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**OPEN YOUR RETIREMENT ACCOUNT**

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**NEED HELP?**

Call **800-842-2252**  
Weekdays, 8 a.m. to  
10 p.m. (ET), or visit  
TIAA.org.

**¿HABLA ESPAÑOL?\***

Llame al **800-842-2252**  
y marque 9 si desea  
atención en español,  
días hábiles son de  
lunes a viernes de  
8:00 am a 10:00 pm  
(hora del Este).

**FILL OUT YOUR ENROLLMENT FORM****STEP 1****CHOOSE YOUR INVESTMENTS**

Select from the list of investment choices available under your employer's plan. Please review the prospectuses for the investment choices before making your selections. See next page for how to access the prospectuses.

**STEP 2****TELL US ABOUT YOURSELF**

Provide basic information to establish your account.

**STEP 3****LIST ANY EXISTING CONTRACTS**

See instructions to determine if applicable.

**STEP 4****NAME YOUR BENEFICIARIES****SPOUSAL WAIVER (IF APPLICABLE)**

This section may or may not appear on your form, depending on the provisions of your employer's plan. If it does appear on your form, and if you are married and name someone other than your spouse as beneficiary for more than 50% of the death benefit, your spouse will need to complete and sign this section.

**STEP 5****SIGN YOUR FORM**

If you need to make a change please initial and date next to the correction.

**RETURN YOUR COMPLETED FORM**

Return your completed form to your employer's HR/Benefits office. You may need to complete a salary deferral agreement with your employer.

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**IMPORTANT INFORMATION**

Whenever a new account is opened, federal law requires all financial institutions to help the government fight the funding of terrorism and prevent money laundering activities by obtaining, verifying and recording information that identifies each person who opens an account. For this reason, we request your name, physical address (a P.O. Box alone is insufficient), date of birth, Social Security number (or taxpayer identification number), telephone number and other information that will allow us to identify you. Without this information, we may not be able to open an account or process any transactions for you. State regulations require that you provide information on any existing annuity or life insurance contracts that would be replaced by the TIAA account for which you are applying. If your new TIAA account is going to replace more than one existing contract, please include that information.

\*Todos los contratos están redactados en inglés. Al hacer cualquier trato con nosotros, usted declara comprender nuestros documentos si los lee en inglés o que cuenta con algún asesor de su confianza que se los interprete. All contract documents are in English. When you do business with us, you represent that you can read and understand our English documents or have your own trusted advisor who can interpret them for you.

**You should consider the investment objectives, risks, charges and expenses carefully before investing. Please call 877-518-9161 or log on to TIAA.org for paper copies of the product and fund prospectuses that contain this and other information. Please read the prospectus carefully before investing.** To have copies of paper prospectuses sent to you at no charge, please call TIAA at **877-518-9161**. TIAA-CREF Individual & Institutional Services, LLC and Teachers Personal Investors Services, Inc. distribute securities products. TIAA (Teachers Insurance and Annuity Association of America) and CREF (College Retirement Equities Fund), 730 Third Avenue, New York, NY 10017 issues annuities.

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NEED HELP?

For assistance in choosing an allocation or filling out your form, please call us at 800-842-2252.

If your employer's plan offers mutual funds as an investment choice, participants with non-U.S. addresses may be subject to certain investment restrictions, including restrictions on purchases of mutual funds.

TWO EASY WAYS TO PICK YOUR INVESTMENTS

OPTION A: One-Step Investing

This option is designed for investors who want to keep it simple—by choosing a single TIAA-CREF Lifecycle Fund to help meet all of their retirement needs. It's a convenient, low-maintenance way to have your retirement investments professionally managed for you—to and through retirement. All you need to do is pick a single TIAA-CREF Lifecycle Fund.

TIAA-CREF Lifecycle funds have names that match specific investment time horizons—the year an investor expects to retire. So all you need to do is choose the Lifecycle investment name with the time horizon that most closely matches when you think that will be.

OPTION B: Pick Your Own Investment Mix

This option is designed for investors who want to research and evaluate their investment choices, and then create their own portfolios. We can give you a head start by providing some examples of model portfolios that include a mix of different asset classes and represent different levels of tolerance. We can also help you determine how much risk you're comfortable taking as a long-term investor.

Before making your investment choices and completing your enrollment form, please read the prospectuses, and plan and investment-related information, including plan fees and expenses, and current investment performance. To view the prospectuses online, go to [TIAA.org/PRO](http://TIAA.org/PRO) and enter your **Prospectus Access Code: 100470**. If you prefer, you can obtain paper copies of the product and fund prospectuses by calling **877-518-9161**. Please note that on your enrollment form, you will be asked to confirm that you have received and accessed the relevant prospectus(es) for your investment choices. Please read the prospectuses carefully before investing.

