# Additional premium acknowledgment



Mail to: P.O. Box 9261, Des Moines, IA 50306-9261 Overnight: 8300 Mills Civic Pkwy, West Des Moines, IA 50266-3833

#### Instructions

I am using this form to:

Establish/Change/Cancel automatic premium payments from my account at my financial institution into my Midland National<sup>®</sup> Life Insurance Company Contract – Complete Sections 1, 2, and 4.

Apply a one-time premium payment to my Midland National Contract – Complete Sections 1, 3, and 4.

## 1. Contract information

Please complete and submit a copy of the Certification of Trust Agreement, if this policy is owned by a Trust.

## Contract number

Owner's name (first, middle initial, last)		
Joint Owner's name (first, middle initial, last) – If applicable		
Non-Natural Owner – If applicable		
Street address		
State	ZIP	Phone number
	State	State ZIP

## 2. Automatic premium payment information

# I would like to:

Establish an Automated Clearing House (ACH) authorization for automatic deposits from my account at my financial institution into my Midland National Annuity Contract.

Change the existing Automatic Premium Payment program.

**Cancel** the existing Automatic Premium Payment program – check here and complete sections 1 & 4.

Add my bank information so it is on file for future premiums. I do not wish to have funds drafted at this time.

#### Systematic authorization

I authorize Midland National Life Insurance Company to automatically withdraw periodic payments from my account (listed below) and credit these periodic payments to my Annuity Contract. Please complete the financial institution information below. This authorization will remain in effect until Midland National and the financial institution have each received written notification of its termination in such time and in such manner as to afford Midland National and the financial institution a reasonable opportunity to act on the request.

Name(s) on account (first, middle initial, last)			Type of account: Checking Savings	
Financial institution name			Financial institution phone number	
Routing number (ABA #)		Account number		
Please debit (payment amount) \$ (	(minimum of	\$100 required)	Starting* (mm/dd/yyyy)	
Please withdraw in the following frequency:	Quarterly	Semi-Annually	Annually	
* Please select a day of the month between the 1st and the 28th. If the date is not complete or an invalid date is chosen, the form will be considered "Not in Good Order. If the elected start date has already passed, the first payment will be processed one modal frequency from the elected start date. If the elected date is not a business day the payment will be processed on the next available business day.				
			E VALUE INCLUDING LOSS OF PRINCIPAL, NO BANK/ DT INSURED BY ANY FEDERAL GOVERNMENT AGENCY.	

# 3. One-time premium payment

All personal contributions for a previous tax year must be postmarked by April 15th. Please include the Midland National Contract number in the memo section of your check.

## Send this completed form with check payable to: Midland National FBO: (Owner's name)

Regular/First class mail			
Midland National Life Insurance Company			
P.O. Box 9261			
Des Moines, IA 50306-9261			

Overnight mail Midland National Life Insurance Company 8300 Mills Civic Pkwy West Des Moines, IA 50266-3833

# Contribution type (please select one):

Personal IRA contribution

- If you are under 50 years of age at the end of the 2024/2025 tax year: The maximum contribution you can make to a Traditional or Roth IRA is the lesser of \$7,000 or the amount of your taxable compensation for 2024/2025. This limit can be split between a Traditional and a Roth IRA, but the combined limit is \$7,000. The maximum contribution to a Roth IRA and the maximum deductible contribution to a Traditional IRA may be reduced depending upon your Modified Adjusted Gross Income (Modified AGI).
- If you are 50 years of age or older before the end of the 2024/2025 tax year: The maximum contribution that can be made to a Traditional or Roth IRA is the lesser of \$8,000 or the amount of your taxable compensation for 2024/2025. This limit can be split between a Traditional and a Roth IRA, but the combined limit is \$8,000. The maximum contribution to a Roth IRA and the maximum deductible contribution to a Traditional IRA may be reduced depending upon your Modified Adjusted Gross Income (Modified AGI).
- SEP IRA contributions: The maximum contribution you can make is the lesser of: 1) 25% of compensation, or 2) \$70,000 (\$69,000 for 2024).
- Midland National does not give tax, investment, or legal advice. Please consult with and rely upon your own tax, investment, and legal professional(s).

Contribution year and amount:	Year*	Amount \$	Year*	Amount \$
······································				

\* If no tax year is indicated on your check or this form, it will be reported as a current tax year contribution.

Rollover contribution: 60-Day Rollover - Qualifying Rollover processed less than sixty (60) days ago. These funds are being deposited within the
allowable 1 rollover per 12-month period.

Contribution amount (minimum of \$1,000 required): \$	Account type:	IRA	Roth IRA*	SEP-IRA**
---	---------------	-----	-----------	-----------

\* Roth IRA: If transfer, provide original conversion/establishment date and amount:

\*\* SEP-IRA: Employer name: \_

Unplanned premium: Payments received after the issue date of the Contract. Premium amount (minimum of \$1,000 required): \$\_\_\_\_\_

#### 4. Signatures

If section 2 is completed, the Contract Owner must sign. If section 3 is completed, the Contract Owner or Agent/Representative must sign.

Owner's signature	Date signed (mm/dd/yyyy)
Joint Owner's signature	Date signed (mm/dd/yyyy)
Agent/Registered Representative's signature	Date signed (mm/dd/yyyy)

Variable annuity products are issued by Midland National® Life Insurance Company distributed by Sammons Financial Network®, LLC., member FINRA.

4244066 23213R