

600 Portland Ave. S., Ste. 5100
Minneapolis, MN 55415-1665
800-365-4172 • thriventcharitable.com

Grant recommendation for full balance

To recommend a grant for an endowment fund's balance, please complete and return this form. We are committed to acting promptly and, upon completion of our due diligence and approval, a grant check for the fund's full balance will be distributed to ensure it meets IRS standards. As per our policy, administrative fees will be assessed on a prorated basis based on the number of days assets were invested in the fund.

Endowment fund information

Fund name: _____

Fund number: _____

Fund advisor name: _____

Fund advisor address: _____

Phone: _____ Email: _____

Statement of reason

As per our policy, a grant of the fund's full value must be accompanied by a statement of reason, certified as required by the Fund Advisor and one other person in a position of responsibility within the organization (e.g., pastor, church president/director, board chair).

Reason:

Grant recommendation

As fund advisor, I recommend a grant for the full balance of the above-named fund. I certify the appropriate decision-making body within the organization has approved it. I also certify that this grant recommendation does not represent the payment of any pledge or financial obligation of the undersigned or the organization I represent. *To maintain a shell endowment fund at Thrivent Charitable Impact & Investing[™], please check the box below:*

Maintain a shell fund on behalf of the above-named organization. I understand the fund will have a \$0 balance until such time as \$25,000 or more is raised and placed into the fund.

Fund Advisor Signature(s): _____ Date: _____

Second Signature/ Title: _____ Date: _____

Notes or special instructions:

Return completed form by mail, fax, or online secure upload to:

Thrivent Charitable Impact & Investing
600 Portland Avenue South, Suite 5100
Minneapolis, MN 55415

Fax: 612-844-4109

<https://www.thriventcharitable.com/share-files>