



SURS RSP TIAA to Voya Transfer Form

PART 1 (print or type)

Name		Member ID #	
Street Address City, State, Zip Code		SSN/TIN #	
		Date of Birth	
Email Address		Daytime Phone	

PART 2 – TIAA Account Information (Please provide a copy of your most recent TIAA statement)

TIAA Number	CREF Number
<input type="checkbox"/> I request a transfer of 100% of my plan assets at TIAA to Voya plan 626701 (Voya Contract Number is SSN)	
----- OR -----	
<input type="checkbox"/> I request a transfer of the following plan assets at TIAA to Voya plan 626701 (Voya Contract Number is SSN)	
Fund Name / Number	Percentage
Fund Name / Number	Percentage
Fund Name / Number	Percentage
Fund Name / Number	Percentage

PART 3 – Investment Selection (Select one of the Following) *

Transfer my funds into my Voya account using my current allocations Yes No (If No, provide instructions below)

Fund Name / Number	Percentage
Fund Name / Number	Percentage
Fund Name / Number	Percentage
Fund Name / Number	Percentage

*If no investment selection or instruction is provided, your funds will be allocated 100% to the plan's default investment.

Continued on Reverse Side

PART 4 – Certification

By signing this form:

- I hereby direct TIAA to liquidate the designated amount(s) of the account(s) or contract(s) listed on this form, and to release the proceeds to my RSP account at Voya Institutional Plan Services, LLC (“Voya”).
- I hereby direct Voya to invest the transferred proceeds in the investment funds that I have selected or, if I have not designated any funds, in the default investment option under the RSP.
- I hereby direct Voya to separately account for any pre-tax and after-tax amounts in the transferred proceeds.
- I hereby agree to the terms and conditions stated in this Form and certify that I am requesting an in-plan transfer of my retirement plan assets in accordance with applicable IRS and RSP plan rules.
- I certify under penalties of perjury that my Social Security or U.S. Tax Identification number on this form are correct.
- I certify that the information provided on this form is true, accurate, and complete to the best of my knowledge.
- I acknowledge that I have read the prospectus(es) for any funds in which I invest and agree to the terms.
- I hereby agree that if my assets will be sent to Voya in installments, the first installment may be invested according to my instructions on this form. All subsequent installment payments as well as any residual balances not received within 30 days will be invested according to the investment elections currently in place with Voya for the RSP at the time my assets are received by Voya.

Written Signature:

Date:

**Mail original application to: TIAA, PO Box 532248, Atlanta, GA 30353
1-888-219-8310**

Faxes will not be accepted

For TIAA Use Only:

Voya Institutional Trust Company
FBO: (member name) – Acct (last 4 of SSN)
Voya Financial Attn: SURS
P.O. Box 55772
Boston, MA 02205-5772