



# Thrift Savings Plan BULLETIN for Service TSP Representatives

**Subject:** Consolidation of Post-Separation Withdrawal Forms: TSP-70, Request for Full Withdrawal (Civilian) and TSP-U-70 (Uniformed Services); Forms TSP-77, Request for Partial Withdrawal When Separated (Civilian), and TSP-U-77 (Uniformed Services); and changes to TSP Post-Separation Withdrawal processing to include Roth TSP

**Date:** May 7, 2012

The Federal Retirement Thrift Investment Board (Agency) has made a number of changes to the TSP post-separation withdrawal process to provide for notarized spouse and participant signatures and to reduce the number of forms rejected because they are incomplete or invalid. Changes include the consolidation of Form TSP-70, Request for Full Withdrawal (civilian) and Form TSP-U-70 (uniformed services) into a single form; and Form TSP-77, Request for Partial Withdrawal When Separated (civilian), and Form TSP-U-77 (uniformed services) into a single form, effective May 7, 2012. The combined forms supersede all prior versions of Forms TSP-70, TSP-U-70, TSP-77, and TSP-U-77 with dates earlier than April 2012. Previous versions of these forms must be immediately discarded (recycled), and agencies/services that provide links to electronic versions of old forms should disable those links. Previous versions will not be processed after June 1, 2012. A copy of the new consolidated Forms TSP-70 and TSP-77 are attached to this bulletin. They are also available for download from the TSP website.

The new Forms [TSP-70](#) and [TSP-77](#) tell participants who have both traditional and Roth TSP balances how the post-separation withdrawal will be disbursed from their traditional and Roth balances. It also provides information on the conditions necessary for Roth earnings to be considered “qualified,” and therefore not subject to Federal income tax. Additional information about the Roth TSP can be found in TSP Bulletin 11-U-4, Implementation of Roth Thrift Savings Plan Contributions, dated February 25, 2011, and TSP Bulletin 12-U-8, Implementation Date for Roth Thrift Savings Plan Contributions, dated April 11, 2012.

This bulletin describes the consolidated form along with other changes to the processing of TSP post-separation withdrawals. This bulletin supersedes TSP Bulletin 02-30, Revision of Form TSP-70, Thrift Savings Plan Request for Full Withdrawal, dated August 1, 2002.

*(continued on next page)*

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**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 2, General Information.

## **I. Purpose of Forms TSP-70 and TSP-77**

- A. Form TSP-70 is used by civilian and uniformed services participants who are separated from Federal service and want to request a full withdrawal of their entire vested account balance in the form of a single payment, monthly payments, life annuity, or any combination of these options.
- B. Form TSP-77 is used by civilian and uniformed services participants who are separated from Federal service and want to request a one-time-only withdrawal of part of their account balance and leave the remainder with the TSP. To be eligible to make a partial withdrawal, a participant cannot have previously made a full withdrawal, partial withdrawal, or age-based in-service withdrawal. Participants who have two accounts (civilian and uniformed service) may make a partial withdrawal from each account.
- C. Forms TSP-70 and TSP-77 do not pertain to beneficiary participant (spouse) accounts. Beneficiary participants must use Form TSP-90, Withdrawal Request For Beneficiary Participants, when requesting either a partial withdrawal or a full withdrawal.

## **II. New Requirements and Changes to Forms TSP-70 and TSP-77**

- A. A new requirement for post-separation withdrawals is that the signature of the participant must be notarized before the form is submitted to the TSP for processing. This is mandatory for all applicants, regardless of marital status or retirement coverage. Married FERS and uniformed services participants are still required to obtain a notarized spouse signature of consent.
- B. If a participant has both a traditional (non-Roth) and a Roth balance, the withdrawal request will be paid proportionally from the traditional and Roth balances. If the participant is requesting a full withdrawal, the proportional payout from Roth balances will apply to each withdrawal option that was selected.
- C. Participants who request to transfer all or part of their withdrawals to IRAs or eligible employer plans must make separate transfer elections for their traditional (non-Roth) balances and separate transfer elections for their Roth balances. They may also elect to have their traditional and Roth transfers sent to different financial institutions.
- D. If a participant has both a traditional (non-Roth) and a Roth balance and requests an annuity as part of a full withdrawal request, the TSP will purchase two of the same type of annuity (one with the traditional balance and one with the Roth balance). The participant cannot choose different annuities for each type of balance. The minimum threshold to purchase an annuity is \$3,500 and applies to each balance separately. Participants may choose to purchase an annuity as long as they have \$3,500 in either their traditional or Roth balance. If a participant elects to use 100% of the TSP balance to purchase an annuity and both balances

are below \$3,500, the TSP-70 will be rejected. If at least one of the balances is \$3,500, the TSP will purchase an annuity with that balance and pay the other balance (the one less than \$3,500) directly to the participant in a cash payment. If the annuity is part of a mixed withdrawal, any amount(s) that cannot be used to purchase the requested annuity will be split proportionally and distributed according to the other withdrawal option(s) the participant elected.

### **III. Agency/Service Responsibilities**

Agency/service representatives, when separating an employee or member who has a TSP account(s), should strongly recommend that the participant read the TSP booklet *Withdrawing Your TSP Account After Leaving Federal Service*, and the TSP tax notice "Important Tax Information About Payments From Your TSP Account." Participants should also be reminded to carefully read the instructions provided with the withdrawal form before completing a withdrawal request.



Gisile Goethe  
Deputy Director, Education & Agency Liaison  
Office of Communications and Education

Attachment: [Form TSP-70](#)  
[Form TSP-77](#)



# Thrift Savings Plan

**TSP-70**

**Request for Full Withdrawal**

**April 2012**

## **Check List for Completing Form TSP-70, Request for Full Withdrawal:**

Be sure to read all instructions before completing this form. Only complete and submit the pages that are required as outlined below. You must submit all pages that are relevant to your request **as one package**.

- ✓ Pages 1 and 2 (Sections I, IV, and VI) are required for all participants. You must **sign** and **date the form**, and your **signature must be notarized**.
- ✓ If you are **married**, you must complete Section II or III depending on your retirement coverage. If you are a married **FERS or uniformed services** participant, your spouse must also sign the form, and the signature must be notarized.
- ✓ If you have a **traditional (non-Roth)** balance and you would like to **transfer** all or a part of the **traditional (non-Roth)** portion of your withdrawal, you must complete and submit Page 4.
- ✓ If you have a **Roth** balance and you would like to **transfer** all or a part of the **Roth** portion of your withdrawal, you must complete and submit Page 5.

**Note:** If you would like to transfer all or a part of **both the traditional and the Roth** portions of your withdrawal, you must complete and submit Page 4 **and** Page 5, **even if the transfer is to the same financial institution.**



# THRIFT SAVINGS PLAN REQUEST FOR FULL WITHDRAWAL

## TSP-70

### I. INFORMATION ABOUT YOU — This section is required.

1. This request applies to my:  Civilian Account **OR**  Uniformed Services Account

2.   
Last Name First Name Middle Name

3.   
TSP Account Number

4.  /  /   
Date of Birth (mm/dd/yyyy)

5. \_\_\_\_\_  
Daytime Phone (Area Code and Number)

6.  Foreign address?  
Check here.

7.   
Street Address or Box Number (For a foreign address, see instructions on back.)  
  
Street Address Line 2

8.   
City

9.   
State

10.  -   
Zip Code

### II. MARRIED FERS AND UNIFORMED SERVICES PARTICIPANTS — If your total TSP account balance is more than \$3,500, your spouse is entitled to a joint life annuity with a 50% survivor benefit, level payments, and no cash refund. Check Item 11 below to use your **entire** account balance to purchase that annuity. Otherwise, complete Items 12–15, then proceed to Section IV.

11.  I choose the default joint life annuity with my spouse. (Option 3b in Section XII). Skip to Section VI and complete Page 6.

12.   -  -   
Spouse's Name (Last, First, Middle) Spouse's Social Security Number

If you are not able to obtain your spouse's signature below, provide your spouse's name and Social Security number and submit Form TSP-16, Exception to Spousal Requirements (TSP-U-16 for uniformed services), with this request.

**Spouse's waiver:** I waive my right to a joint life annuity with a 50% survivor benefit, level payments, and no cash refund.

13.   
Spouse's Signature

14.  /  /   
Date Signed (mm/dd/yyyy)

#### 15. Notary: Please complete the following. No other acknowledgement is acceptable (see instructions).

The person who signed Item 13 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 \_\_\_\_\_, \_\_\_\_\_ Year.  
Month Year

My commission expires: \_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Notary Public's Signature

[seal]

\_\_\_\_\_  
Jurisdiction

### III. MARRIED CSRS PARTICIPANTS — We must notify your spouse of your withdrawal request.

16.   
Spouse's Name (Last, First, Middle)

17. Is your spouse's address the same as your address?

Yes  No (Complete Items 18–22.)  Don't know spouse's address.  
(Provide spouse's SSN and submit Form TSP-16.)

-  -   
Spouse's Social Security Number

18.  Spouse has foreign address?  
Check here.

19.   
Street Address or Box Number (For a foreign address, see instructions.)  
  
Street Address Line 2

20.   
City

21.   
State

22.  -   
Zip Code

**Do Not Write Below This Line**



\* P I I S 0 0 2 2 9 5 0 0 2 0 0 0 0 0 0 0 0 0 P I I S \*

## FORM TSP-70, INFORMATION AND INSTRUCTIONS FOR PAGE 1

Use this form if you are separated from Federal service or the uniformed services and you want to request a full withdrawal of your **entire** vested account balance in the form of a single payment, monthly payments, life annuity, or any combination of these options, to be paid after your agency or service confirms your separation. To request a partial withdrawal of your account and leave the balance of your account with the TSP, do not complete this form; instead, complete Form TSP-77, Request for Partial Withdrawal When Separated.

