thrivent

Thrivent.com • 800-847-4836

Transfer/Direct Rollover/ Conversion Request

Thrivent ID _____

1. General Information

Name of participant/IRA owner _____

Social Security number _____

Name of fund _____ Current account/contract number _____

Name of current custodian/financial institution _____

Address of current custodian/financial institution _____

City _____ State _____ ZIP code _____

Phone _____

2. Transaction Information

Transaction requested (select one):

☐ Transfer ☐ Direct Rollover ☐ Conversion ☐ Spousal Rollover Due to Death

From	To	Plan Type
☐	☐	**Roth IRA** - if coming from a Roth IRA, furnish original Roth IRA start date - _____
☐	☐	**Traditional IRA**
☐	☐	**SEP***
☐	☐	**SIMPLE IRA*** - if coming from SIMPLE IRA, furnish original SIMPLE IRA start date - _____
☐	☐	**SARSEP***
☐	☐	**Qualified Retirement Plan*** (e.g. pension, 401(k), profit sharing) if the plan accepts rollovers
☐		**Roth 401(k)** - furnish original Roth 401(k) start date - _____
☐	☐	**Governmental 457 Plan***

*If funds are being moved to the plan type selected, the contract must be issued. New contracts cannot be issued.

3. Required Minimum Distribution (RMD) Information

☐ **Transfer -** I have or will be taking this contract or fund/account's current year RMD from another source or I will complete a separate RMD request form to take future RMD payments from the contract or fund/account these funds are moving to. If the funds are being placed into a Qualifying Longevity Annuity Contract (QLAC), the current year RMD cannot be taken from the QLAC after the transfer. In that case, I have taken the current year RMD from this contract/account before the transfer or, if the funds are coming from an IRA/403(b), I have/will be taking the current year RMD from another IRA/403(b).

☐ **Rollover/Conversion -** I have satisfied my current year RMD for all of my products subject to RMD. For a spousal rollover, I have taken the decedent's RMD and my RMD, if applicable, for year(s) after the year of death.

☐ **Distribute my RMD** to me before completing my request (including decedent's RMD for a spousal rollover). My RMD amount (including decedent's RMD for a spousal rollover) for this contract or fund/account is $ _____. Complete the Notification for Federal and State Income Tax Withholding in section 7.

Prior year end value of current contract or fund/account (include Actuarial Present Value (APV), if applicable)
$ _____

4. Distribution Information (for distributing company)

Transfers - If no box in Section 3 is checked, RMD will not be distributed prior to the transfer taking place. Any current year RMD amounts to be distributed must be requested by the client.

Rollovers/Conversions - RMD must be distributed prior to the rollover/conversion taking place. If no box is selected in Section 3, distribute the RMD prior to processing of the rollover/conversion.

Triggering Event Information - Required if Direct Rollover from Qualified Retirement Plan or Governmental 457 Plan.

Name of employer-sponsored plan _____

Triggering event _____ Date of event _____

Distribution Instructions to Plan Administrator/Trustee

Redeem/Liquidate: ☐ entire value - Total estimated value - $ _____

☐ partial value - $ _____ or _____ %

Redeem/Liquidate: ☐ immediately ☐ at maturity date - _____

This is an authorization to redeem the above contract or fund/account. To ensure proper credit send a copy of this form with the check to the address indicated below. Reference the account owner's name and contract number on the check. Only cash or cash equivalents can be accepted. Shares of stocks and bonds must be liquidated prior to transfer. **If requesting a distribution from Thrivent Brokerage, the positions in the brokerage account must be liquidated prior to request of the transfer.** A request to redeem for the entire value will result in closure of the brokerage account.

Make check payable to:

Thrivent
PO Box 8075
Appleton, WI 54912-8075

Federal Wire

JP Morgan Chase Bank, N.A.
111 E. Wisconsin Ave.
Milwaukee, WI 53201

Routing/ABA # 021000021
Account # 822799516

Additional Instructions for federal wire:

The financial institution sending the bank wire will need to indicate: "For deposit into Thrivent variable annuity deposit account." If there is a contract number already assigned, that should also be indicated. If there is not yet a contract number, the financial institution should indicate "For deposit into a new variable annuity deposit account."

5. Intended Destination of Dollars

Product Type (FA, VA, DIA, SPIA)	Contract Number	Amount or Percent (percentage total must equal 100)	Change Allocation*
		$ or %	☐
		$ or %	☐
		$ or %	☐
		$ or %	☐
		$ or %	☐
		$ or %	☐

6. Additional Information

7. Notification for Federal and State Income Tax Withholding

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 _____ %

This withholding will be applied to:

- ☐ RMD Only
- ☐ RMD and Rollover/Conversion
- ☐ Rollover/Conversion Only

If no box is checked, the withholding will be applied to both the RMD and Rollover/Conversion.

