

You should use this IRA Asset Transfer Form to transfer assets from your current IRA custodian or retirement plan custodian to an IRA with TIAA-CREF Funds. Be sure to complete the IRA New Account Form/Adoption Agreement if you are opening a new IRA with TIAA-CREF Funds. Upon receipt of this form, we will contact your current custodian to arrange the transfer. Please complete a separate IRA transfer form for each different type of account being transferred. You should also use this form to convert Traditional IRA assets from your current custodian to a TIAA-CREF Funds Roth Conversion IRA. You must also complete a Roth IRA Conversion 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. 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.

**Send your signed and completed form to TIAA-CREF Funds per the 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. – 6 p.m. (ET).**

## 1. ACCOUNT REGISTRATION (REQUIRED)

Owner's Name (Please print or type)

Prefix	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Entity

If you are transferring and establishing an entity account as a beneficiary of an inherited IRA and you are an authorized signer, you must complete the TIAA-CREF Funds Legal Entity Beneficial Ownership Certification Form included with the TIAA-CREF Funds Traditional and Roth IRAs New Account Form/Adoption Agreement required to establish the account.

Account Number	Social Security Number/ Taxpayer Identification Number	Date of Birth (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Nonresident Non-U.S. Citizens: Enter your Social Security Number/Individual Taxpayer Identification Number

Address Street or P.O. Box (APO and FPO addresses will be accepted)	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address (If the above address is a P.O. Box, you must also provide a street address)	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Phone Number	Phone Number Type	Secondary Phone Number	Phone Number Type
<input type="text"/>	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	<input type="text"/>	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business

Alternate Phone	Phone Number Type	Email Address
<input type="text"/>	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	<input type="text"/>

## 2. FOR INHERITED ACCOUNTS ONLY

Decedent's Name	Decedent's Social Security Number	Decedent's PIN (TIAA clients only)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Decedent's Date of Birth (mm/dd/yyyy)	Decedent's Date of Death (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>



In order to comply with the provisions of the SECURE Act of 2020, you must identify your beneficiary relationship with the original owner of the IRA/Roth IRA in order to open an account. Please select below only **one** beneficiary type. If you need further guidance, contact your tax advisor.  
**Note:** If: (i) you received your inherited IRA from a decedent who passed away on or before December 31, 2019, and you opted to receive distributions over your life, or (ii) you are a beneficiary type marked by an asterisk (\*) and you received your inherited IRA from a decedent who passed away after December 31, 2019, you must additionally complete the Required Minimum Distributions for the Beneficiary section below.

The SECURE Act of 2020 modified the Internal Revenue Code definition of a retirement account beneficiary as well as the distribution rules a beneficiary must follow when distributing assets from an inherited retirement account. This in turn impacts when an inherited retirement account is considered abandoned under a state's unclaimed property law. As a result, we need to confirm your beneficiary type in the relation to the original owner from whom you inherited the retirement account. To prevent your inherited retirement account from being considered abandoned, we recommend you maintain regular contact with TIAA by either periodically logging in to your account or contacting customer service.

## BENEFICIARY TYPE SELECTION (REQUIRED)

Please select one:

### INHERITING DIRECTLY FROM THE ORIGINAL DECEASED OWNER:

- ☐ **First Generation Non-Designated Beneficiary\* (1st Gen NDB)** Select this option if the inherited IRA is being transferred to an entity beneficiary (estate, charity, non-see-through trust).
- ☐ **First Generation Eligible Designated Sole Spouse Beneficiary (1st Gen EDB-Sole Spouse)** Select this option if you are a sole spouse and you are **not** electing to treat as your own IRA. If you are treating the IRA as your own, skip this section and see the Remaining Required Minimum Distribution of the IRA Owner section below.
- ☐ **First Generation Eligible Designated Minor Beneficiary of Deceased Owner\* (1st Gen EDB-Minor)** Select this option if the inherited IRA is for a minor (under the age of 21) who is a direct descendant (son or daughter) of the deceased shareholder.
- ☐ **First Generation Eligible Designated Beneficiary – Other\* (1st Gen DB)** Select this option if you are eligible for Life Expectancy payments (chronically ill beneficiary, disabled beneficiary, eligible designated beneficiary less than 10 years younger than original account owner).
- ☐ **First Generation Designated Beneficiary** Select this option if you are not eligible for Life Expectancy (sibling of deceased, grandchild of deceased, child over the age of 21).

