

# YOUR TIAA-CREF ENROLLMENT FORM



## FIRST:

### Make your contribution allocations

We have included information about the accounts or funds that you should refer to when you complete the “Plan Contribution Allocation Administrative Form.” The transfer and withdrawal restrictions of the accounts and funds differ and should be taken into consideration. You may change your allocation at any time.

#### Option A: Choose a TIAA-CREF Lifecycle Fund

Pick the Lifecycle Fund closest to your estimated year of retirement.

#### Option B: Build your own portfolio

Using whole numbers, choose the percentage you want to allocate to each account or fund. The three-digit account and fund numbers

and descriptions are provided with your enrollment form. Write the account or fund number and percentage allocated to each in the appropriate columns. If you are allocating to more than 10 accounts or funds, use a separate page and include your name and Social Security number on it. If your allocation is invalid in any way, your contributions will be automatically invested for you. Upon receiving clarification from you, we will apply all future contributions according to your instructions.

If you need help choosing an allocation, speak to a TIAA-CREF Consultant at **800 842-2776** Monday to Friday from 8 a.m. to 10 p.m. (ET) and Saturday from 9 a.m. to 6 p.m. (ET).

## THEN:

### 1 Provide your personal information

Be sure to provide all the information requested. If you do not have a Social Security number, please provide your taxpayer identification number.

#### 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, including us, 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, such as your home telephone number. Until you provide the information we need, we may not be able to open an account or effect any transactions for you.

### 2 Designate your beneficiary(ies)

Your primary beneficiary(ies) will be paid any survivor benefit existing under the contract at your death. If there are no surviving primary beneficiaries, your contingent beneficiary(ies) will receive these benefits. If you are married, provisions under your employer's plan may require you to name your spouse as primary beneficiary for at least a portion of the benefit. Complete the “Waiver of Spouse's Right to Pre-retirement Death Benefits” if you have designated someone other than your spouse as primary beneficiary. You can call a consultant at **800 842-2776** for further information about choosing your beneficiaries.

### 3 Indicate any existing contracts

We are complying with a regulatory requirement in asking that you provide information on existing contracts.

### 4 Indicate your agreement by signing

#### ▶ Obtain your spouse's signature (if applicable)

Under your employer's plan, your spouse has the right to a death benefit. If the plan is subject to the Employee Retirement Income Security Act (ERISA), your spouse is entitled to at least 50% of the death benefit specified by the plan. If the plan is not subject to ERISA, your spouse is entitled to the percentage stipulated by the plan. Your spouse must consent to any beneficiary designation that doesn't meet these requirements by signing the waiver at the end of your form in the presence of a Notary or Plan Representative. Generally, you can waive these rights only if you are at least age 35. If you are younger than 35 and want to name someone other than your spouse, please contact your benefits office for more information.

#### ▶ Return your enrollment form

Return your enrollment form to your employer's benefits office. You may need to complete a salary reduction agreement with your employer.

## YOUR INVESTMENT CHOICES

**FOR MORE INFORMATION:** For detailed descriptions and performance information for each of these accounts and funds go to [www.tiaa-cref.org/vanderbilt](http://www.tiaa-cref.org/vanderbilt)

**OPTION A:** To select the simplified “One Decision” strategy, simply choose the Lifecycle Fund listed below that’s closest to your estimated year of retirement.

### RETIREMENT FUNDS

ASSET CLASS	TYPE	FUNDS	
MULTI-ASSET	MUTUAL FUND	TIAA-CREF Lifecycle Fund 2010	TIAA-CREF Lifecycle Fund 2030
		TIAA-CREF Lifecycle Fund 2015	TIAA-CREF Lifecycle Fund 2035
		TIAA-CREF Lifecycle Fund 2020	TIAA-CREF Lifecycle Fund 2040
		TIAA-CREF Lifecycle Fund 2025	

**OPTION B:** If you prefer to build your own portfolio, the choices listed below are offered in your retirement plan.

### RETIREMENT ACCOUNTS AND FUNDS

ASSET CLASS	TYPE	FUNDS/ACCOUNTS (FUND/ACCOUNT NUMBER)	
EQUITIES	VARIABLE ANNUITY	CREF Equity Index Account (008) <sup>105</sup> CREF Global Equities Account (006) <sup>105</sup>	CREF Growth Account (007) <sup>105</sup> CREF Stock Account (002) <sup>105</sup>
	MUTUAL FUND	TIAA-CREF International Equity Index Fund (027) TIAA-CREF Large-Cap Value Index Fund (020) TIAA-CREF Mid-Cap Growth Fund (015)	TIAA-CREF Mid-Cap Value Fund (016) TIAA-CREF Small-Cap Blend Index Fund (024)
REAL ESTATE	VARIABLE ANNUITY	TIAA Real Estate Account (009) <sup>105</sup>	
FIXED INCOME	VARIABLE ANNUITY	CREF Bond Market Account (005) <sup>105</sup>	CREF Inflation-Linked Bond Account (010) <sup>105</sup>
MONEY MARKET	VARIABLE ANNUITY	CREF Money Market Account (003) <sup>78, 105</sup>	
GUARANTEED	GUARANTEED ANNUITY	TIAA Traditional Account (001) <sup>105</sup>	
MULTI-ASSET	VARIABLE ANNUITY	CREF Social Choice Account (004) <sup>105</sup>	
	MUTUAL FUND	TIAA-CREF Lifecycle Fund 2010 (135) TIAA-CREF Lifecycle Fund 2015 (136) TIAA-CREF Lifecycle Fund 2020 (137) TIAA-CREF Lifecycle Fund 2025 (138)	TIAA-CREF Lifecycle Fund 2030 (139) TIAA-CREF Lifecycle Fund 2035 (140) TIAA-CREF Lifecycle Fund 2040 (141)

