

Name Title

Business Unit or Department
Tel: (XXX) XXX-XXXX ext. XX XXXX

Fax: (XXX) XX-XXXX XXXXX@tiaa.org

Month XX, 2021

Name Address Address

Re: Notice of data breach

Dear Name:

What happened

I am writing to notify you that unauthorized acquisition or use of your personal information occurred on XXXX.

What information was involved

The information breached consisted of XXXXXXX.

What we are doing

Once we became aware of the exposure/breach, we quickly shut down access to the information.

We checked your accounts and see no indication of unauthorized activity. While we have not detected any indication of improper use of your information, we have placed a note on your record for extra protection. Consequently, you may be asked to provide additional information during the authentication process if you call TIAA in the near future.

As an added precaution, to help protect your identity, we are offering complimentary access to Experian IdentityWorksSM for two years.

If you believe there was fraudulent use of your information as a result of this incident and would like to discuss how you may be able to resolve those issues, please reach out to an Experian agent. If, after discussing your situation with an agent, it is determined that identity restoration support is needed then an Experian Identity Restoration agent is available to work with you to investigate and resolve each incident of fraud that occurred from the date of the incident (including, as appropriate, helping you with contacting credit grantors to dispute charges and close accounts; assisting you in placing a freeze on your credit file with the three major credit bureaus; and assisting you with contacting government agencies to help restore your identity to its proper condition).

Please note that Identity Restoration is available to you for two years from the date of this letter and does not require any action on your part at this time. The Terms and Conditions for this offer are located at www.ExperianIDWorks.com/restoration.

While identity restoration assistance is immediately available to you, we also encourage you to activate the fraud detection tools available through Experian IdentityWorks as a complimentary two –year membership. This product provides you with superior identity detection and resolution of identity theft. To start monitoring your personal information, please follow the steps below:

- Ensure that you enroll by [enrollment end date] (Your code will not work after this date.)
- Visit the Experian IdentityWorks website to enroll: [URL]
- Provide your activation code: [activation code]

If you have questions about the product, need assistance with Identity Restoration that arose as a result of this incident or would like an alternative to enrolling in Experian IdentityWorks online, please contact Experian's customer care team at [Experian TFN] by [enrollment end date]. Be prepared to provide engagement number [engagement number] as proof of eligibility for the Identity Restoration services by Experian.

ADDITIONAL DETAILS REGARDING YOUR TWO-YEAR EXPERIAN IDENTITYWORKS MEMBERSHIP:

A credit card is not required for enrollment in Experian IdentityWorks.

You can contact Experian **immediately** regarding any fraud issues, and have access to the following features once you enroll in Experian IdentityWorks:

- Experian credit report at signup: See what information is associated with your credit file. Daily credit reports are available for online members only.*
- Credit Monitoring: Actively monitors Experian, Equifax and Transunion files for indicators of fraud.
- Internet Surveillance: Technology searches the web, chat rooms & bulletin boards 24/7 to identify trading or selling of your personal information on the Dark Web.
- Identity Restoration: Identity Restoration specialists are immediately available to help you address credit
 and non-credit related fraud.
- Experian IdentityWorks ExtendCARE™: You receive the same high-level of Identity Restoration support even after your Experian IdentityWorks membership has expired.
- \$1 Million Identity Theft Insurance**: Provides coverage for certain costs and unauthorized electronic fund transfers.
- Lost Wallet: Provides assistance with canceling/replacing lost or stolen credit, debit, and medical cards.
- Child Monitoring: For 10 children up to 18 years old, Internet Surveillance and monitoring to determine whether enrolled minors in your household have an Experian credit report are available. Also included are Identity Restoration and up to \$1M Identity Theft Insurance**.

What you can do

You may place a personalized password on your TIAA account for an added level of verbal security.1

We recommend that you regularly review statements from your accounts and periodically obtain your credit report from one or more of the national credit reporting companies.

For more information

Please feel free to contact me directly at (800) XXX-XXXX, extension XX XXXX if you have any questions concerning this matter.

Protecting the privacy and security of your information is extremely important to us. For more information, you can visit the Privacy and Security links on TIAA.org.

Please know that we value your trust and take this matter very seriously.

Sincerely,

XXXXXXX

XXXXXXXXX

¹ Please note that this password is different from the one that you use to login to your account on TIAA.org

Other Important Information Including Information about Identity Theft Prevention

Monitor Your Accounts

We recommend that you regularly review statements from your accounts and periodically obtain your credit report from one or more of the national credit reporting companies. You may obtain a free copy of your credit report online at www.annualcreditreport.com, by calling toll-free 1-877-322-8228, or by mailing an Annual Credit Report Request Form (available at www.annualcreditreport.com) to: Annual Credit Report Request Service, P.O. Box 105281, Atlanta, GA, 30348-5281. You may also purchase a copy of your credit report by contacting one or more of the three national credit reporting agencies listed below.