### INHERITING FROM A BENEFICIARY (NOT THE ORIGINAL DECEASED OWNER):

The previous beneficiary:

First Name

Last Name



Date of Birth (mm/dd/yyyy)

Date of Death (mm/dd/yyyy)

 /  / 
 /  / 

- ☐ **Succeeding Generation Beneficiary when First Generation was Eligible Designated Sole Spouse Beneficiary\* (2<sup>nd</sup> or > Gen EDB-Sole Spouse)** Select this option if you are a second generation or greater beneficiary when the first generation beneficiary was an Eligible Designated Sole Spouse.
- ☐ **Succeeding Generation Beneficiary when First Generation was Eligible Designated Minor of Deceased Owner\* (2<sup>nd</sup> or > Gen EDB-Minor)** Select this option if you are a second generation or greater beneficiary when the first generation beneficiary was a minor son or daughter (under the age of 18) of the original account owner.
- ☐ **Succeeding Generation Beneficiary when First Generation was Eligible Designated Beneficiary – Other\* (2<sup>nd</sup> or > Gen EDB-Other)** Select this option if you are a second generation or greater beneficiary when the first generation beneficiary was eligible for Life Expectancy payments and was not the sole spouse or minor direct decedent of the original account owner.
- ☐ **Succeeding Generation Beneficiary when First Generation was a Designated Beneficiary (2<sup>nd</sup> or > Gen DB)** Select this option if you are a second generation or greater beneficiary when the first generation beneficiary was a designated beneficiary who was not eligible for Life Expectancy payments.



### 3. CURRENT CUSTODIAN

Please confirm the address below with your current custodian. TIAA-CREF Funds will forward this Asset Transfer Form to the address below to initiate the transfer process. Please attach a copy of your current statement to help expedite this transfer.

Name of Current Custodian

Account Representative (if applicable)

Address

City

State

Zip Code

### 4. SOURCE OF MONEY BEING TRANSFERRED

Please check the box that corresponds to the source of money now being transferred. TIAA-CREF Funds will establish the same type of IRA for you. (**Please note:** If you are converting a Traditional IRA from your current custodian to a TIAA-CREF Funds Roth Conversion IRA, do not complete this section. **Go to Section 5.**)

☐

Traditional Contributory IRA

☐

Roth Contributory IRA

☐

Roth Conversion IRA

☐

Inherited Traditional IRA

☐

Inherited Roth IRA

☐

IRA Qualified Retirement Plan

☐

Rollover IRA (Established only with funds received from a retirement plan distribution)

### 5. FEDERAL TAX WITHHOLDING ELECTION (CHECK ONE)

**(For Conversions Only) Important income tax information:** In accordance with IRS guidance, TIAA will not withhold amounts for federal tax purposes unless you complete a substitute federal W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. These rules do not apply to nonresident, non-U.S. citizens. (See NOTE below.)

If you desire federal withholding, please check the box below to agree to voluntary withholding:

☐

I hereby notify TIAA that I will provide a federal form W-4R Withholding Certificate, and I will voluntarily elect federal withholding by entering a rate between 0% and 100% on such form.

I understand that if I do not complete and submit a federal form W-4R Withholding Certificate to TIAA with this transactional form, TIAA will not withhold amounts for federal tax.

Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including 0%) on payments to be delivered outside of the United States and its possessions.

**NOTE:** If you are a nonresident, non-U.S. citizen, you must check the box below.

☐

Notwithstanding the above, as a nonresident, non-U.S. citizen, I understand that special withholding rules apply to a conversion of my Traditional IRA to a Roth IRA unless rules from a relevant income tax treaty apply.

