



# Thrift Savings Plan

## **TSP-90** **Withdrawal Request** **for Beneficiary Participants**

November 2015

## Checklist for Completing Form TSP-90, Withdrawal Request for Beneficiary Participants:

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**.

- ✓ Page 1 (Sections I, II, and III) is required for all beneficiary participants requesting a withdrawal. You must **sign** and **date the form**, and your **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**.

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).



# THRIFT SAVINGS PLAN WITHDRAWAL REQUEST FOR BENEFICIARY PARTICIPANTS

## TSP-90

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

1.     
Last Name First Name Middle Name

2.  3.  /  /   
TSP Account Number Date of Birth (mm/dd/yyyy)

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

5.  Foreign address?  
 Check here.

6.   
Street Address or Box Number (For a foreign address, see instructions.)

Street Address Line 2

7.  8.  9.  -   
City State Zip Code

### II. WITHDRAWAL ELECTION — This section is required.

Complete either the Partial Withdrawal (Item 10) **or** Full Withdrawal (Item 11) section below by providing the requested information for your withdrawal choice. (Do **not** complete both withdrawal elections.) For more information about each of the withdrawal elections read the instructions on this form, the booklet *Your TSP Account: A Guide for Beneficiary Participants*, and the tax notice "Important Tax Information About Payments From Your TSP Account."

**10. Partial Withdrawal:** I want to withdraw \$ , ,  .00 to be paid in one payment (must be \$1,000 or more) and leave the remaining balance in my TSP account.

**OR**

**11. Full Withdrawal:\***

a.  .0% **Single Payment**

b.  .0% **Life Annuity** (Must equal \$3,500 or more. Also complete Page 5.)

c.  .0% **TSP Monthly Payments** → Tell us how you would like your monthly payments:

1 0 0 % (Total a, b, and c)      \$ ,  .00 per month (\$25.00 or more)

**OR**

\* Indicate percentages in whole numbers.

Compute my payments based on life expectancy.

### III. CERTIFICATION AND NOTARIZATION — This section is required.

I certify that I have read the information in this package and the TSP tax notice "Important Tax Information About Payments From Your TSP Account." I understand that my withdrawal election is irrevocable once it is processed. I certify that the information I have provided on all pages of this form is true and complete to the best of my knowledge. **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).

12.  13.  /  /   
Beneficiary Participant's Signature Date Signed (mm/dd/yyyy)

**14. Notary: Please complete the following. No other acknowledgement is acceptable (see instructions).** The person who signed Item 12 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)

[seal]

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

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

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

\_\_\_\_\_  
Jurisdiction

**Do Not Write Below This Line**



## INFORMATION AND INSTRUCTIONS FOR PAGE 1

Use this form if you are a beneficiary participant and you want to:

- Request a one-time-only partial withdrawal of \$1,000 or more from your TSP beneficiary participant account, and leave the balance of your account with the TSP;

**OR**

- Request a full withdrawal of your TSP beneficiary participant account in the form of a single payment, monthly payments, life annuity, or any combination of these options.

**Note:** If you have more than one beneficiary participant account, you must complete a separate Form TSP-90 for each beneficiary participant account from which you want to withdraw.

Before completing your withdrawal request, you should read the booklet *Your TSP Account: A Guide for Beneficiary Participants*, 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, [tsp.gov](http://tsp.gov), or contact the TSP.

**SECTION I. Information About You.** Complete Items 1–9. Your TSP account number is the 13-digit number that was issued to you. It can be found in your "Welcome Letter" and on your participant statements. Be sure to enter your name and account number at the top of each page of this form.

The address you provide on this form will be used to update the address in your TSP account record. It will also be used to send IRS Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. This form will be mailed to you in January of the year following the year in which a withdrawal payment is made to you.

**If you have a foreign address,** check the box in Item 5 and enter the foreign address as follows in Items 6–9:

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 should 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. Withdrawal Election.** You must complete either Item 10 (Partial Withdrawal) or Item 11 (Full Withdrawal). Do **not** complete both Items 10 and 11.

**Partial Withdrawal** (Item 10). You may withdraw \$1,000 or more, and leave the balance in your TSP account. Use a whole dollar amount only. **Note:** You are not eligible for a partial withdrawal if your account balance is less than \$1,000, if you have previously made a partial withdrawal from this account, or if you are already receiving TSP monthly payments.

