



Financial Services

## BENEFICIARY DESIGNATION FORM FOR PLANS SUBJECT TO QJSA

### QUESTIONS?

For account information or any questions:

Call **800 842-2252**

Monday – Friday

8 a.m. – 10 p.m. (ET)

Saturday

9 a.m. – 6 p.m. (ET)

Or visit us online at

**tiaa-cref.org** 24 hours a day. Have your user ID and password ready.

### IMPORTANT INFORMATION

Use this form to update existing or to designate new beneficiary(ies) on your TIAA-CREF pension annuities, IRA accounts and/or TIAA-CREF accounts.. For changes to other product or account types, please visit us at [tiaa-cref.org](http://tiaa-cref.org) or call us at **800 842-2252**.

#### Did you know that incomplete information can make it difficult for us to find your beneficiaries?

To help ensure that your beneficiaries receive their survivor benefits, it's important that we have complete information on file to locate them at all times. This includes each beneficiary's name, address, telephone number, date of birth, Social Security Number or Taxpayer Identification Number and relationship to you and the portion of the benefits to which they are entitled. If you haven't already done so, please update your beneficiary designation with all of this information as soon as possible. And, we also recommend that you review and update your beneficiary information periodically to make sure it continues to be accurate.

To update or change your beneficiary designation, please visit us online at [www.tiaa-cref.org/profile](http://www.tiaa-cref.org/profile) or complete this Designation of Beneficiary form and mail back to us. To obtain a form, visit our website at [www.tiaa-cref.org/beneficiary](http://www.tiaa-cref.org/beneficiary), or call us at **800 842-2252**.

#### Selecting a Beneficiary

A beneficiary can be an individual, an institution, an organization, a trust, or your estate. (Naming an estate may limit options available to your heirs. Please consult with an attorney prior to naming your estate or trust. We cannot accept a 'Will' as a designation but you can designate a Testamentary Trust if we are provided with the "Will" creation date of which the Testamentary Trust will be issued.) Beneficiaries can also be the children of the beneficiaries that you designate on this form. You can choose primary and contingent beneficiaries. Your primary beneficiary(ies) receives benefits at the time of your death. If a class includes more than one person, the benefits are paid proportionately among the living beneficiaries of the class unless you specify otherwise. If there are no living primary beneficiaries at the time of your death and you did not select the child provision option, the benefits will become payable to your contingent beneficiary(ies). If none of the beneficiaries are living at the time of your death, we will pay your Estate, unless the plan provision states otherwise.

#### Spousal Rights to Annuity Death Benefits

If you live in a community or marital property state and have designated someone other than your spouse as more than 50% primary beneficiary, you need to consult your tax advisor regarding the effect that may have on your beneficiary designation. Community and marital property states include, but are not limited to: AZ, CA, ID, LA, NV, NM, TX, WA and WI.

Federal pension law (ERISA) and certain Plan and State provisions mandate:

If you are married at the time of your death, your spouse is entitled to receive, as primary beneficiary, at least 50%, could be up to 100%, of your qualified preretirement survivor annuity death benefits under a retirement or tax-deferred annuity plan covered by any of the following: ERISA or your plan's spousal policy. If you name someone other than your spouse as primary beneficiary of those qualified preretirement survivor annuity death benefits, then we will be obligated to pay your spouse **regardless of your beneficiary designation in effect at the time of your death, unless there is a valid spousal waiver on file**. The remainder will be payable in proportion of the amounts allocated to the other beneficiary(ies) listed as primary.





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Please contact your human resources administrator for any special employer rules.

### IMPORTANT INFORMATION (CONTINUED)

#### Qualified Preretirement Survivor Annuity Notice

All Plan participants must obtain spousal consent to name a beneficiary other than the participant's spouse. This further Notice regarding Qualified Preretirement Survivor Annuities applies to any participants whose account balance is subject to survivor annuity requirements.