Before making a withdrawal request, read the booklet *Withdrawing Your TSP Account After Leaving Federal Service* and the TSP tax notice "Important Tax Information About Payments From Your TSP Account." If you do not have these materials, you can download them from the TSP website ([www.tsp.gov](http://www.tsp.gov)).

You should **not** complete Form TSP-70 if:

- **Your vested account balance is less than \$200.** The TSP will automatically send you a check for the balance of your account after your agency or service reports that you have separated.
- **You expect to be rehired after a break in service of less than 31 calendar days.** You must be separated from Federal service for 31 or more days in order to be eligible for a post-employment withdrawal. **If you expect to be rehired after a break in service of 31 or more full calendar days,** see the Withdrawal Booklet for information about rehired participants and withdrawal restrictions.
- You are the spouse beneficiary of a deceased civilian or uniformed services TSP participant's account. Instead, complete Form TSP-90, Withdrawal Request for Beneficiary Participants.

**There are two ways to complete your post-employment withdrawal:**

- You can use the TSP website ([www.tsp.gov](http://www.tsp.gov)) to begin your withdrawal request once your agency or service has reported your separation to the TSP. For the protection of your account, you will not be able to complete your withdrawal online, but the interactive screens will help you complete the appropriate sections of the form correctly.

After you print out the form, review it, complete any missing information, provide required notarized signatures and documentation, and mail or fax it to the TSP. Do not change or cross out any of the prefilled information you entered on the Web; the form will not be processed if you do.

**OR**

- Complete Form TSP-70, and mail or fax it to the TSP.

**SECTION I. INFORMATION ABOUT YOU.** Complete Items 1–10. Check whether you are withdrawing money from a civilian or uniformed services account in Item 1. If you have more than one account and you do not check a box, your form will not be processed. **Check only one box.** You cannot withdraw from both accounts using one form. Also, be sure to only check the box for the account representing the employment from which you are separated.

The address you provide on this form will be used to update the address in your TSP account record. If you have a foreign address, check the box in Item 6 and enter the foreign address in Items 7–10 as follows:

First address line: Enter the street address or post office box number, and any 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.

Spouses' rights apply to accounts that total more than \$3,500. If you are married (even if separated from your spouse), you must comply with the spouses' rights requirements outlined below:

### Spouses' Rights for Full Withdrawals

Classification	Requirement	Exceptions
FERS/ Uniformed Services	Spouse is entitled to a survivor annuity unless he or she waives that right.	Whereabouts unknown or exceptional circumstances
CSRS	Spouse is entitled to notification by TSP of participant's election.	Whereabouts unknown

### SECTION II. MARRIED FERS AND UNIFORMED SERVICES PARTICIPANTS.

If your **total** TSP account is more than \$3,500, by law, your spouse has the right to a joint and survivor annuity with a 50% survivor benefit, level payments, and no cash refund, unless your spouse waives the right to that annuity. If you would like to use your entire account balance to purchase this annuity, check the box in Item 11 indicating that you choose the **default joint life annuity** with your spouse, then skip to Section VI and complete Page 6.

**Note about annuities:** If you have **both a traditional (non-Roth) and a Roth balance** in your TSP account, the TSP will purchase **two** default annuities (one for each balance). The \$3,500 minimum applies to **each** annuity separately. If you are interested in purchasing an annuity, read the **Special Rules for Annuities** in the instructions for Page 6.

**If your total TSP account balance is more than \$3,500, and you do not choose the default joint life annuity in Item 11,** your spouse must give consent to a full withdrawal from your TSP account by completing, signing, and dating Items 13–14. Your spouse's signature must be notarized (Item 15). Because this form will be filed with a Federal agency in Washington, D.C., the notary must complete the information in Item 15. **No other acknowledgement is acceptable.**

If you cannot obtain your spouse's signature, please provide your spouse's Social Security number in Item 12. The TSP cannot process your withdrawal unless you have a spousal exception on file or if you apply for—and receive—an exception to the spouses' rights requirements. Exceptions are granted in **rare** circumstances. If you wish to apply for an exception, submit Form TSP-16 (TSP-U-16 for uniformed services), Exception to Spousal Requirements, along with this form.

**SECTION III. MARRIED CSRS PARTICIPANTS.** If you are a married CSRS participant with an account balance of more than \$3,500, by law the TSP must notify your spouse of your full withdrawal. If your spouse's address is the same as your address in your TSP record, check "Yes" in Item 17. Otherwise, check "No" in Item 17 and complete Items 18–22.

If you do not know your spouse's whereabouts, check the third box in Item 17, and provide your spouse's Social Security number. The TSP cannot process your withdrawal unless you have a spousal exception on file or if you apply for—and receive—an exception to the spouses' rights requirements. Exceptions are granted in **rare** circumstances. If you wish to apply for an exception, submit Form TSP-16, Exception to Spousal Requirements, with the required documentation.

If your spouse has a foreign address, follow the foreign address instructions in Section I to complete Items 19–22.

See the instructions in Section I for completing Air/Army Post Office (APO) or Fleet Post Office (FPO) addresses.

Name:

(Last, First, Middle)

TSP Account Number:

IV. WITHDRAWAL ELECTION — This section is required. Choose one or more methods. Indicate percentages in whole numbers. If choosing monthly payments, include the dollar amount of each payment or choose to have the TSP compute your payments based on your life expectancy.

23. I would like to withdraw my entire account balance as follows:

a.  .0% Single Payment

b.  .0% Life Annuity (Must equal \$3,500 or more. Also complete Page 6.)

c.  .0% TSP Monthly Payments → Tell us how to pay your monthly payments:

1 0 0 % (Total a, b, and c)

\$  ,  .00 per month (\$25.00 or more)

OR

Compute my payments based on my life expectancy.

V. DIRECT DEPOSIT INFORMATION — Completing this section is optional. Single payments and/or monthly payments that are not being transferred to a traditional IRA, eligible employer plan, or Roth IRA can be paid by direct deposit to a checking or savings account at a financial institution. Do not complete this section if you want direct deposit for annuity payments. The annuity provider will send you the necessary paperwork for direct deposit of those payments.

24. Pay by direct deposit (check all that apply):  Single Payment  TSP Monthly Payments

25. Type of Account:

Checking

OR

Savings

26.   
Name of Financial Institution

27.   
ACH Routing Number (Must be 9 digits)

28.   
Checking or Savings Account Number

VI. CERTIFICATION AND NOTARIZATION — This section is required. I certify that I have read the information in this package, as well as the Withdrawal Booklet and the TSP tax notice, and that I understand that my withdrawal election is irrevocable. I certify that the information I have provided on all pages of this form is true and complete to the best of my knowledge. Also, I certify that I am separated from Federal service and that I do not expect to be rehired by the Federal Government within 31 days of my separation. Warning: Any intentional false statement in this application 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).

29.   
Participant's Signature

30.  /  /   
Date Signed (mm/dd/yyyy)

31. Notary: Please complete the following. No other acknowledgement is acceptable (see instructions).

The person who signed Item 29 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 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Month Year

My commission expires: \_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Notary Public's Signature

[seal]

\_\_\_\_\_  
Jurisdiction

Do not write in this section.

Form TSP-70, Page 2 (4/2012)

PREVIOUS EDITIONS OBSOLETE



## FORM TSP-70, INFORMATION AND INSTRUCTIONS FOR PAGE 2

**SECTION IV. WITHDRAWAL ELECTION.** You **must complete** Item 23. You may withdraw your account balance by choosing any one, a combination of any two, or all three of the basic withdrawal options (single payment, life annuity, TSP monthly payments). In the boxes provided for each method, indicate the percentage of your account that you would like to withdraw by that method. **Use whole percentages only.** Be certain that the percentages in Items 23a, b, and c add up to 100%. **Note:** You can use the calculators on the TSP website to project a life annuity or a monthly payment amount.

**If you have both** a traditional (non-Roth) and a Roth balance in your TSP account, **your withdrawal will be paid proportionally** from your traditional and Roth balances for each withdrawal option that you select.

Example:

TSP account balance = \$10,000

Traditional portion of balance at time of withdrawal = \$5,000 (50%)

Roth portion of balance at time of withdrawal = \$5,000 (50%)

Withdrawal election:

Single Payment = 20%

Life Annuity = 0%

TSP Monthly Payments = 80%

Result:

Single payment = \$2,000, comprised of \$1,000 (50%) traditional money and \$1,000 (50%) Roth money.

Monthly payments = \$8,000. Each monthly payment will be comprised of 50% traditional money and 50% Roth money.

**Note:** If your account contains tax-exempt contributions or Roth contributions, each withdrawal method will be disbursed proportionally from taxable and nontaxable amounts.

If you choose to withdraw your account as a **life annuity**, the minimum amount to purchase the annuity is \$3,500. This means that if you are withdrawing only a portion of your account by means of an annuity (Item 23b), the percentage you choose must equal \$3,500 or more of your account balance (vested account balance if you are FERS). To complete your annuity purchase, you must also provide information needed for the annuity on Page 6 of this form.

If you have **both a traditional (non-Roth) and a Roth balance** in your TSP account, the \$3,500 minimum amount will apply to **both** balances separately. You cannot select just one balance for your annuity purchase. If you are interested in purchasing an annuity, read the **Special Rules for Annuities** in the instructions for Page 6.