**Full Withdrawal** (Item 11). You may withdraw your entire account balance by choosing any one, a combination of any two, or all three of the full withdrawal methods (single payment, life annuity, monthly payments). In the boxes to the left of the full withdrawal options, indicate the percentage of your account that you would like to withdraw by each method. Be certain that the percentages in Items 11a, b, and c add up to 100%. Use whole percentages only. **Note:** You can use the calculators on the TSP website, [tsp.gov](http://tsp.gov), to project an annuity amount, to estimate a monthly payment amount, or to calculate the length of time you can expect to receive monthly payments of a specific dollar 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 beneficiary participant account resulted from a uniformed services account and contains tax-exempt money from combat pay in the traditional (non-Roth) balance, 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 11b), the percentage you choose must equal \$3,500 or more of your account balance. To complete your annuity purchase, you must also provide information needed for the annuity on Page 5 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; however, if you only have \$3,500 in one balance, you may still choose to purchase an annuity. If you are interested in purchasing an annuity, read the **Special Rules for Annuities** in the instructions for Page 5.

If you are withdrawing any portion of your account by means of **TSP monthly payments** (Item 11c), 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, until you request a final single payment, or until your entire account balance has been paid out.

**If you choose to have the TSP compute your payments based on life expectancy,** we will use the IRS Single Life Table, Treas. Reg. § 1.401(a)(9)-9, Q & A 1. The amount of your monthly payment will be calculated each year based on your account balance. You will have one opportunity to later change from TSP-computed payments to payments in an amount you choose.

**SECTION III. 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. 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 section. No other acknowledgement is acceptable.

Name:

(Last, First, Middle)

TSP Account Number:

**IV. FEDERAL TAX WITHHOLDING — Completing this section is optional.** Withholding will not apply to amounts transferred to an IRA or eligible employer plan or which are otherwise nontaxable (see instructions). If you complete this section, **you should not complete IRS 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.**

**Withholding on a Partial Withdrawal (Item 10) or a Single Payment Full Withdrawal (Item 11a)**

15. The TSP must withhold 20% of the taxable portion of your payment for Federal income tax. Indicate the dollar amount of withholding you want **in addition to** the mandatory 20% for Federal income tax:

\$  ,  .00

**Withholding on TSP Monthly Payments (Item 11c)**

The type and duration of monthly payments you elect (Item 11c) will determine the required Federal tax withholding and which options below are available to you. You can use the monthly payment calculator on the TSP website (tsp.gov) to calculate the estimated duration of your payments.

16. For monthly payments that will last **less than 10 years (less than 120 payments)**, indicate the dollar amount of withholding you want on each monthly payment **in addition to** the mandatory 20% for Federal income tax:

\$  ,  .00

17. For monthly payments that will last **10 years or more (120 payments or more)**, or are computed based on life expectancy, I want:

a.  No withholding

b.  Withholding based on my marital status:

Single     Married     Married, but withhold at higher single rate

Allowances (Enter the total number of allowances. If zero, enter 0.)

c.  Withhold this **additional** dollar amount: \$  ,  .00 (Note: You must also complete Item 17b.)

**V. REQUEST FOR DIRECT DEPOSIT —** Partial withdrawals, single payments, or monthly payments that are **not being transferred** 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.

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

19. Type of Account:

Checking

Savings

20.

Name of Financial Institution

21.

ACH Routing Number (Must be 9 digits)

22.

Checking or Savings Account Number

Do not write in this section.

Form TSP-90, Page 2 (11/2015)

PREVIOUS EDITIONS OBSOLETE

## INFORMATION AND INSTRUCTIONS FOR PAGE 2

**SECTION IV.** Complete this section if you want to change the standard Federal income tax withholding for your payment(s).

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

- **For partial withdrawals and 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 15.
  - **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 16.
  - **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 17a.
- OR**
- You may change your withholding marital status and allowances by completing Item 17b. 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 17c. **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 17b. 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 17b, 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:** If your beneficiary participant account resulted from an account that contained tax-exempt contributions, Roth contributions, or qualified Roth earnings, any disbursement of those amounts will not be subject to withholding. Also, withholding does not apply to 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, Withholding Certificate for Pension or Annuity Payments.**

If you include an IRS Form W-4P 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 11b), the annuity provider will send you information about making a withholding election for your annuity payments.

**SECTION V. REQUEST FOR DIRECT DEPOSIT.** Complete this section to have the TSP send your partial withdrawal, single payment, or TSP 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 in this section. If you do not know the 9-digit routing number, contact your financial institution for this information. EFTs will only be made to a financial institution in the United States.