OPTION A: One-Step Investing

Pick the TIAA-CREF Lifecycle Fund that's closest to the year you plan to retire. All of your contributions will go into the fund you pick.

	Investment	Type	Ticker Symbol	Share Class
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2010 Fund	Mutual Fund	TLTX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2015 Fund	Mutual Fund	TLFX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2020 Fund	Mutual Fund	TLWIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2025 Fund	Mutual Fund	TLQIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2030 Fund	Mutual Fund	TLHIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2035 Fund	Mutual Fund	TLYIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2040 Fund	Mutual Fund	TLZIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2045 Fund	Mutual Fund	TLXIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2050 Fund	Mutual Fund	TLIX	Institutional



## CHOOSE YOUR ALLOCATION

### OPTION A: One-Step Investing (continued)

	Investment	Type	Ticker Symbol	Share Class
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2055 Fund	Mutual Fund	TTIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2060 Fund	Mutual Fund	TVIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index 2065 Fund	Mutual Fund	TFIX	Institutional
<input type="checkbox"/>	TIAA-CREF Lifecycle Index Retirement Income Fund	Mutual Fund	TRILX	Institutional

### OPTION B: Pick Your Own Investments

Pick your own investments to build a diversified mix that's right for you. Please use only whole numbers and make sure your total allocation equals 100%. **HELPFUL TOOL:** Visit [TIAA.org/calcs](http://TIAA.org/calcs) to use our Asset Allocation Evaluator to help you create an allocation.

	Percentage	Investment	Type	Ticker Symbol	Share Class
<b>EQUITIES</b>	<input type="text"/> <input type="text"/> <input type="text"/> %	CREF Global Equities Account	Variable Annuity	QCGLIX	R3
	<input type="text"/> <input type="text"/> <input type="text"/> %	CREF Growth Account	Variable Annuity	QCGRIX	R3
	<input type="text"/> <input type="text"/> <input type="text"/> %	CREF Stock Account	Variable Annuity	QCSTIX	R3
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Equity Index Fund	Mutual Fund	TIEIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF International Equity Index Fund	Mutual Fund	TCIEIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Large-Cap Growth Index Fund	Mutual Fund	TILIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Large-Cap Value Index Fund	Mutual Fund	TILVX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Small-Cap Blend Index Fund	Mutual Fund	TISBX	Institutional
<b>REAL ESTATE</b>	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA Real Estate Account	Variable Annuity	QREARX	N/A
<b>FIXED INCOME</b>	<input type="text"/> <input type="text"/> <input type="text"/> %	CREF Bond Market Account	Variable Annuity	QCBMIX	R3
	<input type="text"/> <input type="text"/> <input type="text"/> %	Vanguard Inflation Protected Securities Fund	Mutual Fund	VAIPX	Admiral
	<input type="text"/> <input type="text"/> <input type="text"/> %	Vanguard Total Bond Market Index Fund	Mutual Fund	VBPIX	Institutional

CONTINUED ON NEXT PAGE



## CHOOSE YOUR ALLOCATION

### OPTION B: Pick Your Own Investments (continued)

	Percentage	Investment	Type	Ticker Symbol	Share Class
<b>MONEY MARKET</b>	<input type="text"/> <input type="text"/> <input type="text"/> %	CREF Money Market Account	Variable Annuity	QCMMIX	R3
	<input type="text"/> <input type="text"/> <input type="text"/> %	Vanguard Federal Money Market Fund	Mutual Fund	VMFXX	Investor
<b>GUARANTEED</b>	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA Traditional Annuity	Guaranteed Annuity	N/A	N/A
<b>MULTI-ASSET</b>	<input type="text"/> <input type="text"/> <input type="text"/> %	CREF Social Choice Account	Variable Annuity	QCSCIX	R3
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2010 Fund	Mutual Fund	TLTX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2015 Fund	Mutual Fund	TLFIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2020 Fund	Mutual Fund	TLWIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2025 Fund	Mutual Fund	TLQIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2030 Fund	Mutual Fund	TLHIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2035 Fund	Mutual Fund	TLYIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2040 Fund	Mutual Fund	TLZIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2045 Fund	Mutual Fund	TLXIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2050 Fund	Mutual Fund	TLLIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2055 Fund	Mutual Fund	TTIIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2060 Fund	Mutual Fund	TVIIX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index 2065 Fund	Mutual Fund	TFITX	Institutional
	<input type="text"/> <input type="text"/> <input type="text"/> %	TIAA-CREF Lifecycle Index Retirement Income Fund	Mutual Fund	TRILX	Institutional

**1 0 0 % TOTAL**





# ENROLLMENT FORM

FOR TIAA & CREF GROUP RETIREMENT ANNUITY (GRA) CERTIFICATES

Regulations require that we ask if you are replacing an existing annuity contract/certificate or life insurance policy with this enrollment.