If you are withdrawing any portion of your account by means of **TSP monthly payments** (Item 23c), write in the box the dollar amount that you would like to receive each month (must be at least \$25) **OR** check the box to have the TSP compute your monthly payments based on your life expectancy.

- **If you write in a monthly dollar amount**, you will receive that amount until you change it or until your entire account balance has been paid out.
- **If you choose to have the TSP compute your payments**, we will use the IRS Single Life Table, Treas. Reg. 1.401(a)(9)-9, Q&A 1 (for participants who are under age 70 after June 30 of the calendar year when payments are calculated) or the Uniform Lifetime Table, Treas. Reg. 1.401(a)(9)-9, Q&A 2 (for participants who turn age 70 before July 1 of that year).

**Transfer Option.** If, in Item 23, you choose to withdraw any portion of your account as a single payment or monthly payments for a fixed dollar amount that results in payments that are expected to be completed in less than 120 months, you may be able to transfer all or any portion of the payment(s) to an IRA or eligible employer plan. If you want to transfer any part of your traditional (non-Roth) balance, complete Page 4. If you want to transfer any part of your Roth balance, complete Page 5. If you want to transfer any part of both balances, even if to the same financial institution, complete Pages 4 **and** 5.

**SECTION V. DIRECT DEPOSIT INFORMATION.** Complete this section only if you want the TSP to send your single payment or monthly payments directly to your checking or savings account by means of a direct deposit (electronic funds transfer [EFT]). Provide all of the requested information. If you do not know the 9-digit Routing Number, contact your financial institution for information. EFTs will be made only to a financial institution in the United States. **Note:** Do not complete this section if you selected a life annuity. The annuity provider will send you the necessary paperwork for direct deposit of your annuity payments.

In Item 25, check only one box. Your single and/or monthly payments can be directly deposited into only one account.

If the TSP determines that the EFT information you provided is incomplete or invalid, your request will be processed, but you will receive your payment in the form of a check mailed to you.

**Note:** Payments that are being transferred to an IRA or eligible employer plan **cannot** be paid by EFT.

**SECTION VI. CERTIFICATION AND NOTARIZATION.** Read the certification carefully and sign and date the form. By signing the certification, you are certifying that the information you have provided is true and complete to the best of your knowledge. You are also certifying that you are separated from Federal service and that your separation will last for 31 days or more. In addition, if you chose to transfer any portion of your traditional balance to a Roth IRA, you are certifying that you understand that you must pay tax on the amount transferred for the year of the transfer. Your signature must be notarized; otherwise, your request cannot be processed. Because the form will be filed with a Federal agency in Washington, D.C., the notary must complete the notarization in Item 31. **No other acknowledgement is acceptable.**



## FORM TSP-70, INFORMATION AND INSTRUCTIONS FOR PAGE 3

**SECTION VII. FEDERAL TAX WITHHOLDING.** Complete this section if you want to change the standard Federal income tax withholding for your payment.

The following withholding rules apply to the taxable portion of your withdrawal:

- **For single payments that are not transferred to an IRA or eligible employer plan,** the TSP must withhold a mandatory 20% for Federal income tax. You may ask the TSP to withhold an additional amount by completing Item 32.
- **For monthly payments that are expected to last less than 10 years (less than 120 payments),** the TSP must withhold a mandatory 20% for Federal income tax. You may ask the TSP to withhold an additional amount by completing Item 33.
- **For monthly payments that are expected to last 10 years or more (120 or more payments), or that are computed based on life expectancy,** the TSP will withhold taxes as if you are a married person with 3 dependents. However, you have other withholding options:
  - You may choose to have no withholding by checking the box in Item 34a.

**OR**

- You may change your withholding marital status and allowances by completing Item 34b. You may use the IRS Withholding Calculator on the IRS website at [www.irs.gov/individuals](http://www.irs.gov/individuals) for help in determining how many withholding allowances to claim.

**OR**

- You may ask the TSP to withhold an additional amount by completing Item 34c. **Note:** If you request additional withholding, you **must also** check the box indicating your withholding marital status **and** the number of allowances you would like in Item 34b. You may use the IRS Withholding Calculator on the IRS website at [www.irs.gov/individuals](http://www.irs.gov/individuals) for help in determining how many withholding allowances to claim. If you do not complete Item 34b, your withdrawal will be processed as if you are a married person with 3 dependents.

Be aware that if you elect not to have Federal income tax withheld from your payment(s) or if you do not have a sufficient amount withheld, you may be responsible for the payment of quarterly estimated taxes. Additionally, if any withholding amount and/or payments of quarterly estimated taxes are not sufficient, you may be subject to penalties under the IRS' estimated tax rules.

**Note:** Withholding does not apply to disbursements of tax-exempt contributions, Roth contributions, Roth qualified earnings, or any amounts transferred to an IRA or eligible employer plan.

For more information about the tax implications of your withdrawal, read the TSP tax notice "Important Tax Information About Payments From Your TSP Account."

For more information about estimated tax requirements and income tax penalties, refer to IRS Publication 505, *Tax Withholding and Estimated Tax*. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your TSP payment(s) using this form. You may use IRS Publication 919, *How Do I Adjust My Tax Withholding?*, to see how the dollar amount you are having withheld compares to your projected Federal income tax for the current year.

**This section is a substitute for IRS Form W-4P, Withholding Certificate for Pension and Annuity Payments. If you complete this section, you should not complete IRS Form W-4P.**

If you include an IRS Form W-4P, Withholding Certificate for Pension or Annuity Payments, with the completed withholding section of this form, the withholding information you provide on this form will supersede the information on your submitted Form W-4P.

If you complete this section incorrectly or choose a withholding option that does not apply to your elected withdrawal, and the rest of your form is completed correctly, your withdrawal will be processed using the standard IRS withholding rules.

If you elected a life annuity (Item 23b), the annuity provider will send you information about making a withholding election for your annuity payments.

Name:

(Last, First, Middle)

TSP Account Number:

### TRANSFER — TRADITIONAL

**This page is optional.** You **and** the IRA trustee or plan administrator must complete this page if you want to transfer (i.e., direct rollover) all or a part of the **traditional (non-Roth) portion of your single or eligible monthly payments** to a traditional IRA, an eligible employer plan, or a Roth IRA. Your traditional TSP balance consists of traditional contributions, tax-exempt contributions, all agency contributions, and the earnings associated with these contributions. **Note:** If you choose to transfer money from your traditional (non-Roth) balance to a Roth IRA, you will have to pay tax on that portion when you file your tax return for the year.

**VIII. YOUR TRANSFER ELECTION FOR TRADITIONAL BALANCE** — After you complete this section, take or send this page (including the instructions on the back) to your IRA or plan. Your IRA trustee or plan administrator must complete Section IX. **You** must submit the completed package in order for your transfer to be processed.

**35. Single Payment.** Indicate the percentage of your **traditional (non-Roth) single payment** that you want to transfer:  .0%

**36. Monthly Payments.** Indicate the percentage of your **traditional (non-Roth) monthly payments** that you want to transfer:  .0%

**IX. TRANSFER INFORMATION FOR TRADITIONAL BALANCE** — This section is to be completed by the IRA trustee or plan administrator. The account described here must be a traditional IRA, eligible employer plan, or Roth IRA. Please return this completed form to the participant. **Do not submit transfer forms of financial institutions or plans.**

**37. Type of Account:**  Traditional IRA  Eligible Employer Plan  Roth IRA

**38.**   
IRA/Plan Account Number or Other Customer ID

**39.**  Check this box if tax-exempt balances are accepted into the account identified above.

**40.** Provide the **name and mailing address information below exactly as it should appear** on the front of the check.

Make check payable to

If needed, use these boxes to supplement "check payable to" information above.

Street Address

City

State

Zip Code

-

The financial institution or plan will need to use this information to identify the account that will receive the transfer.

I confirm the accuracy of the information in this section and the identity of the individual named above. As a representative of the financial institution or plan to which the funds are being transferred, I certify that the financial institution or plan agrees to accept the funds directly from the Thrift Savings Plan and deposit them into the IRA or eligible employer plan identified above.

**41.**  (  )  
Typed or Printed Name of Certifying Representative (Last, First, Middle) Daytime Phone (Area Code and Number)

**42.**   
Signature of Certifying Representative

**43.**  /  /   
Date Signed (mm/dd/yyyy)

Do not write in this section.

**GENERAL INFORMATION ABOUT TRANSFERS**

You may elect to transfer all or part of your withdrawal to a traditional IRA, eligible employer plan, or Roth IRA. The type of plan to which you can transfer your withdrawal depends on whether your withdrawal consists of a traditional (non-Roth) balance, a Roth balance, or both.

To transfer all or any part of the **traditional (non-Roth)** portion of your withdrawal to an IRA or eligible employer plan, complete Page 4.

To transfer all or any part of the **Roth** portion of your withdrawal, complete Page 5.

To transfer all or any part of **both** the traditional **and** Roth portions of your withdrawal to **separate plans** or to the **same plan**, you must complete Page 4 **and** Page 5.

If you have both a traditional (non-Roth) and a Roth balance in your TSP account, any eligible transfers will be processed according to the proportion of each balance in your account.

Example:

TSP account balance = \$10,000

Traditional portion of balance at time of eligible transfer request = \$9,000 (90%)

Roth portion of balance at time of eligible transfer request = \$1,000 (10%)

Withdrawal election:

Single Payment = 100%

Transfer request:

Transfer 50% of traditional portion of the withdrawal

Transfer 50% of Roth portion of the withdrawal

Result:

Amount transferred to eligible plan(s) = \$5,000, comprised of \$4,500 traditional money and \$500 Roth money.