For those participants whose account balance is subject to Qualified Preretirement Survivor Annuity requirements, if you are married and die before receiving any benefits due under the terms of the Plan, then unless it is waived, the Qualified Preretirement Survivor Annuity will provide your spouse with a series of equal monthly payments for the remainder of his/her life with all payments stopping at the time of his/her death. The amount of the monthly payments will depend on your account balance, then current annuity rates being charged by major insurance companies and your spouse's age at the time of commencement of his or her benefit. In lieu of receiving a life annuity, your spouse may elect another form of payment made available for death benefits (including a lump-sum payment) under the plan. However, the plan will pay the death benefit in the form of a lump sum or direct rollover if the value of your account balance is \$1,000 or less at the time of your death.

The value of the Qualified Preretirement Survivor Annuity at the annuity purchase date will equal 50%, or more as required under your plan, of the value of your vested interest in your account. Because the total value of the benefit paid under a Qualified Preretirement Survivor Annuity depends on the amount applied to its purchase, the time value of money, the annuity commencement date, and the period for which your spouse survives, the total benefit received may ultimately prove to be different (either greater or less) than available benefit forms having the same value of the Qualified Preretirement Survivor Annuity. If you have questions about this, you should contact your plan administrator.

You may elect a beneficiary other than your spouse for all or a portion of your preretirement death benefits. You may only do so if your spouse consents, in writing, to the specific non-spouse beneficiary and waiver of the Qualified Preretirement Survivor Annuity. Your spouse's consent must be witnessed by an authorized Plan representative or notary public. If the Plan's Committee or its designee does not have the fully executed Beneficiary Designation form with Annuity Waiver on file at the time benefits begin, the Qualified Preretirement Survivor Annuity will be paid to your spouse in any available form of payment elected by your spouse in a timely manner.

If you elect (with written spousal consent) to decline the Qualified Preretirement Survivor Annuity for your spouse, and later revoke that election but are still married, you will again be covered by the Qualified Preretirement Survivor Annuity. Thereafter, you may not again elect to decline the Qualified Preretirement Survivor Annuity without again securing written spousal consent to the new election. Consent given by your present spouse to your election to decline the Qualified Preretirement Survivor Annuity is not effective as to a subsequent spouse. So, if you elect, with the consent of your present spouse, to decline the Qualified Preretirement Survivor Annuity, are later widowed or divorced, and then remarry, the Qualified Preretirement Survivor Annuity will be reinstated automatically on your remarriage, subject to any later election, with the written consent of your new spouse, to decline the coverage.

If you elect to waive the Qualified Preretirement Survivor Annuity with your spouse's written consent, your entire vested account balance will be paid to your designated beneficiary(ies) as required under the Plan in a single lump sum. You may designate different beneficiaries to receive their respective portions of your account balance under the Plan.





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### IMPORTANT INFORMATION (CONTINUED)

If you are subject to these survivor annuity rules and elect a non-spouse beneficiary (and thus waive the Qualified Preretirement Survivor Annuity) with your spouse's consent prior to your obtaining age 35, your waiver will automatically become invalid on the first day of the Plan year in which you reach age 35. If this occurs, you will need to complete a new Beneficiary Designation Form with annuity Waiver if you still wish to designate a non-spouse beneficiary.

It is important that you and your spouse understand your respective rights and obligations concerning your death benefit. You should direct any questions to the Plan Administrator.

#### How to waive a Qualified Preretirement Survivor Annuity?

Please consult with your Plan Representative for more information.

If you are married and want to name someone other than your spouse as beneficiary for more than 50% of your retirement account (or amount, as required by your employer's plan), your spouse must agree to your beneficiary designation. He or she may consent to your designation by completing the Additional Requirement Based on Marital Status section of this form. A Notary Public or Plan Representative must witness your spouse signing and dating his or her consent. Under federal law, if you are under 35, your spouse cannot provide consent unless it is permitted by your plan. And, even if your plan allows this, your spouse must consent to the beneficiary designation again at the start of the year when you turn age 35.

