Advisory fee request form

CLEAR ALL

MIDLAND NATIONAL®

Please submit request via email to RIAService@sfgmembers.com

P.O. Box 10385, Des Moines, IA 50306-0385

This form is used to request that your registered investment advisory fee be distributed ("advisory fee disbursement") from your client's Annuity Contract ("Contract") issued by Midland National® Life Insurance Company ("Midland National").

Prior to processing any request for an advisory fee distribution, Midland National must have a completed Client advisor authorization form providing authorization from your client to process the advisory fee distribution from their Contract.

Any advisory fees distributions will be processed as a partial surrender from the Contract, are not assessed by Midland National, and are separate from and in addition to any of Midland National's Contract fees or expenses. Please refer to the Contract to determine any impact of advisory fee distribution may have on the Contract.

Submission date: ______________________ (mm/dd/yyyy)

General information (all fields required)

Owner's name (first, middle initial, last) If joint Owners, include both names	Annuity Contract number

RIA firm (CRD) number	Registered Investment Advisor's (RIA) firm name

Advisory fee will be paid to the RIA firm using the bank account provided on the Advisory profile form. If no account detail was provided, fee will be paid via physical check mailed to the RIA firm's address of record.

One-time disbursement for advisory fees (complete this section for a one-time advisory fee withdrawal)

Dollar amount $________________

Systematic advisory fee disbursements

Complete this section to setup a systematic advisory fee disbursement. Selections you make below replace any previous systematic advisory fee disbursement instructions on file.

Disbursement option (select one)**:**

☐ Annual percent ______%

**Annual maximum varies by product. See your Contract for details.*

☐ Dollar amount $____________

** The dollar amount indicated will be deducted each frequency.*

Requested start date:

- Requested start date ____________(mm/dd/yyyy) If requested start date occurs before contract is issued, fee will be set up for the next occurrence of the date and frequency selected.
- If no date is provided, fee will begin on the first available date following contract issue (cannot be 29, 30, or 31).

Frequency:

☐ Monthly ☐ Quarterly ☐ Semi-annual ☐ Annual

Acknowledgments By submitting this form, the RIA represents, acknowledges, and understands the following:

- Midland National has no responsibility to review the propriety of reasonableness of any request for payment of advisory fees and will not undertake such review.
- Any one-time advisory fee disbursement instructions received after an event that terminates the RIA's authority to request advisory fee withdrawals (e.g., death, change of ownership, full surrender, annuitization, etc) will not be processed.
- It is the firm's responsibility to notify Midland National in order to discontinue an existing systematic advisory fee disbursement in the event that the relationship with the client who owns the Contract is terminated.

Print name - authorized person

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