Amount paid to you = \$5,000, comprised of \$4,500 traditional money and \$500 Roth money.

Be aware that depending on how you choose to receive your withdrawal, you may be subject to Federal income tax withholding rules.

**Note:** For tax reporting purposes, the TSP will report each payment and each transfer from each balance on a separate Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. For example, a participant who makes the election described in the above example will receive four Form 1099-Rs: one for the \$4,500 traditional balance transferred, one for the \$500 Roth balance transferred, one for the \$4,500 traditional amount paid to the participant, and one for the \$500 Roth amount paid to the participant.

**TRANSFER INFORMATION FOR TRADITIONAL (NON-ROTH) BALANCE**

**SECTION VIII. YOUR TRANSFER ELECTION FOR TRADITIONAL BALANCE.** You may transfer all or any part of the **traditional (non-Roth)** portion of your eligible withdrawal to a traditional IRA, eligible employer plan, or Roth IRA.

If you elected to withdraw all or a part of your TSP account as a **single payment** and you want to transfer all or a part of the traditional (non-Roth) portion of that payment to a traditional IRA, eligible employer plan, or Roth IRA, enter a percentage between 1 and 100% in Item 35. Do not enter decimals or a percentage over 100%.

If you elected to withdraw all or a part of your TSP account as **monthly payments** and you want to transfer all or a part of the traditional (non-Roth) portion of those monthly payments to a traditional IRA, eligible employer plan, or Roth IRA, enter a percentage between 1 and

100% in Item 36. Do not enter decimals or a percentage over 100%. (You cannot transfer payments expected to last 120 months or more or those that are computed based on life expectancy.)

**Note:** If you decide to transfer to a Roth IRA, be aware that Roth IRAs accept only after-tax dollars. As a result, you must pay tax on the amount you transfer, and the tax liability is incurred for the year of the transfer. We strongly recommend you consult with a tax advisor regarding your eligibility for, and the tax consequences of, making the transfer.

Payments that are not transferred directly to a traditional IRA, eligible employer plan, or Roth IRA are subject to mandatory 20% Federal income tax withholding. (See Section VII.) Read the TSP tax notice "Important Tax Information About Payments From Your TSP Account" for detailed tax rules.

**SECTION IX. TRANSFER INFORMATION FOR TRADITIONAL BALANCE.** If you choose to transfer all or any part of the **traditional (non-Roth)** portion of your withdrawal to a traditional IRA, eligible employer plan, or Roth IRA, **your financial institution or plan administrator must complete this section before you submit this form to the TSP.**

**Do not submit transfer forms of financial institutions or plans; the TSP cannot accept them.**

The institution or plan to which the payment is to be transferred must be a trust established inside the United States (i.e., the 50 states and the District of Columbia).

The financial institution or plan should retain a **copy** of Page 4 to identify the account to which the check should be deposited when it is received. If the transfer is to a traditional IRA or Roth IRA, the institution accepting the transfer should submit Form 5498, IRA Contribution Information, to the IRS. The TSP will report all payments and transfers to you and to the IRS on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

**Information for the IRA or Plan:** Complete Section IX and return this form to the participant identified at the top of Page 4. The financial institution or plan administrator must ensure that the account described here is a traditional IRA, eligible employer plan, or Roth IRA.

**Type of Account and Account Number.** Indicate whether the transfer is to a traditional IRA, eligible employer plan, or Roth IRA in Item 37. In Item 38, enter the account number, if available, of the IRA or plan to which the money is to be transferred. If an account number is not available, provide information that will help you identify the check when it is sent to you.

**Transfer of Tax-Exempt Balances.** A uniformed services participant may have contributed tax-exempt money from pay earned in a combat zone to his or her traditional balance. Check the box in Item 39 if tax-exempt balances are accepted into the account identified in Item 38. If the participant's traditional balance includes tax-exempt contributions, the taxable portion of the withdrawal from the traditional balance will be transferred first. Tax-exempt money will be transferred **only if** the taxable portion of the withdrawal does not satisfy the participant's transfer election **and** the plan or IRA accepts tax-exempt balances. If the plan or IRA does not accept tax-exempt balances, that portion of the payment will be paid directly to the participant.

**Name and Mailing Address.** Provide the name and mailing address information in the boxes provided exactly **as you want it to appear on the front of the transfer check**. You will need to identify the account to which the transfer should be deposited from the information contained in these boxes.

The certifying representative must provide the requested information in Items 41–43. If we need to contact the financial institution or plan for more information, the individual named here will be used as the contact person.

Name:

(Last, First, Middle)

TSP Account Number:

### TRANSFER — ROTH

**This page is optional.** You **and** the IRA trustee or plan administrator must complete this page if you want to transfer (i.e., direct rollover) all or a part of the **Roth portion of your single or eligible monthly payments** to a Roth IRA or to a Roth account maintained by an eligible employer plan. Your Roth TSP balance consists of any employee contributions that you designated as Roth when you made your contribution election and the earnings associated with these contributions. Withdrawals of Roth contributions are paid tax-free. The earnings associated with these contributions are paid tax-free only if 5 years have passed since January 1 of the calendar year in which you made your first Roth contribution, **and** you have reached age 59½ or have a permanent disability. (See instructions.)

**X. YOUR TRANSFER ELECTION FOR ROTH BALANCE** — After you complete this section, take or send this page (including the instructions on the back) to your IRA or plan. Your IRA trustee or plan administrator must complete Section XI. **You** must submit the completed package in order for your transfer to be processed.

**44. Single Payment.** Indicate the percentage of your **Roth single payment** that you want to transfer:  .0%

**45. Monthly Payments.** Indicate the percentage of your **Roth monthly payments** that you want to transfer:  .0%

**XI. TRANSFER INFORMATION FOR ROTH BALANCE** — This section is to be completed by the IRA trustee or plan administrator. The account described here must be a Roth IRA or a Roth account maintained by an eligible employer plan. Please return this completed form to the participant. **Do not submit transfer forms of financial institutions or plans.**

**46. Type of Account:**  Roth IRA  Eligible Employer Plan — Roth Account

**47.**   
IRA/Plan Account Number or Other Customer ID

**48.** Provide the **name and mailing address information below exactly as it should appear** on the front of the check.

Make check payable to

If needed, use these boxes to supplement "check payable to" information above.

Street Address

City

State

Zip Code

The financial institution or plan will need to use this information to identify the account that will receive the transfer.

I confirm the accuracy of the information in this section and the identity of the individual named above. As a representative of the financial institution or plan to which the funds are being transferred, I certify that the financial institution or plan agrees to accept the funds directly from the Thrift Savings Plan and deposit them into the IRA or eligible employer plan identified above.

**49.**  (  )  
Typed or Printed Name of Certifying Representative (Last, First, Middle) Daytime Phone (Area Code and Number)

**50.**   
Signature of Certifying Representative

**51.**  /  /   
Date Signed (mm/dd/yyyy)

Do not write in this section.

Form TSP-70, Page 5 (4/2012)

PREVIOUS EDITIONS OBSOLETE

## FORM TSP-70, INFORMATION AND INSTRUCTIONS FOR PAGE 5

### GENERAL INFORMATION ABOUT TRANSFERS

You may elect to transfer all or part of your withdrawal to a traditional IRA, eligible employer plan, or Roth IRA. The type of plan to which you can transfer your withdrawal depends on whether your withdrawal consists of a traditional (non-Roth) balance, a Roth balance, or both.

To transfer all or any part of the **traditional (non-Roth)** portion of your withdrawal to an IRA or eligible employer plan, complete Page 4.

To transfer all or any part of the **Roth** portion of your withdrawal, complete Page 5.

To transfer all or any part of **both** the traditional **and** Roth portions of your withdrawal to **separate plans** or to the **same plan**, you must complete Page 4 **and** Page 5.

If you have both a traditional (non-Roth) and a Roth balance in your TSP account, any eligible transfers will be processed according to the proportion of each balance in your account.

Example:

TSP account balance = \$10,000

Traditional portion of balance at time of eligible transfer request = \$9,000 (90%)

Roth portion of balance at time of eligible transfer request = \$1,000 (10%)

Withdrawal election:

Single Payment = 100%

Transfer request:

Transfer 50% of traditional portion of the withdrawal

Transfer 50% of Roth portion of the withdrawal

Result:

Amount transferred to eligible plan(s) = \$5,000, comprised of \$4,500 traditional money and \$500 Roth money.

Amount paid to you = \$5,000, comprised of \$4,500 traditional money and \$500 Roth money.

Be aware that depending on how you choose to receive your withdrawal, you may be subject to Federal income tax withholding rules.

**Note:** For tax reporting purposes, the TSP will report each payment and each transfer from each balance on a separate Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. For example, a participant who makes the election described in the above example will receive four Form 1099-Rs: one for the \$4,500 traditional balance transferred, one for the \$500 Roth balance transferred, one for the \$4,500 traditional amount paid to the participant, and one for the \$500 Roth amount paid to the participant.

### TRANSFER INFORMATION FOR ROTH BALANCE

**SECTION X. YOUR TRANSFER ELECTION FOR ROTH BALANCE.** You may transfer all or any part of the **Roth** portion of your withdrawal to a Roth IRA or to a Roth account maintained by an eligible employer plan.