### STATE TAX WITHHOLDING

State income tax withholding may be required from your distribution. If state withholding is mandatory, we will withhold at the rate required by your state. Please note that the state may allow you to elect not to have withholding applied, to choose additional withholding, or to specify the rate of withholding. For more information on state tax withholding, go to [TIAA.org/public/tax-withholding](http://TIAA.org/public/tax-withholding). Call TIAA if you have any questions at 800-842-2252.



## 6. ASSET TRANSFER INSTRUCTIONS

List the assets you are transferring to TIAA-CREF Funds. We will contact your current custodian to arrange the transfer. If you are transferring assets from more than two funds, check the box at the end of this section and attach additional transfer instructions.

☐ **Mutual Fund** Mutual Fund Name  Account Number

☐ Liquidation in Full ☐ Partial Liquidation of \$  OR ☐  % of Account

**Mutual Fund** Mutual Fund Name  Account Number

☐ Liquidation in Full ☐ Partial Liquidation of \$  OR ☐  % of Account

☐ **Certificate of Deposit (CD)** CD Account Number

☐ Liquidate Immediately<sup>1</sup> ☐ Liquidate upon Maturity<sup>2</sup> Maturity Date (mm/dd/yyyy)  /  / 20

<sup>1</sup> Some institutions charge a withdrawal penalty for early liquidation of a CD. Check with your current custodian to verify whether this penalty applies to you.

<sup>2</sup> We must receive this form at least 15 days (but not more than one month) prior to the maturity date of the CD.

☐ **Brokerage Accounts** (other than for Mutual Funds or Certificates of Deposit) Account Number

☐ Liquidation in Full ☐ Liquidate Only the Following Assets

Description of Assets (Partial transfers only)

Quantity

(Indicate "all" or a number of shares, dollar amount, or percentage to be liquidated)

☐ **Other** Type of Asset  Account Number

☐ Liquidation in Full ☐ Partial Liquidation of \$  OR ☐  % of Account

☐ I have attached additional transfer instructions



## 7. INVESTMENT ALLOCATION

Please indicate the funds in which you are investing. If you are investing in an existing TIAA-CREF Funds IRA, please fill in your IRA Fund Account number. If you would like to invest in multiple existing IRAs, please attach a separate sheet with the additional information. If you are establishing a **new IRA**, please check the box indicating that this is a new account. Note: If you are opening a new fund within an existing account with the allocations given below, please check the box for acknowledgment in the signature section.<sup>1</sup>

Account Number

☐ Existing TIAA-CREF Funds IRA Account Number         ☐ New IRA Account<sup>1</sup>

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

### RETAIL CLASS

FUND NAME (FUND CODE)	AMOUNT	PERCENT	FUND NAME (FUND CODE)	AMOUNT	PERCENT
Bond Index (91)	\$ <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"/> %
Core Bond (66)	\$ <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"/> %
Core Impact Bond (45)	\$ <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"/> %
Core Plus Bond (96)	\$ <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"/> %
Emerging Markets Debt (2794)	\$ <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"/> %
Emerging Markets Equity (67)	\$ <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"/> %
Emerging Markets Equity Index (69)	\$ <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"/> %
Equity Index (65)	\$ <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"/> %
Green Bond (2608)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Quant International Small-Cap Equity (2966)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Growth & Income (64)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Quant Small-Cap Equity (88)	\$ <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"/> %	Quant Small/Mid-Cap Equity (2956)	\$ <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"/> %	Real Estate Securities (89)	\$ <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"/> %	Short Duration Impact Bond (2609)	\$ <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"/> %	Short-Term Bond (97)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
International Opportunities (49)	\$ <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"/> %
Large-Cap Growth (68)	\$ <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"/> %
Large-Cap Value (85)	\$ <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"/> %
Lifecycle Retirement Income (70)	\$ <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"/> %
Lifestyle Aggressive Growth (94)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	<b>Total Amount</b>	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %



## 8. REMAINING REQUIRED MINIMUM DISTRIBUTION OF THE IRA OWNER

If a deceased original IRA owner had any unpaid Required Minimum Distribution (RMD) amounts within such owner's account, such unpaid RMD amounts cannot be transferred to your inherited IRA.

