

Important message for notaries

If the state in which you reside has extended notary commissions as a result of the pandemic, you must include information about the extension with any TSP forms you notarize. You may include this information as an annotation or as supporting documentation from your state. We will not be able to process forms that have been notarized with an expired commission unless you include an annotation or provide supporting documentation.

Remote and electronic notarization

We accept electronic and remote notarization in addition to traditional, in-person notarization for TSP forms that require a notarized signature.



This *TSP Retirement Benefits Court Order Division Package* contains all of the forms you will need to divide a Thrift Savings Plan (TSP) account pursuant to a divorce, annulment, or legal separation.

The TSP is a defined contribution retirement savings and investment plan for federal civilian employees and members of the uniformed services. A TSP account may be divided by means of (1) a court decree of divorce, annulment, or legal separation; or (2) a court order or court-approved property settlement agreement incident to such a decree. To be honored by the TSP as a qualifying retirement benefits court order, a court order must meet the requirements found in 5 United States Code (U.S.C.) § 8435(c) and 5 Code of Federal Regulations (C.F.R.) part 1653, subpart A.

Do not use this package or the online court order wizard if you are drafting a court order related to Federal Employees Retirement System (FERS) or Civilian Service Retirement System (CSRS) annuity benefits. Court orders related to the FERS and CSRS annuity programs, which are administered by the Office of Personnel Management (OPM), should be submitted to the Court Ordered Benefits Branch of OPM at the following address: U.S. Office of Personnel Management, Court Ordered Benefits Branch, P.O. Box 17, Washington, DC 20044.

You cannot use this package or online wizard to draft a court order awarding funds to a child or dependent.

COMPLETING THE TSP RETIREMENT BENEFITS COURT ORDER DIVISION PACKAGE

The purpose of this package is to provide a court order form, *TSP Retirement Benefits Court Order Form*, which, when properly completed in accordance with the instructions below, will satisfy the TSP's requirements for a qualifying retirement benefits court order. This package also contains additional forms, described in the Table of Contents, that may be applicable. Using the *TSP Retirement Benefits Court Order Form* will help to expedite the TSP's processing of the court order; however, the TSP does not require the use of this form. The TSP will honor any court order or court-approved property settlement agreement that meets the requirements of 5 U.S.C. § 8435(c) and 5 C.F.R. part 1653, subpart A.

The rules for qualified domestic relations orders (QDROs) that apply to private sector plans do not apply to the TSP. The provisions of the Federal Employees' Retirement System Act (FERSA), not the Employee Retirement Income Security Act (ERISA), govern court orders that divide a TSP account. The TSP cannot represent or warrant that this order will meet the requirements of your local jurisdiction. The parties' attorneys should review local court rules to ensure this court order is sufficient.

For more information on retirement benefits court orders, please review the TSP booklet *Court Orders and Powers of Attorney*, which is available at tsp.gov. For general questions about this form, call the toll-free ThriftLine at 877-968-3778. Outside the U.S. and Canada, please call 404-233-4400 (not toll free). For specific questions related to your individual situation, please consult your personal or legal representative.



SUBMITTING THE COURT ORDER PACKAGE TO THE TSP

Once the court has approved and entered the *TSP Retirement Benefits Court Order Form*, make a copy of this package for your records. Submit the optional forms, if applicable, to the TSP as one package via mail or fax to:

TSP Legal Processing Unit P.O. Box 4390 Fairfax, VA 22038-4390 Fax number: (703) 592-0151 Or overnight to:

TSP Legal Processing Unit 12210 Fairfax Town Center Unit 906 Fairfax, VA 22033



COMPLETION CHECKLIST

Before submitting the package to the TSP, check to make sure:

- ✓ A judge or an authorized court official has completed and signed the TSP Retirement Benefits Court Order Form.
- ✓ You have provided the participant's account number(s) and current mailing address, and payee's account number(s) or Social Security number and current mailing address.
- ✓ The TSP participant has signed and dated the TSP Retirement Benefits Court Order Form and all other applicable forms.
- ✓ The payee has signed and dated the TSP Retirement Benefits Court Order Form and all other applicable forms.
- ✓ The attorneys for the TSP participant or the payee have signed the *TSP Retirement Benefits Court Order Form* if applicable.
- ✓ You have not altered or added any language or formatting to this package. Doing so may delay processing or result in the denial of the court order.

