



FINANCIAL SERVICES
FOR THE GREATER GOOD*

P.O. Box 1259
Charlotte, NC 28201

DESIGNATING BENEFICIARIES

PAGE 1 OF 3

Important: Please use a pen with **blue or black ink and print in capital letters**. If you have questions, call us toll-free at **800 842-2776** Monday to Friday from 8 a.m. to 10 p.m. and Saturday from 9 a.m. to 6 p.m. (ET) or visit us online at **www.tiaa-cref.org**.

YOUR PERSONAL INFORMATION

First Name
 MI
 Last Name

- -

Social Security Number/Tax Identification Number
 / /

Date of Birth (mm/dd/yyyy)

- -

Daytime Telephone Number
 - -

Evening Telephone Number

Your Country of Citizenship is

Your U.S. State of Residence is:

OR Your Country of Residence is:

PROVIDE YOUR ANNUITY/ACCOUNT NUMBERS

Important: This form is for funds in TIAA-CREF retirement accounts through employers' plans not subject to ERISA, from plans that have no spousal rights provisions, or are not part of employers' plans like IRAs. This form does not cover mutual fund accounts not part of a retirement plan, life insurance contracts, and contracts through which you are currently receiving retirement income. If you have questions or need a form for these situations, call us or visit us online.

Check **either A or B** below. Check the first box (**A**) if you want the same beneficiary designation(s) for all your applicable TIAA-CREF annuities. Check the second box (**B**) if you want the beneficiary designation(s) applied to specific annuities. If you have additional annuities for which the designation(s) apply, check the box below and attach a signed and dated page listing your additional annuity numbers.

A. These beneficiary designations will apply to all of your TIAA and accompanying CREF annuity numbers, which are described on Page 1 of "Designating Beneficiaries for Your TIAA-CREF Accounts."

OR

B. These designations of beneficiaries are to apply only to the following TIAA and accompanying CREF annuity numbers.

Check this box and attach a signed and dated page to list additional annuity numbers.

TIAA Numbers

CREF Numbers





DESIGNATING BENEFICIARIES

DESIGNATING PAYMENT TO CHILDREN OF A DECEASED CHILD OF MINE/BENEFICIARY

If you want to apply the **Payment to children of a deceased child of mine/Payment to children of a deceased beneficiary** designations, complete **A and/or B** as appropriate. **If you don't select a class of beneficiaries for a provision, we will apply this provision to your primary beneficiary(ies).** See "Making Beneficiary Designations" on Page 2 of "Designating Beneficiaries for Your TIAA-CREF Accounts" for more information on these provisions.

A. Apply the provision "Payment to children of a deceased **child of mine**" to my
 Primary (Class I) beneficiaries Contingent (Class II) beneficiaries.

AND/OR

B. Apply the provision "Payment to children of a deceased **beneficiary**" to my
 Primary (Class I) beneficiaries Contingent (Class II) beneficiaries.

YOUR AGREEMENT

Please provide your signature and the date below. Also be sure to complete the following pages which request information about your marital status as required by your plan. Please mail this completed form to **TIAA-CREF, P.O. Box 1259, Charlotte, NC 28201.**

I, the undersigned, agree that:

- All prior beneficiary designations and methods of payment requested for the annuities indicated on this "Designating Beneficiaries" form will be revoked, and any benefits due by reason of my death will be payable to the beneficiary(ies) named on this form.
- I understand that this "Designating Beneficiaries" form is subject to all of the terms and conditions of the annuities and as described in "Designating Beneficiaries for Your TIAA-CREF Accounts" provided with this form.
- I request that any provision that requires the annuities to be submitted for endorsement of this change be waived.
- I reserve the right to make further changes to my beneficiary designations. However, if I previously named an irrevocable beneficiary for any benefits, I will need to obtain a consent or release from the beneficiary before a change can be made.
- I understand that if I elect to have this designation apply to all my referenced annuities, it will apply to those issued as of the date this form is accepted by TIAA-CREF.

Your Signature

Date (mm/dd/yyyy)

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