- ☐ I want TIAA to calculate the unpaid RMD amount. Distribute the amount of the remaining RMD to me in a single payment.
- ☐ I will provide my own calculated RMD amount (option is for individuals with multiple IRAs). Please distribute \$\_\_\_\_\_ to satisfy the remaining RMD.

The remaining Required Minimum Distribution of the IRA owner is a nonperiodic distribution that is non-rollover eligible.

### NONPERIODIC DISTRIBUTIONS THAT ARE NON-ROLLOVER ELIGIBLE (CHECK ONE)

- ☐ I hereby notify TIAA that I decline to provide a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I understand that federal withholding will be withheld at the default rate of 10%.
- ☐ I am providing a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I am making a federal withholding election as indicated on my substitute federal form W-4R Withholding Certificate by entering a rate between 0% and 100% on line 2.
- ☐ I am providing a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I am choosing to have no federal income tax withheld by entering "-0-" on line 2.

Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including 0%) on payments to be delivered outside of the United States and its possessions.

If you are a nonresident, non-U.S. citizen, you must certify your foreign tax status by providing IRS Form W-8BEN prior to requesting a distribution. A W-8BEN is maintained on file for a three-year period. To print the W-8BEN form, go to [TIAA.org/forms](https://www.tiaa.org/forms) and scroll to 'Find tax information.'

### STATE TAX WITHHOLDING

State income tax withholding may be required from your distribution. If state withholding is mandatory, we will withhold at the rate required by your state. Please note that the state may allow you to elect not to have withholding applied, to choose additional withholding, or to specify the rate of withholding. For more information on state tax withholding, go to [TIAA.org/public/tax-withholding](https://www.tiaa.org/public/tax-withholding). Call TIAA if you have any questions at 800-842-2252.



## 9. REQUIRED MINIMUM DISTRIBUTIONS FOR THE BENEFICIARY

If: (i) you received your inherited IRA from a decedent who passed away on or before December 31, 2019, and you opted to receive distributions over your life, or (ii) you are a beneficiary type marked by an asterisk (\*) in Section 2 above and you received your inherited IRA from a decedent who passed away after December 31, 2019, RMDs from the inherited IRA are based on a measuring life as required by federal tax law.

RMD amounts paid to you are nonperiodic distributions that are non-rollover eligible. Please use the selections below to choose withholding on your RMD amounts.

### NONPERIODIC DISTRIBUTIONS THAT ARE NON-ROLLOVER ELIGIBLE (CHECK ONE)

- ☐ I hereby notify TIAA that I decline to provide a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I understand that federal withholding will be withheld at the default rate of 10%.
- ☐ I am providing a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I am making a federal withholding election as indicated on my substitute federal form W-4R Withholding Certificate by entering a rate between 0% and 100% on line 2.
- ☐ I am providing a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I am choosing to have no federal income tax withheld by entering "-0-" on line 2.

Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including 0%) on payments to be delivered outside of the United States and its possessions.

If you are a nonresident, non-U.S. citizen, you must certify your foreign tax status by providing IRS Form W-8BEN prior to requesting a distribution. A W-8BEN is maintained on file for a three-year period. To print the W-8BEN form, go to [TIAA.org/forms](https://www.tiaa.org/forms) and scroll to 'Find tax information.'

### STATE TAX WITHHOLDING

State income tax withholding may be required from your distribution. If state withholding is mandatory, we will withhold at the rate required by your state. Please note that the state may allow you to elect not to have withholding applied, to choose additional withholding, or to specify the rate of withholding. For more information on state tax withholding, go to [TIAA.org/public/tax-withholding](https://www.tiaa.org/public/tax-withholding). Call TIAA if you have any questions at 800-842-2252.



## 10. SIGNATURE

I hereby authorize this transfer to the TIAA-CREF Funds IRA as indicated on this form.

### 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](https://www.tiaa.org/public/prospectuses))

TIAA Privacy Policy ([TIAA.org/public/support/privacy-policy](https://www.tiaa.org/public/support/privacy-policy))

TIAA Business Continuity Policy ([TIAA.org/public/about-tiaa/business-continuity](https://www.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. 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](https://www.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](https://www.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.

