



FINANCIAL SERVICES  
FOR THE GREATER GOOD®

# TIAA-CREF FUNDS DIRECT DEPOSIT ENROLLMENT FORM

(For Retirement Payments)

To initiate automatic investment of your retirement annuity payments into your TIAA-CREF Funds account(s), complete Section 1 of this form. If you need assistance and would like to speak with a Consultant, please call us at 1 800 842-2776, Monday through Friday, 8:00 a.m. – 10:00 p.m. (ET). **This form must be received by the 1st business day of the month in order to be applied to your next retirement annuity payment.**

New Direct Deposit    Change Direct Deposit    Establish Direct Deposit & Cancel Automatic Investment Plan    Cancel Direct Deposit

## 1 TO BE FILLED OUT BY THE EMPLOYEE — ACCOUNT INFORMATION

Please print or type.

First Name                      Middle Initial                      Last Name

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|  
Social Security Number (Individual Taxpayer Identification Number.)

E-Mail Address

### Mailing Address

Address (A street address must be provided)

Address

City                                      State                                      Zip Code

Day Time Phone Number                      Evening Phone Number

Please list below the retirement annuity contracts, and the dollar amount for each contract from which you want your systematic payments to be automatically invested in one or more mutual fund account(s).

<b>CONTRACT</b>	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	-	AMOUNT	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
<b>CONTRACT</b>	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	-	AMOUNT	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
<b>TOTAL</b>				_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____

Please list below your fund-account number(s) and the percentage you want allocated to each mutual fund. The total payment from the annuity contracts you listed above can be invested in one or more mutual fund accounts. You cannot have different allocations for different annuity contracts.

**Note: If you currently do not own a TIAA-CREF Funds account, write the name of the fund(s) in which you want to invest, the percentage of allocation and check the new account box if applicable. In addition to this form, to open an account you must complete a TIAA-CREF Funds application. All direct deposits to an IRA will be considered current-year contributions.**

FUND NAME	FUND ACCOUNT NUMBER	PERCENTAGE % (whole percentages only)	NEW ACCOUNT
_____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____  %	<input type="checkbox"/>
_____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____  %	<input type="checkbox"/>
_____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____  %	<input type="checkbox"/>
_____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____  %	<input type="checkbox"/>
_____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____  %	<input type="checkbox"/>

Please indicate the effective date of your direct deposit payments: \_\_\_\_\_ (If no date is given, direct deposit payments will begin with the next payment cycle.)

<p><input checked="" type="checkbox"/> Signature _____ Date _____</p>	<p>Send your completed Direct Deposit Enrollment Form and an application, if applicable, to TIAA-CREF Funds, 730 Third Avenue, New York, NY 10017-3206</p>
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## 2 TO BE FILLED OUT BY TIAA-CREF

STATE STREET BANK & TRUST CO

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|

Bank Transit Number   Bank Account Number   Social Security Number

Must be coded "checking account." State Street Bank & Trust Co., Attn: Custody & Shareholder Services, PO Box 55081, Boston, MA 02205-5081