

Roth Qualified Retirement Plan (Roth QRP)

## Thrivent Funds Inherited IRA/Roth IRA Funding Request

Direct Rollover

Use this form to request assets from another custodian/financial institution into your Thrivent Funds Inherited IRA/Roth IRA **Section 1 - General Information** Name of IRA owner Social Security number Phone Current account/contract number Name of fund Name of current custodian/financial institution Address of current custodian/financial institution City ZIP code State Phone Section 2 - Original Owner/Plan Participant Provide the information for the first decedent who was the original owner. Name of deceased Date of birth of deceased Date of death **Section 3 - Transaction Information** I am applying to move the (original or inherited) assets (select the applicable transaction): To Inherited To Inherited From **Traditional IRA Roth IRA** Traditional, SEP, SARSEP, or SIMPLE IRA (after two years) Transfer **Roth IRA** Transfer Original start date -403(b) ☐ Direct Rollover Qualified Rollover Contribution (QRC) Qualified Retirement Plan (QRP) (e.g. pension, Profit ☐ Direct Rollover ☐ QRC Sharing, 401(k), etc.) and 457(b) Roth 403(b) Direct Rollover

Section 4 - Required Minimum Distribution	n (RMD) Prior to Money Movement			
Decedent died prior to Required Beginnin	g Date (RBD) or RMD is not applicable.			
☐ Distribute the decedent's full RMD amoun	t before completing my request.			
☐ The last RMD for the decedent has been	taken from the funding fund/account or from and	other source		
Section 5 - Distribution Instructions to Cu	rrent Custodian/Financial Institution			
Redeem/Liquidate: entire value	partial value - \$	or	%	
Total estimated value - \$	i			
Redeem/Liquidate: immediately	at maturity date			
Distribute any decedent and beneficiary F	RMD that was not previously paid out prior to re	leasing the f	unds (if applicat	ole).
Section 6 - Intended Destination of Dollars	· · · · · · · · · · · · · · · · · · ·			
Fund/Account Number	Mutual Fund Name	Amount or Percent (percentage total must equal 100)		
		\$	or	%
		\$	or	%
		\$	or	%
		\$	or	%
		\$	or	%
Section 7 - Notification for Federal and Sta distribution options)	ate Income Tax Withholding (for distributing	company a	nd/or ongoing	
If no box is checked, 10% federal income state of residence.	tax will be withheld and state withholding wi	ill occur as	required by you	ur
Federal Tax Withholding:				
Do not withhold federal income tax				
Withhold federal income tax amount of 10	%			
Other federal withholding%				
For more details on federal withholding, p enough or underpaying estimated taxes n	lease consult IRS Form W-4R, available on the nay lead to IRS penalties.	IRS website	:. Failure to with	hold
State Tax Withholding:				
Do not withhold state income tax				
Other state withholding %				

Section 8 - Employer Certification (complete if funds are co	oming from a 403(b) only)	
By signing below I certify that I am an authorized representative beneficiary is requesting a rollover/qualified rollover contribution assets from the current custodian/financial institution to Thriver complete a rollover/qualified rollover contribution under the term in Section 4 complies with the terms of the plan.	n of the (i) decedent's 403(b) assets on t Financial and verify that the benefici	r (ii) inherited 403(b) ary is entitled to
Name of employer		
Name of authorized representative of employer		
Title of authorized representative of employer		
Signature of authorized representative of employer		Date signed
X		
Section 9 - Agreements and Signatures		
Important - Your current custodian/financial institution may recrequirements. Select the following if it applies:		
A signature guarantee is required by the current custodian/f the Registered Representative Attestation (form 26731) to h guarantee (form 26731 not applicable to shares invested this	nave the Operations Center affix a Med	
You know or strongly suspect that an ink original signature i this form and complete the signature section.	is required by the current custodian/fin	ancial institution. Print
Client will provide company specific paperwork, in place of t current custodian/financial institution.	his transfer/direct rollover/conversion	request form, to the
Authorization to Release Information I authorize Thrivent Financial to request information by telepho receive information necessary to ensure proper tax reporting. To following the date the account/contract is terminated but not to the right to receive a copy of this authorization and revoke this Thrivent Financial.	This authorization will expire and be co exceed one (1) year from the date sig	nsidered invalid 30 days ned. I understand I have
I irrevocably designate the funds distributed to be applied as in	dicated (direct rollover/transfer/qualifie	ed rollover contribution).
I acknowledge that distributions made as RMD will result in the and it cannot be reversed. Such taxable amount will be subject		
Signature of owner/controller/guardian	Date signed	
x		
Title (if applicable)		
Signature of owner/controller/guardian		Date signed
X		
Title (if applicable)		
Acceptance of Rollover/Transfer/Qualified Rollover Contribution by Thrivent Financial: Authorized signature of corporate employee	Medallion Signature Guarantee Seal	or Notary Seal
C/usm D. Starling		

