully deductible against ordinary income or deductible as a miscellaneous deduction subject to a limitation of 2% of adjusted gross income (AGI). If the IRS views the two transactions as a single integrated transaction, they could consider it a step transaction and successfully disallow the losses as a tax deduction.

4. TAVEAVER INCLUSION ATION AND ADDITION TION					
4. TAXPAYER IDENTIFICATION NUMBER CERTIFICATION					
Under penalties of perjury, I certify					
<ol> <li>The number on this form is my and</li> </ol>	correct taxpayer identification number (or	I am waiting for a number to be issued to me	<del>)</del> );		
notified by the Internal Reven		n backup withholding, or (b) I have not bee o withholding as a result of failure to report a bject to backup withholding; and			
3. I am a U.S. person (including a	a U.S. resident alien).				
	e been notified by the IRS that you are curr I interest and dividends on your tax return.	ently subject to backup withholding because	e		
4. I am exempt from Foreign Acc	ount Tax Compliance Act (FATCA) reporting	j.			
5. SIGNATURES					
This transfer request also authorizes the receiving and surrendering company to request information on the status of this transfer or exchange by phone or in writing. By signing below, I represent that the responses herein are, to the best of my knowledge, accurate and I have read the DISCLOSURES / ACKNOWLEDGMENTS section on page 2 the ACORD 1035 Exchange / Rollover / Transfer Form.					
The Internal Revenue Service does required to avoid backup withhold		s of this document other than the certification	ns		
Signature Guarantee (if applicable)	Signature Guarantee (if applicable)				
	Signature of Owner / Plan Administrator / Trustee / Custodian	Date (mm/dd/yyyy)			
Signature of Joint Owner / Co-Trustee (if applicable)  Date (mm/dd/yyyy)					
	Signature of Insured / Annuitant (if applicable)	Date (mm/dd/yyyy)			
Signature of insured / Affiditions (if applicable)  Date (mm/do/yyyy)					
Signature of Irrevocable Beneficiary (if applicable)  Date (mm/dd/yyyy)					
Signature of Spouse (Required in AZ, CA, ID, LA, NV, NM, TX, WA and WI only) (if applicable)  Date (mm/dd/yyyy)					
FOR TSA/403(b) TO TSA/403(b) TRANSFERS/EXCHANGES ONLY - EMPLOYER/THIRD PARTY ADMINISTRATOR SIGNATURE					
By signing below, I am acknowledging that I have reviewed this direct transfer / rollover / exchange request and that it is authorized and approved under the employer's 403(b) plan under IRC section 403(b) and the final regulations.					
a) I am authorizing this transfer / rollover request.					
b) I am confirming that there is an information sharing agreement in place with the receiving company under the IRC section 403(b) regulations.					
c) All information provided on this form is accurate.					
Print Name of Employer or Third Party Administrator  Title of Employer or Third Party Administrator					
Signature of Employer or Third Party Adm	ninistrator	Date (mm/dd/yyyy)			

#### 6. SIGNATURES (For the receiving company's use only)

#### 6 A. ACCEPTANCE OF 1035 EXCHANGE / TRUSTEE TRANSFER / DIRECT ROLLOVER

By signature of an authorized officer below, the receiving company accepts assignment of all (or a portion of the assets if this is a partial exchange) to the above contract for purposes of complying with the client's intention of effecting a nontaxable exchange under IRC Section 1035. Please issue payment payable to the receiving company, the owner of the contract, for the full cash surrender value of the contract or a portion if it is a partial surrender.

For Trustee Transfers / Direct Rollovers from Tax-Qualified Accounts / Contracts:	
The receiving company will deposit funds received into a:	

#### 6 B. eCONSENT AND ACKNOWLEDGMENT (Applies to eSignature Transactions Only)

To the extent the receiving company has obtained electronic signatures to effectuate the transaction(s) set forth in this form, the receiving company, by the below signature of its authorized officer, hereby represents and warrants to the surrendering company that:

- a. This form has been completed using an electronic system that has an integrated e-signature capability;
- b. All consumer consents have been obtained under, and this form was signed using an e-signature process that complies with, all applicable federal and state e-signature requirements, including, but not limited to, the federal E-Sign Act, and the applicable states' versions of the Uniform Electronic Transactions Act;
- C. It shall indemnify, defend, and hold harmless the surrendering company from and against all losses, costs, liabilities, claims, threatened claims, demands, suits, obligations, expenses, judgments, and damages, including, but not limited to, reasonable attorneys' fees and witness' fees, arising from or related to: (i) the receiving company's breach of the warranties set forth in (a) and/or (b) above; (ii) a liability imposed by any municipal, state or federal governmental body relating to the receiving company's violation of an applicable e-signature law or regulation; and (iii) the receiving company's gross negligence, willful misconduct or illegal acts, including, but not limited to, claims that the e-signatures obtained on this form by the receiving company are invalid or were improperly obtained; provided, however, that (x) the surrendering company shall provide the receiving company of prompt written notice of any claim that the surrendering company believes falls within this scope of this paragraph, and (y) the surrendering company shall not settle any claim that adversely affects any rights of the receiving company without the receiving company's prior written consent; and
- d. It shall promptly provide to the surrendering company and/or its designee(s) any and all information in the receiving company's possession (or within the receiving company's reasonable control) as may be necessary to evidence the validity of the electronic signatures that were obtained to effectuate the transaction(s) set forth in this form.

Print Name of Authorized Officer Title of Au		orized Officer	
Signature of Authorized Officer (if applicable - may not be required if LOA is used)		Date (mm/dd/yyyy)	