**IMPORTANT:** If the asset allocation you choose on the following page is invalid in any way, your contributions will be automatically invested for you in the Lifecycle Fund.

**78 An investment in the CREF Money Market Account is not a deposit of any bank and is neither insured nor guaranteed by the Federal Deposit Insurance Corporation or any other U.S. government agency.**

<sup>105</sup> Annuities are designed for retirement savings or for other long-term goals. They offer several payment options, including lifetime income. Payments from TIAA and CREF variable annuities are not guaranteed, and the payment amounts will rise or fall depending on investment returns.

# PLAN CONTRIBUTION ALLOCATION ADMINISTRATIVE FORM

## Make Your Contribution Allocations

If you need help creating an allocation, you can use our **Asset Allocation Calculator** at [www.tiaa-cref.org/calcs](http://www.tiaa-cref.org/calcs). You can also have a custom portfolio prepared for you by calling us at **800 842-2776**. Either way, you'll answer a series of questions and a sample portfolio will be suggested based on your risk tolerance and investment preferences.

**OPTION A**  
**Choose a TIAA-CREF Lifecycle Fund**  
 Choose the Lifecycle Fund closest to your estimated year of retirement.

**Choose One**

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**TIAA-CREF Lifecycle Fund 2040**  
 Initial Target:  
 80% Equity  
 20% Nonequity

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**TIAA-CREF Lifecycle Fund 2035**  
 Initial Target:  
 75% Equity  
 25% Nonequity

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**TIAA-CREF Lifecycle Fund 2030**  
 Initial Target:  
 70% Equity  
 30% Nonequity

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**TIAA-CREF Lifecycle Fund 2025**  
 Initial Target:  
 65% Equity  
 35% Nonequity

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**TIAA-CREF Lifecycle Fund 2020**  
 Initial Target:  
 60% Equity  
 40% Nonequity

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**TIAA-CREF Lifecycle Fund 2015**  
 Initial Target:  
 55% Equity  
 45% Nonequity

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**TIAA-CREF Lifecycle Fund 2010**  
 Initial Target:  
 50% Equity  
 50% Nonequity

OR

**OPTION B**  
**Build Your Own Portfolio**  
 Enter the name and three-digit number of your allocation choices in the spaces provided. Please use whole numbers only and make sure your total allocation equals 100%. If the account number and name don't match, we will use the account number for your allocation choice.

Account/Fund Number	Account/Fund Name	Allocation Percent
1. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	1. <input type="text"/> <input type="text"/> <input type="text"/> %
2. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	2. <input type="text"/> <input type="text"/> <input type="text"/> %
3. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	3. <input type="text"/> <input type="text"/> <input type="text"/> %
4. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	4. <input type="text"/> <input type="text"/> <input type="text"/> %
5. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	5. <input type="text"/> <input type="text"/> <input type="text"/> %
6. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	6. <input type="text"/> <input type="text"/> <input type="text"/> %
7. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	7. <input type="text"/> <input type="text"/> <input type="text"/> %
8. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	8. <input type="text"/> <input type="text"/> <input type="text"/> %
9. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	9. <input type="text"/> <input type="text"/> <input type="text"/> %
10. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	10. <input type="text"/> <input type="text"/> <input type="text"/> %
		<b>100%</b>





# 2

**Designate your beneficiary(ies)** Make sure that the percentage allotted to all beneficiaries in each class totals 100%.

## Name(s) of primary beneficiary(ies)

<b>1.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>
<b>2.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>
<b>3.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>
<b>4.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>

## Name(s) of contingent beneficiary(ies)

<b>1.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>
<b>2.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>
<b>3.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>
<b>4.</b>	Name (First, Middle Initial, Last)	Percentage
	<input type="text"/>	<input type="text"/> %
	Social Security Number*	Date of Birth (mm/dd/yyyy)
	<input type="text"/>	<input type="text"/>
		Relationship to you
	<input type="text"/>	<input type="text"/>

\*(if unavailable, provide later)



### 3 Indicate any existing contracts

Will these annuity certificates replace an existing annuity contract/certificate or life insurance policy from another company?

If so, from what company?