If you elected to withdraw all or a part of your TSP account as a **single payment** and you want to transfer all or a part of the Roth portion of that payment to a Roth IRA or a Roth account maintained by an eligible employer plan, enter a percentage between 1 and 100% in Item 44. Do not enter decimals or a percentage over 100%.

If you elected to withdraw all or a part of your TSP account as **monthly payments** and you want to transfer all or a part of the Roth portion of those monthly payments to a Roth IRA or a Roth account maintained by an eligible employer plan, enter a percentage between

1 and 100% in Item 45. Do not enter decimals or a percentage over 100%. (You cannot transfer payments expected to last 120 months or more or those that are computed based on life expectancy.)

Roth contributions are not subject to mandatory Federal income tax withholding because they are not taxable upon distribution. However, if you have not met the conditions necessary for your Roth earnings to be qualified (i.e., paid tax-free), any Roth earnings that are not transferred directly to a Roth IRA or to a Roth account maintained by an eligible employer plan are taxable and are subject to the mandatory 20% Federal income tax withholding. Roth earnings become qualified when the following **two** conditions have been met: (1) 5 years have passed since January 1 of the calendar year in which you made your first Roth contribution **and** (2) you have reached age 59½ or have a permanent disability. **Note:** The TSP cannot certify to the IRS that you meet the Internal Revenue Code's definition of a disability when your taxes are reported. Therefore, you must provide the justification to the IRS when you file your taxes.

Read the TSP tax notice "Important Tax Information About Payments From Your TSP Account" for detailed tax rules.

**SECTION XI. TRANSFER INFORMATION FOR ROTH BALANCE.** If you choose to transfer all or any part of the **Roth** portion of your withdrawal to a Roth IRA or a Roth account maintained by an eligible employer plan, **your financial institution or plan administrator must complete this section before you submit this form to the TSP.**

**Do not submit transfer forms of financial institutions or plans; the TSP cannot accept them.**

The institution or plan to which the payment is to be transferred must be a trust established inside the United States (i.e., the 50 states and the District of Columbia).

The financial institution or plan should retain a **copy** of Page 5 to identify the account to which the check should be deposited when it is received. If the transfer is to a Roth IRA, the institution accepting the transfer should submit Form 5498, IRA Contribution Information, to the IRS. The TSP will report all payments and transfers to you and to the IRS on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

**Information for the IRA or Plan:** Complete Section XI and return this form to the participant identified at the top of Page 5. The financial institution or plan administrator must ensure that the account described here is a Roth IRA or a Roth account maintained by an eligible employer plan.

**Type of Account and Account Number.** Indicate whether the transfer is to a Roth IRA or a Roth account maintained by an eligible employer plan in Item 46. In Item 47, enter the account number, if available, of the IRA or plan to which the money is to be transferred. If an account number is not available, provide information that will help you identify the check when it is sent to you.

**Name and Mailing Address.** Provide the name and mailing address information in the boxes provided exactly **as you want it to appear on the front of the transfer check**. You will need to identify the account to which the transfer should be deposited from the information contained in these boxes.

The certifying representative must provide the requested information in Items 49–51. If we need to contact the financial institution or plan for more information, the individual named here will be used as the contact person.

Name:

(Last, First, Middle)

TSP Account Number:

Complete this page if you chose a life annuity in Item 11 or 23b.

XII. ANNUITY ELECTION — Choose only one annuity. If you choose a joint life annuity, you must complete Section XIII. If the annuity you choose is marked by an asterisk (\*), you must also complete Section XIV.

52. Your Gender:  Male  Female

53. Indicate your annuity choice by checking one of the options below.

Single Life — Level Payments:

- 1a No additional features
\*1b Cash refund (Complete Section XIV)
\*1c 10-year certain (Complete Section XIV)

Single Life — Increasing Payments:

- 2a No additional features
\*2b Cash refund (Complete Section XIV)
\*2c 10-year certain (Complete Section XIV)

Joint Life With Spouse — Level Payments:

- 3a 100% to survivor, no additional features
3b 50% to survivor, no additional features
\*3c 100% to survivor, cash refund (Complete Section XIV)
\*3d 50% to survivor, cash refund (Complete Section XIV)

Joint Life With Spouse — Increasing Payments:

- 4a 100% to survivor, no additional features
4b 50% to survivor, no additional features
\*4c 100% to survivor, cash refund (Complete Section XIV)
\*4d 50% to survivor, cash refund (Complete Section XIV)

Joint Life With Joint Annuitant Other Than Spouse — Level Payments:

- 5a 100% to survivor, no additional features
5b 50% to survivor, no additional features
\*5c 100% to survivor, cash refund (Complete Section XIV)
\*5d 50% to survivor, cash refund (Complete Section XIV)

XIII. INFORMATION ABOUT SPOUSE OR OTHER JOINT ANNUITANT

54. Name (Last, First, Middle)

55. Date of Birth (mm/dd/yyyy) 56. Joint Annuitant's Social Security Number 57. Gender: Male Female

58. Relationship to Participant

XIV. BENEFICIARY DESIGNATION FOR YOUR TSP ANNUITY — If you chose an annuity with a cash refund or 10-year certain feature (options in Section XII marked by an asterisk (\*)), you must provide the requested information and indicate the share of your annuity intended for each designation. (Contingent beneficiaries are not allowed.) Use whole percentages. Percentages must total to 100.

59. Beneficiary's Name (Last, First, Middle) Share: %

Social Security Number/EIN Relationship to Participant

60. Beneficiary's Name (Last, First, Middle) Share: %

Social Security Number/EIN Relationship to Participant

61. Beneficiary's Name (Last, First, Middle) Share: %

Social Security Number/EIN Relationship to Participant

Check here if you are submitting additional pages. How many additional pages are you attaching to this form?

Do not write in this section.



## FORM TSP-70, INFORMATION AND INSTRUCTIONS FOR PAGE 6

Before completing this page, read the annuity information contained in the booklet *Withdrawing Your TSP Account After Leaving Federal Service*. **Note: You cannot change your annuity option or cancel your annuity once your annuity has been purchased.**

**Special Rules for Annuities:** The minimum threshold for an annuity purchase is \$3,500. If you have **both** a traditional (non-Roth) and a Roth balance in your TSP account and you elect to purchase an annuity, the minimum threshold of \$3,500 applies to each balance separately. You may choose to purchase an annuity as long as you have \$3,500 in either your traditional or Roth balance. The TSP will purchase **two** of the same type of annuity (one with the traditional balance and one with the Roth balance). You cannot choose different annuities for each type of balance.

Also, the following rules apply:

- **If you choose to use 100% of your TSP account to purchase an annuity** and both balances are below \$3,500, your form will be rejected. If you have both a traditional balance and a Roth balance and at least one of the balances is at least \$3,500, the TSP will purchase an annuity with the balance that is at least \$3,500 and pay the other balance directly to you as a cash payment.
- Alternatively, **if you choose an annuity as part of a mixed withdrawal**, any amount(s) that cannot be used to purchase the requested annuity will be split proportionally and distributed according to the other withdrawal option(s) you have chosen.

**SECTION XII. ANNUITY ELECTION.** Indicate your gender, then choose the one annuity option you want by checking the appropriate box. **Note:** If you are a married FERS or uniformed services participant and you checked Item 11 on Page 1, you must select Annuity Option 3b; otherwise, your form cannot be accepted.

An asterisk (\*) before an annuity option number indicates that there is a cash refund or 10-year certain feature associated with that annuity. If you choose one of these annuities, you must complete Section XIV and name a beneficiary(ies) for your annuity.

If you are choosing among the joint life annuities, consider both the monthly payments you will receive while you and your joint annuitant are both alive and the payments that will be made to the survivor if one of you dies. If you choose a joint life annuity with a 50% survivor benefit, the monthly annuity payment to the survivor — whether the survivor is you or your joint annuitant — **will be reduced by half (that is, 50%)** of the annuity payment made while you and your joint annuitant are alive. If you choose an annuity with a 100% survivor benefit, the monthly annuity payment to the survivor will not be reduced when one of you dies. However, with the 100% survivor benefit, the monthly annuity payment that you will receive while you and your joint annuitant are both alive will be less than if you select the 50% survivor benefit. The booklet *Withdrawing Your TSP Account After Leaving Federal Service* provides detailed information.

**SECTION XIII. INFORMATION ABOUT SPOUSE OR OTHER JOINT ANNUITANT.** If you chose a joint life annuity, you must provide the requested information about your joint annuitant. You must also provide a copy of your joint annuitant's birth certificate. If your joint annuitant's birth certificate is unavailable, one of the following three items may be used if the date of birth is shown: baptismal certificate, family bible record, or marriage certificate. If a birth certificate or the above items are not available, submit **two** of the following types of evidence: school or college record, church record, birth certificate of children (if parent's age is shown), family record of genealogies, driver's license, military identification, military discharge papers, passport, life insurance papers, hospital

records, census records, or voting records. **Do not send original documents;** they will not be returned to you. If the name on a document is not the same as the current name of the joint annuitant, you may be requested to submit a statement from the joint annuitant indicating that he or she is the person named in the document.

If you chose an annuity that provides for a joint annuitant other than your spouse, the joint annuitant must be either a former spouse or someone with an **insurable interest** in you. This means that the person is financially dependent on you and could reasonably expect to derive financial benefit from your continued life.