If your spouse does not sign the Additional Requirement Based on Marital Status section when you complete this form, we will update your beneficiary designation as requested. However, at the time of your death, we will advise your spouse about the legal right to his or her portion of your retirement account. Your spouse will have the option to either claim this inheritance or give up his or her rights to this amount.





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Print in upper case using black or dark blue ink and provide all information requested.

To help avoid incorrect interpretation or delays, please be sure that all handwritten information is legible.

## 1. PROVIDE YOUR INFORMATION

First Name	<input type="text"/>	Middle Initial	<input type="text"/>
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Last Name	<input type="text"/>	Suffix	<input type="text"/>
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Social Security Number/ Taxpayer Identification Number	<input type="text"/>	Date of Birth (mm/dd/yyyy)	<input type="text"/>
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Address

City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>
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Contact Telephone Number	<input type="text"/>	Extension	<input type="text"/>
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Email Address

## 2. APPLICABLE CONTRACTS AND/OR ACCOUNTS

This beneficiary designation applies to: **ONLY** my TIAA-CREF pension, annuity, IRA contract set(s) or TIAA-CREF account(s) indicated below:

TIAA Number	<input type="text"/>	CREF Number	<input type="text"/>
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TIAA Number	<input type="text"/>	CREF Number	<input type="text"/>
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TIAA Number	<input type="text"/>	CREF Number	<input type="text"/>
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Designations can only be at the contract and/or account level. Plan-based designations are not acceptable.

**NOTE:** If you wish to make changes to other products you hold at TIAA-CREF, please visit us at [tiaa-cref.org](http://tiaa-cref.org) or call us at 800 842-2252.















**5. YOUR SIGNATURE**

I, the undersigned, agree that:

- I understand that this form is subject to all of the terms and conditions of the pension, annuity and IRA contracts and/or accounts, as described in Section 3.
- If I am subject to the Qualified Preretirement Survivor Annuity provisions and have designated anyone other than my spouse as Primary Beneficiary, I hereby waive the Qualified Preretirement Annuity coverage subject to my spouse's consent.
- I reserve the right to make further changes to my beneficiary designations and/or accounts.
- I understand that if I elect to have this designation apply to all of my referenced accounts, it will apply ONLY to those active as of the date this form is accepted by TIAA-CREF.
- I understand that if any or all of my accumulation for which this designation applies is subject to Spousal Consent under plan or ERISA rules, my spouse must complete the spousal consent section of this form.
- I understand that if I elect 'payment to my deceased beneficiary's children' that I agree with TIAA's interpretation of how the benefits at my death will be paid as outlined in this form.
- I understand and agree to the changes and updates I made on this form.

Please sign your full legal name with suffix, if applicable, using black or dark blue ink. Digital signatures are not accepted. ▶

Your Signature

Today's Date (mm/dd/yyyy)

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The Employee Retirement Income Security Act of 1974 (ERISA) provides certain rights to the spouse of a participant in a retirement plan subject to the law. Some Non-ERISA plans may also require that we pay from 50% to 100% to a surviving spouse at death.

NOTE: Due to Plan Provisions or Employee Retirement Income Security Act (ERISA) regulations we need to verify if there is a surviving spouse. This verification will be completed prior to benefits being paid/settled to any beneficiary.

**6. ADDITIONAL REQUIREMENTS BASED ON MARITAL STATUS**

**6A. IF YOU ARE SINGLE, COMPLETE THIS SECTION**

Check the box if you are not married

I am not married.





**6. ADDITIONAL REQUIREMENTS BASED ON MARITAL STATUS (CONTINUED)**

**6B. IF YOU ARE MARRIED**

If you are married and have not designated your spouse as a primary beneficiary for at least 50% of the benefit, or the percentage required by ERISA or your plan, your spouse must complete this section in front of a Notary Public or your current employer's plan representative.