Contract Number

### 4 Indicate your agreement by signing

Your employer's plan may offer mutual funds as an investment choice in addition to the TIAA and CREF annuities. All contributions must be remitted under the terms of your employer's plan. Under federal law, distributions before age 59½ or termination of employment may be prohibited, limited, and/or subject to substantial tax penalties. The TIAA and CREF certificates and amounts in any of the mutual funds cannot be assigned.

Your ability to take loans and make transfers and withdrawals may be limited by the terms of your employer's plan. Otherwise, you may transfer among any of the available annuity accounts and mutual funds. Loans are only available from the TIAA Traditional Annuity. Cash withdrawals and transfers from the TIAA Traditional Annuity are not currently subject to a surrender charge. If such a charge is imposed in the future, you would receive three months' advance notice, and the charge would only apply to subsequently remitted premiums including any amounts transferred from CREF accounts, the TIAA Real Estate Account, or the mutual funds after the charge is imposed.

The accumulations in and benefit payments from the CREF accounts, the TIAA Real Estate Account, and the mutual funds are *variable* and *not guaranteed*; they depend on the investment performance of these accounts.

Your beneficiary designation will apply to your TIAA and CREF annuity certificates and to the mutual fund accounts. Under your employer's plan, your spouse has the right to a death benefit. If the plan is subject to ERISA, your spouse is entitled to at least 50% of the death benefit specified by the plan. If the plan is not subject to ERISA, your spouse is entitled to the percentage stipulated by the plan. Your spouse must consent to any beneficiary designation that doesn't meet this requirement by completing the "Waiver of Spouse's Right to Pre-retirement Death Benefits."

**I have read and acknowledge all provisions of this enrollment form.**

**Under penalties of perjury, you certify that the taxpayer identification number shown on this form is your correct Social Security number.**

**The Internal Revenue Service does not require your consent to any provision of this document.**

Signed

Date (mm/dd/yyyy)

 /  / 

If you would like to receive CREF's Statement of Additional Information, which supplements the CREF prospectus, check here.

The following information does not apply to New York applicants. Some states require a fraud warning to appear on the form. These states, including Arkansas, Kentucky, Maine and New Mexico require a warning substantially similar to the following:

People who file applications for insurance or statements of claim commit a fraudulent insurance act if they: knowingly do so with intent to injure, defraud or deceive any insurance company or another person; and/or knowingly include in their application or statement of claim any materially false or misleading information; and/or knowingly conceal information, for the purpose of misleading, concerning any fact material to the application or claim.

A fraudulent insurance act is a crime, and penalties may include imprisonment, fines, denial of insurance and civil damages.

New Jersey residents, please note: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Ohio residents, please note: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

District of Columbia residents, please note: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

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**Obtain your spouse's signature**

**Waiver of spouse's right to pre-retirement death benefits**

If you have waived your spouse's right to a pre-retirement survivor death benefit under your employer's plan and/or ERISA, your spouse must consent to the waiver.

**Consent by Spouse (Must Be Witnessed)**

With this consent I am voluntarily and irrevocably giving up my right to a qualified pre-retirement survivor death benefit. I recognize that any pre-retirement death benefit payable under these certificates will be paid to the beneficiaries as specified above.

Signed (Spouse)

Social Security Number

 —  — 

Date (mm/dd/yyyy)

 /  / 

Signature of Notary Public or Plan Representative

Date (mm/dd/yyyy)

 /  / 

**You should consider the investment objectives, risks, charges and expenses carefully before investing. Please read the prospectuses for the accounts and funds carefully before you invest.**

TIAA-CREF Individual & Institutional Services, LLC, and Teachers Personal Investors Services, Inc., distribute securities products. This form must be accompanied or preceded by current prospectuses. For additional copies, call **877 518-9161** or visit **www.tiaa-cref.org**. Read them carefully before investing or sending money. TIAA (Teachers Insurance and Annuity Association of America), 730 Third Avenue, New York, NY 10017 issues annuities.



Teachers Insurance and Annuity Association  
730 Third Avenue, New York NY 10017  
Telephone: 800 842-2733

STATE OF TENNESSEE

NOTICE REGARDING REPLACEMENT

REPLACING YOUR LIFE INSURANCE POLICY

Are you thinking about buying a new life insurance policy and discontinuing or changing an existing one? If you are, your decision could be a good one -- or a mistake. You will not know for sure unless you make a careful comparison of your existing benefits and the proposed benefits.

Make sure you understand the facts. You should ask the company or agent that sold you your existing policy to give you information about it. You are urged not to take action to terminate, assign or alter your existing life insurance coverage until you have been issued the new policy, examined it and have found it acceptable.

Hear both sides before you decide. This way you can be sure you are making a decision that is in your best interest.

IF YOU SHOULD FAIL TO QUALIFY FOR THE LIFE INSURANCE FOR WHICH YOU HAVE APPLIED, YOU MAY FIND YOURSELF UNABLE TO PURCHASE OTHER LIFE INSURANCE OR ABLE TO PURCHASE IT ONLY AT SUBSTANTIALLY HIGHER RATES.