Blood relatives or adopted relatives (but not relatives by marriage) who are closer than first cousins are presumed to have an insurable interest in you. **If you name such a joint annuitant (i.e., a former spouse or someone with an insurable interest) who is more than 10 years younger than you, you must choose a joint life annuity with the 50% survivor benefit. The only exception is for a former spouse to whom all or a portion of your TSP account is payable pursuant to a retirement benefits court order.**

If the person named as your joint annuitant is not presumed to have an insurable interest in you, you must submit an affidavit (i.e., a certification signed before a notary public) from someone with personal knowledge that the named person has an insurable interest in you. The certifier must know the relationship between you and the joint annuitant and must state why he or she believes that the named joint annuitant might reasonably expect to benefit financially from your continued life.

### SECTION XIV. BENEFICIARY DESIGNATION FOR YOUR TSP ANNUITY.

If you chose an annuity option with a cash refund or 10-year certain feature, you must designate a beneficiary or beneficiaries to receive benefits from the annuity after your death, under the conditions outlined in that feature. The beneficiary designation on this form applies **only** to the portion of your account used for the annuity purchase. After your annuity is purchased, changes in your beneficiary designation must be made directly with the annuity provider.

The share of any beneficiary who dies before you die will be distributed among the surviving beneficiaries in proportion to the shares you indicate, or entirely to the surviving beneficiary. You may name any individual, corporation, trust, legal entity, or your estate as your beneficiary. If you need additional space, use a blank sheet of paper with your name, TSP account number, and date of birth on it. If you use additional pages, number, sign, and date each page. Use the same date on each page.

Indicate a whole percentage for each beneficiary. Percentages must add up to 100%.

- **If your beneficiary is a person**, enter for each beneficiary the last name, first name, middle name, Social Security number (SSN), and the beneficiary's relationship to you.
- **If your beneficiary is a firm, corporation, or other legal entity**, enter the legal representative's name and the Employer Identification Number (EIN).
- **If your beneficiary is a trust**, enter the trustee's name and the EIN.
- **If your beneficiary is an estate**, enter the executor's name and EIN.

After completing your withdrawal request, make a **copy** for your records.

**Mail the original to:**

**Thrift Savings Plan  
P.O. Box 385021  
Birmingham, AL 35238**

**Or**

**Fax to: 1-866-817-5023.**

**Note:** Do **not** mail **and** fax your request. The TSP will automatically cancel the second request it receives. If you need to make a change or correction on your form, call the TSP immediately to cancel your first request. If the TSP has processed your form prior to receiving your call, your transaction cannot be reversed.

If you have questions, call the toll-free ThriftLine at 1-TSP-YOU-FRST (1-877-968-3778) or the TDD at 1-TSP-THRIFT5 (1-877-847-4385). Outside the U.S. and Canada, please call 404-233-4400 (not toll free).

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**PRIVACY ACT NOTICE.** We are authorized to request the information you provide on this form under 5 U.S.C. chapter 84, Federal Employees' Retirement System. We will use this information to identify your TSP account and to process your transaction. In addition, this information may be shared with other Federal agencies for statistical, auditing, or archiving purposes. We may share the information with law enforcement agencies investigating a violation of civil or criminal law, or agencies implementing a

statute, rule, or order. It may be shared with congressional offices, private sector audit firms, spouses, former spouses, and beneficiaries, and their attorneys. We may disclose relevant portions of the information to appropriate parties engaged in litigation and for other routine uses as specified in the Federal Register. You are not required by law to provide this information, but if you do not provide it, we will not be able to process your request.



# **Thrift Savings Plan**

**TSP-77**

**Request for Partial  
Withdrawal When Separated**

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**April 2012**

## **Check List for Completing Form TSP-77, Request for Partial Withdrawal When Separated**

Be sure to read all instructions before completing this form. Only complete and submit the pages that are required as outlined below. You must submit all pages that are relevant to your request **as a single package**.

- ✓ **All** participants must complete and submit Page 1. Remember that your signature must be notarized.
- ✓ If you are **married**, you must also complete and submit Page 2 (either Section VI or VII depending on your retirement coverage). If you are a married **FERS or uniformed services** participant, your spouse must sign the form, and the signature must be notarized.
- ✓ If you have a **traditional (non-Roth)** balance and you would like to **transfer** all or a part of the **traditional (non-Roth)** portion of your withdrawal, you must complete and submit Page 3.
- ✓ If you have a **Roth** balance and you would like to **transfer** all or a part of the **Roth** portion of your withdrawal, you must complete and submit Page 4.

**Note:** If you would like to transfer all or a part of **both the traditional and the Roth** portions of your withdrawal, you must complete and submit Page 3 **and** Page 4, **even if the transfer is to the same financial institution.**



# THRIFT SAVINGS PLAN

# TSP-77

## REQUEST FOR PARTIAL WITHDRAWAL WHEN SEPARATED

### I. INFORMATION ABOUT YOU

1. This request applies to my:  Civilian Account **OR**  Uniformed Services Account

2.  Last Name  First Name  Middle Name

3.  TSP Account Number 4.  /  /  Date of Birth (mm/dd/yyyy) 5. \_\_\_\_\_ Daytime Phone (Area Code and Number)

6.  Foreign address? Check here. 7.  Street Address or Box Number (For a foreign address, see instructions on back.)  
 Street Address Line 2

8.  City 9.  State 10.  -  Zip Code

### II. PARTIAL WITHDRAWAL REQUEST

11. Amount you want to withdraw: \$ , , .00 (amount must be \$1,000 or more)

### III. DIRECT DEPOSIT INFORMATION — This section is optional.

Complete this section if you want the portion of your withdrawal that is **not being transferred** (Sections VIII–XI) directly deposited into your checking or savings account.

12. Type of Account:  Checking  Savings 13.  Name of Financial Institution  
14.  ACH Routing Number (Must be 9 digits) 15.  Checking or Savings Account Number

### IV. ADDITIONAL TAX WITHHOLDING — This section is optional.

The TSP must withhold 20% of the taxable portion of your withdrawal for Federal income tax. Withholding does not apply to amounts transferred to an IRA or eligible employer plan (Sections VIII–XI) or which are otherwise nontaxable (see instructions).

16. In **addition** to the mandatory 20%, withhold this amount for Federal income tax: \$ , .00

### V. CERTIFICATION AND NOTARIZATION — I certify that the information I have provided on all pages of this withdrawal request is true and complete to the best of my knowledge. I further certify that if I did not complete Section VI or VII on Page 2 (Spouse Information for Married TSP Participants), I am an unmarried TSP participant. Warning: Any intentional false statement in this application or willful misrepresentation concerning this request 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).

17.  Participant's Signature 18.  /  /  Date Signed (mm/dd/yyyy)

19. **Notary: Please complete the following. No other acknowledgement is acceptable (see instructions).** The person who signed Item 17 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 \_\_\_\_\_, \_\_\_\_\_ Year.

My commission expires: \_\_\_\_\_ Date (mm/dd/yyyy) Notary's Signature \_\_\_\_\_  
Notary's Printed Name \_\_\_\_\_ Notary's Phone Number \_\_\_\_\_  
Jurisdiction \_\_\_\_\_

**Do Not Write Below This Line**



## FORM TSP-77, INFORMATION AND INSTRUCTIONS FOR PAGE 1

Use this form if you are separated from Federal service and you want to request a one-time-only withdrawal of part of your vested account balance and leave the remainder with the TSP. If you would like to request a withdrawal of your entire vested account balance now, do not complete this form; instead, complete Form TSP-70.

Before completing a withdrawal request, you should read the booklet *Withdrawing Your TSP Account After Leaving Federal Service* and the TSP tax notice "Important Tax Information About Payments From Your TSP Account." If you do not have these materials, you can download them from the TSP website ([www.tsp.gov](http://www.tsp.gov)) or ask your former agency or service for a copy. You can also request them by calling the ThriftLine.

### First, make sure you are eligible for a partial withdrawal:

- Your vested account balance must be at least \$1,000. Your vested account balance is the total amount of your traditional balance and your Roth balance (if any), less any Agency Automatic (1%) Contributions and earnings in your account that have not met the time-in-service requirement.
- The minimum amount for a partial withdrawal is \$1,000.
- You cannot have previously made a partial withdrawal after separating from Federal service. Only one partial withdrawal is allowed.
- You cannot have previously made an age-based in-service withdrawal.
- You must be separated from Federal service for 31 or more days in order to be eligible for a post-employment withdrawal.

### There are two ways to request a partial withdrawal:

1. Complete Form TSP-77 and mail or fax it to the TSP. **Note:** Your request cannot be processed until your agency or service submits confirmation of your separation to the TSP.

or

2. Use the TSP website ([www.tsp.gov](http://www.tsp.gov)) to begin your withdrawal request. For security reasons, you cannot complete your request online. You will be asked to print out your partially completed withdrawal request form at the end of your online session. Review the form, complete any missing information, and provide any required signatures and documentation before you mail or fax it to the TSP. **Do not change or cross out any of the prefilled information** resulting from your entries on the Web; the form may not be processed if you do so.

**Note:** This type of withdrawal cannot process until your agency or service reports your separation to the TSP.

If you are not married and you do not want to transfer any part of your partial withdrawal to a traditional IRA, an eligible employer plan, or a Roth IRA, you only have to complete Page 1 of this form. Sign the form, have it notarized, and submit it to the TSP at the address indicated on the last page of this form.

**SECTION I.** Complete Items 1 – 10. Check whether you are withdrawing money from a civilian or uniformed services account in Item 1. **Check only one box.** You cannot withdraw from both accounts using one form. Also, be sure to only check the box for the account representing the employment from which you are separated. If you have two TSP accounts, and you do not check a box, your form will not be processed.

Your TSP account number is the 13-digit number that was issued to you.

