

Thrivent Funds Beneficiary Designation Request

Section 1 - Account Owner General Information								
First Name		M.I.	Last Name	Last Name				
All funds associate provided.	d with the below fur	nd and account nu	mber(s) will be upda	ted with the benefi	ciary information			
By checking this box, the beneficiary designation will only be applied to the specific fund and account number(s) outlined below. The designation will not be applied to all funds within the referenced account.								
Fund/Account number(s)								
Section 2 - Transfer on Death Beneficiary Designation								
Fransfer on Death (TOD) is not available on accounts registered as Trusts, Corporations, Estates, Tenants in Common, Custodial accounts, or Community Property without rights of survivorship.								
Provide all informa	tion for primary and o	contingent beneficia	ries.					
 In order to aid available. 	in locating your bene	ficiary upon your de	ath, provide your ben	eficiary's Social Sec	urity number, if			
	• •	,	ter each name/group, e beneficiary rights tra	, ,	will be used. When dants of the deceased			

- beneficiary (a person who is in direct line to an ancestor), such as child, grandchild, great grandchild, and on forever.

 If a beneficiary is a trust, provide the trust name and date the trust was established.
- · All account owners must sign. By signing you are agreeing to all terms of this form.
- If additional beneficiary designations are needed, submit a letter of instruction with this form signed by the account owner(s).

Primary beneficiary

Print first name, middle initial, last name, or name of trust/entity	LDPS	Date of birth or Date of trust	Social Security number or tax identification number (TIN)	Relationship to shareholder	Percentage must equal 100%. If omitted, equal distribution will apply.
				Spouse Entity Non-Spouse	%
				Spouse Entity Non-Spouse	%
				Spouse Entity Non-Spouse	%
				Spouse Entity Non-Spouse	%

Contingent beneficiaries

Print first name, middle initial, last name, or name of trust/entity	LDPS	Date of birth or Date of trust	Social Security number or tax identification number (TIN)	Relationship to		Percentage must equal 100%. If omitted, equal distribution will apply.
				Spouse Non-Spou	☐ Entity	%
				Spouse Non-Spou	☐ Entity	%
				Spouse Non-Spou	☐ Entity	%
				Spouse Non-Spou	☐ Entity	%
Section 3 - Agreements and Signature	s					
By signing this form, I certify that I have the Additional Provisions at the end of the		gree to the Be	neficiary Designatio	n Payment Pro	ovisions and	d if applicable
Signature of owner					Date sign	ned
X						
Signature of joint owner					Date sign	ned
X						
Signature of joint owner					Date sign	ned
X						
Signature of joint owner					Date sign	ned
X Signature of spouse					Date sign	ned
X						
Mail completed form to:						
Regular Mail: Thrivent Funds	Express In Thrivent F		Fax: 866-278-	8363	Phone: 800-847-48	836

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

Disclosures

Transfer on Death Beneficiary Designation

Beneficiary Designation and Payment Provisions

This beneficiary designation is effective and revokes all previous beneficiary designations upon: 1) successful completion of the electronic signature process online, or 2) submission to and approval by the Processing Center. If more than one beneficiary designation is received, the designation with the latest date will be honored. If you designate one or more beneficiaries for your account(s), you have the right to change or revoke the beneficiary designation at any time in the future.

Beneficiary designation which included the terms "or" or "and/or" will be administered as if the conjunction "and" was used.

If two or more persons are named as primary beneficiaries, the death proceeds will be paid equally to the survivors or survivor, unless otherwise directed. The same shall be true for contingent beneficiaries if no primary beneficiaries survive. If none of the beneficiaries survive, proceeds shall be paid to the owner's estate.

When the term Lineal Descendant Per Stirpes (LDPS) is used; upon the death of a named beneficiary, the beneficiary rights transfer to the lineal descendants of the deceased beneficiary. If a named beneficiary dies without leaving a lineal descendant, that beneficiary's share of the death proceeds will be distributed among the remaining named beneficiaries in proportionate shares. Thrivent accepts the LDPS designation when the individual named is related to the benefit member by blood, marriage, or legal adoption.

Children, sons, daughters, brothers, sisters, half-brothers, half-sisters, grandchildren, great-grandchildren, granddaughters and grandsons are the only acceptable group designations. All group designations listed which are named in the singular (e. g. child, son, daughter, brother, sister, half-brother, half-sister, grandchild, granddaughter, grandson) will include all members of that group at time of the account owners death. Group designations do not include step-children unless legally adopted.

The words children, issue, grandchildren and children of a deceased child shall include adopted children, adopted issue, adopted grandchildren and adopted children of a deceased child unless otherwise specified.

The interest of any beneficiary is subject to any collateral assignment of the account.

If you have ever signed a marital property agreement with your spouse or former spouse or lived in a community property state while married, your spouse or former spouse may have rights to the death proceeds of your account even if you choose not to name your spouse as beneficiary. Thrivent is not responsible for determining whether your account or death proceeds are subject to community property laws or a marital property agreement or whether you should obtain spousal consent when naming your beneficiary. Thrivent will not be liable for acting in accordance with the designation on file unless we have received a properly documented community property or marital property agreement claim prior to paying death proceeds. By signing this form, I certify that I have read this consent and determined it is not necessary to have my spouse sign and hold Thrivent harmless.

Additional Provisions and Instructions

As permitted under the Minnesota Uniform Transfer on Death Security Registration Act (MN.Stat. 524.6-301 - 524.6-311), shareholders in the Funds may choose to have their shares transferred upon death directly to their designated beneficiaries. If you choose to name one or more beneficiaries, all shares in the account(s), including those purchased in the future, will be transferred directly tot he designated beneficiaries upon your death.

I direct the transfer agent to transfer the shares in such account(s) and any unpaid dividends and capital gains payments, in accordance with this direction and the provision of the Minnesota Uniform Transfer on Death Security Registration Act. If the account(s) established is/are joint tenancy or community property, no transfer of ownership of shares under this beneficiary designation will occur until the death of all owners of the account(s). By designating a beneficiary on a joint or community property account, you are electing to establish a right of survivorship for all multiple owners of the account(s).

I acknowledge that the ability to register a securities account in TOD form is created by state law and not all states have enacted such laws. I understand that I should consult a legal tax advisor before electing or revoking the TOD account designation as I deem appropriate.