

Thrivent Funds Nonqualified Account Transfer

Section 1 - General Information					
Name of owner (print first, middle, and last name)				Date of birth	
Name of joint owner (print first mid	dle and lest name)		Data	f hirth	
Name of joint owner (print first, middle, and last name)				Date of birth	
Existing Thrivent Funds account nu	mber(s)				
Section 2 - Fund Selection					
Approximate amount of the transfer	·-\$				
I instruct Thrivent Funds to invest the Section 1 as follows:	ne transferred proceeds in	to the existing Thrivent Funds a	account	number referenced in	
☐ In accordance with the fund sele	ection provided in the Thri	vent Funds Application attache	d to this	form.	
As directed in the table below:					
Fund Number	Percent	Fund Number		Percent	
	%			%	
	%			%	
	%			%	
	%			%	
	%			%	
		Total perc	ent mu	st equal <u>100 %</u>	
Section 3 - Transfer Instructions	to Releasing Company				
I instruct the releasing company to	execute a:				
Full liquidation					
Partial liquidation of \$					
Linetweet the valencing commons, to					
I instruct the releasing company to In-kind shares (selecting this bo Thrivent Funds)		kind of Thrivent Funds shares h	neld at th	ne releasing company to	
☐ Immediately					
Upon maturity date:/	/				
month Section 4. Current Plan Informat	day year				
Section 4 - Current Plan Information				4	
Name of releasing company			Curren	t account number	
Overnight address of releasing company		City	State	ZIP code	
Name of account owner(s)			Phone of releasing company		

Indicate each account number and fund being transferred from. Provide a copy of your most recent statement. **Account Number Fund Number, CUSIP Number or Ticker** Section 5 - Agreements and Signatures I authorize the liquidation or transfer of in-kind assets noted in Section 3 that your company holds for me. I agree to the Disclosures at the end of this form and any other disclosures contained in this form. Signature of owner Date signed Signature of joint owner/trustee Date signed X Your resigning trustee or custodian may require your signature to be guaranteed. Call that institution for requirements. A medallion signature guarantee is not the same as a notarized signature. You must obtain a medallion signature guarantee from a commercial bank, trust company, savings association, credit union, or a registered broker/dealer that participates in the medallion signature guarantee program. The guarantee must state the words "Medallion Signature Guarantee Stamp." Medallion Signature Guarantee or Notary Seal Medallion Signature Guarantee or Notary Seal

Section 6 - Instructions to Releasing Company

Physical Checks:

- Make the check(s) payable to Thrivent Funds
- Include the Thrivent Funds account number and FBO information
- Send the check(s) to the address listed below
- · Note: Certificates are not accepted

Federal Wire:

State Street Corp. 225 Franklin Street Boston, MA 02101 ABA #011000028 Account #4195-538-6

Credit:

Thrivent Financial Investor Services Inc. as Agent for the benefit of Thrivent Mutual Funds

Further Credit:

[Name of the Fund] [Shareholder Account Number] [Shareholder Registration/Name]

Mail completed form to:

Regular Mail: **Express Mail:** Phone: Fax: Thrivent Funds Thrivent Funds 866-278-8363 800-847-4836 PO Box 219348 801 Pennsylvania Ave

Kansas City, MO 64121-9348 Suite 219348

Kansas City, MO 64105

Disclosures

Sales of nonqualified assets may be a taxable event. Thrivent Funds recommends that you consult with a professional tax advisor regarding any questions concerning distributions form your nonqualified accounts.

Cost Basis Information

If your transaction will open a new fund, and you have not previously informed us of an election method that can be applied to new funds, the default method of Average Cost will be placed on the new fund.

Thrivent Funds cannot offer tax advice. You should consult with a qualified tax advisor to determine the method that makes the most sense for you, or if you have tax questions regarding your account.