

## Section 1 - General Information

Name of owner (print first, middle, and last name)

Social Security number or Tax Identification Number

Date of birth

Existing Thrivent Funds account number(s)

## Section 2 - Fund Selection for Destination of Assets

Approximate amount of the transfer - \$ \_\_\_\_\_

I instruct Thrivent Funds to invest the transferred proceeds into the existing Thrivent Funds account number referenced in Section 1 as follows:

- ☐ In accordance with the fund selection provided in the Thrivent Funds Application attached to this form.  
☐ As directed in the table below:

Fund Number	Percent	Fund Number	Percent
	%		%
	%		%
	%		%
	%		%

**Total percent must equal 100%**

## Section 3 - Transaction Information

Select which plan type the assets will be moving from/to.

From	To	Plan Type
<input type="checkbox"/>	<input type="checkbox"/>	<b>Roth IRA</b> - if coming from a Roth IRA, furnish original Roth IRA start date: _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>Traditional IRA</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>SEP/SARSEP</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>SIMPLE IRA</b> - if coming from SIMPLE IRA, furnish original SIMPLE IRA start date: _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>Qualified Retirement Plan</b> (e.g. pension, 401(k), profit sharing) if the plan accepts rollovers
<input type="checkbox"/>		<b>Roth 401(k)</b> - furnish original Roth 401(k) start date: _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>Coverdell Education Savings Account</b> (only if coming from another Coverdell account)
<input type="checkbox"/>		<b>Governmental 457 Plan</b>

Do not use for 403(b) transfers. Use 403(b) Transfer of Assets Form MF24965.

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**Section 4 - Transfer Instructions to Releasing Company**

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RMD must be distributed prior to the rollover/conversion taking place.

☐ Full liquidation

☐ Partial liquidation of \$ \_\_\_\_\_

I instruct the releasing company to transfer:

☐ In-kind shares (selecting this box authorizes a transfer in-kind of Thrivent Funds shares held at the releasing company to Thrivent Funds)

☐ Immediately

☐ Upon maturity date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month day year

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**Section 5 - Current Plan Information**

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Name of releasing company		Current account number	
Overnight address of releasing company	City	State	ZIP code
Name of account owner(s)		Phone of releasing company	

Indicate below each account number and fund being transferred. Provide a copy of your most recent statement.

Account Number	Fund Number, CUSIP Number, or Ticker

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**Section 6 - Notification for Federal and State Income Tax Withholding (required for Roth IRA conversion only)**

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***If no box is checked, 10% federal income tax will be withheld and state withholding will occur as required by your state of residence.***

**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, please consult IRS Form W-4R, available on the IRS website. Failure to withhold enough or underpaying estimated taxes may lead to IRS penalties.*

**State Tax Withholding:**

☐ Do not withhold state income tax

☐ Other state withholding \_\_\_\_\_ %

**Any tax withholding should be:**

☐ Added to the amount requested (net).

☐ Subtracted from the amount requested (gross).

Unless otherwise indicated on this form, state and/or federal income taxes will be subtracted from the distribution amount requested (gross).

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## Section 7 - Agreements and Signatures

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### Authorization to Release Information

I authorize Thrivent Financial Investor Services Inc. to request information by telephone or in writing regarding the status of this transaction or to obtain information necessary to ensure proper tax reporting. This authorization will expire and be considered invalid 30 days following the date the account/contract is terminated but not to exceed one (1) year from the date signed. I understand I have the right to receive a copy of this authorization and revoke this authorization at any time by submitting a written request to Thrivent Financial Investor Services Inc.

By signing this agreement, I acknowledge and represent that I have:

- Irrevocably designated the funds distributed to be applied as indicated (direct rollover/transfer/conversion).
- Received and reviewed a prospectus for the Fund(s) purchased.
- Authorized Thrivent Financial Investor Services Inc. to process the requested transaction.
- Received, read, and agree to the Disclosures at the end of this form and any other disclosures contained in this form.

Signature of participant/owner/plan trustee

Date signed

**X**

Acceptance of Rollover/Transfer/Conversion by Thrivent Financial Investor Services Inc. and Thrivent Funds.

Authorized signature of corporate employee:



Medallion Signature Guarantee or Notary Seal

Check with the current custodian/financial institution to determine if a Medallion Signature Guarantee or Notary Seal is required in order to distribute the funds. Requirements differ by institution.