### **Section 10 - 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

Thrivent Funds PO Box 219348 Kansas City, MO 64121-9348

### **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]

### Inherited IRA/Roth IRA Beneficiary Option Information

### Section 11 - Transaction Requested - Ongoing Distribution Options Inherited Asset Type (select one): 1. First generation - I am the beneficiary inheriting the following assets that the decedent owned. The decedent was the original owner of a traditional IRA, SEP, SARSEP, SIMPLE IRA, Roth IRA, 403(b), Qualified Retirement Plan (QRP), or 457(b). Relationship to deceased: Spouse Non-Spouse Entity 2. Subsequent generation - I am the beneficiary inheriting the following assets that the decedent owned. The decedent was the owner of an inherited traditional IRA, inherited SEP, inherited SARSEP, inherited SIMPLE IRA, inherited Roth IRA, inherited 403(b), inherited Qualified Retirement Plan (QRP), or inherited 457(b). **First Generation Beneficiary** Name Date of birth Date of death Relationship to original owner Spouse ☐ Non-Spouse Complete the fields below if you are a third generation beneficiary (or beyond). If the fields below are not provided and you are a third generation beneficiary (or beyond), your RMD payout may be inaccurate. **Most Recent Decedent** Name Date of death As a third generation beneficiary (or beyond), provide the fields below only if the relationship to the first generation beneficiary to the original owner was spouse. **Second Generation Beneficiary** Name Date of birth **Funding Contract/Account Information** Prior year end value of current fund/account. Your portion - \$

Distribution Options							
Distribution Options for date of death	n 12/31/2019 or prior (select one):						
☐ Establish RMD payout - Complete Method of Distribution section							
Five year deferral - systematic withd	rawal amount - \$	- Complete Meth	nod of Distribution section				
Postpone RMD - Do not pay payout	RMD until further notice, I am satis	sfying it elsewhere.					
Distribution Options for date of death	n 01/01/2020 and after:						
Your distribution options are specific to relationship below and select your distri		To identify the options	available to you, find your				
Spouse, minor child of decedent, any than the deceased:	one disabled, anyone chronical	ly ill, and anyone less	that 10 years younger				
<ul> <li>Establish RMD payout based on the longer of either my life expectancy or the decedent's life expectancy - Complete Method of Distribution section</li> <li>Postpone RMD - Do not pay payout RMD until further notice, I am satisfying it elsewhere.</li> </ul>							
Other individual: (for example, adult of Establish RMD payout based on the Method of Distribution section  *Accounts are required to be depleted Postpone RMD - Do not pay payout	longer of either my life expectancy and within 10 years after the date of	or the decedent's life of death of the original ow					
Non individual beneficiary: (for example)	ole, entity or Trust)						
Five year deferral - systematic withdrawal amount - \$  - Complete Method of Distribution section							
Postpone RMD - Do not pay payout RMD until further notice, I am satisfying it elsewhere.							
Section 12 - Method of Distribution							
Receive payment by systematic with	drawal - Complete if electing payoเ	ut in Section 11					
I elect to start the ongoing deduction	ns on - / / /						
month day 1-28 year  Select a withdrawal date from 1 - 28. (If 29, 30, or 31 is chosen, 28 will be used.)							
	•	i be useu.)					
Withdrawal month(s) - (select all tha		<b>□ ^ </b> □ <b>^ </b> □	O-4				
☐ Jan ☐ Feb ☐ Mar ☐ Apr If a date and/or month is not selecte	│ May ││ Jun ││ Jul │ ed, the redemption will default to th	l Aug     l Sep <u> </u> e 7th of each month.	Oct Nov Dec				
Receive payment by check to address of record							
Direct deposit to financial institution (EFT/ACH)							
Deposit into an <b>existing</b> nonqualified Thrivent Mutual Fund account number -							
Deposit into a <b>new</b> nonqualified Thrivent Mutual Fund account - Application required							
Section 13 - Agreements and Signatu	ires						
I authorize Thrivent Financial Investor S	Services Inc. to process the reques	ted transaction and I ce	rtify I have received, read,				
and agree to the Disclosures (pages 7-8 of this form) and any other disclosures contained in this form.							
Signature of owner/controller/guardian			Date signed				
X							
Title (if applicable)							
Mail completed form to:		_					
Regular Mail: Thrivent Funds	Express Mail: Thrivent Funds	<b>Fax:</b> 866-278-8363	<b>Phone:</b> 800-847-4836				
PO Box 219348	801 Pennsylvania Ave	000-270-0303	000-047-4030				
Kansas City, MO 64121-9348	Suite 219348 Kansas City, MO 64105						