In order to ensure that your spouse has seen your intentions and can attest that they fully agree to waive their rights, your spouse's signature must be the same or a later date than you signed in Section 5.

**TO BE COMPLETED BY YOUR SPOUSE**

**Consent by Spouse (Must Be Completed by Your Spouse and Witnessed)**

**Spousal Consent & Distribution Election Waiver**

I hereby consent to the above designation by my spouse of a beneficiary other than me under the Plan (and, if applicable, consent to the waiver of Qualified Pre-Retirement Survivor Annuity benefits), and I understand that my spouse's election is not valid unless I consent to it, and that my consent is irrevocable unless my spouse revokes the election. I have read the instructions above and understand that by consenting to the above designation, either (I) no benefit from the Plan will be payable to me upon my spouse's death (including any Qualified Preretirement Survivor Annuity) or (II) only a partial benefit from the Plan will be payable to me upon my spouse's death if a Joint Primary Beneficiary Designation was elected above.

First Name

Last Name

Signature

Today's Date (mm/dd/yyyy)

 /  / 20

**NOTARY PUBLIC CERTIFICATION**

State County

 

Notary Expiration Date (mm/dd/yyyy)

 /  / 20

On the date noted below the subscriber known to me to be the person described in and who executed the foregoing instrument and he/she acknowledged to me that he/she executed the same.

Notary Public's Signature

Today's Date (mm/dd/yyyy)

 /  / 20

**FOR NOTARY PUBLICS IN MASSACHUSETTS ONLY**

Indicate the type of identification:

- Valid federal or state ID
- Testimony of a credible witness
- Personal knowledge of the subscriber

In this space, the Notary Public must provide his/her notarial number and the date the appointment expires. Provide the notarial seal if outside New York state

**OR**

**PLAN REPRESENTATIVE CERTIFICATION**

By signing, you are certifying you witnessed the spouse's signature.

Plan Representative's Signature

Today's Date (mm/dd/yyyy)

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Plan Representative's Name (Please print)

Title





Financial Services

## BENEFICIARY DESIGNATION FORM FOR PLANS SUBJECT TO QJSA

### CHECKLIST

Did you remember to:

- Provide all the personal information requested and choose your beneficiaries.
- Initial any changes made within the form and be sure to sign and date the agreement in Section 5.
- Complete the "Additional Requirements Based on Marital Status" section. If you are single, complete Section 6A; if you are married and have not designated your spouse as a primary beneficiary of at least 50% of the benefit, or the percentage required by your plan, your spouse must complete Section 6B in front of a Notary Public or your current employer's plan representative.
- If applicable, attach a signed and dated page to list special provisions for deceased beneficiaries.

Original documents are required. Faxes cannot be accepted.

### RETURN COMPLETED FORM TO:

#### STANDARD MAIL:

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

#### OVERNIGHT:

TIAA-CREF  
8500 Andrew Carnegie Blvd.  
Charlotte, NC 28262

### BENEFICIARY PROVISIONS

#### 1. Effectiveness

This Designation of Beneficiary is effective for each annuity contract, certificate or account listed by number or by definition of contracts as stated in the Annuity Numbers section. If the beneficiary designations are satisfactory by TIAA-CREF's standards and the designations are accepted by TIAA-CREF, the designations will be effective from the date the form was received in good order by TIAA-CREF.

#### 2. Immediate Annuity under a Two-Life Option

If you own an Immediate Annuity under a Two-Life Option, you have already provided for benefits at your death for the second annuitant. Therefore, your second annuitant should not be named as a beneficiary. If you do designate your second annuitant, TIAA-CREF will remove that person from the contract's designation. Your confirmation will display this change.