Once the court has approved and entered the *TSP Retirement Benefits Court Order Form*, make a copy of this package for your records. Submit the optional forms, if applicable, to the TSP as one package via mail or fax to:

TSP Legal Processing Unit P.O. Box 4390 Fairfax, VA 22038-4390 Fax number: (703) 592-0151



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TSP Retirement Benefits Court Order Form	TSP-92A	Required*	Once you have filled out this form, you must submit the form in its entirety to a court for approval. A judge or authorized court official must complete and sign the actual court order. If you submit your court form without a judge's or authorized court official's signature, the TSP will treat it as a draft court order and will not review or process it.
<i>Retirement Benefits Specialist (RBS) Authorization Form</i>	TSP-92B	Optional	An RBS (sometimes called a "pension specialist" or a "QDRO specialist" in the private sector) is an individual who has been retained to assist you in preparing your court order for submission to the TSP. Under TSP rules, we require authorization from the individual TSP participant and/or payee to release information relating to TSP records to these individuals. If you or your attorney have retained an RBS and would like to authorize that individual to submit and receive information on your behalf, you should fill out this form and include it with your submission to the TSP.
TSP Personal Information Form (PIF) (one for each party)	TSP-92C	Optional	 The public is allowed to view most court orders, but some jurisdictions require that certain personal information be protected from public disclosure. If your jurisdiction mandates that some or all of the personal information required in the <i>TSP Retirement Benefits Court Order Form</i> be protected, you must fill out a PIF for yourself and note on the order that this information will be provided in the PIF. You should include the completed PIF with your court order package submission to the TSP. Only use this form to update information already provided in the court order.
Request for TSP Account Information Form	TSP-92D	Optional	Certain TSP account information is available to current or former spouses to assist in developing a retirement benefits court order and protecting their rights. This information may include the participant's account balance, outstanding loan balance (if any), and/or annual or quarterly statements. If you need to obtain this information for the purpose of drafting a retirement benefits court order, please use this form for your request.

* Using the *TSP Retirement Benefits Court Order Form* will help to expedite the TSP's processing of the court order; however, the TSP does not require the use of this form. The TSP will honor any court order or court-approved property settlement agreement that meets the requirements of 5 U.S.C. § 8435(c) and 5 C.F.R. part 1653, subpart A.

FORMATTING OF FOREIGN ADDRESSES

If you have a foreign address, mark the Foreign Address checkbox, and enter the foreign address as follows:

- First address line: Enter the street address or post office box number and, if applicable, apartment number.
- **Second address line:** Enter the city or town name, other principal subdivision (e.g., province, state, county), and postal code, if known. (The postal code may precede the city or town.)
- **City/State/Zip Code fields:** Enter the entire country name in the City field; leave the State and Zip Code fields blank.

If you use an Air/Army Post Office (APO) or Fleet Post Office (FPO) address, enter that address in the two available address lines (include the unit designation). Enter APO or FPO, as appropriate, in the City field. In the State field, enter AE as the state abbreviation for zip codes beginning with 090 – 098, AA for zip codes beginning with 340, and AP for Zip Codes beginning with 962 – 966. Then enter the appropriate zip code.

TAX CONSEQUENCES OF COURT ORDER PAYMENT TO CURRENT OR FORMER SPOUSE

The taxable portion of court-ordered payments made to a current or former spouse will be taxable to the current or former spouse for the year of the payment and is subject to 20% mandatory federal income tax withholding for civilian and uniform services accounts. Payments from beneficiary participant accounts are subject to 10% federal income tax withholding. This withholding cannot be waived or decreased but can be increased.

If the court order is determined to be qualifying for the TSP, the payee will be sent a letter that will include the forms the payee must use to elect payment options along with information about taxes.

