TSP-19

ing agencies must obtain the Thrift Savings Plan (TSP) account information of employees who transfer from other Feder

or who change payro employee is contribu	ust obtain the Thrift Savings Pla oll offices. The losing agency mu uting to the TSP. The gaining age	ust provide ency shoul	e the relevant TS ld provide a copy	SP informa of the co	ation to the gaini mpleted form to	ng agency	, whether or not the
- 1	ll office. A copy may also be filed loyee Information	in the en	nployee's Ufficia	l Personn	el Folder.		
1. Name			First				Middle
2. Social Security N	No	3. Date o	of Birth / mm	/ dd yyyy	_ 4. Effective D	ate of Tran	isfer / / mm dd yyyy
Section B Infor	mation to Be Transferred						
Enrollment Infor	mation						
5. TSP Status Code	e (Enter the appropriate code):				6. TSP Status	Date	mm dd yyyy
Y = Contributing a	rollment for agency contributions but not cont ind, if FERS, eligible for agency contr ibutions and, if FERS, eligible for age	ibutions	outions				66 ,,,,,
7. TSP Service Con	nputation Date(FERS only)	/	dd yyyy		8. TSP Vestin	g Code	
	de is T and employee is in the no rawal, indicate the ending day of			ting from	a financial hards	hip	/
10. Contribution Elec	ction Information — Enter the em	ployee's ta:	x-deferred contrib	oution elec	tion in a and/or Ro	oth contribu	ution election in b below.
a. Tax-Deferred:b. Roth:	.0%		\$ \$				
11. Total employee c	ontributions made for current year	`:	\$	as of _	mm dd yyyy	_	
Catch-up Contrib	outions						
12. If the employee is currently making catch-up cont enter the dollar amount per pay period and the at calendar year for each type of contribution:			a. Tax-Deferre	ed §	ò	00 for	year year
			b. Roth	9		00 for	year
13. Total catch-up c	ontributions made for current ye	ar:					
Loan Information	n						
14. Does employee I	nave a TSP loan? (Check one.)	Y	es (Complete Ite	ms below	, as applicable.)		No (Skip to Item 22.)
First Loan	15. Account Number:				16. Payment A	mount \$	
Second Loan	17. Account Number:				18. Payment A	mount \$	
19 If employee is cur	rrently in nonnay status, indicate th	ne heginnir	ng date of the nor	nnav·	/ /		

Section C Identification of Losing Agency

21. Date Agency submitted Form TSP-41 to TSP:

Military

22.	Agency Name and Location	
	<i>y</i> ,	

23.	Payroll	Office

	o-digit identifying Namber	
ĺ) –	
	Area Code and Number	

20. Type of Nonpay:

INSTRUCTIONS

The losing 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

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

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

Item 9. 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.