## LIST ANY EXISTING CONTRACTS /CERTIFICATES (IF APPLICABLE)

Do you own any annuity contracts /certificates or life insurance policies?

Yes  No

Does this enrollment replace, discontinue or change an existing annuity contract /certificate or life insurance policy?

- If yes, provide contract /certificate number and company name below.
- If no, skip this step and proceed to 'Name Your Beneficiaries'.

Contract /Certificate Number

Company Name

## NAME YOUR BENEFICIARIES

**DEFINITION:** Primary beneficiaries are individuals who are entitled to receive the benefits of your plan if you die.

Make sure the percentages for your primary and contingent beneficiaries each totals 100%.

### Primary Beneficiaries

Name (Title, First Name, Middle Name, Last Name)

Percentage

Social Security or Tax ID Number

Birth Date (mm/dd/yyyy)

Relationship

Name (Title, First Name, Middle Name, Last Name)

Percentage

Social Security or Tax ID Number

Birth Date (mm/dd/yyyy)

Relationship

CONTINUED ON NEXT PAGE



# ENROLLMENT FORM

FOR TIAA & CREF GROUP RETIREMENT ANNUITY (GRA) CERTIFICATES

**DEFINITION:** Contingent beneficiaries are individuals who are entitled to receive the benefits of your plan if the primary beneficiary(ies) die(s) before you.

## Contingent Beneficiaries

To choose more than two primary or contingent beneficiaries, include an additional page with your name, Social Security or Tax ID number, and the information for the additional beneficiaries.

Name (Title, First Name, Middle Name, Last Name)

Percentage

Social Security or Tax ID Number

Birth Date (mm/dd/yyyy)

Relationship

Name (Title, First Name, Middle Name, Last Name)

Percentage

Social Security or Tax ID Number

Birth Date (mm/dd/yyyy)

Relationship

You only need to have your spouse complete this section if:

1. you are married, **AND**
2. you wish to name a person or entity other than your spouse as primary beneficiary for more than 50% of the death benefit.

## WAIVER OF SPOUSE'S RIGHT TO PRERETIREMENT DEATH BENEFITS (IF APPLICABLE)

**PLEASE NOTE:** If you're married and you name a person or entity other than your spouse as primary beneficiary for more than 50% of the death benefit or the percent specified by your employer plan, then your spouse must properly consent to waive his/her preretirement survivor death benefit under your employer plan and/or ERISA in order to put your nonspousal beneficiary designation into effect. Generally, waiving spousal rights is available if you are age 35 or older. If you're under age 35 and wish to designate someone other than your spouse as beneficiary, please contact your benefits office.

## CONSENT BY SPOUSE (MUST BE WITNESSED)

I am voluntarily and irrevocably giving up my right to a qualified preretirement survivor death benefit. I recognize that any preretirement death benefit payable under these annuities and/or mutual funds held under my spouse's employer plan will be paid to the beneficiaries as described in this form.

The date of your spouse's signature must be the same or later than the date you sign your enrollment form. Your spouse's signature must be notarized or witnessed by a plan representative.

Signature of Spouse

Date (mm/dd/yyyy)

Social Security or Tax ID Number

Birth Date (mm/dd/yyyy)

Signature of Notary Public or Plan Representative

Date (mm/dd/yyyy)



# ENROLLMENT FORM

FOR TIAA & CREF GROUP RETIREMENT ANNUITY (GRA) CERTIFICATES

## SIGN YOUR FORM

If your employer's plan contains a vesting requirement, your employer exercises all rights to your accumulations under the TIAA and CREF annuities and the mutual funds until you become vested under the plan. If your employer's plan does not contain a vesting requirement or if you have met the vesting requirement of your employer's plan, you exercise these rights yourself.

