

## Remote and electronic notarization

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



## Form TSP-92 TSP Retirement Benefits Court Order Division Package

**July 2018** 

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

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

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

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

### COMPLETING THE TSP RETIREMENT BENEFITS COURT ORDER DIVISION PACKAGE

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

### The rules for qualified domestic relations orders (QDROs) that apply to private sector plans do not apply to the TSP.

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

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



### SUBMITTING THE COURT ORDER PACKAGE TO THE TSP

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

TSP Legal Processing Unit

P.O. Box 4390

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

12210 Fairfax Town Center

Unit 906

Fairfax, VA 22033



### **COMPLETION CHECKLIST**

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

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

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

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

### **TABLE OF CONTENTS**

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

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

### **FORMATTING OF FOREIGN ADDRESSES**

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

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

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

### TAX CONSEQUENCES OF COURT ORDER PAYMENT TO CURRENT OR FORMER SPOUSE

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

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

### **EARNINGS AND INTEREST**

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

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

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

### SUBMITTING THE FORM FOR ISSUANCE OF A COURT ORDER

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

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



# Thrift Savings Plan TSP RETIREMENT BENEFITS COURT ORDER FORM

IN RE THE MARK	RIAGE				FOR COURT USE
	OF:	Petitioner's Name			
			and		
			and		
		Respondent's Name			
COURT N	AME:				
STATE/JURISDIC	TION:		CASE NO.:		
JUDGE'S N AND CO					
			er 5 U.S.C. § 8435(c), and 5 C.F.R. p ble to the Thrift Savings Plan (TSP		
This order pertains to	the fo	llowing parties:			
. PARTICIPANT/ I <sup>ST</sup> PARTY				☐ Check he	re for foreign address
F	First Na	ame	Middle Name	Las	t Name
Ā	Address	s Line 1			
Ī	Address	s Line 2			
Ō	City		State	Zip	Code
Ē	Phone N	Number	☐ Civilian	Account Number	er:
			☐ Uniformed Services	, tooballt realing	
			☐ Beneficiary Participant	Account Number	er:
I. PAYEE/ 2 <sup>nd</sup> PARTY				☐ Check he	re for foreign address
F	First Na	ame	Middle Name	Las	st Name
Ā	Address	s Line 1			
Ā	Address	s Line 2			
Ō	City		State	Zip	Code
Ē	Phone N	Number	☐ Civilian	Account Number	er:
			☐ Uniformed Services	Account Number	51 •
			☐ Beneficiary Participant	Account Number	er:
=			TOD -		
5	ocial S	Security number (SSN) (If	tne payee is not a 15P	ionship to the Part	icipant/ I * Party

participant)



## TSP RETIREMENT BENEFITS COURT ORDER FORM

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

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



# Thrift Savings Plan TSP RETIREMENT BENEFITS COURT ORDER FORM

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



### RETIREMENT BENEFITS SPECIALIST AUTHORIZATION FORM

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

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

Mail or fax the form to:TSP Legal Processing UnitOr overnight to:TSP Legal Processing UnitP.O. Box 439012210 Fairfax Town Center

Fairfax, VA 22038-4390 Unit 906 Fax number: (703) 592-0151 Fairfax, VA 22033

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

I. PARTICIPANT INFORMATION		ne below authorization r	relates to the submission of the court order pe	rtaining to the TSP
	1			
	١.	First Name	Middle Name	Last Name
	2			
	۷.	Participant's TSP Accoun	nt Number	
II. RETIREMENT				
BENEFITS SPECIALIST	3.			
INFORMATION		First Name	Last Name	
	4.			
	→.	Address		
		City	State	Zip Code
	5.		6.	
		Phone Number	Fax Number	
	7.	Is the RBS a licensed	attorney? (mark one) □ Yes □ No	
	7a	a. If Yes, please provide t	the RBS's jurisdiction and bar or license numb	oer:
		Jurisdiction	Bar/License	Number





### RETIREMENT BENEFITS SPECIALIST AUTHORIZATION FORM

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

III. GRANT OF AUTHORIZATION PARTICIPANT/ 1<sup>ST</sup> PARTY

[seal]

Please type or print. Middle Name Last Name do hereby authorize the RBS identified in Section II to: (Initial next to the authorization you are granting.) \_\_ submit my personally identifiable information to the TSP \_\_ receive case-status information \_\_\_\_ receive copies of TSP notices related to the retirement benefits court order submission Participant's/ 1st Party's Signature Date Signed (mm/dd/yyyy) Notary: Please complete the following. No other acknowledgement is acceptable. The person who signed above is known to or was identified by me, and, before me, signed or acknowledged to have signed this form. In witness thereof, I have signed below on this\_\_\_\_\_day of \_\_\_ Year My commission expires: Date (mm/dd/yyyy) Notary Public's Signature Name (print) Phone Number Jurisdiction





