



Please complete this form to designate beneficiaries for your TIAA Brokerage IRA account. For specific beneficiary provisions, refer to the IRA Plan Document and Adoption Agreement.

Questions? Please call **800-842-2252**, weekdays, 8 a.m.-7 p.m. (ET).

STEP 1: BROKERAGE ACCOUNT INFORMATION (REQUIRED)

Brokerage Account Number (Leave blank if new account)

Marital Status

 Married Other

Brokerage Account Owner's Name

STEP 2: BENEFICIARY DESIGNATIONS

Depending on who your beneficiary is at your death, federal tax law may require your beneficiary to take a full distribution of their inheritance on or before the end of the 10th year following the year of your death (or in the case of an inherited account, before the end of the 10th year following the year of the original account owner's death). You should consult your professional tax advisor before selecting a beneficiary.

If you want to name additional Primary or Contingent Beneficiaries, attach a separate sheet with all of the requested information. You understand that the beneficiary(ies) named herein may be changed or revoked by you at any time by completing a new designation in writing with TIAA Brokerage. You hereby make the following designation of beneficiary(ies) pursuant to the provisions of the applicable IRA Adoption Agreement.

INSTRUCTIONS:

1. Name the Primary Beneficiary(ies) you want to receive the balance of your IRA assets following your death. Please include all of the requested information.
2. Be sure to indicate the particular percentage of IRA assets you would like Pershing LLC or TIAA Brokerage Services to distribute to each Primary Beneficiary after your death (the sum should add up to 100%). If no percentage is indicated, your IRA assets will be distributed equally among all surviving Primary Beneficiaries.
3. If a Primary Beneficiary should predecease you and you want that beneficiary's share to go to his or her lineal descendants, check "per stirpes." Otherwise, a Primary Beneficiary's rights end with the death of that beneficiary, and the estate of a predeceased beneficiary has no claim to or interest in your account. If you do not check "per stirpes" and the Primary Beneficiary predeceases you, their share will be divided among surviving Primary Beneficiaries (if any), and if there are no surviving beneficiaries, the interest will pass to the Contingent Beneficiaries.

PRIMARY BENEFICIARY(IES) (REQUIRED - AT LEAST ONE PRIMARY BENEFICIARY)

1. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage
 %

Social Security Number/
Taxpayer Identification Number

Date of Birth/Date of Trust/
Issue Date of Will (mmddyyyy)

Relationship

Gender

 Male Female

Lineal Descendants
Per Stirpes (LDPS)

 Yes, add Per Stirpes




2. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage %

Social Security Number/
Taxpayer Identification Number
Date of Birth/Date of Trust/
Issue Date of Will (mmddyyyy)
Relationship Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes

3. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage %

Social Security Number/
Taxpayer Identification Number
Date of Birth/Date of Trust/
Issue Date of Will (mmddyyyy)
Relationship Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes

4. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage %

Social Security Number/
Taxpayer Identification Number
Date of Birth/Date of Trust/
Issue Date of Will (mmddyyyy)
Relationship Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes





CONTINGENT BENEFICIARY(IES) (OPTIONAL)

Depending on who your beneficiary is at your death, federal tax law may require your beneficiary to take a full distribution of their inheritance on or before the end of the 10th year following the year of your death (or in the case of an inherited account, before the end of the 10th year following the year of the original account owner’s death). You should consult your professional tax advisor before selecting a beneficiary.

You may choose to designate Contingent Beneficiaries. Contingent Beneficiaries are beneficiaries who will receive the balance of your IRA after your death if all of your Primary Beneficiaries (as well as their descendants, if you chose the LDPS option for each of them) predecease you. Be sure to also indicate the share of your IRA you would like Pershing LLC or TIAA Brokerage Services to distribute to each Contingent Beneficiary, and to decide whether you wish the LDPS option to apply for each of your Contingent Beneficiaries. If a Contingent Beneficiary predeceases you, his or her share of your IRA will be distributed to his or her descendants, by right of representation (if you chose the LDPS option for such Beneficiary). If you did not choose the LDPS option for such Beneficiary, his or her share will instead be distributed to the remaining Contingent Beneficiaries equally, or in the percentage share you may have indicated. If you do not designate any Contingent Beneficiaries, and if all of your Primary Beneficiaries (as well as their descendants, if you chose the LDPS option for each of them) predecease you, the balance of your IRA will be distributed to your estate.