The address you provide on this form will be used to update the address in your TSP account record. If you have a foreign address, check the box in Item 6 and enter the foreign address in Items 7 – 10 as follows:

First address line: Enter the street address or post office box number, and any 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.

**SECTION II.** You may withdraw \$1,000 or more. Use a whole dollar amount only. **Note:** Your withdrawal will be disbursed pro rata (i.e., proportionally) from any traditional (non-Roth) and Roth balances in your account. If your vested account balance is less than \$1,000, submit a full withdrawal request using Form TSP-70.

**SECTION III.** Complete this section only if you want the TSP to send your partial withdrawal directly to your checking or savings account by means of a direct deposit (electronic funds transfer [EFT]). Provide all of the requested information in this section. If you do not know the 9-digit ACH Routing number or your checking or savings account number, contact your financial institution for this information. Direct deposits will be made only to financial institutions in the United States. **Note:** Only the portion of your withdrawal that is not being transferred to a traditional IRA, eligible employer plan, or Roth IRA can be paid by EFT.

**Note:** If the TSP determines that the EFT information you provided is incomplete or invalid, your request will be processed, but you will receive your payment in the form of a check mailed to you.

**SECTION IV.** There is a **mandatory 20% Federal income tax withholding** on the **taxable** portion of payments that are not transferred directly to a traditional IRA, eligible employer plan, or Roth IRA. You cannot waive withholding for Federal income tax, but you can ask the TSP to withhold an additional amount by completing Item 16. If a uniformed services participant has a tax-exempt balance, the tax-exempt portion of the withdrawal will not be subject to withholding. Roth contributions and qualified Roth earnings are not also subject to mandatory tax withholding. **If you complete this section, you should not complete IRS Form W-4P.** Read the TSP tax notice "Important Tax Information About Payments From Your TSP Account" for detailed tax rules.

**SECTION V.** Read the certification carefully and sign and date the form. Your signature must be notarized; otherwise, your request cannot be processed. Because the form will be filed with a Federal agency in Washington, D.C., the notary must complete the notarization in Item 19. No other acknowledgement is acceptable.

Name:

[Name input box]

(Last, First, Middle)

TSP Account Number:

[TSP Account Number input box]

**SPOUSE INFORMATION FOR MARRIED TSP PARTICIPANTS**

**VI. FERS AND UNIFORMED SERVICES PARTICIPANTS** — Your spouse must consent to your withdrawal. Your spouse's signature must be notarized.

**20. Spouse:** By signing below, I consent to this withdrawal from my spouse's Thrift Savings Plan account. I understand that the amount withdrawn will not be available later for the purchase of a joint and survivor annuity.

[Spouse's Name input box]

Spouse's Name (Last, First, Middle)

**21.**

[Spouse's Signature input box]

Spouse's Signature

**22.**

[Date Signed input box]

Date Signed (mm/dd/yyyy)

**23. Notary: Please complete the following. No other acknowledgement is acceptable (see instructions).**

The person who signed Item 21 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 \_\_\_\_\_ Month, \_\_\_\_\_ Year.

My commission expires: \_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Notary's Signature

\_\_\_\_\_  
Notary's Printed Name

( )

\_\_\_\_\_  
Notary's Phone Number

[seal]

\_\_\_\_\_  
Jurisdiction

**24. Participant:** If you cannot obtain your spouse's signature, provide your spouse's name (Item 20) and Social Security number on the right, and submit Form TSP-16, Exception to Spousal Requirements (TSP-U-16 for uniformed services), with the required documentation.

[Spouse's Social Security Number input box]

Spouse's Social Security Number

**VII. CSRS PARTICIPANTS** — Your spouse must be notified of your withdrawal request.

**25.**

[Spouse's Name input box]

Spouse's Name (Last, First, Middle)

**26.** Is your spouse's address the same as your address in your TSP record?

Yes

No (Complete Items 27-31.)

Don't know spouse's address.  
(Provide spouse's SSN and submit Form TSP-16.)

[Spouse's Social Security Number input box]

Spouse's Social Security Number

**27.**

Spouse has foreign address? Check here.

**28.**

[Street Address or Box Number input box]

Street Address or Box Number (For a foreign address, see instructions.)

[Street Address Line 2 input box]

Street Address Line 2

**29.**

[City input box]

City

**30.**

[State input box]

State

**31.**

[Zip Code input box]

Zip Code

**Do Not Write Below This Line**

## FORM TSP-77, INFORMATION AND INSTRUCTIONS FOR PAGE 2

Spouses' rights apply to all partial withdrawals from your TSP account. If you are married (even if separated from your spouse), you must comply with the spouses' rights requirements outlined below:

### Spouses' Rights for Partial Withdrawals

Classification	Requirement	Exceptions
FERS/ Uniformed Services	Spouse must provide notarized consent to the partial withdrawal.	Whereabouts unknown or exceptional circumstances
CSRS	Spouse must be notified of the request for a partial withdrawal.	Whereabouts unknown

**SECTION VI — Married FERS and uniformed services participants.** By law, your spouse has the right to a joint and survivor annuity with a 50% survivor benefit, level payments, and no cash refund, unless your spouse waives the right to that annuity. By consenting to the partial withdrawal on this form, your spouse acknowledges that any amount disbursed now will not be available later for the purchase of such an annuity.

Your spouse gives consent to a partial withdrawal from your TSP account by completing, signing, and dating Items 20–22. Your spouse's signature must be notarized (Item 23). Because this form will be filed with a Federal agency in Washington, D.C., the notary must complete the information in Item 23. No other acknowledgement is acceptable.

If you cannot obtain your spouse's signature, please provide your spouse's Social Security number in Item 24. The TSP cannot process your withdrawal unless you have an exception on file or if you apply for — and receive — an exception to the spouses' rights requirements. Exceptions are granted in **rare** circumstances. If you wish to apply for an exception, you can do so by submitting Form TSP-16 (TSP-U-16 for uniformed services), Exception to Spousal Requirements, along with this form.

**SECTION VII — Married CSRS participants.** By law, the TSP must notify your spouse of your partial withdrawal. Provide your spouse's name in Item 25. If your spouse's address is the same as your address in your TSP record, check "Yes" in Item 26. Otherwise, check "No" in Item 26 and complete Items 27–31. If you do not know your spouse's whereabouts, check the third box in Item 26 and provide your spouse's Social Security number. The TSP cannot process your withdrawal unless you have an exception on file or if you apply for — and receive — an exception to the spouses' rights requirements. Exceptions are granted in **rare** circumstances. If you wish to apply for an exception, you can do so by submitting Form TSP-16, Exception to Spousal Requirements, along with this form.

If your spouse has a foreign address, check the box in Item 27 and enter the foreign address in Items 28–31 as follows:

First address line: Enter the street address or post office box number, and any 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 your spouse uses 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.



Name:

(Last, First, Middle)

TSP Account Number:

### TRANSFER — TRADITIONAL

**This page is optional.** You and the IRA trustee or plan administrator must complete this page if you want to transfer all or a part of the **traditional (non-Roth)** portion of your withdrawal to a traditional IRA, eligible employer plan, or a Roth IRA. Your traditional TSP balance consists of traditional contributions, tax-exempt contributions, all agency contributions, and the earnings associated with these contributions. **Note:** If you choose to transfer to a Roth IRA, you will have to pay tax on that portion when you file your tax return for the year.

**VIII. YOUR TRANSFER ELECTION FOR TRADITIONAL BALANCE** — After you complete this section, take or send this page (including the instructions on the back) to your IRA or plan. Your IRA trustee or plan administrator must complete Section IX. **You** must submit the completed package in order for your transfer to be processed.

32. Transfer .0% of the **traditional (non-Roth)** portion of my withdrawal to the IRA or plan identified in Section IX.

**IX. TRANSFER INFORMATION FOR TRADITIONAL BALANCE** — This section is **to be completed by the IRA trustee or plan administrator**. The account described here must be a traditional IRA, eligible employer plan, or a Roth IRA. Please return this completed form to the participant. **Do not submit transfer forms of financial institutions or plans.**

33. Type of Account:  Traditional IRA  Eligible Employer Plan  Roth IRA

34.   
IRA/Plan Account Number or Other Customer ID

35.  Check this box if tax-exempt balances are accepted into the account identified above.

36. Provide the **name and mailing address information below exactly as it should appear** on the front of the check.

Make check payable to

City

State

Zip Code

The financial institution or plan will need to use this information to identify the account that will receive the transfer.

I confirm the accuracy of the information in this section and the identity of the individual named above. As a representative of the financial institution or plan to which the funds are being transferred, I certify that the financial institution or plan agrees to accept the funds directly from the Thrift Savings Plan and deposit them into the IRA or eligible employer plan identified above.

37.  (  )  
Typed or Printed Name of Certifying Representative (Last, First, Middle) Daytime Phone (Area Code and Number)

38.   
Signature of Certifying Representative

39.  /  /   
Date Signed (mm/dd/yyyy)

**Do Not Write Below This Line**

## FORM TSP-77, INFORMATION AND INSTRUCTIONS FOR PAGE 3

You may elect to transfer all or part of your partial withdrawal to a traditional IRA, an eligible employer plan, or a Roth IRA. The type of plan to which you can transfer your withdrawal depends on whether your withdrawal consists of a traditional (non-Roth) balance, a Roth balance, or both.

If you would like to transfer all or any part of the **traditional (non-Roth)** portion of your withdrawal to an IRA or eligible employer plan, complete Page 3.

If you would like to transfer all or any part of the **Roth** portion of your withdrawal to a Roth IRA or eligible employer plan, complete Page 4.