8. Agreements and Signatures

Select all that apply:

☐ A signature guarantee is required by the current custodian/financial institution. Obtain a signature guarantee.

☐ Client knows or strongly suspects that an ink original signature is required by the current custodian/financial institution. Print this form and complete the signature section.

☐ Yes ☐ No Has the original been sent to this custodian/financial institution?

☐ Client will provide company specific paperwork, in place of this transfer/exchange/rollover/conversion request form, to the current custodian/financial institution.

☐ Yes ☐ No Has the company specific paperwork been sent to this custodian/financial institution?

Authorization to Release Information

I authorize Thrivent to request information by telephone or in writing regarding the status of this transaction or receive 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 below. 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.

I irrevocably designate the funds distributed to be applied as indicated (direct rollover/transfer/conversion).

I authorize Thrivent to process the requested transaction and I certify I have received, read, and agree to the Disclosures (pages 5-6 of this form) and any other disclosures contained in this form.

Signature of participant/owner/plan trustee _____

Title (if applicable) _____

Date signed _____

Signature of participant/owner/plan trustee _____

Title (if applicable) _____

Date signed _____

Acceptance of Rollover/Transfer/Conversion by Thrivent
Authorized signature of corporate employee 

Medallion Signature Guarantee Seal or Notary Seal _____

Name and code number of representative _____

Mail completed form to:
Thrivent
PO Box 8075
Appleton, WI 54912-8075

Fax:
800-225-2264

9. Disclosures

Transaction Information

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. RMD must be distributed prior to the rollover taking place. If completing a direct rollover from Thrivent Brokerage, contact Securities Brokerage Services for the appropriate form and further instructions.

Conversion (including qualified rollover contributions) - This transaction is taxable and will be reported to the IRS. You must complete the tax withholding election in Section 7. A SIMPLE IRA cannot be converted within two 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. You, as IRA owner, are responsible for determining if there is cost basis in your traditional IRA and assuring that cost basis is not rolled over, if the plan does not accept cost basis. Cost basis information should be verified with your tax advisor. Thrivent is not responsible for the accuracy of this information or the tracking of cost basis.

Required Minimum Distribution (RMD) Information

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 us is accurate. Thrivent will not be responsible for an inaccurate calculation that results from providing us with inaccurate account balance information.

RMD for Qualified Retirement Plans, 403(b)s 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.

Intended Destination of Dollars

***Variable Annuity Deposit Notice -** The funds requested on this form will be applied based on the most recent premium allocation instructions on record at Thrivent, unless the change allocation box is checked, and an Allocation Change/ Remittance Request (form 28831) is submitted.

***Fixed Annuity Deposit Notice -** If funds requested on this form are going into a Multi-Year Guarantee product, the premiums will be allocated according to the allocation instructions on record at Thrivent, unless the change allocation box is checked, and an Allocation Change/Remittance Request (form 28831) is submitted.

For internal product-to-product transfers only - Only available for One-time Partial or Complete Surrenders. Unless otherwise indicated herein, I intend the requested transfer(s) from the distributing contract(s) to become effective only if and when:

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

Notification for Federal and State Income Tax Withholding

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, Thrivent will withhold at your state's minimum rate.

Any tax withholding will be subtracted from the taxable amount (gross).

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.

Roth Distributions - No tax withholding will be withheld from your Roth IRA.

Disclosures of Distribution Request

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

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

Fixed Indexed Annuity surrenders are withdrawn from the Fixed Account first and will only be taken from the Indexed Account when the accumulated value in the Fixed Account is not sufficient. Surrenders removed from the Indexed Account will not receive any interest credited on the Interest Crediting Date.

Variable or Multi-Year Guarantee product distributions will be taken proportionately from all subaccounts or allocation periods containing a value unless specified otherwise.

Any surrender charges will be subtracted from the amount requested unless you specify otherwise.

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 be sent to our office.

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

Annuities - When a qualified plan is requesting a rollover to the plan participant's IRA within the same contract, the trustee(s) hereby transfer all rights, title, and interest in the contract to the participant listed in Section 1.

Retirement Choice Variable Annuity with Guaranteed Lifetime Withdrawal benefit (GLWB) - Any partial surrender will set and lock-in your withdrawal percentage. Surrenders in excess of the Guaranteed Annual Withdrawal Amount (GAWA) will reduce the benefit base.