



TIAA-CREF FUNDS
ROTH IRA CONVERSION FORM/ADOPTION AGREEMENT
(Retail Class Only)

You should use this form to convert an existing TIAA-CREF Funds Traditional IRA to a Roth IRA. If you are converting a Traditional IRA from another custodian, you must complete both this IRA Conversion Form and the IRA Asset Transfer Form.

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 form 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, then prompt 2, with any questions, weekdays, 8 a.m. - 10 p.m. (ET).

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, Social Security number and other information that will allow us to identify you (including a state issued driver's license or other government issued identification.)

1. ACCOUNT REGISTRATION (REQUIRED)

Please print or type. Please complete this section if you are converting an existing TIAA-CREF Funds Traditional IRA to a TIAA-CREF Funds Roth IRA, or if you are converting a Traditional IRA held at another institution. Please provide the information exactly as you want it to appear on your account.

Prefix First Name MI Last Name

Name of Entity

If you are establishing an entity account as beneficiary due to death of the owner in this section and you are an authorized signer, you must complete the TIAA-CREF Funds Legal Entity Beneficial Ownership Certification Form included in order for the account to be established.

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

Citizenship For foreign accounts, one of the following must be provided: Alien ID or passport number with country of issuance along with photocopy of ID. U.S. Resident Alien Nonresident Alien (Specify country) Alien ID or Passport Number

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 Daytime Phone Number Evening Phone Number



**1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED)**

TIAA Wealth Management Advisor (Name)

Dealer Number



**2. ACCOUNT INFORMATION**

Please complete this section if you are converting all or part of an existing TIAA-CREF Funds Traditional IRA to a TIAA-CREF Funds Roth IRA.

Fund Name	Existing IRA Fund and Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
<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"/>

**3. CONVERSIONS FROM ANOTHER INSTITUTION**

(For New or Existing Accounts) Please complete a separate IRA Asset Transfer Form for each Traditional IRA being converted from another institution. Check the box corresponding to the source of the money now being transferred.

Traditional Contributory IRA     Traditional Rollover IRA

**4. INVESTMENT ALLOCATION**

If you are converting a Traditional IRA from another institution, please indicate below the funds in which you would like to invest. The minimum initial investment in any fund is \$2,000.

Please check here to set this allocation for future investments, unless other instructions are received

Fund Name (Fund Code)	Existing IRA Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
Bond (66)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Bond Index (91)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Bond Plus (96)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Emerging Markets Debt (2794)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Emerging Markets Equity (67)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Emerging Markets Equity Index (69)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Equity Index (65)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Growth and Income (64)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
High-Yield (95)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Inflation-Linked Bond (90)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
International Bond (2957)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
International Equity (61)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>

(Continued)



**4. INVESTMENT ALLOCATION (CONTINUED)**

Fund Name (Fund Code)	Existing IRA Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
International Opportunities (49)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Large-Cap Growth (68)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Large-Cap Value (85)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Lifecycle Retirement Income (70)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Lifestyle Aggressive Growth (94)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Lifestyle Conservative (78)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Lifestyle Growth (93)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Lifestyle Income (77)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Lifestyle Moderate (79)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Managed Allocation (99)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Mid-Cap Growth (86)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Mid-Cap Value (87)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Money Market (63)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Quant International Small-Cap Equity (2966) <sup>1</sup>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Quant Small-Cap Equity (88)* <sup>1</sup>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Quant Small/Mid-Cap Equity (2956) <sup>1</sup>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Real Estate Securities (89)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Short-Term Bond (97)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Short-Term Bond Index (2797)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Social Choice Bond (45)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Social Choice Equity (62)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Social Choice International Equity (2762)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Social Choice Low Carbon Equity (2763)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
		<b>Total</b>	\$ <input type="text"/>

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

<sup>1</sup>The following fund name changes are effective 8/1/18:

Formerly: International Small-Cap Equity; Renamed: Quant International Small-Cap Equity

Formerly: Small-Cap Equity; Renamed: Quant Small-Cap Equity

Formerly: Small/Mid-Cap Equity; Renamed: Quant Small/Mid-Cap Equity



## 5. WITHHOLDING REQUIREMENTS

If you're transferring assets from another custodian, you must complete only the withholding section on the IRA Asset Transfer Form.