## RETIREMENT BENEFITS SPECIALIST AUTHORIZATION FORM

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

IV. GRANT OF AUTHORIZATION PAYEE/ 2<sup>ND</sup> PARTY

Please type or print.		
9. I, First Name	Middle Name	Last Name
do hereby authorize the RE (Initial next to the authoriza	S identified in Section II to: ation you are granting.)	
submit my pers	onally identifiable information t	o the TSP
receive case-st	atus information	
receive copies of	of TSP notices related to the reti	rement benefits court order submissio
Payee's/ 2 <sup>nd</sup> Party's Signature		Date Signed (mm/dd/yyyy)
Notary: Please complete t	he following. No other acknowl	edgement is acceptable.
	is known to or was identified by me tness thereof, I have signed below (	e, and, before me, signed or acknowledged on this day of ,  Month
My commission expires:	mm/dd/yyyyl	
Notary Public's Signature		
Name (print)	Phone Number	
Jurisdiction		



## PERSONAL INFORMATION FORM (PIF) PARTICIPANT/ 1ST PARTY

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

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

COURT NAME:  STATE/JURISDICTION:  The information is about:  1. First Name  NOTE: The names of the parties	dent's Name  ATTENTION COURT STAFF: Th	CASE NO.:	
COURT NAME:  STATE/JURISDICTION:  The information is about:  1. First Name  NOTE: The names of the parties	ATTENTION COURT STAFF: Th	CASE NO.:	
The information is about:  1. First Name  NOTE: The names of the parties	ATTENTION COURT STAFF: Th	CASE NO.:	
The information is about:  1. First Name  NOTE: The names of the parties		is is a restricted access document.	
The information is about:  1. First Name  NOTE: The names of the parties			
1. First Name  NOTE: The names of the parties	Middle	N	
<b>NOTE:</b> The names of the parties	Middle	NI	
NOTE: The names of the parties		Name	Last Name
·	are not confidential.		
13 Formor logal namoc(c) (if anni			
2. Address Line 1			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Address Line 2			
City	State		Zip Code
3		4	
Phone Number		Social Security number	r (SSN) (Payee only)
<b>5.</b> Applicable TSP account $\Box$	l Civilian		
(If you are the participant,	}	Account Number:	
select all that apply):	Uniformed Services		
	Beneficiary Participant	Account Number:	



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

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

IN DE THE MARRIAGE			FOR COURT LIGH
IN RE THE MARRIAGE OF:	Petitioner's Name		FOR COURT USE
		and	
Ī	Respondent's Name		
COURT NAME:			
STATE/JURISDICTION:		CASE NO.:	
	ATTENTION COURT STAFF: TI	nis is a restricted access docun	nent.
The information is about:			
1. First Name			
First Name	Middle	Name	Last Name
NOTE: The names of the	parties are not confidential.		
<b>1a.</b> Former legal names(s)	(if applicable):		
•			
Address Line 1			
Address Line 2			
City	State		Zip Code
2		,	
Phone Number		Social Security r	number (SSN) (Payee only)
	•		
5. Applicable TSP accour	nt 🗆 Civilian	Account Number:	
(If you are the participant, select all that apply):	e tile participarit,		
	☐ Beneficiary Participant	Account Number:	
	presentation concerning it is a violation		arning: Any intentional false statemen fine or imprisonment for as long as 5
6		<b>7</b> .	
Signature		<b>7</b> Date Signed (mm/dd/y	уууу)
<b>3.</b> Completed and submit	ted by:		
' □ Participant's/ 1 <sup>st</sup> Party's A	•	Payee's/ 2 <sup>nd</sup> Party's Attorney	☐ Other:
	, ,,,,, =	, ., ,	



### REQUEST FOR PARTICIPANT ACCOUNT INFORMATION

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

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

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

Mail or fax this form to:

TSP Service Bureau P.O. Box 385021 Birmingham, AL 35238 Fax number: (866) 817-5023

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

I. INFORMATION ABOUT THE TSP	Please type or print:		
PARTICIPANT	1. First Name	Middle Name	Last Name
	2. This request applies to the participation	ant's:	
	☐ Civilian Account	Account Number:	
	☐ Uniformed Services Account	, 1000 dillo 11 dillo	
	☐ Beneficiary Participant Account	Account Number:	
II. INFORMATION REQUESTED	☐ Account balance as of mm/dd/yyyy		
(Check all that apply)	☐ Account balances from mm/dd/yyyy	to	
	$\square$ Outstanding loan balances as of ${\underset{m}{=}}$	m/dd/yyyy	
	☐ Loan history frommm/dd/yyyy	to	
	☐ Annual statement(s) as of	year(s)	
	$\square$ Quarterly statements from ${mm/dd/}$	yyyyy to to	-
	☐ Withdrawal history from mm/dd/yyy	to	
	□ Other		





OUT YOU		What is your relationship to the p	articipant?		Current Spouse Former Spouse Divorce or Separation Date RBS (must submit a TSP-92B, Retirement Benefits
	4.	First Name	Middle Nam		Specialist Authorization Form)
	5.	Address Line 1	Middle Nam	ne 	Last Name
		Address Line 2			
	6.	City Phone Number	State	е	Zip Code
		Phone Number			