05-5



Subject: Revision of Form TSP-19, Transfer of Information Between Agencies

Date: June 27, 2005

The Federal Retirement Thrift Investment Board (Board) has revised <u>Form TSP-19</u>, Transfer of Information Between Agencies, to include catch-up contributions. This form, dated June 2005, will supersede all prior versions of Form TSP-19. A copy of this form, which agencies must reproduce locally or download from the TSP Web site, is attached to this bulletin.

This bulletin also explains the requirement to transfer TSP enrollment and loan information between agencies and contains instructions for completing Form TSP-19.

I. Purpose of Form TSP-19

When FERS or CSRS employees transfer to FERS or CSRS positions in other Federal agencies or when these employees change payroll offices, their TSP participation must continue without interruption. In addition, if these employees have TSP loans, their loan repayments must continue.

Consequently, when an employee who is participating in the TSP transfers or changes payroll offices, the gaining payroll office must establish the employee's account in its payroll system, submit an Employee Data Record (06-Record) to the TSP, and determine the employee's contributions, including catch-up contributions, and report them to the TSP. In addition, if the employee has a TSP loan or loans, the gaining payroll office must continue to deduct and report loan payments.

To allow gaining payroll offices to take these actions, the gaining personnel offices must obtain the relevant TSP information from the losing personnel offices; Form TSP-19 was developed for this purpose.

(continued on next page)

Inquiries:	Questions concerning this bulletin should be directed to the Federal Retirement Thrift Investment Board at 202-942-1460 .					
Chapter:	This bulletin may be filed in Chapter 3, Eligibility, or Chapter 6, Establishing and Maintaining Accounts.					
Supersedes:	This bulletin supersedes TSP Bulletin 01-12, Revision of Form TSP-19, Transfer of Information Between Agencies, dated March 30, 2001.					
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II. Completing Form TSP-19

- A. Section A (Employee Information) identifies the employee and includes the employee's name, Social Security number, date of birth, and the effective date of the transfer.
- B. Section B (Information to Be Transferred) identifies the TSP information that the gaining agency must obtain.
 - 1. Items 5 and 6

If the employee is contributing, complete Item 5 or 6, indicating the percentage of basic pay or the whole dollar amount the employee has elected to contribute each pay period. If the employee is not contributing, leave these items blank.

2. Item 7

Check this box if the employee is covered by FERS and has never made a TSP contribution election and is not yet eligible to receive agency contributions. Also, complete Item 13 to indicate the date the employee will become eligible to receive agency contributions.

3. Item 8

Indicate the total amount of contributions that were deducted from the employee's pay for the current year (i.e., the year that the form is being completed). Because this form may be completed before the employee receives his or her last pay check from the losing agency, also indicate the "as of" date for this amount (which will probably be the date the form is being completed).

"Regular" employee contributions for a calendar year cannot exceed that year's elective deferral limit. The TSP will reject employee contributions (and attributable agency matching contributions) that would cause an employee to exceed the elective deferral limit. Consequently, if this item is not completed (or is incorrectly completed) and the gaining payroll office submits employee contributions that would cause the employee to exceed the elective deferral limit, the TSP will not process the contributions and the payroll office must refund this money to the employee.

4. Items 9 and 10

If the employee is covered by FERS, complete these items. See TSP Bulletin 97-30, dated August 19, 1997, for more information on the TSP vesting requirement and the TSP service computation date. 5. Items 11 and 12

Complete these items as appropriate. See TSP Bulletin 05-2 for more information on TSP status codes and TSP status dates.

6. Item 13

If the employee's TSP status code is "W" or "S" or if the box in Item 7 is checked, indicate the date the employee will become eligible for agency contributions. The gaining agency will then have the information to begin agency contributions on time.

7. Item 14

If the employee's TSP status code is "T" or "S," and the employee is serving the non-contribution period attributable to a financial hardship in-service withdrawal, indicate the day the noncontribution period will end. See TSP Bulletin 03-14, dated July 9, 2003, for more information about this restriction.

8. Item 15

If the employee is making catch-up contributions, indicate the dollar amount of the election and the attributable calendar year.

9. Item 16

Indicate the total amount of catch-up contributions that were deducted from the employee's pay for the current year (i.e., the year that the form is being completed). Because this form may be completed before the employee receives his or her last pay check from the losing agency, also indicate the "as of" date for this amount (which will probably be the date the form is being completed).

Catch-up contributions for a calendar year cannot exceed that year's annual limit. The TSP will reject catch-up contributions that would cause an employee to exceed this annual limit. Consequently, if this item is not completed (or is incorrectly completed) and the gaining payroll office submits catch-up contributions that would cause the employee to exceed the annual limit, the TSP will not process the contributions and the payroll office must refund to the money to the employee.