**Important income tax information:** We are required to withhold federal income taxes (at a rate of 10%) on the amount you convert unless you elect not to have withholding apply. **These rules do not apply to nonresident aliens. (See NOTE below.)**

**You must make a withholding election. If you do not check a box, taxes will be withheld at a rate of 10% on your conversion.** (State withholding also may apply.)

- Do not withhold federal income tax from my conversion amount. I understand that I will be liable for payment of federal tax on the taxable part of my conversion and that I may incur penalties under the estimated tax payment rules.
- I want federal income tax withheld and understand that the withholding will be at a rate of 10% unless a different withholding percentage is specified:   %. (State withholding also may apply.) You may change this election by written request prior to the conversion.

**NOTE: If you are a nonresident alien, you must check the box below.**

- As a nonresident alien, I understand that special withholding rules apply to a conversion of my Traditional IRA to a Roth IRA.



**6. DESIGNATE YOUR BENEFICIARIES**

Please complete this section to designate your beneficiaries. We will transfer ownership of your IRA to your primary beneficiaries upon your death. Your primary beneficiaries will share equally in your IRA, unless you specify different percentages below. If a primary beneficiary predeceases you, his or her share of your IRA shall be divided proportionately among the surviving primary beneficiaries. In addition, we will transfer ownership of your IRA to your contingent beneficiaries only if there are no surviving primary beneficiaries at the time of your death. If this happens, your contingent beneficiaries will share equally in your IRA, unless you specify different percentages below. If there are no surviving contingent beneficiaries at the time of your death, we will transfer ownership of your IRA to your estate. All percentages must total 100%.

**NOTE:** If more than one primary and/or contingent beneficiary is designated, and no percentages are indicated, equal percentages totaling 100% will be allocated to each beneficiary.

**Primary Beneficiary**

First Name or Name of Entity  MI  Last Name

Relationship  Percentage  % Social Security Number/  
Taxpayer Identification Number  Date of Birth (mm/dd/yyyy)  /  /

**Primary Beneficiary**

First Name or Name of Entity  MI  Last Name

Relationship  Percentage  % Social Security Number/  
Taxpayer Identification Number  Date of Birth (mm/dd/yyyy)  /  /

**Contingent Beneficiary**

First Name or Name of Entity  MI  Last Name

Relationship  Percentage  % Social Security Number/  
Taxpayer Identification Number  Date of Birth (mm/dd/yyyy)  /  /

**Contingent Beneficiary**

First Name or Name of Entity  MI  Last Name

Relationship  Percentage  % Social Security Number/  
Taxpayer Identification Number  Date of Birth (mm/dd/yyyy)  /  /

**Note:** If you reside in a community property state, you may need your spouse's consent to your beneficiary designation. You may wish to seek legal advice.



## 7. TELEPHONE OPTIONS

Please select from the services below. These services allow you to invest or exchange by telephone or web among your identically registered TIAA-CREF Funds IRAs. You will also have access to your IRA through the Automated Telephone Service (ATS) and the Internet. See the TIAA-CREF Funds prospectuses for details. These services will be automatically added unless you check **NO** below.

Telephone Purchase

 No

Telephone Exchange

 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. Please complete Section 9.)

This option permits exchanges between your identically registered TIAA-CREF Funds IRAs. (\$2,000 minimum to a new fund account, \$50 to an existing fund account.)

## 8. 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, frequency, the first month to begin debiting your account and the time interval of your investments. Semimonthly investments occur on both the 1<sup>st</sup> and 15<sup>th</sup>, while monthly investments occur on either the 1<sup>st</sup> or 15<sup>th</sup>. All automatic investments are considered current year contributions. It takes up to 10 days to initiate this service. (Please also complete Section 9.)

