



TIAA-CREF FUNDS
REDEMPTION AND TRANSFER FORM
FOR NON-IRA ACCOUNTS

Use this form to redeem, transfer or change the ownership of your non-IRA accounts with TIAA-CREF Funds. Please note that any features existing on the current account will not automatically transfer to the new account.

By signing this form, investor(s) acknowledges that neither TIAA-CREF Funds nor any Teachers Advisors, LLC affiliate or service provider to TIAA-CREF Funds has provided the investor(s) with advice, recommendations or suggestions as to any specific investment decisions.

Please send your signed and completed application to TIAA-CREF Funds per Return Completed Forms section below or in the enclosed customer reply envelope. Please call 800-223-1200, enter prompt 1, prompt 2, with any questions, weekdays, 8 a.m. - 10 p.m. (ET).

Complete all applicable sections of the form. If your request is to transfer shares and establish a new Mutual Fund account, you must include a completed TIAA-CREF Funds Account Application. You can download this form from TIAA.org by going to the "Help and Resources" tab. For transfer requests to establish a new trust account, in addition to the TIAA-CREF Funds Account Application, please attach the initial page(s) of the trust agreement identifying the parties to the trust and the signature page(s).

1. ACCOUNT INFORMATION (REQUIRED)

Please fill out this section with your account number and current registration. Please print in capital letters and only use black or dark blue ink.

Primary Account Owner/Minor/Trust

Form fields for Primary Account Owner: Prefix, First Name or Name of Entity, MI, Last Name

Form fields for Primary Account Owner: Account Number, Social Security Number/Taxpayer Identification Number, Day Time Phone Number, Evening Phone Number

Secondary Joint Account Owner/Custodian/Trustee

Form fields for Secondary Joint Account Owner: Prefix, First Name, MI, Last Name

Form fields for Secondary Joint Account Owner: Day Time Phone Number, Evening Phone Number

2. LIST OF MUTUAL FUNDS

Enter the Fund Name, Fund Code, and amount you wish to transfer and/or redeem in Section 3.

- List of mutual funds including Bond (66), International Equity (61), Mid-Cap Growth (86), etc.

*As of October 2, 2017, the TIAA-CREF Small-Cap Equity Fund is closed to new investors.



3. TRANSFER AND REDEEM SHARES

Choose from the following options below.

REASON FOR TRANSFER¹ To ensure accurate cost basis reporting, indicate the type of transfer requested and provide transfer details where applicable.

| | |
|--|--|
| <input type="checkbox"/> Re-registration (name change, divorce, etc.) <input type="checkbox"/> Death (inheritance) Date of Death (mm/dd/yyyy) (Required) <input type="text"/> / <input type="text"/> / <input type="text"/> Alternate Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> or \$ <input type="text"/> | <input type="checkbox"/> Gift (For gifting to a Charitable Organization, please see option 4.) Date of Gift (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> Fair Market Value Acceptance <input type="text"/> Signature of New Owner <input type="text"/> |
| Beneficiary's Social Security Number <input type="text"/> Alternate Value (Optional) ² <input type="text"/> | |

If the accepting account will use Average Cost, the new owner must sign above indicating acceptance of the shares at fair market value on the date of the gift.

¹ If a reason is not provided, this transfer will be defaulted to a transfer due to gift.

² There is a special rule under the estate tax that allows the executor (the person in charge of the estate) to elect a different valuation date in certain cases. If the estate qualifies for this election and the executor makes the election, the valuation date is six months after the date of death. The principal reason for making this election is to reduce the amount of estate tax. But the election also has an effect on income tax, because it means you will now use the later date to determine your basis.

| | |
|---|--|
| <input type="checkbox"/> OPTION 1. Transfer All Shares to <input type="checkbox"/> An Existing Account Number <input type="text"/> <input type="checkbox"/> OPTION 2. Transfer Partial Shares or the Dollar Amount to <input type="checkbox"/> An Existing Account Number <input type="text"/> | <input type="checkbox"/> A New Account (If you are transferring to a New Account, fill out the TIAA-CREF Funds Account Application and include the application with this form) <input type="checkbox"/> A New Account (If you are transferring to a New Account, fill out the TIAA-CREF Funds Account Application and include the application with this form) |
|---|--|

| FUND NAME | FUND CODE | ALL SHARES | OR | PERCENTAGE OF SHARES | OR | DOLLAR AMOUNT |
|----------------------|----------------------|--------------------------|----|------------------------|----|-------------------------|
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | OR | <input type="text"/> % | OR | \$ <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | OR | <input type="text"/> % | OR | \$ <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | OR | <input type="text"/> % | OR | \$ <input type="text"/> |