**Note:** Do not complete this section if any of the following are true:

- You would like to receive your payment(s) by paper check to your address of record.
- You selected a life annuity. The annuity provider will send you the necessary paperwork for direct deposit of your annuity payments.
- Your payment(s) will be transferred to an IRA or eligible employer plan.

**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 the address in your TSP account record.**

**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.

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 withdrawal** to a traditional IRA, eligible employer plan, or a Roth IRA. Only certain withdrawal elections are eligible for transfer: partial withdrawals, single payment full withdrawals, and TSP monthly payments that have a duration of less than 10 years (less than 120 payments). **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.

**VI. 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 VII. **You** must submit the completed package in order for your transfer to be processed.

- 23. Partial Withdrawal.** Indicate the percentage of your **traditional (non-Roth) partial withdrawal** that you want to transfer:  .0%
- 24. Single Payment.** Indicate the percentage of your **traditional (non-Roth) single payment** that you want to transfer:  .0%
- 25. Monthly Payments.** Indicate the percentage of your **traditional (non-Roth) monthly payments** that you want to transfer:  .0%

**VII. 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.**

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

**27.**   
IRA/Plan Account Number or Other Customer ID

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

**29.** 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.

**30.**  (  )  
Typed or Printed Name of Certifying Representative (Last, First, Middle) Daytime Phone (Area Code and Number)

**31.**   
Signature of Certifying Representative

**32.**  /  /   
Date Signed (mm/dd/yyyy)

Do not write in this section.

## INFORMATION AND INSTRUCTIONS FOR PAGE 3

### GENERAL INFORMATION ABOUT TRANSFERS

You may elect to transfer all or a part of your withdrawal to a traditional IRA, 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.

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.

To transfer all or any part of the **Roth** portion of your withdrawal, complete Page 4.

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 Pages 3 **and** 4.

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

Example:

TSP account balance = \$10,000

Traditional (non-Roth) 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 (non-Roth) 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 (non-Roth) money and \$500 Roth money.

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

Be aware that depending on how you choose to receive your withdrawal, you may be subject to Federal 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 beneficiary participant who makes the election described in the above example will receive four Form 1099-Rs: one for the \$4,500 traditional (non-Roth) balance transferred, one for the \$500 Roth balance transferred, one for the \$4,500 traditional (non-Roth) amount paid to the beneficiary participant, and one for the \$500 Roth amount paid to the beneficiary participant.

### TRANSFER INFORMATION FOR TRADITIONAL (NON-ROTH) BALANCES

**SECTION VI.** 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 take a **partial withdrawal** from your account and you want to transfer all or a part of the traditional (non-Roth) portion of that withdrawal to a traditional IRA, eligible employer plan, or Roth IRA, enter a percentage between 1 and 100% in Item 23. Do not enter decimals or a percentage over 100%.

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 24. 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 25. (You cannot transfer monthly 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 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 IV.) Read the TSP tax notice "Important Tax Information About Payments From Your TSP Account" for detailed tax rules.

**SECTION VII.** 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 VII and return this form to the participant identified at the top of Page 3. 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 26. In Item 27, 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.** Check the box in Item 28 if tax-exempt balances are accepted into the account identified in Item 27. If the participant's traditional balance includes tax-exempt money, 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 IRA or plan does not accept tax-exempt money, 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 30–32. 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 withdrawal** to a Roth IRA or to a Roth account maintained by an eligible employer plan. Only certain withdrawal elections are eligible for transfer: partial withdrawals, single payment full withdrawals, and TSP monthly payments that have a duration of less than 10 years (less than 120 payments).

**VIII. 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 IX. **You** must submit the completed package in order for your transfer to be processed.

- 33. Partial Withdrawal.** Indicate the percentage of your **Roth partial withdrawal** that you want to transfer:  .0%
- 34. Single Payment.** Indicate the percentage of your **Roth single payment** that you want to transfer:  .0%
- 35. Monthly Payments.** Indicate the percentage of your **Roth monthly payments** that you want to transfer:  .0%

**IX. 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.**

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

- 37.**   
IRA/Plan Account Number or Other Customer ID

- 38.** 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.

- 39.**  (  )  
Typed or Printed Name of Certifying Representative (Last, First, Middle) Daytime Phone (Area Code and Number)

- 40.**   
Signature of Certifying Representative
- 41.**  /  /   
Date Signed (mm/dd/yyyy)

Do not write in this section.

