**TSP-19** 

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.

Sed	ction A	Employee Information									
		t curity No				/ d yyyy	4.	Effective Date	e of Tran	Middle nsfermm	/ / dd yyyyy
Sec	ction B	Information to Be Transferre	d								
Eni	rollment	Information									
5.	A = Autom E = FERS e Y = Contrib	s Code (Enter the appropriate code):  atic Enrollment  cligible for agency contributions but not co- buting and, if FERS, eligible for agency con d contributions and, if FERS, eligible for agency	tributions	5			6.	TSP Status D	ate	/ _mm dd	уууу
7.	TSP Servi	ce Computation Date (FERS only)	n	nm dd	ууууу		8.	TSP Vesting (	Code		
9.		tus Code is <b>T</b> and employee is in the n withdrawal, indicate the ending day o			eriod resulti	ing from	n a fina	ancial hardship	)	mm dd	ууууу
10.	Contribution Election Information — Enter the employee's tax-deferred contribution election in <b>a</b> and/or Roth contribution election in <b>b</b> below.										
	a. Tax-Deb. Roth:	ferred:0 0				.00					
		oyee contributions made for current yea	ar:	\$		_ as of	/	/ / dd yyyy			
Cat	tch-up Co	ontributions									
12.	enter the	loyee is currently making catch-up cor dollar amount per pay period and the a ear for each type of contribution:			ax-Deferred	d	\$ \$		00 for 00 for	year	
13.	Total catc	h-up contributions made for current y	ear:				\$		00 as	of / mm	/ dd yyyy
Loa	an Inforn	nation									
14.	Does emp	loyee have a TSP loan? (Check one.)		Yes (Co	mplete Iter	ms belov	w, as a	applicable.)		] No (Skip	to Item 22.)
	First Loan 15. Account Number:						<b>16.</b> Payment Amount \$				
	Second Lo	<b>17.</b> Account Number:					18.	Payment Am	ount \$		
19.	If employe	e is currently in nonpay status, indicate	the begi	nning dat	e of the nonp	pay:	/	/ / dd yyyy			
20.	Type of No	npay: Military Other									
21.	Date Agen	cy submitted Form TSP-41 to TSP:	r	nm dd	ууууу						
Sec	ction C	Identification of Losing Agend	у								
22.	Agency Na	ame and Location					23.	Payroll Office	e 8-digit	ldentifying Nu	ımber
24.	Name of 0	Contact Person					25.	Telephone			 Der

## **INSTRUCTIONS**

The losin0g agency should use this form to provide required employee information to the gaining agency.

## SECTION A — Employee Information

**Items 1-3.** Enter the identifying information.

**Item 4.** Enter the effective date of the transfer.

## SECTION B —Information to Be Transferred

**Items 5-6.** Complete these items to reflect the employee's TSP Status Code and Status Date.

**Items 7-8.** Complete these items ONLY if the employee is covered by FERS.

If the Status Code entered in item 5 is "T" AND the employee is serving the non-contribution period attributable to the financial hardship in-service withdrawal, enter the date the non-contribution period will end.

**Item 10 a.** Enter the employee's tax-deferred contribution election.

**10 b.** Enter the employee's Roth contribution election.

(NOTE: Employee may elect either tax-deferred or Roth contributions or both.)

**Item 11.** Enter the total amount of tax-deferred and/or Roth contributions that were deducted from the employee's pay for the current year.

**Item 12 a.** Enter the dollar amount of the employee's tax-deferred catch-up contribution election and the attributable calendar year.

**Item 12 b.** Enter the dollar amount of the employee's Roth catch-up contribution election and the attributable calendar year.

**Item 13.** Enter the total amount of tax-deferred and/or Roth catch-up contributions that were deducted from the employee's pay for the current year.

**Item 14.** Check the appropriate box.

**Item 15-18.** Enter the applicable information.

**Item 19.** Enter the beginning date of the nonpay period.

**Item 20.** Check the appropriate box.

**Item 21.** Date Form TSP-41, Notification To TSP Of Nonpay Status, was submitted. If Form TSP-41 has NOT been submitted to the TSP, submit it before transferring the employee to the gaining agency.

## SECTION C — Identification of Losing Agency

**Item 22-25.** Enter the identifying information.