*As of October 2, 2017, the TIAA-CREF Small-Cap Equity Fund is closed to new investors.

| | |
|---|--|
| <input type="checkbox"/> OPTION 3. Redeem Shares or the Dollar Amount <input type="checkbox"/> Redeem All Funds and All Shares from Account Number <input type="text"/> <input type="checkbox"/> Redeem Partial Shares or dollar amount indicated below from Fund Name and Account Number <input type="text"/> | |
|---|--|

| FUND NAME | FUND CODE | ALL SHARES | OR | PERCENTAGE OF SHARES | OR | DOLLAR AMOUNT |
|----------------------|----------------------|--------------------------|----|------------------------|----|-------------------------|
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | OR | <input type="text"/> % | OR | \$ <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | OR | <input type="text"/> % | OR | \$ <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | OR | <input type="text"/> % | OR | \$ <input type="text"/> |

If using specific lot, please indicate shares to be sold in Section 5.



3. TRANSFER AND REDEEM SHARES (CONTINUED)

OPTION 4. Charitable Organization Distributions

Redeem All Funds and All shares from Account Number

Redeem dollar amount or partial number of shares from Account Number

If you are redeeming partial shares or dollar amount by fund from account(s), please indicate below Fund Name and Account Number:

| FUND NAME | FUND CODE | ALL SHARES | PERCENTAGE OF SHARES | DOLLAR AMOUNT |
|----------------------|----------------------|--|--|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> OR <input type="checkbox"/> | <input type="text"/> % OR <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> OR <input type="checkbox"/> | <input type="text"/> % OR <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="checkbox"/> OR <input type="checkbox"/> | <input type="text"/> % OR <input type="text"/> | <input type="text"/> |

Please complete section 4 to provide delivery or redemption instructions and section 6 for signature.



4. REDEMPTION INSTRUCTIONS

USE THIS SECTION FOR REDEMPTIONS ONLY (For transfers, skip this section and go to the checklist below.)

Please indicate how you would like to receive your redemption proceeds. Choose only one.

- A. Mail my redemption proceeds to the address on my account.
If you had an address change within the last 30 days, we require a Medallion Signature Guarantee in Section 7.
- B. Mail my redemption proceeds to an address other than the address on record.
A Medallion Signature Guarantee is required in Section 7.

Mail to: Street Address

City

State

Zip Code

- C. Deposit my proceeds to my bank of record on file using:
- Automated Clearing House (Bank processing times may vary) OR Wire (wire can be chosen only if proceeds are \$5,000 or higher.)
- D. Deposit my redemption proceeds directly into my checking or savings account not on file using the Automated Clearing House. **You must attach a voided bank check which includes your preprinted name and address or a savings deposit slip which includes your preprinted name and account number. This will ensure accurate bank information. A Medallion Signature Guarantee is required in Section 7.**

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

- E. Charitable Distributions
A Medallion Signature Guarantee is required in Section 7.

Name of Nonprofit Organization

Receiving Account Number

Street Address

City

State

Zip Code

Attention



5. OVERRIDING COST BASIS ELECTION

If you choose to override your Cost Basis election method during this financial transaction, please select the method below. If the Specific Lot Identification method is chosen, please identify the share lots to be used during the transaction a secondary accounting method must be provided. If you do not select an option, the Funds default method of Average Cost will be recorded as your Cost Basis Method.

- FIFO – First In First Out** – A standing order to sell the oldest shares in the account first.
- LIFO – Last In First Out** – A standing order to sell the newest shares in the account first.
- HIFO – High Cost First Out** – A standing order to sell the most expensive shares in the account first.
- LCFO – Low Cost First Out** – A standing order to sell the least expensive shares in the account first.
- LGUT – Loss/Gain Utilization** – A method that evaluates losses and gains and then systematically selects lots based on the gain/loss in conjunction with a holding period.
- SLID – Specific Lot Identification** – The shareholder designates specific shares for each redemption.