EARNINGS AND INTEREST

For the purpose of a retirement benefits court order, the term "earnings" includes earnings and losses.

Neither interest nor earnings will be paid on the amount of the entitlement unless the court order specifically provides for them. A court order can only require the payment of earnings at a stated annual percentage rate or the addition of a per diem dollar amount to the payee's entitlement.

If the court order provides for earnings, but does not specify a rate or a per diem dollar amount, the TSP will calculate earnings based on the type of TSP funds the participant was invested in on the date used to calculate the payee's entitlement, the number of shares the participant had in each fund on the date used to calculate the payee's entitlement, and the share price of those TSP funds up to two days prior to disbursement. **Note:** Investment fund changes that were made after the date used to calculate the participant's entitlement are not considered in this calculation.

SUBMITTING THE FORM FOR ISSUANCE OF A COURT ORDER

Once you have completed the required Form TSP-92A, *TSP Retirement Benefits Court Order Form*, you must submit it in its entirety to a court for approval. A judge or authorized court official must complete and sign the court order.

NOTE: If you submit your court order form without a judge's or authorized court official's signature, the TSP will treat it as a draft court order and will not review or process it.



Thrift Savings Plan

TSP RETIREMENT BENEFITS COURT ORDER FORM

IN RE THE MARRIAGE OF:	Petitioner's Name		FOR COURT USE
	and		
	Respondent's Name		
COURT NAME:			
STATE/JURISDICTION:		CASE NO.:	
JUDGE'S NAME AND COURT:			

This is a retirement benefits court order (RBCO) under 5 U.S.C. § 8435(c), and 5 C.F.R. part 1653, subpart A. The terminology used in this order is governed by the definitions generally applicable to the Thrift Savings Plan (TSP) as set forth at 5 CFR §1690.1.

This order pertains to the following parties:

I. PARTICIPANT/ 1 ST PARTY	☐ Check here for foreign addres			
	First Name	Middle Name	Last Name	
	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
	Phone Number	— 🗆 Civilian	Account Number:	
		Uniformed Services		
		Beneficiary Participant	Account Number:	
II. PAYEE/ 2 nd PARTY			\Box Check here for foreign address	
	First Name	Middle Name	Last Name	
	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
	Phone Number	— 🗆 Civilian 🛛 🔪	Account Number:	
		Uniformed Services	Account Number:	
		Beneficiary Participant	Account Number:	
	Social Security number (participant)	SSN) (If the payee is not a TSP Rela	tionship to the Participant/ 1st Party	

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TSP-92A



This matter having come before the court on motion, and the court after reviewing the motion and being otherwise fully advised of the matter, it is hereby ordered as follows:

III. AWARD #	_ Participant's Name:			
This award applies to the:	 Civilian Account Uniformed Services Account Beneficiary Participant Account 			
Check here if ord	ering multiple award amounts. (Use photocopies of this blank page to specify additional award amounts.)			
IV. AWARD TYPE	Specify the award type: (select one)			
	 Fixed dollar amount: \$ (also complete section V) Percentage of account balance:% (skip to section VI) 			
V. FIXED DOLLAR	Specify the adjustment calculation for the fixed dollar award: (select one)			
AWARD OPTIONS	 No earnings Earnings at annual percentage rate of% per annum Earnings at per diem dollar rate of \$ per day Earnings and losses 			
	Specify the entitlement date: (not applicable for <u>no earnings</u>)			
	 As of the effective date of the court order As of the following specified date: Date (mm/dd/yyyy)			
VI. PERCENTAGE AWARD	Specify the entitlement date: (required)			
OPTIONS	 As of the effective date of the court order As of the following specified date:			
	Specify the adjustment calculation for the percentage award: (select one)			
	 No earnings Earnings at annual percentage rate of% per annum Earnings at per diem dollar rate of \$per day Earnings and losses 			
	When calculating the payee's award amount, outstanding loan balances should be:			

