



**1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED)****B. Parent/Legal Guardian Information** (Only one person may be listed)
 Parent  Legal Guardian (If Legal Guardian, submit proof of guardianship)

Prefix  First Name  MI  Last Name

**Citizenship** For foreign accounts, one of the following must be provided: Taxpayer ID, Alien ID or passport number with country of issuance.

 U.S.  Resident Alien  Nonresident Alien  (Specify country.) Gender  Male  Female

Social Security Number           Date of Birth (mm/dd/yyyy)   /   /      Alien ID or Passport Number

**Parent/Legal Guardian's Mailing Address**

Address Street or P.O. Box (APO and FPO addresses will be accepted)  City  State   Zip Code

Address (If the above address is a P.O. Box, you must also provide a street address)  City  State   Zip Code

Email Address  Day Time Phone Number  Evening Phone Number

**C. Donor Information** (If Donor is the Parent/Legal Guardian set forth in Section B, do not complete this section.)

Prefix  First Name  MI  Last Name

Social Security Number           Date of Birth (mm/dd/yyyy)   /   /      Gender  Male  Female

**Donor's Mailing Address**

Address Street or P.O. Box (APO and FPO addresses will be accepted)  City  State   Zip Code

Address (If the above address is a P.O. Box, you must also provide a street address)  City  State   Zip Code

Email Address  Day Time Phone Number  Evening Phone Number



## 2. INVESTMENT ALLOCATION

Be sure to read the current prospectuses carefully before investing. The maximum annual investment under the law is \$2,000 and the minimum investment to open a Coverdell ESA is \$2,000. Please make check payable to TIAA-CREF Funds.

FUND NAME	FUND NUMBER	CONTRIBUTION FOR CURRENT YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>

This contribution does not exceed the maximum permitted amount as described in the Coverdell ESA Disclosure Statement.

## 3. ROLLOVER OR TRANSFER OF EXISTING COVERDELL ESA

Be sure to read the current prospectuses carefully before investing.

**Direct transfer of existing Coverdell ESA**  
Complete the separate Coverdell ESA Direct Asset Transfer Form and return it with this form.

**Rollover of distribution from existing Coverdell ESA within 60 days after distribution**  
The requirements for a valid rollover are complex. See the Coverdell ESA Disclosure Statement for additional information.

Check enclosed for \$

Check the box below that describes the relationship between the Student in Section 1 above and the Student in the existing Coverdell ESA. The person in Section 1 is the:

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Same Person                    | <input type="checkbox"/> Child or Stepchild                               | <input type="checkbox"/> Sibling      |
| <input type="checkbox"/> Child of Sibling               | <input type="checkbox"/> Parent   | <input type="checkbox"/> First Cousin |
| <input type="checkbox"/> Stepparent                     | <input type="checkbox"/> Other <input style="width: 150px;" type="text"/> |                                       |
| <input type="checkbox"/> Spouse of One of the Foregoing |   |                                       |

For rollover distributions only. Please do not complete this section for a direct transfer of assets from another Coverdell ESA. Use the Direct Asset Transfer Form.

### RETAIL CLASS

FUND NAME (FUND CODE)	AMOUNT	FUND NAME (FUND CODE)	AMOUNT
Bond (66)	\$ <input style="width: 100%;" type="text"/>	Lifestyle Moderate (79)	\$ <input style="width: 100%;" type="text"/>
Bond Index (91)	\$ <input style="width: 100%;" type="text"/>	Lifestyle Growth (93)	\$ <input style="width: 100%;" type="text"/>
Bond Plus (96)	\$ <input style="width: 100%;" type="text"/>	Lifestyle Aggressive Growth (94)	\$ <input style="width: 100%;" type="text"/>
Emerging Markets Debt (2794)	\$ <input style="width: 100%;" type="text"/>	Managed Allocation (99)	\$ <input style="width: 100%;" type="text"/>
Emerging Markets Equity (67)	\$ <input style="width: 100%;" type="text"/>	Mid-Cap Growth (86)	\$ <input style="width: 100%;" type="text"/>
Emerging Markets Equity Index (69)	\$ <input style="width: 100%;" type="text"/>	Mid-Cap Value (87)	\$ <input style="width: 100%;" type="text"/>
Equity Index (65)	\$ <input style="width: 100%;" type="text"/>	Money Market (63)	\$ <input style="width: 100%;" type="text"/>
Global Natural Resources (92)	\$ <input style="width: 100%;" type="text"/>	Real Estate Securities (89)	\$ <input style="width: 100%;" type="text"/>
Growth & Income (64)	\$ <input style="width: 100%;" type="text"/>	Short-Term Bond (97)	\$ <input style="width: 100%;" type="text"/>
High-Yield (95)	\$ <input style="width: 100%;" type="text"/>	Short-Term Bond Index (2797)	\$ <input style="width: 100%;" type="text"/>
Inflation-Linked Bond (90)	\$ <input style="width: 100%;" type="text"/>	Small-Cap Equity (88)	\$ <input style="width: 100%;" type="text"/>
International Bond (2957)	\$ <input style="width: 100%;" type="text"/>	Small/Mid-Cap Equity (2956)	\$ <input style="width: 100%;" type="text"/>
International Equity (61)	\$ <input style="width: 100%;" type="text"/>	Social Choice Bond (45)	\$ <input style="width: 100%;" type="text"/>
International Opportunities (49)	\$ <input style="width: 100%;" type="text"/>	Social Choice Equity (62)	\$ <input style="width: 100%;" type="text"/>
International Small-Cap Equity (2966)	\$ <input style="width: 100%;" type="text"/>	Social Choice International Equity (2762)	\$ <input style="width: 100%;" type="text"/>
Large-Cap Growth (68)	\$ <input style="width: 100%;" type="text"/>		