CONTINGENT BENEFICIARY(IES)

1. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage
 %

Social Security Number/
Taxpayer Identification Number
Date of Birth/Date of Trust/
Issue Date of Will (mmdyyy)
Relationship Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes

2. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage
 %

Social Security Number/
Taxpayer Identification Number
Date of Birth/Date of Trust/
Issue Date of Will (mmdyyy)
Relationship Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes





3. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage
 %

Social Security Number/
Taxpayer Identification Number

Date of Birth/Date of Trust/
Issue Date of Will (mmdyyyy)

Relationship

Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes

4. Name (First Name, Middle Initial, Last Name, Suffix/Trust Title) Percentage
 %

Social Security Number/
Taxpayer Identification Number

Date of Birth/Date of Trust/
Issue Date of Will (mmdyyyy)

Relationship

Gender Male Female

Lineal Descendants
Per Stirpes (LDPS)
 Yes, add Per Stirpes

Note: If you need to add additional beneficiaries, please attach a separate letter with all of the information requested above. The attachment letter must also be signed, dated and submitted with this agreement.





STEP 3: SPOUSAL CONSENT AND NOTARY REQUIREMENT (REQUIRED ONLY IF YOU ARE MARRIED, RESIDE IN A COMMUNITY PROPERTY STATE AND DO NOT NAME YOUR SPOUSE AS SOLE PRIMARY BENEFICIARY.)

If you are married, reside in a community property or marital property state (including but not limited to: AZ, CA, ID, LA, NV, NM, TX, WA, WI), and designate someone other than your spouse as your sole Primary Beneficiary, your spouse must sign this form below and have their signature notarized.

I am the spouse of the above-named account holder. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Due to the important tax consequences of giving up my interest in this IRA, I have been advised to see a tax professional. I hereby give the account holder any interest I have in the funds or property deposited in this IRA and consent to the Beneficiary designation(s) indicated above. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Custodian.

Print Name of the Signature that has been notarized:

First Name Last Name

Spousal Signature

Today's Date (mm/dd/yyyy) / / 20

NOTARY SIGNATURE

State County Notary Expiration Date (mm/dd/yyyy) / / 20

In this space, the Notary Public must provide his/her notarial number and the date the appointment expires. Provide the notarial seal if outside New York state.

On the date noted below, the subscriber known to me to be the person described in and who executed the foregoing instrument and he/she acknowledged to me that he/she executed the same.

FOR NOTARY PUBLICS IN FLORIDA

The foregoing instrument was acknowledged before me, by means of:

Physical presence Online notarization

Notary Public's Signature Today's Date (mm/dd/yyyy) / / 20

NOTE: A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STEP 4: ACCOUNT OWNER SIGNATURE (REQUIRED)

Your Signature

Today's Date (mm/dd/yyyy) / / 20





OPTIONS TO RETURN COMPLETED FORM(S)

OPTION 1: Digitally sign and submit your form.

- If you received a digital form, complete the online signature digital process.

OPTION 2: Use the TIAA mobile app to quickly upload your completed document(s). It's as simple as taking a picture. Haven't downloaded the TIAA mobile app? Get it today in the [App Store](#) or [Google Play](#).

- Tap the **Message Center** icon in the upper-right corner of your main screen.
- Go to the **Files** tab, select **Upload** and then follow the instructions.

OPTION 3: If you are using your personal computer, here's what you'll need to do to upload your completed document(s):

- Log in to your [TIAA.org](#) account and select the **Actions** tab.
- Choose **Upload document(s)** from the options presented.
- Select **Upload Files** and follow the step-by-step instructions.

OPTION 4: If you prefer to fax or mail this form, use the information provided below:

FAX:

800-914-8922 (within U.S.)

704-595-5795 (outside U.S.)

STANDARD MAIL:

TIAA

P.O. Box 1280

Charlotte, NC 28201-1280

OVERNIGHT DELIVERY:

TIAA

8500 Andrew Carnegie Blvd.

Charlotte, NC 28262