TSP-92A



Thrift Savings Plan TSP RETIREMENT BENEFITS COURT ORDER FORM

AUTHORIZATIONS

It is so ordered:			
Date Signed (mm/dd/yyyy)	Judge's or Authorized Court Official's Signature		
Seen and agreed to by the following:			
Participant's/ 1st Party's Signature Date	Payee's/ 2nd Party's Signature Date		
Notary: Please complete the following. No other acknowledgement is acceptable.	Notary: Please complete the following. No other acknowledgement is acceptable.		
The person who signed above is known to or was identified by me, and, before me, signed or acknowledged to have signed this form. In witness thereof, I have signed below on this day of	The person who signed above is known to or was identified by me, and, before me, signed or acknowledged to have signed this form. In witness thereof, I have signed below on this day of		
day of Year	day of, Month Year		
My commission expires: Date (mm/dd/yyyy)	My commission expires: Date (mm/dd/yyyy)		
Notary Public's Signature	Notary Public's Signature		
Name (print) Phone Number	Name (print) Phone Number		
Jurisdiction	Jurisdiction		
[seal]	[seal]		
Participant's/ 1st Party's Attorney's Signature (if applicable) Date	Payee's/ 2nd Party's Attorney's Signature (if applicable) Date		
Attorney's Name	Attorney's Name		
Law Firm's Name	Law Firm's Name		
Address	Address		
City State Zip Code	City State Zip Code		
Phone Number Fax Number	Phone Number Fax Number		
	Jurisdiction and Bar/License Number		

Jurisdiction and Bar/License Number

TSP-92A



The purpose of this document is to authorize a Retirement Benefits Specialist (RBS) to act on your behalf regarding the submission of a retirement benefits court order (RBCO) related to a Thrift Savings Plan (TSP) account. The TSP participant or payee can use this form to provide specific authority(ies) identified in Section III and/or IV (Grant of Authorization) to the RBS (sometimes called a "pension specialist" or "QDRO specialist" in the private sector) identified in Section II (RBS Information). **You must sign and date this form, and your signature must be notarized.**

Do not use this form to grant a power of attorney (POA) for an individual to act on your behalf with the TSP.

Mail or fax the form to:	TSP Legal Processing Unit P.O. Box 4390	Or overnight to:	TSP Legal Processing Unit 12210 Fairfax Town Center
	Fairfax, VA 22038-4390 Fax number: (703) 592-0151		Unit 906 Fairfax, VA 22033

If you have questions, call the toll-free ThriftLine at 877-968-3778. Outside the U.S. and Canada, please call 404-233-4400 (not toll free). For specific questions related to your individual situation, please consult your personal or legal representative.

I. PARTICIPANT INFORMATION	The below authorization relates to the submission of the court order pertaining to the TSP account of:			
	1 First Name	Middle Name	Last Name	
	2. Participant's TSP Acco	unt Number		
II. RETIREMENT BENEFITS SPECIALIST INFORMATION	3. First Name	Last Name		
	4. Address			
	City	State	Zip Code	
	5 Phone Number	6. Fax Number		
	7. Is the RBS a license	d attorney? (mark one) 🛛 Yes 🗌 No		
	7a. If Yes, please provid	e the RBS's jurisdiction and bar or licens	e number:	

Jurisdiction

Bar/License Number



TSP-92B Thrift Savings Plan RETIREMENT BENEFITS SPECIALIST AUTHORIZATION FORM

III. GRANT OF
AUTHORIZATION
PARTICIPANT/
1 ^{s⊤} PARTY

Complete this section only if you are the TSP participant or 1st party and are granting authorization. Please type or print.

8.		
8. I, First Name	Middle Name	Last Name
,	the RBS identified in Section II to: thorization you are granting.)	
submit m	y personally identifiable information	to the TSP
receive ca	ase-status information	
receive cc	opies of TSP notices related to the re	tirement benefits court order submission
Participant's/ 1 st Party's	s Signature	Date Signed (mm/dd/yyyy)
Notary: Please comp	lete the following. No other acknow	ledgement is acceptable.
The person who signed	-	ne, and, before me, signed or acknowledged v on thisday of ,
The person who signed	above is known to or was identified by m	ne, and, before me, signed or acknowledged
The person who signed to have signed this form	above is known to or was identified by m n. In witness thereof, I have signed below	ne, and, before me, signed or acknowledged v on thisday of ,
The person who signed to have signed this form Year	above is known to or was identified by m n. In witness thereof, I have signed below	ne, and, before me, signed or acknowledged v on thisday of ,

Jurisdiction

[seal]



IV. GRANT OF

TSP-92B Thrift Savings Plan RETIREMENT BENEFITS SPECIALIST AUTHORIZATION FORM

Complete this section only if you are the TSP payee or 2nd party and are granting authorization.