### **Disclosures**

### **Transaction Information**

**Transfer** - This transaction is not taxable. It will not be reported to the IRS.

Direct Rollover - This transaction is not taxable, but will be reported to the IRS.

**Qualified Rollover Contribution (QRC)** - This transaction will be taxable. Complete the tax withholding election in Section 7. It will be reported to the IRS.

### Required Minimum Distribution (RMD) Prior to Money Movement

Transfers - RMD does not have to be paid out prior to the money movements.

Rollover/QRC - RMD must be paid out prior to money movement.

RMD for original or inherited qualified plans, 403(b)s and IRAs cannot be satisfied from other plan types (e.g. IRA RMD can only be satisfied from an IRA, etc.). RMD can be satisfied from another inherited contract or fund/account only from the same decedent and for the same beneficiary of the same plan type.

RMD for the most recent decedent, if applicable, must be satisfied by 12/31 the year of death.

### First Generation - You are the beneficiary of the original assets.

Beneficiary's RMD for QRP/403(b)/457(b) death proceeds - If, after the year of death, the beneficiary of QRP/403(b)/457(b) death proceeds does a direct rollover to an inherited traditional IRA or a QRC to an inherited Roth IRA, the beneficiary's RMD must be paid out prior to movement of the funds. If this applies to you, your RMD should be distributed to you in full prior to the movement of funds.

Required Beginning Date (RBD) - The Required Beginning Date (RBD) is the date when the first minimum amount must be paid out. For traditional IRAs, RBD is April 1 of the year after the attainment of age as defined in the Internal Revenue Code section 401(a)(9). For 403(b) and Qualified Retirement Plans, RBD is April 1 of the year after the attainment of age as defined in the Internal Revenue Code section 401(a)(9) or, if later and if the plan provides, termination of employment. If you are unsure if the plan contains a delay to retirement provision, work directly with the employer.

### **Intended Destination of Dollars**

**Mutual Funds Deposit Notice** - The funds requested on this form will be applied based on the allocation instructions on this form. A mutual fund application must also be completed if transferring to open a new mutual fund account.

For internal product-to-product transfers, rollovers, or qualified rollover contributions only - Unless otherwise indicated herein, I intend the requested transfer(s) from the distributing contract or fund/account(s) to become effective only if and when:

- Thrivent Financial (including its subsidiaries and affiliates) has approved the application of the amount(s) requested to the receiving fund/account(s), as described above, or, if not, as I subsequently agree to accept; and
- With respect to any receiving fund/account(s) that I have applied for, as described above, Thrivent Financial (including its subsidiaries and affiliates) has approved the issuance of the receiving contract or fund/account(s), as applied for or, if not, as I subsequently agree to accept.

# Notification for Federal and State Income Tax Withholding (for distributing company and/or ongoing distribution options)

**Notification of Withholding -** You are liable for federal and state income tax, where applicable, on the taxable portion of your distribution even if you elect no withholding. 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.

Form W-4R can be found on the IRS website https://www.irs.gov/pub/irs-pdf/fw4r.pdf

**State Withholding -** If withholding is indicated and the percentage is less than the state minimum, or if the percentage is not completed, we will withhold at your state's minimum rate.

**Residents of Connecticut** - submit the Form CT-W4P to indicate your withholding election with this form. If you do not submit Form CT-W4P with this form, Thrivent will use your most recently-submitted CT-W4P, if one is on file. If you do not submit Form CT-W4P with this form and you have not previously submitted Form CT-W4P, the maximum rate will be withheld. You have the right to revoke or change your withholding election at least 10 days prior to the effective date of the distribution.

### **Transaction Requested - Ongoing Distribution Options**

### Ongoing RMD Payment Election (receive an income)

The Required Beginning Date (RBD) is the date when the first minimum amount must be paid out (if applicable).

### **Existing Inherited Asset**

The election you made when the transferor financial institution (five- or ten-year rule, or life expectancy) is irrevocable and must apply to the transferred inherited IRA assets at Thrivent Financial. Thrivent Financial is relying on you to continue your original election and will not be responsible for any adverse tax consequences that result from you changing your election.