**3. ROLLOVER OR TRANSFER OF EXISTING COVERDELL ESA (CONTINUED)****RETAIL CLASS**

FUND NAME (FUND CODE)	AMOUNT	FUND NAME (FUND CODE)	AMOUNT
Large-Cap Value (85)	\$ <input type="text"/>	Social Choice Low Carbon Equity (2763)	\$ <input type="text"/>
Lifecycle Retirement Income (70)	\$ <input type="text"/>	Tax-Exempt Bond (98)	\$ <input type="text"/>
Lifestyle Income (77)	\$ <input type="text"/>	<b>Total Amount</b>	\$ <input type="text"/>
Lifestyle Conservative (78)	\$ <input type="text"/>		

Please indicate payment method below (U.S. dollars only):

Check made payable to TIAA-CREF Funds.

Wire assets directly. (See prospectuses for wire instructions.)

Wire Date (mm/dd/yyyy)

/  /

**Please Note:** We will not accept payment in the following forms: travelers' checks, money orders, credit card convenience checks, cash, starter checks or third-party checks (i.e., any checks not made payable directly to TIAA-CREF Funds).

**4. TELEPHONE OPTIONS**

This service allows you to make exchanges or purchases by telephone or web among your identically registered accounts. You will also have access to your account through the Automated Telephone Service (ATS) and the Internet. See prospectus for details. This service will be automatically added to your account unless you check **No** below.

Telephone Exchange  **No**

This option permits exchanges among TIAA-CREF Funds with the same account registrations (\$50 minimum to an existing account/\$2,000 minimum to a new fund account).

Telephone Purchase  **No**

This option lets you invest by telephone with payments transferred by Automated Clearing House (ACH) from your designated bank account to your existing mutual fund account. (\$100 minimum)



### 5. AUTOMATIC INVESTMENT PLAN

If you would like to participate in the TIAA-CREF Funds Automatic Investment Plan, the minimum investment per fund is \$100. Please indicate below the amount to invest, the frequency, the first month to begin debiting your account and the time interval. Semimonthly investments occur on both the 1<sup>st</sup> and the 15<sup>th</sup>, while monthly investments occur on either the 1<sup>st</sup> OR 15<sup>th</sup>. It takes up to 10 days to initiate this service. (Please also complete Section 6.)

FUND NAME	FUND CODE	DOLLAR AMOUNT	SEMI/MONTHLY	START MONTH	1 <sup>ST</sup> /15 <sup>TH</sup> MONTH
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### 6. BANK INFORMATION

You must complete this section if you requested Telephone Purchase, or the Automatic Investment Plan.

Type of Account  Checking  Savings

Name of Primary Bank Account Owner

Name of Joint Bank Account Owner

Bank Name

ABA Routing Number

Bank Phone Number

Bank Account Number

**ATTACH A VOIDED BANK CHECK OR PREPRINTED SAVINGS DEPOSIT SLIP.**

This will ensure accurate bank information.



## 7. CERTIFICATION OF SIGNATURES

If this is a Rollover Coverdell ESA, the undersigned certifies that no rollover into a Coverdell ESA has been made within the one-year period immediately preceding this rollover; that such distribution was received within 60 days of making the rollover to the Account; and that the Student identified in Section 1 is either the person for whose benefit the prior Coverdell ESA was maintained or a member of such person's family [within the meaning of the Internal Revenue Code Section 529(e)(2)].