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"/>
<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"/>

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

## 9. 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.



## 10. SIGNATURES

By signing this form, I certify that:

I have received, read, and agree to the terms of the prospectus for each fund in which I am investing. I have the authority and legal capacity to establish this custodial (Conversion and/or Contribution) Roth IRA, and to direct the purchase of mutual fund shares, am of legal age in my state, and believe each investment is a suitable one for me.

I received, read, and agree to both the TIAA-CREF Funds Individual Retirement Accounts Disclosure Statement and UMB Bank, n.a. Universal Individual Retirement Account Custodial Agreement.

I understand I may revoke this Agreement by notifying the Custodian in writing within seven days, if I did not receive the Disclosure Statement at least seven days prior to today's date.

I authorize TIAA-CREF Funds, UMB Bank, n.a. or their designees to act on any instructions believed to be genuine for any service authorized in the Custodial Agreement and on this form. The TIAA-CREF Funds use reasonable procedures (including Shareholder identity verification) to confirm that instructions given by telephone/computer are genuine and are not liable for acting on these instructions. (However, if these procedures are not followed, it is the opinion of certain regulatory agencies that the TIAA-CREF Funds may be liable for any losses that may result from acting on instructions given.) All services are subject to conditions set forth in the TIAA-CREF Funds prospectus. I elect under paragraph 9(a) of the Custodial Agreement not to have life expectancy recalculated for minimum distribution purposes, unless I notify the Custodian otherwise prior to my required beginning date.

### PROSPECTUS AND OTHER DOCUMENTS ACKNOWLEDGMENT

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

- Prospectuses and Product Disclosures 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 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. 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](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 by going 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.

Please Sign Here

Owner's Signature

Today's Date (mm/dd/yyyy)

 /  /  20  

### CUSTODIAN ACCEPTANCE

UMB Bank, n.a. will accept appointment as Custodian of the Depositor's IRA. Receipt by the Depositor 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 Depositor's Account.

#### UMB BANK, N.A., CUSTODIAN

Owner's Signature

Today's Date (mm/dd/yyyy)

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**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 219227  
Kansas City, MO 64121-9227

**OVERNIGHT:**

TIAA-CREF Funds  
430 W. 7th Street, Suite 219227  
Kansas City, MO 64105-1407







To get started, simply complete the following sections, and return with the appropriate documentation as listed below. Please send your signed and completed form to TIAA-CREF Funds per the Return Completed Forms section below or in the enclosed customer reply envelope. If you have any questions regarding completion of this form, please call 800-223-1200, enter prompt 1, then prompt 2, weekdays, 8 a.m. – 10 p.m. (ET).

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ENTITY ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information about the “beneficial owners” of business applicants. Businesses can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

**What this means for you:** This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of non-U.S. persons) for the such individuals (i.e., the **beneficial owners**). This information will be verified to ensure the identity of all individuals opening a mutual fund account. Until you provide the information we need, we may not be able to open an account or effect any transactions for you.

**DEFINING OWNERSHIP**

- **Beneficial owner:** Any natural person who, directly or indirectly, owns 25% or more of the legal entity customer.
- **Control person:** An individual with significant responsibility to control, manage, or direct the legal entity. This includes a member of the organization with control (including chief executive officer, chief financial officer, chief operating officer, managing member, general partner, president, vice president, or treasurer) and a controlling stake in the organization.

This form requires you to provide the information mentioned above for all of the entity’s beneficial owners, including individuals in a control role in the organization.

The number of individuals that satisfy this definition of “beneficial owner” may vary. Under Section 3, depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under Section 3, you must provide the identifying information of one individual under Section 2. It is possible that in some circumstances, the same individual might be identified under both sections (e.g., the president of Acme, Inc., who is a controlling person may also be a beneficial owner by holding 30% equity interest in the company). Thus, a completed form will contain the identifying information of at least one individual under Section 2, and up to four individuals in Section 3.