If you would like to transfer all or any part of **both** the traditional and Roth portions of your withdrawal to **separate plans** or to the **same plan**, you must complete Page 3 **and** Page 4.

**SECTION VIII.** You may transfer all or any part of the **traditional (non-Roth)** portion of your withdrawal to a traditional IRA, eligible employer plan, or Roth IRA. Enter a percentage between 1 and 100% in Item 32. Do not enter decimals or a percentage over 100%. If you decide to transfer to a Roth IRA, be aware that Roth IRAs accept only after-tax dollars. As a result, you must pay tax on the amount you transfer and the tax liability is incurred for the year of the transfer. We strongly encourage you to consult with a tax advisor regarding your eligibility for, and the tax consequences of, making the transfer.

Payments that are not transferred directly to a traditional IRA, eligible employer plan, or Roth IRA are subject to **mandatory 20% Federal income tax withholding**. (See Section IV.) Read the TSP tax notice "Important Tax Information About Payments From Your TSP Account" for detailed tax rules.

**SECTION IX.** If you choose to transfer all or any part of the **traditional (non-Roth)** portion of your withdrawal to a traditional IRA, eligible employer plan, or Roth IRA, **your financial institution or plan administrator must complete this section before you submit this form to the TSP.**

**Do not submit transfer forms of financial institutions or plans; the TSP cannot accept them.**

The institution or plan to which the payment is to be transferred must be a trust established inside the United States (i.e., the 50 States and the District of Columbia).

The financial institution or plan should retain a **copy** of Page 3 to identify the account to which the check should be deposited when it is received. If the transfer is to a traditional IRA or Roth IRA, the institution accepting the transfer should submit Form 5498, IRA Contribution Information, to the IRS. The TSP will report all payments and transfers to you and to the IRS on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

**Information for the IRA or Plan:** Complete Section IX and return this form to the participant identified at the top of the page. The financial institution or plan administrator must ensure that the account described here is a traditional IRA, eligible employer plan, or Roth IRA.

**Type of Account and Account Number.** Indicate whether the transfer is to a traditional IRA, eligible employer plan, or Roth IRA in Item 33. In Item 34, enter the account number, if available, of the IRA or plan to which the money is to be transferred. If an account number is not available, provide information that will help you identify the check when it is sent to you.

**Transfer of Tax-Exempt Balances.** A uniformed services participant may have contributed tax-exempt money from pay earned in a combat zone to his or her traditional balance. Check the box in Item 35 if tax-exempt balances are accepted into the account identified in Item 33. If the participant's traditional balance includes tax-exempt contributions, the taxable portion of the withdrawal from the traditional balance will be transferred first. Tax-exempt money will be transferred **only if** the taxable portion of the withdrawal does not satisfy the participant's transfer election **and** the plan or IRA accepts tax-exempt balances. If the plan or IRA does not accept tax-exempt balances, that portion of the payment will be paid directly to the participant.

**Name and Mailing Address.** Provide the name and mailing address information in the boxes provided exactly as you want it to appear on the front of the transfer check. You will need to identify the account to which the transfer should be deposited from the information contained in these boxes.

The certifying representative must provide the requested information in Items 37–39. If we need to contact the financial institution or plan for more information, the individual named here will be used as the contact person.

Name:

(Last, First, Middle)

TSP Account Number:

### TRANSFER — ROTH

**This page is optional.** You **and** the IRA trustee or plan administrator must complete this page if you want to transfer all or a part of the **Roth** portion of your withdrawal to a Roth IRA or to a Roth account maintained by an eligible employer plan. Your Roth TSP balance consists of any employee contributions that you designated as Roth when you made your contribution election and the earnings associated with these contributions. Withdrawals of Roth contributions are paid tax-free. The earnings associated with these contributions are paid tax-free only if 5 years have passed since January 1 of the calendar year in which you made your first Roth contribution **and** you have reached age 59½ or have a permanent disability. (See instructions.)

**X. YOUR TRANSFER ELECTION FOR ROTH BALANCE** — After you complete this section, take or send this page (including the instructions on the back) to your IRA or plan. Your IRA trustee or plan administrator must complete Section XI. **You** must submit the completed package in order for your transfer to be processed.

40. Transfer .0% of the **Roth** portion of my withdrawal to the IRA or plan identified in Section XI.

**XI. TRANSFER INFORMATION FOR ROTH BALANCE** — This section is to **be completed by the IRA trustee or plan administrator**. The account described here must be a Roth IRA or a Roth account maintained by an eligible employer plan. Please return this completed form to the participant. **Do not submit transfer forms of financial institutions or plans.**

41. Type of Account:  Roth IRA  Eligible Employer Plan — Roth Account

42.   
IRA/Plan Account Number or Other Customer ID

43. Provide the **name and mailing address information below exactly as it should appear** on the front of the check.

Make check payable to

City

State

Zip Code

The financial institution or plan will need to use this information to identify the account that will receive the transfer.

I confirm the accuracy of the information in this section and the identity of the individual named above. As a representative of the financial institution or plan to which the funds are being transferred, I certify that the financial institution or plan agrees to accept the funds directly from the Thrift Savings Plan and deposit them into the IRA or eligible employer plan identified above.

44.  (  )  
Typed or Printed Name of Certifying Representative (Last, First, Middle) Daytime Phone (Area Code and Number)

45.   
Signature of Certifying Representative

46.  /  /   
Date Signed (mm/dd/yyyy)

**Do Not Write Below This Line**

## FORM TSP-77, INFORMATION AND INSTRUCTIONS FOR PAGE 4

**SECTION X.** You may transfer all or any part of the **Roth** portion of your withdrawal to a Roth IRA or to a Roth account maintained by an eligible employer plan. Enter a percentage between 1 and 100% in Item 40. Do not enter decimals or a percentage over 100%.

Roth contributions are not subject to mandatory Federal income tax withholding because they are not taxable upon distribution. However, if you have not met the conditions necessary for your Roth earnings to be qualified (i.e., paid tax-free), any Roth earnings that are not transferred directly to a Roth IRA or to a Roth account maintained by an eligible employer plan are taxable and are subject to the mandatory 20% Federal income tax withholding. Roth earnings become qualified when the following **two** conditions are met: (1) 5 years have passed since January 1 of the calendar year in which you made your first Roth contribution **and** (2) You have reached age 59½ or have a permanent disability. **Note:** The TSP cannot certify to the IRS that you meet the Internal Revenue Code's definition of a disability when your taxes are reported. Therefore, you must provide the justification to the IRS when you file your taxes.

Read the TSP tax notice "Important Tax Information About Payments From Your TSP Account" for detailed tax rules.

**SECTION XI.** If you choose to transfer all or any part of the **Roth** portion of your withdrawal to a Roth IRA or to a Roth account maintained by an eligible employer plan, **your financial institution or plan administrator must complete this section before you submit this form to the TSP.**

**Do not submit transfer forms of financial institutions or plans; the TSP cannot accept them.**

The institution or plan to which the payment is to be transferred must be a trust established inside the United States (i.e., the 50 States and the District of Columbia).

The financial institution or plan should retain a **copy** of Page 4 to identify the account to which the check should be deposited when it is received. If the transfer is to a Roth IRA, the institution accepting the transfer should submit Form 5498, IRA Contribution Information, to the IRS. The TSP will report all payments and transfers to you and to the IRS on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

**Information for the IRA or Plan:** Complete Section XI and return this form to the participant identified at the top of the page. The financial institution or plan administrator must ensure that the account described here is a Roth IRA or a Roth account maintained by an eligible employer plan.

**Type of Account and Account Number.** Indicate whether the transfer is to a Roth IRA or to a Roth account maintained by an eligible employer plan in Item 41, and in Item 42 enter the account number, if available, of the IRA or plan to which the money is to be transferred. If an account number is not available, provide information that will help you identify the check when it is sent to you.

**Name and Mailing Address.** Provide the name and mailing address information in the boxes provided exactly as you want it to appear on the front of the transfer check. You will need to identify the account to which the transfer should be deposited from the information contained in these boxes.

The certifying representative must provide the requested information in Items 44–46. If we need to contact the financial institution or plan for more information, the individual named here will be used as the contact person.

**PRIVACY ACT NOTICE.** We are authorized to request the information you provide on this form under 5 U.S.C. chapter 84, Federal Employees' Retirement System. We will use this information to identify your TSP account and to process your request. In addition, this information may be shared with other Federal agencies for statistical, auditing, or archiving purposes. We may share the information with law enforcement agencies investigating a violation of civil or criminal law, or agencies implementing

a statute, rule, or order. It may be shared with congressional offices, private sector audit firms, spouses, former spouses, and beneficiaries, and their attorneys. We may disclose relevant portions of the information to appropriate parties engaged in litigation and for other routine uses as specified in the Federal Register. You are not required by law to provide this information, but if you do not provide it, we will not be able to process your request.

After completing your withdrawal request, make a **copy** for your records.

**Mail the original to:**

**Thrift Savings Plan  
P.O. Box 385021  
Birmingham, AL 35238**

**Or fax to: 1-866-817-5023.**

**Note:** Do **not** mail **and** fax your request. The TSP will automatically cancel the second request it receives. If you need to make a change or correction on your form, call the TSP to cancel your first request.

If you have questions, call the toll-free ThriftLine at 1-TSP-YOU-FRST (1-877-968-3778) or the TDD at 1-TSP-THRIFT5 (1-877-847-4385). Outside the U.S. and Canada, please call 404-233-4400 (not toll free).