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 of your shares or units you 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 5 days, this transaction may be canceled.

If I am a nonresident, non-citizen of the United States, I acknowledge that the below tax certifications do not apply to me. I have provided TIAA with an IRS Form W-8BEN within the last three years or will submit a W-8BEN prior to requesting a distribution from this account. I acknowledge that I must have a W-8BEN on file to request a distribution. (If you need to print IRS Form W-8BEN, go to [TIAA.org/forms](https://www.tiaa.org/forms) and scroll to 'Find tax information'.)

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 or Authorized Signer's Signature (exactly as it appears in Section 1)

Today's Date (mm/dd/yyyy)

/   / 20





**11. MEDALLION SIGNATURE GUARANTEE**

Your current custodian may require a medallion signature guarantee in order to process the transfer. Please check with your custodian before sending us this Asset Transfer Form.\*\*

\*\*A medallion signature guarantee is not the same as a notarized signature. You must obtain a medallion signature guarantee from a bank or trust company, savings bank, savings and loan association, or a member of a national stock exchange which participates in the medallion signature guarantee program. A notary public is a not an acceptable guarantor.

**12. UMB BANK, N.A. AUTHORIZATION (FOR OFFICE USE ONLY)**

(UMB Bank, n.a. will complete this section.) UMB Bank, n.a. hereby represents that it has established for the above-named individual a TIAA-CREF Funds IRA that qualifies under Section 408 or Section 408A of the Internal Revenue Code, and will apply the proceeds of the above-described IRA Asset Transfer to such IRA upon receipt.

**Instructions to Custodian:** Send redemption proceeds by check to: TIAA-CREF Funds, P.O. Box 219227, Kansas City, MO 64121-9227

UMB Bank, n.a. Authorized Signature

Today's Date (mm/dd/yyyy)

Reference Number

 /  / 20**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





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**WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS  
AND ELIGIBLE ROLLOVER DISTRIBUTIONS**  
SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

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**IMPORTANT INFORMATION**

**PLEASE READ BEFORE FILLING OUT FORM**

This substitute form W-4R applies to non-rollover eligible payments that are nonperiodic and rollover-eligible payments.

Federal laws may require mandatory federal income tax be withheld from cash withdrawals. Our records indicate that you are a U.S. person (U.S. citizen or resident non-U.S. citizen), and may, therefore, be subject to federal tax withholding from your cash distribution. If you claim residence AND citizenship outside the United States, you must complete Form W-8BEN instead of this form W-4R to certify your foreign tax status. To print the W-8BEN form, go to [TIAA.org/forms](https://www.tiaa.org/forms) and scroll to Find tax forms. U.S. citizens living abroad, except in any U.S. territories, must elect to have taxes withheld. Distributions from retirement plans are subject to a federal default withholding rate depending on the type of payment. If you want the federal default rate applied, you do not need to submit this form as the federal default rate will be applied automatically. If you want a rate other than the federal default rate for either a non-periodic payment or an eligible rollover distribution or want no withholding on a non-periodic payment, please submit this form.





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**WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS  
AND ELIGIBLE ROLLOVER DISTRIBUTIONS**  
**SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS**

Page 1 of 2

**1. PROVIDE YOUR INFORMATION**

**STEP 1A.**

Title	First Name	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Suffix	
<input type="text"/>	<input type="text"/>	
Mailing Address		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Contact Telephone Number	Extension	
<input type="text"/>	<input type="text"/>	

**STEP 1B.**

Social Security Number/  
Taxpayer Identification Number

<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"/>
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**STEP 1C.**

Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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A TIAA Company

**WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS  
AND ELIGIBLE ROLLOVER DISTRIBUTIONS**  
SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

Page 2 of 2

Your withholding rate is determined by the type of payment you will receive.

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate on line 2. You may not choose a rate less than 20%.

See IRS Form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions Instructions attached at the end of this form for more information.

**Step 2**

Complete this line if you would like a rate of withholding that is different from the default withholding rate.

