PPC

RETIRED PAY

SEMINAR HANDOUT



FOR ADDITIONAL INFORMATION PLEASE CONTACT

COMMANDING OFFICER (RAS) U S COAST GUARD PAY & PERSONNEL CENTER 444 SE QUINCY STREET TOPEKA, KS 66683-3591

PHONE: (866) 772-8724 FAX: (785) 339-3770

TABLE OF CONTENTS

Page	<u>Topic</u>
1	Retiree and Annuitant Services Branch Structure
2	Points of Contact (Phone Numbers and Websites)
3	Retirement Resources and General Information
4	Laws Governing Retired Pay
5	Establishing your Retired Account (Form DD-2656)
6-11	Form DD-2656
12-14	Instructions (Note: Form may be found on https://www.dcms.uscg.mil/ppc/ras/RetirementProcessing/
15 1 6-17 18	Retired Pay Computation (3 Formulas) Computation – Non-Disability Retired Pay Disability Retired Pay
19-21	Exhibit (Years/Months/Percent)
22	Veterans Administration Disability Compensation
2 3	Combat-Related Special Compensation for Disabled Retirees
24	Concurrent Disability Payments of Retired Pay and VA Disability Compensation
2 5	Allotment Information
26	Active Duty Leave & Earnings Statement (Example)
27	Retired Allotment Form (CG-7221)
28	Retired Allotment Form (Allotments Authorized in Retirement)
2 9	Garnishment

	TABLE OF CONTENTS (Continued)
30	Former Spouse Protection Act
3 1	Taxes - Federal Income Tax Withholding (FITW) and State Income Tax Withholding (SITW)
32	States with Agreement to Withhold SITW
33 34	Retiree Annuitant Statement of Monthly Income (RAS) RAS (Example)
3 5	Differences in Retired and Active Duty Pay
36	Retired Cost of Living Adjustments (COLAs)
37	Recall to Active Duty
38	Conditions that may affect Retired Pay Foreign Citizenship Foreign Employment
39	Conditions that may affect Retired Pay (Continued) Criminal Conviction Federal Employment
40	Physical or Mental Incapacitation Incapacitation Trustee Appointment

Court Appointed Guardian

Making Changes to Your Retired Account What Happens to Your Retired Pay When You Die?

Common Questions About Survivor Benefit Plan (SBP)

FEDVIP Dental and Vision

DEERS

41 42

43

44

45-47

Retiree and Annuitant Services (RAS)

✓ Retiree and Annuitant Services Branch Customer Service:

U. S. COAST GUARD
PAY & PERSONNEL CENTER (RAS)
444 SE QUINCY ST
TOPEKA KS 66683-3591

866-772-8724

Fax: 785-339-3770

- ✓ Pay Technicians establishing and maintaining retirement accounts
- ✓ Separations Branch Processing 20 year letters, reservists entering RET1 or RET2 status; and producing and mailing retirement certificates and pins.
- ✓DEERS Personnel Technician for information and ID Cards can be reached by calling 1 866 772-8724.
 - ✓ Deceased Account Team processing retiree deaths, annuitant starts, and maintaining annuitant accounts. Call 1-866-772-8724.

You can email RAS at: PPC-DG-CustomerCare@uscg.mil

Points Of Contact

Helpful Telephone Numbers/Email Addresses

Final separation or sale of leave PPC (SEP)

866 772-8724

Discrepancy of time or Statements of Service PPC (ADV)

PPC Travel (TVL)

Orders: Officer (PSC-opm-1)

ARL-PF-CGPSC-OPM-1-SEPARATIONS@USCG.MIL

ARL-PF-CGPSC-EPM-1-SEPARATIONS@USCG.MIL

Office of Servicemember's Group Life Insurance (SGLI)

800 419-1473 or 201 802-7676

Department of Veteran's Affairs (VA)

Enlisted (PSC-epm-1)

800 827-1000

Social Security Administration

800 772-1213

Retiree Dental/Vision Program

877 888-3337

To obtain copies of your DD-214, awards, etc. contact:

National Personnel Records Center (MPR)