#### 3. Order of Payment and Division of Benefits

- a. Unless otherwise stated: At your death (or the last surviving annuitant's death under a Two-Life Annuity), any benefits due will be paid to a beneficiary if he or she is then living. If a class of beneficiaries contains more than one person, benefits due to the beneficiaries in such class at your death (or the last surviving annuitant's death under a Two-Life Annuity) will be paid in accordance with the proportions stated. If a beneficiary predeceases you (or the last surviving annuitant under a Two-Life Annuity), the proportion of the benefits that would have otherwise been apportioned to such deceased beneficiary shall instead be divided to the other beneficiaries who survive you (or the last surviving annuitant under a Two-Life Annuity).
- b. If all beneficiaries predecease you (or the last surviving annuitant under a Two-Life Annuity), all benefits will be payable to your estate (or the estate of the last surviving annuitant under a Two-Life Annuity), unless otherwise stated by the plan provisions.





## BENEFICIARY DESIGNATION FORM FOR PLANS SUBJECT TO QJSA

### ADDITIONAL PROVISIONS

**Provision:** 'Payment to my deceased beneficiary's children' provision applied to a beneficiary means that if you check 'payment to my deceased beneficiary's children' and the named beneficiary predeceases you, the monies which would have been paid to that beneficiary will be divided proportionately among his/her children (if any). If there are no living children for that beneficiary, their portion will be paid in proportion to the remaining beneficiaries in that class. In the event there are no other beneficiaries, we will pay your Contingent beneficiary(ies) or Estate, unless otherwise stated in the plan provisions.

**Example:**

John Doe – your son with a 50% designation 'payment to my deceased beneficiary's children'

Jane Doe – your daughter with a 50% designation 'payment to my deceased beneficiary's children'

John predeceases you. Then John's portion will be paid to his children equally. If John has no children, his share will then be paid to Jane. If both John and Jane predecease you and there are no children, we will pay the contingent beneficiaries you designate. In absence of any contingent beneficiaries, we will pay your Estate, unless otherwise stated by the plan provisions.

**4. If a Trust is Designated as Beneficiary:**

- a. TIAA-CREF will not accept or be obliged to inquire into the terms of any trust affecting the annuity contract/certificate/account or its death benefit and shall not be charged with knowledge of terms thereof.
- b. TIAA can only accept a testamentary trust if you give us the create date of the will at the time of the designation. A designation of Will is not acceptable.
- c. If benefits become payable to a testamentary trust and (i) the will is not presented for probate within a reasonable period of time following your death (or the death of the last surviving annuitant in a Two-Life Annuity); or (ii) the will has been presented for probate within a reasonable period of time but no qualified trustee makes claim for the benefits within nine months after your death (or the death of the last surviving annuitant in a Two-Life Annuity); or (iii) if evidence is furnished and is satisfactory to TIAA-CREF within such nine-month period that no trustee can qualify to receive the benefits, payment shall be made to the successor beneficiary(ies), if any such beneficiary(ies) (is)are designated and survive you (or the last surviving annuitant in a Two-Life Annuity): otherwise to your estate (or the estate of the last surviving annuitant), unless otherwise stated in the plan provisions.
- d. If benefits become payable to an inter vivos trust and (i) the trust agreement is not in effect; or (ii) no trustee can qualify to receive the benefits; or (iii) the qualified trustee is not willing to accept the benefits, payments shall be made to the successor beneficiary(ies) as designated, if any such beneficiary(ies) are designated and survive(s) you (or the last surviving annuitant in a Two-Life Annuity); otherwise to your estate (or to the estate of the last surviving annuitant), unless otherwise stated in the plan provisions.
- e. Payment to, and receipt by, said trustee, said successor beneficiary(ies) or said estate, as provided for in (b) and (c) above, shall fully discharge TIAA-CREF for all liability to the extent of such payment. TIAA-CREF shall have no obligations as to the application of funds so paid and shall, in all dealings with said trustee or with said executor(s) or administer(s), including but not limited to any consent, release or waiver of interest, be fully protected against the claims or demands of any other person(s).





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## BENEFICIARY DESIGNATION FORM FOR PLANS SUBJECT TO QJSA

### 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.