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## Section 8 - Instructions to Releasing Company

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### Physical Checks:

- Make the check(s) payable to Thrivent Funds
- Include the Thrivent Funds account number or RE number found on the Letter of Acceptance 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 or check(s) 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

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### Transaction Information

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**Transfer** - This transaction is not taxable. It will not be reported to the IRS. This is the only option allowed when moving money from a Thrivent Brokerage Account using this form.

**Direct Rollover** - This transaction is not taxable, but will be reported to the IRS. Current plan administrator paperwork may be required. Contact the former employer or the plan administrator for their required forms. A triggering event must occur to do a rollover from a qualified retirement plan or governmental 457 plan. Required Minimum Distribution (RMD) must be distributed prior to the rollover taking place. If completing a direct rollover from Thrivent Brokerage, contact Securities Brokerage Services at 1-800-847-4836 for the appropriate form and further instructions.

**Conversion (including qualified rollover contributions)** - This transaction will be taxable. It will be reported to the IRS. A SIMPLE IRA cannot be converted within two (2) years of your initial SIMPLE IRA contribution. RMD must be distributed prior to the conversion taking place. Conversions are not allowed between Thrivent Brokerage and other Thrivent products. The conversion must take place between two Thrivent Brokerage accounts before being transferred to another Thrivent product.

**Cost basis** - After-tax money in a traditional IRA cannot be rolled over to a qualified retirement plan, unless the plan permits. If the plan does not accept cost basis, you, as the IRA owner, are responsible for determining if there is a cost basis in your Traditional IRA and assuring that it is not rolled over. Cost basis information should be verified with your tax advisor. Thrivent Financial Investor Services Inc. and its affiliates are not responsible for the accuracy of this information or the tracking of cost basis.

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### Required Minimum Distribution (RMD) Information

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RMD for Qualified Retirement Plans, 403(b) Plans, and IRAs cannot be satisfied from other plan types (e.g. IRA RMD can only be satisfied from IRA, etc.). RMD must be taken prior to sending the funds to Thrivent Funds.

The calculation of your required minimum distribution 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 us is accurate. Thrivent Financial Investor Services Inc. and its affiliates will not be responsible for an inaccurate calculation that results from receiving inaccurate account balance information.

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### Distribution Information (for distributing company)

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

I authorize Thrivent Trust Company to act as Custodian and will hold the Custodian harmless for all necessary actions taken by the Custodian when authorized by the Custodian Agreement and beneficiary designation.

I have read and understood the corresponding IRA Custodial Agreement and Disclosure Statement.

By establishing your IRA, Thrivent Trust Company accepts the appointment as Custodian in accordance with the terms and conditions of the Custodial Agreement.

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### Notification for Federal and State Income Tax Withholding

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**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 dollar amount or percentage is less than the state minimum, or if amount or 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.

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## Disclosures of Distribution Request

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

- Thrivent Financial Investor Services Inc. and its affiliates have 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 Investor Services Inc. and its affiliates have approved the issuance of the receiving fund/account(s), as applied for or, if not, as I subsequently agree to accept.

**Notice to Qualified Plan Trustee(s)** - Trustee(s) of Qualified Retirement Plans (such as Money Purchase Plans, Profit Sharing Plans, 401(k) Plans, Defined Benefit Plans, etc.) or 457(b) Plans must provide the Qualified Joint and Survivor Annuity Notice, when applicable, to plan participants. Your Thrivent representative will provide you with the required participant-specific benefit illustration to accompany the Qualified Joint and Survivor Annuity Notice. If a form of benefit other than the Qualified Joint and Survivor Annuity is elected, spousal consent must be obtained. Trustee(s) are also required to provide participants with a Distribution Disclosure Notice.

If you do not have the above referenced notices, Thrivent has generic notices for your use. These notices should be reviewed by your tax advisor to verify suitability for your plan. You are responsible for providing the applicable notices and obtaining any required signatures. Thrivent does not require a copy of these notices.

Generic notices available:

- Qualified Joint and Survivor Annuity Notice (15081)
- Spousal Consent (9336)
- 403(b) Plan and Qualified Plan Distribution Disclosure (9972)