See the IRS Form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions Instructions and the Marginal Rate Tables attached at the end of this form for additional information.

Enter the rate as a whole number (no decimals) \_\_\_\_\_ Line 2 \_\_\_\_\_ %

**STEP 3. YOUR SIGNATURE**

The form will become effective with your next available payment. You may revoke this election at any time by filing a new federal income tax withholding election form with TIAA.

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 your full legal name with suffix, if applicable, using black ink, or online using TIAA's digital signing experience.

Your Signature

Today's Date (mm/dd/yyyy)

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**OPTIONS TO RETURN COMPLETED FORM(S)**

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 DELIVERY:**

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





A TIAA Company

# WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

## IRS FORM W-4R WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS INSTRUCTIONS

### GENERAL INSTRUCTIONS

Section references are to the Internal Revenue Code.

**Future developments.** For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to [www.irs.gov/FormW4R](http://www.irs.gov/FormW4R).

**Purpose of form.** Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

**Caution:** If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

### 2023 MARGINAL RATE TABLES

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See the next page for more information on how to use this table.

Single or Married filing separately		Married filing jointly or Qualifying surviving spouse		Head of Household	
Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more
\$0	0%	\$0	0%	\$0	0%
13,850	10%	27,700	10%	20,800	10%
24,850	12%	49,700	12%	36,500	12%
58,575	22%	117,150	22%	80,650	22%
109,225	24%	218,450	24%	116,150	24%
195,950	32%	391,900	32%	202,900	32%
245,100	35%	490,200	35%	252,050	35%
591,975*	37%	721,450	37%	598,900	37%

\* If married filing separately, use \$360,725 instead for this 37% rate.

### GENERAL INSTRUCTIONS (CONTINUED)

**Nonperiodic payments—10% withholding.** Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments unless you enter a different rate on line 2. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering “-0-” on line 2. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including “-0-”) on any payments to be delivered outside the United States and its territories.

**Note:** If you don't give Form W-4R to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can't honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2023, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

**Eligible rollover distributions—20% withholding.** Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can't choose withholding at a rate of less than 20% (including “-0-”). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% on line 2. Don't give Form W-4R to your payer unless you want more than 20% withheld.





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Note that the following payments are **not** eligible rollover distributions: (a) qualifying "hardship" distributions, and (b) distributions required by federal law, such as required minimum distributions. See Pub. 505 for details. See also Nonperiodic payments—10% withholding above.

**Payments to nonresident aliens and foreign estates.** Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

**Tax relief for victims of terrorist attacks.** If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, enter "-0-" on line 2. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

**SPECIFIC INSTRUCTIONS**

**LINE 1B**

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

**LINE 2**

**More withholding.** If you want more than the default rate withheld from your payment, you may enter a higher rate on line 2.

**Less withholding (nonperiodic payments only).** If permitted, you may enter a lower rate on line 2 (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

**Suggestion for determining withholding.** Consider using the Marginal Rate Tables on the previous page to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate on line 2. (See Example 1 below.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate on line 2. (See Example 2 below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on line 2.

**Examples.** Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

**Example 1.** You expect your total income to be \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Because these two rates are the same, enter "22" on line 2.

**Example 2.** You expect your total income to be \$42,500 without the payment. Step 1: Because your total income without the payment, \$42,500, is greater than \$24,850 but less than \$58,575, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. The two rates differ. \$16,075 of the \$20,000 payment is in the lower bracket (\$58,575 less your total income of \$42,500 without the payment), and \$3,925 is in the higher bracket (\$20,000 less the \$16,075 that is in the lower bracket). Multiply \$16,075 by 12% to get \$1,929. Multiply \$3,925 by 22% to get \$863.50. The sum of these two amounts is \$2,792.50. This is the estimated tax on your payment. This amount corresponds to 14% of the \$20,000 payment (\$2,792.50 divided by \$20,000). Enter "14" on line 2.



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. – 6 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







**A. NAME AND TITLE OF NATURAL PERSON OPENING THE ACCOUNT** (Must provide signature in box under Certification Section 4)



**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)

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**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. - 6 p.m. (ET).