Your employer's plan may offer mutual funds as an investment choice in addition to the TIAA and CREF annuities. The TIAA and CREF certificates and amounts in any of the mutual funds do not provide for loans and cannot be assigned. Under federal law, distributions before age 59½ or before termination of employment may be prohibited, limited, and/or subject to substantial tax penalties. Your ability to make withdrawals and transfers from the TIAA and CREF certificates and amounts in any of the non-annuity mutual funds may be limited by the terms of your employer's retirement plan. Within 120 days after the later of termination of employment or specific date stipulated by your employer's plan, withdrawals and transfers are available from the TIAA Traditional Annuity in a lump sum. Such withdrawals and transfers are subject to a surrender charge. At all other times, withdrawals and transfers from the TIAA Traditional Annuity must be spread over a ten-year period (five years for withdrawals after termination of employment). **The amount and value of any accumulation units transferred from any account within a TIAA Variable Annuity Separate account may be affected by redemption charges imposed by the investments in which the account invests. The accumulations in and benefit payments from the CREF accounts, the TIAA Variable Annuity Separate accounts, and the mutual funds are variable and not guaranteed; they depend on the investment performance of these accounts.**

Your beneficiary designation will apply to your TIAA and CREF annuities and to the mutual fund accounts. Under your employer's plan, your spouse has the right to a death benefit. If the plan is subject to ERISA, your spouse is entitled to at least 50% of the death benefit specified by the plan. If the plan is not subject to ERISA, your spouse is entitled to the percentage stipulated by the plan. Your spouse must consent to any beneficiary designation that doesn't meet this requirement by completing the "Waiver of Spouse's Right to Preretirement Death Benefits."

## PROSPECTUS AND OTHER DOCUMENTS ACKNOWLEDGMENT

Please check the box below acknowledging your receipt of the following documents:

- Prospectuses for the investment options available to you
- TIAA Business Continuity Policy
- TIAA Privacy Policy
- Intermediary Frequent Trading Policy

Please check the box below to acknowledge electronic receipt of prospectuses and other required documents.

I acknowledge that I consent to receiving and have received the above-referenced documents for my plan by means of either the TIAA website ([ttaa.org](http://ttaa.org)), the website from which this form was downloaded, a CD accompanying my enrollment form, or at the special web address [www.ttaa.org/PRO](http://www.ttaa.org/PRO) using the Prospectus Access Code provided in my enrollment materials. I further acknowledge that I am able to access these documents via one of these sources. I understand that this acknowledgment applies only to this initial enrollment.

To select this acknowledgment and consent, you must either have access to the websites noted above or a computer with a CD drive and Internet access. In either case, you must also be able to download, view and print the documents. You will need Adobe Reader to view and print electronic PDF documents. If you don't have Adobe Reader, go to [www.adobe.com](http://www.adobe.com) to download a free copy. To request assistance with accessing these documents electronically, please contact us toll-free at 800 842-2252. You understand and acknowledge that accessing documents electronically may involve additional costs, including but not limited to, subscription access fees from an Internet service provider and printing costs.

Paper versions of the above documents can be ordered free of charge, both now and in the future, by calling toll-free 877 518-9161 or go to [ttaa.org](http://ttaa.org). If you are unable to acknowledge that you have received and accessed these documents on the website or CD, please call 877 518-9161 for paper prospectuses at no charge.

Note: Unless indicated above, I acknowledge that I have received paper copies of the above-referenced documents.

**Under penalties of perjury, you certify that the taxpayer identification number shown on this form is your correct Social Security number. The Internal Revenue Service does not require your consent to any provision of this document.**

I have read and acknowledge all provisions of this form.

Please sign in only black or dark blue ink.



Signature

Date (mm/dd/yyyy)





# ENROLLMENT FORM

FOR TIAA & CREF GROUP RETIREMENT ANNUITY (GRA) CERTIFICATES

## FOR YOUR PROTECTION, WE PROVIDE THIS NOTICE / WARNING REQUIRED BY MANY STATES

This notice/warning does not apply in New York.

Any person who, knowingly and with intent to defraud any insurance company or other person, files an application for insurance or a statement of claim for insurance benefits containing materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and may be subject to criminal penalties, including confinement in prison, and civil penalties. Such action may entitle the insurance company to deny or void coverage or benefits. Also:

**CO:** Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**DC, VA:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

### FOR TIAA AGENT USE, IF APPLICABLE

Agent Name (Title, First Name, Middle Name, Last Name)

Agent CRD Number

Replacement requirements:

Exempt

Subject to Replacement Requirements

To the best of my knowledge and belief, the applicant owns existing life insurance policies or annuity contracts.

Yes

No

To the best of my knowledge and belief, the applicant is replacing, discontinuing, or changing existing life insurance policies or annuity contracts.

Yes

No

### For contracts to be issued in North Carolina

I did not record the applicant's information on the enrollment form. The information on the enrollment form was recorded by the applicant.

I recorded the information on the enrollment form and certify that the information I recorded completely and accurately represents the information provided by the applicant.

Agent Signature (Title, First Name, Middle Name, Last Name)

Date (mm/dd/yyyy)