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

Date: July 30, 2010

The Federal Retirement Thrift Investment Board (Agency) has revised Form TSP-19, Transfer of Information Between Agencies, to include automatic enrollment contributions. This form, dated August 2010, will supersede all prior versions of Form TSP-19. A copy of this form, which agencies must reproduce locally or download from the TSP website, 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 (EDR) 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)
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
   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.

3. Items 8 and 9
   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.

4. Items 10 and 11
   Complete these items as appropriate. See TSP Bulletin 10-7 for more information on TSP Status Codes and TSP Status Dates.

5. Item 12
   If the employee’s TSP Status Code is “T,” and the employee is serving the non-contribution period attributable to a financial hardship in-service withdrawal, indicate the day the non-contribution period will end. See TSP Bulletin 03-14, dated July 9, 2003, for more information about this restriction.

6. Item 13
   If the employee is making catch-up contributions, indicate the dollar amount of the election and the attributable calendar year.
7. Item 14

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 the money to the employee.

8. Item 15

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

9. Items 16 and 17

Complete these items if the employee has a TSP loan.

10. Items 18 and 19

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 the 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 OPE. If erroneous information was transferred, the gaining agency must take corrective action.

PAMELA-JEANNE MORAN
Director
Office of Benefits Services

Attachment: Form TSP-19, Transfer of Information Between Agencies
**Section A Employee Information**

1. Name ____________________________
2. Social Security No. ____ – ____ – _____
3. Date of Birth mm/dd/yyyy
4. Effective Date of Transfer mm/dd/yyyy

**Section B Information to Be Transferred**

**Enrollment Information**
Enter the employee's contribution election using either Item 5 (a whole percentage of basic pay per pay period) or Item 6 (a whole dollar amount per pay period).

5. ________% OR 6. $ ________.

7. Total employee contributions made for current year: $ ________ as of mm/dd/yyyy

8. TSP Service Computation Date (FERS only) mm/dd/yyyy
9. TSP Vesting Code ________

10. TSP Status Code [Enter the appropriate code]:
   - A = Automatic Enrollment
   - E = FERS eligible for agency contributions but not contributing
   - Y = contributing and, if FERS, eligible for agency contributions
   - T = stopped contributions and, if FERS, eligible for agency contributions

11. TSP Status Date mm/dd/yyyy

12. If TSP Status Code is T and employee is in the noncontribution period resulting from a financial hardship in-service withdrawal, indicate the ending day of this period: mm/dd/yyyy

**Catch-up Contributions**

13. If the employee is currently making catch-up contributions, enter the dollar amount per pay period and the attributable calendar year: $ ________ for ________

14. Total catch-up contributions made for current year: $ ________ as of mm/dd/yyyy

**Loan Information**

15. Does employee have a TSP loan? [Check one.] □ Yes [Complete Items below as applicable.] □ No [Skip to Item 20.]

First Loan 16. Account Number: ____________________________
17. Payment Amount $ ____________________________

Second Loan 18. Account Number: ____________________________
19. Payment Amount $ ____________________________

**Section C Identification of Losing Agency**

20. Agency Name and Location ____________________________
21. Payroll Office 8-digit Identifying Number

22. Name of Contact Person ____________________________
23. Telephone (______) ______ – ________
   Area Code and Number

---

See Bulletin 12-11 for updated Form TSP-19 (5/2012)
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. Enter the total amount of contributions that were deducted from the employee’s pay for the current year.

Items 8-9. Complete these items if the employee is covered by FERS.

Items 10-11. Complete these items to reflect the employee’s TSP Status Code and TSP Status Date.

Item 12. If the Status Code entered in item 10 is “T” 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 13. Enter the dollar amount and the attributable calendar year.

Item 14. Enter the total amount of catch-up contributions that were deducted from the employee’s pay for the current year.

Item 15. Check the appropriate box.

Items 16-19. Enter the applicable information.

Items 20-23. Enter the identifying information.

See Bulletin 12-11 for updated Form TSP-19 (5/2012)