	Please type or print.					
PAYEE/ 2 [№] PARTY	9. I, First Name	Middle Name	Last Name			
	do hereby authorize the RBS identified in Section II to: (Initial next to the authorization you are granting.)					
	submit my perso	nally identifiable information to	the TSP			
	receive case-stat	us information				
	receive copies of	TSP notices related to the retire	ement benefits court order submission			
	Payee's/ 2 nd Party's Signature		Date Signed (mm/dd/yyyy)			
	Notary: Please complete the following. No other acknowledgement is acceptable.					
	The person who signed above is known to or was identified by me, and, before me, signed or acknowledged to have signed this form. In witness thereof, I have signed below on thisday of,					
	Year		Month			
	My commission expires: Date (m	m/dd/yyyy]				
	Notary Public's Signature					
	Name (print)	Phone Number				

Jurisdiction

[seal]



Most court files may be viewed by the public. However, some jurisdictions require that personal information be protected from public disclosure. If your jurisdiction requires protection of some or all of the personal information required in the *TSP Retirement Benefits Court Order Form*, you must fill out this *Personal Information Form (PIF)* for yourself and note on the court order that this information is provided on the PIF.

This form should be included in your submission to TSP. This document is not accessible to the public or other parties.

IN RE THE MARRIAGE OF:	Petitioner's Name and		FOR COURT USE	
	Respondent's Name			
COURT NAME:				
STATE/JURISDICTION:		CASE NO.:		
ATTENTION COURT STAFF: This is a restricted access document.				

The information is about:

1.	First Name		Middle Na	ame Last Name
	NOTE: The names of the par	ties are not confidential.		
1a	•			
2.	Address Line 1			
	Address Line 2			
	City		State	Zip Code
3.	Phone Number			4. Social Security number (SSN) (Payee only)
	Applicable TSP account (If you are the participant, select all that apply):	Civilian	}	Account Number:
		Uniformed ServiceBeneficiary Partici		Account Number:

I certify that the information I have provided is true and complete to the best of my knowledge. Warning: Any intentional false statement in this form or willful misrepresentation concerning it is a violation of law that is punishable by a fine or imprisonment for as long as 5 years or both (18 U.S.C. 1001).

6			7.					
	Signature		Date Signed (mm/dd/yyyy)					
8	8. Completed and submitted by:							
] Participant/ 1 st Party	□ Participant's/ 1 st Party's Attorney	□ Payee/ 2 nd Party	Payee's/ 2 nd Party's Attorney				
	Other:							



Most court files may be viewed by the public. However, some jurisdictions require that personal information be protected from public disclosure. If your jurisdiction requires protection of some or all of the personal information required in the *TSP Retirement Benefits Court Order Form*, you must fill out this *Personal Information Form (PIF)* for yourself and note on the court order that this information is provided on the PIF.

This form should be included in your submission to TSP. This document is not accessible to the public or other parties.

IN RE THE MARRIAGE OF:	OF: Petitioner's Name and		FOR COURT USE		
	Respondent's Name				
COURT NAME:					
STATE/JURISDICTION:		CASE NO.:		·	
ATTENTION COURT STAFF: This is a restricted access document.					

