

Thrivent Funds Dividends/Capital Gains Distribution

Section 1 - General Information			
Name of owner (print first, middle, and last name)	Date o	Date of birth	
Name of joint owner (print first, middle, and last name)	Date of birth		
Existing Thrivent Funds account number(s)			
Section 2 - Distribution Options			
Dividends/Capital gains distributions are not available on 403(b) accounts or Coverde	II Education Sa	avings Accounts.	
Dividends: Pay Reinvest			
Capital gains: Pay Reinvest			
Pay to: Registered account address			
Other Thrivent Funds account			
Direct Deposit to a bank - If Direct Deposit is selected, is bank information	n already on file	e?	
Yes. Name of bank -			
No. Complete Section 3 - Bank Information			
Other payee			
Name of other payee (print first, middle, and last name)	Contract/Account number		
For the benefit of (print first, middle, and last name)			
Address		City	
	State	ZIP code	
Section 3 - Bank Information			
Name of bank account owner			
Name of joint bank account owner			
Name of bank			
Type of account Routing number Checking Savings	Account number		

I authorize Thrivent Financial Investor Services Inc. to: 1) make electronic deposits, withdrawals and corrections to my bank account that comply with U.S. law; 2) act on this authorization until I revoke it by contacting Thrivent Funds; 3) apply this authorization to any future bank accounts I may designate; 4) make administrative changes to this authorization which I request such as date or amount changes; 5) release any and all information related to this authorization to the third party account/contract owner, and 6) act upon electronic deposit instructions I provide to my representative.

Section	4 -	∆dditiona l	Information
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Section 5 - Agreements and Signatures I certify that I have received, read, and agree to the Disclosures at the end of this form and any other disclosures contained in this form. Signature of primary owner/conservator/guardian/custodian/trustee/authorized person Date signed X Signature of joint owner/additional conservator/additional trustee/additional authorized person Date signed X Signature of joint owner/additional conservator/additional trustee/additional authorized person Date signed X Medallion Signature Guarantee or Notary Seal

Mail completed form to:

Regular Mail: Thrivent Funds PO Box 219348 Kansas City, MO 64121-9348 Express Mail: Thrivent Funds 801 Pennsylvania Ave Suite 219348 Kansas City, MO 64105 **Fax:** 866-278-8363

Phone: 800-847-4836

Disclosures

Notification for Federal and State Income Tax Withholding on IRA or 403(b)

You are liable for federal and state income tax, where applicable, on the taxable portion of your distribution even if you elect no withholding. Except where prohibited by federal and/or state law, you can elect: 1) no withholding; 2) withholding at the minimum federal and state rates; or 3) withholding at a rate higher than the minimum rates. You may be subject to tax penalties under the estimated tax payment rules if your payments of estimated tax and withholding, if any, are not adequate. Check with your tax advisor to determine if withholding is necessary.

Non-Retirement Distributions - We will not withhold for federal or state taxes from distributions on these account types.

Roth Distributions - Unless otherwise indicated on this form, we will not automatically withhold for distributions from a Roth IRA.

Mandatory Tax - Distributions from a 403(b) or qualified retirement plan that are eligible for rollover and are not directly rolled over are subject to mandatory 20% federal tax withholding. Refer to the 403(b) and Qualified Plan Distribution Disclosure (9972) for more information. If your distribution is subject to mandatory 20% federal tax withholding, your distribution may also be subject to mandatory state tax withholding.

We are unable to withhold for federal and state taxes - By electing to have your dividends and/or capital gains distributed, you are electing no withholding. Some states will require state withholding even if you elect no withholding.

If you wish to elect withholding, request to have your dividends and capital gains reinvested and establish a systematic distribution.

Validation

For your protection, validation of your identity is requested.

Redemption/disbursement transactions:

- a. Value of \$500,000 or more will require a Medallion Signature Guarantee.
- b. Greater than \$99,999 and up to \$499,999 will require one of the following forms of validations:
 - · Your notarized signature
 - · An original Medallion Signature Guarantee; or
 - · An attestation of your signature by your Thrivent Financial financial representative
- c. Greater than \$9,999, less than \$99,999, and the address of record changed within the prior 15 days will require an attestation of your signature by your Thrivent Financial financial representative, your notarized signature or an original Medallion Signature Guarantee.
- d. Greater than \$9,999, less than \$99,999, and the bank information provided has been on record for less than 15 days will require an attestation of your signature by your Thrivent Financial financial representative, your notarized signature or an original Medallion Signature Guarantee.
- e. Of any dollar amount requested to send proceeds to an address other than the one listed on your account, and/or request to make proceeds payable to someone other than the account owner require one of the following forms of validation;
 - · Your notarized signature
 - · An original Medallion Signature Guarantee; or
 - · An attestation of your signature by your Thrivent Financial financial representative

A Notary Public or Medallion Signature Guarantee may generally be obtained at any national bank.