

# Inter-fund transfer request

Through your donor-advised fund, you may make contributions to other donor-advised funds, Impact Funds or organizational endowments.

## Donor/fund advisor information

Fund name (grant from): \_\_\_\_\_

Fund number (grant from): \_\_\_\_\_

Fund advisor name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Grant recommendations

The minimum grant recommendation is \$100. If you request a transfer that will reduce your fund balance to less than \$1,000, please consult with our staff prior to requesting a transfer.

Grant amount	Fund number or Impact Fund name (grant to)	Support purpose	Additional notes/instructions
Grant total: \$ _____			

### Anonymity option

I request that grant(s) be made anonymously, with no reference made to the name of the original donor or the name of the fund.

It is okay to disclose the fund name and donor/fund advisor name with this grant distribution only.

I recommend the fund transfer from the named fund. I understand this recommendation does not represent the payment of any pledge or other financial obligation of the donor nor provides any impermissible benefits.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Notes or special instructions:

Return completed form by mail or online secure upload to:

Thrivent Charitable Impact & Investing  
PO Box 8072  
Appleton, WI 54912-8072  
<https://www.thriventcharitable.com/share-files>

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