The information is about:

Т.	First Name		Middle N	lame Last Name
	NOTE: The names of the par	ties are not confidential.		
1a	•			
2.	Address Line 1			
	Address Line 2			
	City		State	Zip Code
3.	Phone Number			4. Social Security number (SSN) (Payee only)
	Applicable TSP account (If you are the participant,	🗆 Civilian	}	Account Number:
	select all that apply):	Uniformed Service	s	
		Beneficiary Partici	pant	Account Number:

I certify that the information I have provided is true and complete to the best of my knowledge. Warning: Any intentional false statement in this form or willful misrepresentation concerning it is a violation of law that is punishable by a fine or imprisonment for as long as 5 years or both (18 U.S.C. 1001).

6		7	
Signature		Date Signed (mm/dd/y	ууу]
8. Completed and submitted by:			
□ Participant's/ 1 st Party's Attorney	□ Payee/ 2 nd Party	Payee's/ 2 nd Party's Attorney	Other:



Certain Thrift Savings Plan (TSP) account information is available to current or former spouses to assist in developing a valid retirement benefits court order and protecting his or her rights. The participant's (or beneficiary participant's) current or former spouse, either party's attorney, or an authorized Retirement Benefits Specialist (RBS), may obtain TSP account balances and transaction history by submitting this form. A subpoena is not required.

This form should only be submitted to the TSP for the purposes of drafting a valid retirement benefits court order.

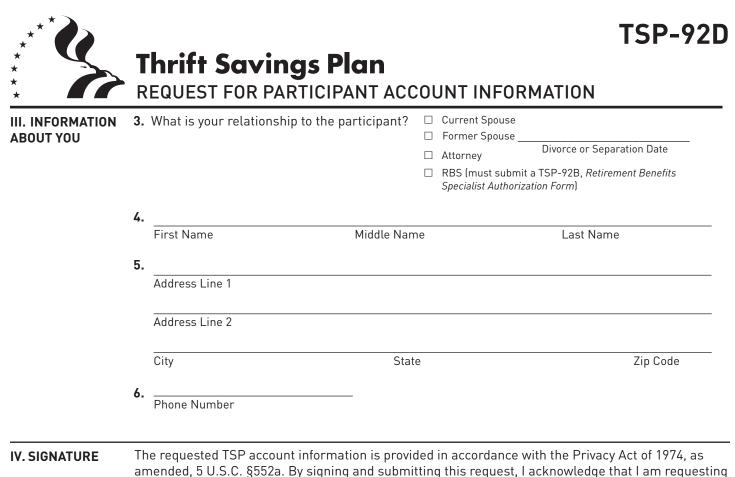
Please note: If it is determined that the requesting party is entitled to a participant's TSP account information, in accordance with the Privacy Act of 1974, as amended, 5 U.S.C. §552a, the TSP will not release information beyond what is specifically indicated on this form.

Mail or fax this form to: TSP Service Bureau P.O. Box 385021 Birmingham, AL 35238 Fax number: (866) 817-5023

If you have questions about this form, call the toll-free ThriftLine at 877-968-3778. Outside the U.S. and Canada, please call 404-233-4400 (not toll free). For specific questions related to your indivdual situation, please consult your personal or legal representative.

I. INFORMATION ABOUT THE TSP	Please type or print:					
PARTICIPANT	1 First Name	Middle Name	Last Name			
	2. This request applies to the participant's:					
	🗆 Civilian Account					
	□ Uniformed Services Account					
	Beneficiary Participant Account	Account Number:				
II. INFORMATION REQUESTED	□ Account balance as of mm/dd/yyyy					
(Check all that apply)	□ Account balances from	to mm/dd/yyyy				
	Outstanding loan balances as of mm/dd/yyyy					
	□ Loan history from mm/dd/yyyy	to mm/dd/yyyy				
	Annual statement(s) as of					
	\Box Quarterly statements from $\frac{1}{mm/dd/y}$	yyy to mm/dd/yyyy				
	□ Withdrawal history from	y to y mm/dd/yyyy				
	Other					

TSP-92D



amended, 5 U.S.C. §552a. By signing and submitting this request, I acknowledge that I am requesting this information for the purpose of drafting a retirement benefits court order pursuant to a divorce, separation, or annulment proceeding.

7. ______Signature 8. ______Date Signed (mm/dd/yyyy)

FORM TSP-92 (7/2018)