Please note this form must be completed along with the appropriate TIAA-CREF Funds Account Application or Adoption Agreement.

**Please contact 800-223-1200, enter prompt 1, then prompt 2, if you need assistance obtaining one of these forms:**

- TIAA-CREF Funds Account Application (F11154)
- TIAA-CREF Funds Account Application (Non-Retail Class Only) (F11488)
- TIAA-CREF Funds Account Application Advisor Funds (F11624)
- TIAA-CREF Funds Traditional and Roth IRAs New Account Form/Adoption Agreement (F11153)

**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 219227  
Kansas City, MO 64121-9227

**OVERNIGHT:**  
TIAA-CREF Funds  
430 W. 7th Street, Suite 219227  
Kansas City, MO 64105-1407





### 3. BENEFICIAL OWNER INFORMATION (REQUIRED)

Any individual who, directly or indirectly, owns 25% or more of the equity interest of the legal entity named above. (If no individual meets this definition, please write "Not Applicable.")

A. Name (First, MI, Last)  Date of Birth (mm/dd/yyyy)  /  /     Social Security Number

Residential Address  City  State   Zip Code

**Citizenship** For foreign owners, one of the following must be provided: Alien ID or passport number with country of issuance along with a photocopy of the ID.

U.S.  Resident Alien  Nonresident Alien  (Specify country)  Alien ID or Passport Number

B. Name (First, MI, Last)  Date of Birth (mm/dd/yyyy)  /  /     Social Security Number

Residential Address  City  State   Zip Code

**Citizenship** For foreign owners, one of the following must be provided: Alien ID or passport number with country of issuance along with a photocopy of the ID.

U.S.  Resident Alien  Nonresident Alien  (Specify country)  Alien ID or Passport Number

C. Name (First, MI, Last)  Date of Birth (mm/dd/yyyy)  /  /     Social Security Number

Residential Address  City  State   Zip Code

**Citizenship** For foreign owners, one of the following must be provided: Alien ID or passport number with country of issuance along with a photocopy of the ID.

U.S.  Resident Alien  Nonresident Alien  (Specify country)  Alien ID or Passport Number

D. Name (First, MI, Last)  Date of Birth (mm/dd/yyyy)  /  /     Social Security Number

Residential Address  City  State   Zip Code

**Citizenship** For foreign owners, one of the following must be provided: Alien ID or passport number with country of issuance along with a photocopy of the ID.

U.S.  Resident Alien  Nonresident Alien  (Specify country)  Alien ID or Passport Number



**4. CERTIFICATION (REQUIRED)**

I  hereby certify, as the natural person opening the account, to the best of my knowledge, that the information provided above is complete and correct. Further, I agree to notify TIAA-CREF Funds immediately in writing of any changes in the beneficial ownership interest of the above referenced organization.

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. Investors in TIAA-CREF Funds are urged to consult their own advisors before making investment-related decisions, including but not limited to, those related to transfer or rollover from retirement plans, purchase or sale of investments, selection or retention of investment managers, or selection of account beneficiaries.

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.

**PRIMARY AUTHORIZED INDIVIDUAL**

Your Signature

Today's Date (mm/dd/yyyy)

 /  / 20  
**CHECKLIST**

Remember to:

- Complete Section 1 with individual and entity information.
- Complete Section 2 with controlling party information.
- Complete Section 3 with beneficial owner information.
- Complete the certification in Section 4.
- Complete the appropriate new Account Application and Adoption Agreement and mail in with this form.
- Include any supporting documentation required.
- Make a copy of this form for your records.
- Please contact TIAA-CREF Funds with any questions, at 800-223-1200, enter prompt 1, then prompt 2, weekdays, 8 a.m. - 10 p.m. (ET).

