



Thrivent Financial for Lutherans  
thrivent.com • 800-847-4836

# Legal Name Change Verification

**Purpose:** Use this form to notify Thrivent Financial that your name has changed because of marriage, divorce, or another reason.

Note: Before completing this form, please ensure that you have filed an updated Form SS-5 with the Social Security Administration.

Change name with SSA ([SSA.gov/personal-record/change-name](https://ssa.gov/personal-record/change-name))

Application for Social Security Card ([ssa.gov/forms/ss-5.pdf](https://ssa.gov/forms/ss-5.pdf))

**Fields marked with an (\*) asterisk are required.**

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## Section 1 - Supporting Document(s)

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Check the appropriate box below to indicate which supporting document(s) you are providing. Please provide copies only.

**\*Check at least one box:**

- Marriage certificate.
- Divorce decree referencing the name change.
- Court order referencing the name change.
- An updated social security card reflecting the name that has changed. See Application for Social Security Card ([ssa.gov/forms/ss-5.pdf](https://ssa.gov/forms/ss-5.pdf)) for further information.

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## Section 2 - Account Holder Information

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\*Thrivent ID: \_\_\_\_\_

\*Social Security Number: \_\_\_\_\_

\*Print Previous Legal Name:

Prefix (optional): \_\_\_\_\_

\*First: \_\_\_\_\_

Middle (optional): \_\_\_\_\_

\*Last: \_\_\_\_\_

Suffix (i.e., Jr., Sr., III, etc. if applicable): \_\_\_\_\_

\*Print New Legal Name:

Prefix (optional): \_\_\_\_\_

\*First: \_\_\_\_\_

Middle (optional): \_\_\_\_\_

\*Last: \_\_\_\_\_

Suffix (i.e., Jr., Sr., III, etc. if applicable): \_\_\_\_\_

Greeting Name (the name a client prefers to be greeted with, if different from their legal name):

\_\_\_\_\_



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**Section 3 - Disclosures & Signature**

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The name change will apply to all your accounts/contracts under your client ID, at Thrivent Financial. As used below, the word "I" refers to the applicant who is the taxpayer.

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number, 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 (IRS) that I am subject to backup withholding because of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and the FATCA code(s) on this form (if any) indicating that I am exempt from FATCA reporting is correct.

If you are signing in any capacity on behalf of the client, a title (attorney-in-fact, conservator trustee, authorized person, etc.) must be provided.

\*Signature: \_\_\_\_\_ Date \_\_\_\_\_

Title: \_\_\_\_\_

Mail completed form to:

Thrivent  
PO Box 8075  
Appleton, WI 54912-8075

FAX:  
800-225-2264