### **Funding Contract Information - Prior Value**

The calculation of your RMD is based on many factors, including the prior December 31 account balance. The calculation is accurate only to the extent the prior December 31 account balance that was provided to Thrivent Funds is accurate. Thrivent Funds will not be responsible for an inaccurate calculation that results from providing inaccurate account balance information.

### For a Date of Death on or before 12/31/2019:

### **Ongoing RMD Payment Election (RMD payout)**

- For traditional IRAs, RBD is April 1 of the year after the attainment of age as defined in the Internal Revenue Code section 401(a)(9).
- For 403(b) and Qualified Retirement Plans, RBD is April 1 of the year after the attainment of age age as defined in the Internal Revenue Code section 401(a)(9) or, if later and if the plan provides, termination of employment. If you are unsure if the plan contains a delay to retirement provision, work directly with the employer.
- For Roth IRAs, RBD is not applicable.

### **Five Year Deferral**

It is the shareholder's responsibility to monitor and deplete the funds by December 31 of the year containing the fifth anniversary of the original owner's death.

Only available if the original owner died prior to his/her Required Beginning Date (RBD). RBD can vary upon plan type. 403(b)s and other qualified plans may have a delay to retirement provision. RBD is not applicable to Roth IRAs.

### **First Generation**

If original owner:

Had a Roth IRA - RMD rules apply as if the original owner died prior to RBD.

Died prior to RBD - The five-year deferral is available for all beneficiary types if death is prior to RBD.

- As spouse, you do not have an RMD requirement until the deceased spouse would have reached the year
  he/she would have turned the age as defined in the Internal Revenue Code section 401(a)(9).
- As **non-spouse**, RMD is based on your own life expectancy.
- · As an entity, only the five-year deferral is an option.

### Died on/after RBD -

- As either **spouse** or **non-spouse** beneficiary, RMD is based on **the longer of** your own life expectancy **or** the original owner's remaining life expectancy.
- As an entity, RMD is based on the original owner's remaining life expectancy.

### **Subsequent Generation**

If the original owner **had a Roth IRA**, RMD rules apply as if the original owner **died prior** to RBD. If the first generation beneficiary chose the five year deferral, subsequent generations can only defer for the remaining period of the five year deferral.

When the first generation beneficiary was the original owner's spouse:

- If the first generation beneficiary was the original owner's spouse and the original owner died **prior to** the original owner's RBD, RMD for the second/subsequent generation beneficiary is based on the remaining life expectancy of the first generation beneficiary; however, if the first generation beneficiary also died **prior to** the year in which the original owner would have turned the age as defined in the Internal Revenue Code section 401(a)(9)., RMD for the second/subsequent generation beneficiary is based on the remaining life expectancy of the second generation beneficiary.
- If the first generation beneficiary was the original owner's spouse and the original owner died **on/after** the original owner's RBD, RMD for the second/subsequent generation is based on the longer of the remaining life expectancy of (i) the first generation beneficiary or (ii) the original owner's life expectancy.

When the first generation beneficiary was not the original owner's spouse:

- If the first generation beneficiary was not the original owner's spouse and the original owner died **prior to** the original owner's RBD, RMD for the second/subsequent generation beneficiary is based on the remaining life expectancy of the first generation beneficiary.
- If the first generation beneficiary was not the original owner's spouse and the original owner died **on/after** the original owner's RBD, RMD for the second/subsequent generation is based on the longer of the remaining life expectancy of (i) the first generation beneficiary or (ii) the original owner's life expectancy.

### For a Date of Death on or after 1/1/2020:

- For traditional IRAs, 403(b), Qualified Retirement Plans, and Roth IRAs, an annual required minimum distribution (RMD) is required. You may elect a one-time or periodic distribution (systematic withdrawal) equal to or greater than the RMD amount. All assets in the account must be paid out by the end of the 10th year following the date of death of the deceased account owner unless the IRA owner is an eligible designated beneficiary (EDB). An EDB is any of the following, relative to the deceased account owner and as of the date of the deceased account owner's death: spouse, minor child, disabled, chronically ill and any other beneficiary who is less than 10 years younger than the deceased account owner as of the date of death.
- An EDB who is a minor child as of the date of the deceased account owner's death will no longer be an EDB once the
  minor child beneficiary reaches the age of majority, and will be subject to the 10-year time period in which to deplete
  the IRA account assets. The 10-year time period begins on the date the minor child beneficiary reaches the age of
  majority.