



SYSTEMATIC TRANSFERS FROM TIAA TRADITIONAL TO ANOTHER INVESTMENT COMPANY

NEED HELP? 800-842-2252

Weekdays

8 a.m. – 10 p.m. (ET)

Saturday

9 a.m. – 6 p.m. (ET)

Or visit TIAA.org.

Have your ID and password ready.

Use this form to transfer some or all of your TIAA Traditional account balances as a Direct Transfer to another financial institution permitted to receive transfers from your employer's retirement plan. To confirm if the institution you name can receive transfers, please call us.

HOW DOES IT WORK?

You complete the enclosed forms choosing an amount of \$10,000 or more (100% if your account balance is less than \$10,000 but greater than \$5,000) from your TIAA Traditional account, which is then placed into a new Transfer Payout Annuity contract. Each year this new contract will automatically transfer 10% of the value, plus any earnings, to another investment company that you choose.

KEY INFORMATION TO CONSIDER

- Please see the cover letter for any plan rules that may apply to your Request.
- Please note, if you have a Retirement Choice certificate, your institution has the right to change funding vehicles for your accumulations. If your institution exercises this right, accumulations from which you may be receiving payments may be moved to another carrier.
- To view your current accumulation or to find out the status of your Request, visit our Web Center at TIAA.org, or call us; both are available 24 hours a day, seven days a week. You'll need your password and User ID.
- If you want to withdraw funds from your CREF accounts, please call us. There are different rules for these withdrawals, so you must complete separate forms.
- We will continue to use the beneficiary designation we have on file for the original contract. Once your Transfer Payout Annuity contract is issued, you may go online at TIAA.org to update your beneficiary designations.
- We'll send the transfer amount within four to seven business days after we receive your completed forms or from the start date you requested. To avoid delays, be sure to complete all sections.





SYSTEMATIC TRANSFERS FROM TIAA TRADITIONAL TO ANOTHER INVESTMENT COMPANY

Please print using black or dark blue ink.

IMPORTANT: A full Social Security Number/Taxpayer Identification Number is required to process your request.

If you claim residence AND citizenship outside the U.S., you must complete Form W-8BEN in addition to this form to certify your foreign tax status. To print the W-8BEN form, go to TIAA.org/forms, and scroll to Find tax forms.

1. PROVIDE YOUR INFORMATION

First Name Middle Initial

Last Name Suffix

Social Security Number/
Taxpayer Identification Number Contact Telephone Number Extension

State of Legal Residence (if outside the U.S., write in Country of Residence) Citizenship (if not U.S.)

* The Plan and Sub Plan Numbers should have been provided when you requested the form. If you don't have them, please reference your quarterly statement.

2. PROVIDE YOUR CONTRACT NUMBERS

Yes, make systematic transfers from the TIAA Traditional accumulation from the contract listed below.

The financial institutions permitted to receive transfers from your employer's retirement plan may be restricted by your employer's plan provisions. To confirm whether the institution you name can receive transfers, please call us.

TIAA Number

Plan Number* Sub Plan Number*

Plan Name

If you currently contribute to TIAA Traditional, you should review your allocations. If you want to change your allocations and you have a password, you can visit our website at TIAA.org or call us.

3. WHEN WILL YOUR MONTHLY TRANSFERS BEGIN

We'll make the first transfer when we issue your Transfer Payout Annuity contract. And for future transfers, we'll transfer funds monthly on the first business day of that month. If you wish to change your monthly transfer date to a later date, please tell us below.

Date (mm/yyyy) /

I want monthly transfers to begin on the first day of: /





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** The minimum transfer is \$10,000, or 100% if the account balance is less than \$10,000.

Remember, account balances change daily based on market performance. Log in to your account at TIAA.org, or call us for automated up-to-date account information.

4. CHOOSE THE AMOUNT TO TRANSFER FROM TIAA TRADITIONAL (CHOOSE ONE)

A. I want to transfer my entire TIAA Traditional amount.

B. I want to transfer only a part of my TIAA Traditional available account balance as indicated. *If you are not withdrawing/rolling over your entire available account balance, indicate the dollar amount or percentage. Percentages and amounts must be in whole numbers.*

Dollar Amount**		Percent of Account Balance
\$ <input type="text"/>	OR	<input type="text"/> <input type="text"/> <input type="text"/> %

Your employer may restrict the investment companies that can receive transfers from your employer's retirement plan. Please call us to confirm whether the investment company you name can receive transfers.

5. ACCEPTANCE BY INVESTMENT COMPANY

A representative from the investment company receiving the transfer must complete this section.

We agree to accept the direct transfers from TIAA and to deposit the amount in an account/annuity set up for the participant under the employer's retirement plan. We'll enforce applicable plan withdrawal restrictions on any elective deferrals or earnings on them, and any preretirement survivor annuity and joint and survivor annuity requirements of ERISA or of any plan provisions.

Investment Company Name

Street Address or P.O. Box for Funds Transfer

City

State

Zip Code

Contact Telephone Number

Extension

Account Number

Please sign using black or dark blue ink. Digital signatures are not accepted.

Investment Company Representative's Signature

Today's Date (mm/dd/yyyy)

 / / 20

Investment Company Representative's Name (please print)

Title





6. YOUR AUTHORIZATION AND SIGNATURE

By signing below:

- You authorize TIAA to transfer funds from your TIAA Traditional account balances, as stated in this form.
The date we issue your Transfer Payout Annuity contract cannot be before we receive all necessary papers.
Once we issue your Transfer Payout Annuity contract, it cannot be revoked and the amount cannot be changed.
If you transfer the full value of your TIAA contract to your Transfer Payout Annuity, that TIAA contract will be of no value.
You authorize the continuation of the beneficiaries under the original contract listed in section 2. Once the contract is issued, you reserve the right to change this designation at any time.
For your protection, TIAA may require additional verification of your identity before accepting your transaction as in good order.

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: Item 4 serves no purpose beyond required reproduction of the official Form W-9 language. 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 your full legal name with suffix, if applicable, using black or dark blue ink. Digital signatures are not accepted.

Your Signature

[Signature line]

Today's Date (mm/dd/yyyy)

[Date input boxes: / / 20]





SYSTEMATIC TRANSFERS FROM TIAA TRADITIONAL TO ANOTHER INVESTMENT COMPANY

RETURN COMPLETED FORM(S) TO:

FAX:

800-914-8922 (within U.S.)
704-595-5795 (outside U.S.)

STANDARD MAIL:

TIAA
P.O. Box 1268
Charlotte, NC 28201-1268

OVERNIGHT:

TIAA
8500 Andrew Carnegie Blvd.
Charlotte, NC 28262

SEND US YOUR FORM ONLINE:

- Log in to your account at TIAA.org. On the main menu, under “My Account,” select the “Upload documents” link.
- Within the “Shared Files” tab in “Message Center,” select the “Upload Files” button.

MOBILE UPLOAD:

- Log in to your TIAA app, and click on “Message Center” from the top right menu.
- Click on “Shared Files.”
- In the bottom right corner, click on the upload icon and select the folder to upload to.
- Follow the instructions to take a picture and upload your completed form.

CHECKLIST

Did you remember to:

- Complete all necessary personal information.
- Tell us how much you would like to transfer. (Section 4)
- Your institution must approve the alternate carrier. Please call to verify if company is approved.
- Sign and date this form. (Section 6)
- Call TIAA if you have any questions or need assistance at **800-842-2252**.

FRAUD WARNING

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.

Colorado residents, please note: 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.

Virginia and Washington, DC residents, please note: 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.