Secondary Reporting Method Required

Specific Lot Identification Redemption Account Tax Lots

| ACQUISITION DATE | DESCRIPTION (Description of shares; Please identify purchase, transfer, dividend or capital gain reinvestment) | SHARES |
|--|--|---|
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input style="width: 90%; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |

Attach extra sheet if necessary.



6. CURRENT ACCOUNT OWNERS' AUTHORIZATION AND SIGNATURES

I authorize TIAA-CREF Funds and their agents to act for any service authorized on this form and on any instructions that they believe to be genuine and that are received from me or any person claiming to act as my representative who can provide my account registration information. The TIAA-CREF Funds use reasonable procedures (including shareholder identity verification) to confirm that instructions given by telephone are genuine and are not liable for acting on these instructions. If these procedures are not followed, the TIAA-CREF Funds may be liable for losses due to unauthorized or fraudulent transactions.

If you are transferring to a new account, you will need to complete the TIAA-CREF FUNDS ACCOUNT APPLICATION and include it with this form.

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)

TIAA Privacy Policy (TIAA.org/public/support/privacy-policy)

TIAA Business Continuity Policy (TIAA.org/public/about-tiaa/business-continuity)

Note: If a new fund is being opened within an existing account, I acknowledge that I consent to receiving and have received the above-referenced documents through TIAA's website. 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.

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

If this transfer is due to the death of one or more of the current owners:

I certify that all taxes, funeral expenses, debts and claims against the deceased's estate have been paid or will be paid by the recipient(s) listed in section 6, and no person, firm, association, or corporation other than the recipient(s) listed in section 6 has (have) any right, title, claim, equity, or interest in, to, or respecting the estate or the shares to be transferred or the proceeds thereof.

For your protection, TIAA may require additional verification of your identity before accepting your transaction as in good order. You agree that your transaction will be valued as of the market close on the business day that all of the steps necessary to verify your identity and the transaction to be in good order have been completed. You also agree that in the event these steps are completed after the market close on a business day, then your transaction will be valued as of the market close on the next business day. The amount of money that you receive will depend on the share or unit price on the day on which your transaction is deemed to be in good order. Due to market fluctuations, the price your shares or units ultimately receive could be less than the share or unit price when you initiated this transaction. It is also possible that if we are unable to reach you to verify this transaction within five days, this transaction may be canceled.

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.

Signature (Owner, Custodian, or Trustee, etc.)

Title

Today's Date (mm/dd/yyyy)

 / / 20

Signature (Joint Owner or Co-Trustee, etc.)

Title

Today's Date (mm/dd/yyyy)

 / / 20


7. MEDALLION SIGNATURE GUARANTEE

A Medallion Signature Guarantee is not the same as a notarized signature. You must obtain a medallion signature from a national or state bank, federal savings and loan association, savings bank or member of a national stock exchange who is a member of the medallion signature program. A notary public is not an acceptable Medallion Signature Guarantee.

I certify that the above-named person as described and whose identity is known or proven to me, personally appeared before me on the date and location listed below.

Medallion Signature Guarantee for Owner, Custodian or Trustee, etc.

| | | | |
|--|----------------------------------|----------------------|----------------------|
| <div style="border: 1px solid black; height: 150px; width: 100%;"></div> | Today's Date (mm/dd/yyyy) | | |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |
| | | | |
| | Print Name of Certifying Officer | | |
| | | | |
| Title of Certifying Officer | | | |
| | | | |

Medallion Signature Guarantee for Joint Owner or Co-Trustee, etc.

| | | | |
|--|----------------------------------|----------------------|----------------------|
| <div style="border: 1px solid black; height: 150px; width: 100%;"></div> | Today's Date (mm/dd/yyyy) | | |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |
| | | | |
| | Print Name of Certifying Officer | | |
| | | | |
| Title of Certifying Officer | | | |
| | | | |

RETURN COMPLETED FORM(S) TO:

Please return ALL numbered pages including any pages you did not need to complete.

STANDARD MAIL:

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

OVERNIGHT:

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