10. Item 17

Check the appropriate box to indicate whether the employee has a TSP loan.

11. Items 18 and 19

Complete these items if the employee has a TSP loan.

12. Items 20 and 21

If the employee has a second TSP loan, complete these items.

C. Section C (Identification of Losing Agency) contains information about the losing agency which the gaining agency may need if it has questions about any of the information provided by the losing agency.

III. Verifying Accuracy of Form TSP-19

The gaining personnel office should verify the enrollment information it obtained from the losing agency when it receives the employee's OPF. If erroneous information was transferred, the gaining agency must take corrective action.

anda - Juan Moran

PAMELA-JEANNE MORAN Director Office of Benefits Services

Attachment: Form TSP-19, Transfer of Information Between Agencies

THRIFT SAVINGS PLAN TRANSFER OF INFORMATION BETWEEN AGENCIES

Gaining agencies must obtain the Thrift Savings Plan (TSP) account information of employees who transfer from other Federal agencies or who change payroll offices. The losing agency must provide the relevant TSP information to the gaining agency, whether or not the employee is contributing to the TSP. The gaining agency should provide a copy of the completed form to the employee and forward the original to the payroll office. A copy may also be filed in the employee's Official Personnel Folder.

Se	ction A	Employee Info	rmation							
1.	1. Name			First			Middle			
2.				3. Date of Birth	4. Effective	4. Effective Date of Transfer / / / mm dd yyyy				
Se	ction B	Information to	Be Transfe	rred						
		t Information								
		ployee's contribution per pay period).	election using	either Item 5 (a who	le percentage of	basic pay per	pay period)	or Item 6 (a whole		
5.		.0%	OR			and		tributing FERS employee e for agency contributions		
8.	Total emp	ployee contributions	made for curr	ent year: <u>\$</u>	_ as of/	/ dd yyyy				
		ice Computation Dat		/ / mm dd yyyy	.	10. TSP Ve (FERS (
11.	 W = FERS control E = FERS ellipsion Y = control T = stopped 	us Code (Enter the ap contributing but not eligible ligible for agency contribu uting and, if FERS, eligible d contributions and, if FER topped contributing but no	for agency contrib tions but not contri for agency contrib S, eligible for agen	utions outing utions cy contributions		12. TSP Sta	tus Date.	/ / mm dd yyyy		
13.	. If TSP Status Code is W or S or if Item 7 is checked, indicate date employee will become eligible for/ /									
14.	If TSP Status Code is T or S and employee is in the noncontribution period resulting from a financial /// mm dd yyyy									
Ca	tch-up C	Contributions								
15.	. If the employee is currently making catch-up contributions, enter the dollar amount per pay period and the attributable calendar year. <u>\$</u> .00 for									
16.	Total cato	ch-up contributions	made for curre	ent year: <u>\$</u>	as of /	/ 1 yyyy		year		
Lo	an Infori	mation				уууу				
17.	17. Does employee have a TSP loan? (Check one.) Yes (Complete Items below, as applicable.) No (Skip t									
	First Loan 18. Account Number:					19. Payment Amount \$				
	Second Loan 20. Account Number:					21. Payment Amount \$				
Se	ction C	Identification o	f Losing A	gency						
22.	. Agency Name and Location					23. Payroll Office				
24.	24. Name of Contact Person						25. Telephone ()			

INSTRUCTIONS

Items 1-3. Enter the identifying information.

Item 4. Enter the effective date of the transfer.

Items 5-6. Complete item 5 or 6, as applicable.

Item 7. Check this box if employee is covered by FERS and has never made a TSP contribution election and is not yet eligible to receive agency contributions.

Item 8. Enter the total amount of contributions that were deducted from the employee's pay for the current year.

- Items 9-10. Complete these items if the employee is covered by FERS.
- Items 11-12. Complete these items to reflect the employee's TSP status code and TSP status date.
- **Item 13.** If the status code entered in item 11 is "W" or "S" OR the box in item 7 is checked, enter the date the employee will become eligible for agency contributions.
- **Item 14.** If the status code entered in item 11 is "T" or "S" AND the employee is serving the non-contribution period attributable to a financial hardship in-service withdrawal, enter the date the non-contribution period will end.
- **Item 15.** Enter the dollar amount and the attributable calendar year.
- **Item 16.** Enter the total amount of catch-up contributions that were deducted from the employee's pay for the current year.
- **Item 17.** Check the appropriate box.
- Items 18-21. Enter the applicable information.
- Items 22-25. Enter the identifying information.