If this is an Annual Contribution Coverdell ESA, the undersigned certifies that the Student is less than 18 years old or a Special Needs Student and that all contributions made on the Student's behalf to this or any other Coverdell ESAs do not exceed \$2,000 in a single tax year. If this is a Transfer or Rollover of an existing Coverdell ESA, the undersigned certifies that the Student is less than 30 years old or a Special Needs Student and that the relationship indicated in Section 3 is correct.

The undersigned acknowledges having received and read the *Coverdell ESA Disclosure Statement and Custodial Account Agreement* relating to this Account and the TIAA-CREF Funds prospectuses.

The undersigned acknowledges receipt of the *Coverdell ESA Disclosure Statement and Custodial Account Agreement* at least 7 days before the date of signature (as indicated below) and acknowledges that there is no further right of revocation. All services are subject to conditions set forth in the TIAA-CREF Funds prospectuses.

The undersigned, by signing this Application/Adoption Agreement, hereby establishes a Coverdell ESA for the benefit of the Student with UMB Bank, n.a. as Custodian. The Account will be effective upon acceptance by the bank.

### PROSPECTUS AND OTHER DOCUMENTS ACKNOWLEDGMENT

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

- Prospectus for the investment options available to you ([TIAA.org/public/prospectuses](http://TIAA.org/public/prospectuses))
- TIAA Privacy Policy ([TIAA.org/public/support/privacy-policy](http://TIAA.org/public/support/privacy-policy))
- TIAA Business Continuity Policy ([TIAA.org/public/about-tiaa/business-continuity](http://TIAA.org/public/about-tiaa/business-continuity))

Please check this box ▶  
to acknowledge electronic receipt of prospectuses and other required documents

I acknowledge that I consent to receiving and have received the above-referenced documents through TIAA's website, the website from which this form was downloaded. I further acknowledge that I am able to access these documents on the website. I understand that this acknowledgment applies only to this initial account application.

To select this acknowledgment and consent, you must have access to the website noted above. 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 [adobe.com](http://adobe.com) to download a free copy. To request assistance with accessing these documents electronically, please contact us toll-free at 800-842-2273. 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, both now and in the future, by calling toll-free 877-518-9161 or go to [TIAA.org](http://TIAA.org). If you are unable to acknowledge that you have received and accessed these documents on the website, please call 877-518-9161 for paper prospectuses at no charge.

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

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person; and (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Note:** There are no FATCA code entries on this form, so please disregard item 4.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

### Please Sign Here

Signature of Donor (Donor's signature is not required for a Rollover or transfer of assets)

Today's Date (mm/dd/yyyy)

 /  / 20

Signature of Parent/Legal Guardian (Or student if the Student has attained the age of maturity in his/her state of residence)

Today's Date (mm/dd/yyyy)

 /  / 20

### CUSTODIAN ACCEPTANCE

UMB Bank, n.a. will accept appointment as Custodian of the Account. However, this Agreement is not binding upon the Custodian until the Student has received a statement of the transaction. Receipt by the Student of a confirmation of the purchase of the Fund shares indicated above will serve as notification of UMB Bank, n.a.'s acceptance of appointment as Custodian of the Account.

By

Today's Date (mm/dd/yyyy)

 /  / 20


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## 8. STUDENT'S RIGHTS

If the Student is a minor under the laws of the Student's state of residence, acceptance by the Custodian of the contribution to this Account is expressly conditioned upon the Parent's (identified above in Section 1) agreement to be responsible for all requirements of the Student, and to exercise the powers and duties of the Student with respect to the operation of the Account. Upon reaching the age of majority in the state in which the Student then resides, the Student may advise the Custodian in writing (accompanied by such supporting documentation as the Custodian may require) that he or she is assuming sole responsibility to exercise all powers and duties associated with the administration of the Account. Absent such written notice by the Student, the Custodian shall have no responsibility to acknowledge the Student's exercise of such powers and duties of administration.

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### RETURN COMPLETED FORM(S) TO:

**STANDARD MAIL:**

TIAA-CREF Funds  
P.O. Box 55081  
Boston, MA 02205-5081

**OVERNIGHT:**

TIAA-CREF Funds  
30 Dan Road  
Canton, MA 02021-2809

Retain a photocopy of this completed Application/Adoption Agreement for your records.

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