## INFORMATION AND INSTRUCTIONS FOR PAGE 4

### GENERAL INFORMATION ABOUT TRANSFERS

You may elect to transfer all or a part of your withdrawal to a traditional IRA, 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.

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.

To transfer all or any part of the **Roth** portion of your withdrawal, complete Page 4.

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 Pages 3 **and** 4.

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

Example:

TSP account balance = \$10,000

Traditional (non-Roth) 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 (non-Roth) 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 (non-Roth) money and \$500 Roth money.

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

Be aware that depending on how you choose to receive your withdrawal, you may be subject to Federal 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 beneficiary participant who makes the election described in the above example will receive four Form 1099-Rs: one for the \$4,500 traditional (non-Roth) balance transferred, one for the \$500 Roth balance transferred, one for the \$4,500 traditional (non-Roth) amount paid to the beneficiary participant, and one for the \$500 Roth amount paid to the beneficiary participant.

### TRANSFER INFORMATION FOR ROTH BALANCES

**SECTION VIII.** 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 take a **partial withdrawal** from your account and you want to transfer all or a part of the Roth portion of that withdrawal to a Roth IRA or a Roth account maintained by an eligible employer plan, enter a percentage between 1 and 100% in Item 33. Do not enter decimals or a percentage over 100%.

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 34. 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 35. 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.)

The Roth earnings in your beneficiary participant account become qualified, and are therefore distributed tax-free, when 5 years have passed since January 1 of the calendar year in which the deceased TSP participant first made a Roth contribution to the account. If that requirement has not been met, the Roth earnings in your account are taxable. The taxable portion of any payments that are not transferred directly to a Roth IRA or to a Roth account maintained by an eligible employer plan 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.

**Note:** The taxable portion of your Roth balance will be transferred first. Nontaxable money will be transferred only if the taxable portion of your withdrawal is less than the amount you choose to transfer.

**SECTION IX.** If you choose to transfer all or any part of the **Roth** portion of your withdrawal to a Roth IRA or 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 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 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 36. In Item 37, 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 39–41. 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 *only* if you chose a life annuity in Section II (Item 11b) on Page 1.

X. ANNUITY ELECTION — Choose only **one** annuity. If the annuity is marked by an asterisk (\*), complete Section XII. Be advised that if you chose **any** annuity with a **50% survivor** benefit (3b, 3d, 4b, 4d, 5b, or 5d), when **either you or your annuitant dies**, the dollar amount of your payments will be **reduced by half**.

42. Your Gender:  Male  Female

43. Single Life — Level Payments:

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

Single Life — Increasing Payments:

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

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 XII)
- \*3d 50% to survivor, cash refund (Complete Section XII)

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 XII)
- \*4d 50% to survivor, cash refund (Complete Section XII)

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 XII)
- \*5d 50% to survivor, cash refund (Complete Section XII)

XI. INFORMATION ABOUT CURRENT SPOUSE OR OTHER JOINT ANNUITANT

44.   
Name (Last, First, Middle)

45.  /  /   
Date of Birth (mm/dd/yyyy)

46.  -  -   
Joint Annuitant's Social Security Number

47. Gender:  Male  Female

48.   
Relationship to Participant

XII. BENEFICIARY DESIGNATION FOR YOUR TSP ANNUITY — If you chose an annuity with a cash refund or 10-year certain feature (options in Section X 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.

49.   
Beneficiary's Name (Last, First, Middle)

Share:  %

Social Security Number/EIN

Relationship to Participant

50.   
Beneficiary's Name (Last, First, Middle)

Share:  %

Social Security Number/EIN

Relationship to Participant

51.   
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.

## INFORMATION AND INSTRUCTIONS FOR PAGE 5

**Complete Page 5 (Sections X–XII) only if you chose to purchase a Life Annuity (Item 11b on Page 1).**

Before completing this page, read the annuity information contained in the booklet *Your TSP Account: A Guide for Beneficiary Participants*.

**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 your 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(ies) will be split proportionally and distributed according to the other withdrawal option(s) you have chosen.

**SECTION X. Annuity Election.** Indicate your gender, and then choose the one annuity option you want by checking the appropriate box.

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 XII and name a beneficiary(ies) for your annuity.

If you choose a single life annuity, you will receive this annuity payment from the annuity provider for the rest of your life.

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 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.

Annuities with increasing payments receive a cost of living adjustment (COLA) each year not to exceed 3%.

**SECTION XI. Information About Current 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 XII. 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 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.