Equifax®
P.O. Box 740241
Atlanta, GA 30374-0241
1-800-685-1111
www.equifax.com

Experian
P.O. Box 9701
Allen, TX 75013-9701
1-888-397-3742
www.experian.com

TransUnion®
P.O. Box 1000
Chester, PA 19016-1000
1-800-888-4213
www.transunion.com

When you receive your credit reports, review them carefully. Look for accounts or creditor inquiries that you did not initiate or do not recognize. Look for information, such as home address and Social Security number, that is not accurate. If you see anything you do not understand or identify information that you believe is not correct, call the credit reporting agency at the telephone number on the report.

Credit Freeze

You have the right to put a security freeze, also known as a credit freeze, on your credit file, so that no new credit can be opened in your name without the use of a Personal Identification Number (PIN) that is issued to you when you initiate a freeze. A credit freeze is designed to prevent potential credit grantors from accessing your credit report without your consent. If you place a credit freeze, potential creditors and other third parties will not be able to access your credit report unless you temporarily lift the freeze. Therefore, using a credit freeze may delay your ability to obtain credit. Pursuant to federal law, you cannot be charged to place or lift a credit freeze on your credit report. Should you wish to place a credit freeze, please contact all three major consumer reporting agencies listed below.

Equifax®
P.O. Box 105788
Atlanta, GA 30348-5788
1-800-685-1111
www.equifax.com/personal/
credit-report-services

Experian
P.O. Box 9554
Allen, TX 75013-9554
1-888-397-3742
www.experian.com/
freeze/center.html

TransUnion®
P.O. Box 2000
Chester, PA 19016-2000
1-888-808-8872
www.transunion.com/
credit-freeze

You must separately place a credit freeze on your credit file at each credit reporting agency. The following information should be included when requesting a credit freeze:

- Full name, with middle initial and any suffixes;
- 2) Social Security number;
- 3) Date of birth (month, day, and year);
- 4) Current address and previous addresses for the past five (5) years;
- 5) Proof of current address, such as a current utility bill or telephone bill;
- 6) Other personal information as required by the applicable credit reporting agency;

If you request a credit freeze online or by phone, then the credit reporting agencies have one (1) business day after receiving your request to place a credit freeze on your credit file report. If you request a lift of the credit freeze online or by phone, then the credit reporting agency must lift the freeze within one (1) hour. If you request a credit freeze or lift of a credit freeze by mail, then the credit agency must place or lift the credit freeze no later than three (3) business days after getting your request.

Fraud Alerts

You also have the right to place an initial or extended fraud alert on your file at no cost. An initial fraud alert lasts 1-year and is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years. Should you wish to place a fraud alert, please contact any one of the agencies listed below. The agency you contact will then contact the other two credit agencies.

Equifax

P.O. Box 105788
Atlanta, GA 30348-5788
1-888-766-0008
www.equifax.com/personal/
credit-report-services

Experian P.O. Box 958

P.O. Box 9554
Allen, TX 75013-9554
1-888-397-3742
www.experian.com/
fraud/center.html

TransUnion

P.O. Box 2000 Chester, PA 19016-2000 1-800-680-7289 www.transunion.com/fraudvictim-resource/place-fraud-alert

Monitor Your Personal Health Information

If applicable to your situation, we recommend that you regularly review the explanation of benefits statement that you receive from your insurer. If you see any service that you believe you did not receive, please contact your insurer at the number on the statement. If you do not receive the regular explanation of benefits statements, contact your provider and request them to send such statements following the provision of services in your name or number.

You may want to order copies of your credit reports and check for any medical bills that you do not recognize. If you find anything suspicious, call the credit reporting agency at the phone number on the report. Keep a copy of this notice for your records in case of future problems with your medical records. You may also want to request a copy of your medical records from your provider, to serve as a baseline. If you are a California resident, we suggest that you visit the website of the California Office of Privacy Protection at www.privacy.ca.gov to find more information about your medical privacy.

Additional Information

You can further educate yourself regarding identity theft and the steps you can take to protect yourself, by contacting your state Attorney General or the Federal Trade Commission. Instances of known or suspected identity theft should be reported to law enforcement, your Attorney General, and the FTC.

The Federal Trade Commission

600 Pennsylvania Avenue, NW Washington, DC 20580 1-877-ID-THEFT (1-877-438-4338) TTY: 1-866-653-4261 www.ftc.gov/idtheft

For residents of Maryland: You may also obtain information about preventing and avoiding identity theft from the Maryland Office of the Attorney General:

Maryland Office of the Attorney General

Consumer Protection Division 200 St. Paul Place Baltimore, MD 21202 1-888-743-0023 www.oag.state.md.us

For residents of North Carolina: You may also obtain information about preventing and avoiding identity theft from the North Carolina Attorney General's Office:

North Carolina Attorney General's Office

Consumer Protection Division 9001 Mail Service Center Raleigh, NC 27699-9001 1-877-5-NO-SCAM www.ncdoj.gov