314 801-0800

9700 Page Blvd, St. Louis, MO 63132-5100

Helpful Web Sites

Coast Guard Magazine www.uscg.mil

Navy (Info, plus the Navy publication Shift Colors) www.npc.navy.mil/channels

Air Force (Info, plus the Air Force publication Afterburner) www.retirees.af.mil/

Social Security <u>www.ssa.gov</u>

Department of Veterans Affairs www.va.gov

DEERS & RAPIDS www.tricare.mil/deers

The Retired Enlisted Association www.trea.org

The Military Officers Association of America www.moaa.org

Reserve Officers Association www.roa.org

The American Legion www.legion.org

Disabled American Veterans www.dav.org

American Red Cross www.redcross.org

Retired Military Almanac www.militaryalmanac.com

National Personnel Records Center https://www.archives.gov/veterans/military- service-records

TRICARE Internet Home Page www.tricare.mil

note: some email addresses may have changed since this was printed.

Resources and General Information

- ➤ Request for retirement. Personnel Manual COMDTINST M1000.6 (series), 12.C.9 and 11.
- ➤ Physical (6 months prior to retirement). COMDTINST M1000.6 (series), 12.C.3.a
- ➤ Checklist for retirement found in 3PM PPCINST M1000.2 (series), 3.B.22.
- Time In Grade Requirements. Titles 10 and 14 of the U.S. Code establish legal minimum periods that a member must hold a pay grade in order to retire with that grade. Personnel Manual COMDTINST M1000.6 (series), 5&6 establish time in grade policies for voluntary retirements.
- Retirement Certificate and Pin must be requested by the member's unit at least 60 days prior to the date planned for the member's retirement ceremony. If not received call SEP (866) 772-8724. To order. https://www.dcms.uscg.mil/ppc/sep/CertificateRequest/
- > SPO enters SOI at least 60 days prior to the date member goes on terminal leave or date of retirement. Personnel and Pay Procedures Manual (3PM) PPCINST M 1000.2 (series), 3.B.15.
- DD214. Completed by SPO. Member should see a draft copy 30 days prior to retirement and final copy issued by unit on day of retirement. 3PM PPCINST M1000.2 (series), 3.B.15.
- ➤ Final active duty pay, final leave settlement, and final W-2 (issued at year-end) for taxable active duty pay. Issued by PPC (SEP) (866) 772-8724.
- ➤ Retirement Form DD-2656. Submit at least 6 months prior to your date of retirement and verify receipt.
- > DEERS change address on line. www.tricare.mil/deers
- ➤ PPC Web Page https://www.dcms.uscg.mil/PPC/
- > Retired pay computation on line https://www.dcms.uscg.mil/ppc/ras/retirementEst/

Laws Governing Retired Pay

ONLY APPLICABLE TO THOSE WITH A DIEMS DATE PRIOR TO 9/8/1980.

- ⇒ Coast Guard enlisted members and regular officers are retired under authority of Title 14, U.S. Code, and their retired pay is computed under Section 423 of Title 14 and Section 1406(f) of Title 10. Under these provisions, the basic pay rates in effect "at the time of retirement" is used for computing retired pay. Therefore as an example all enlisted members and all regular officers who enter into retirement on the first day of January will have their retirement pay based on the pay scales in effect on 1 January.
- ⇒ Coast Guard warrant officers are retired under authority of Title 10, U.S. Code, and their retired pay is computed under Section 1406(b) of Title 10. Under these provisions, the basic pay rates in effect "on day before retirement" are used for computing retired pay. Therefore as an example all warrant officers who enter into retirement on the first day of January will have their retirement pay based on the pay scales in effect on 31 December of the prior year.

Additional information concerning retirement computation for warrant officers:

- The law and Comptroller General decisions are very explicit that a warrant officer retired under Title 10, Sections 1263, 1293 and 1305 must have his/her retired pay based on the basic pay rates in effect on the day before retirement.
- Article 12.C.6, CG Personnel Manual, provides that Coast Guard warrant officers are retired under Title 10, Sections 1263, 1293, and 1305.
- Prior to May 1954, the Coast Guard retired their warrant officers under Title 14, Sections 303-305, in lieu of Title 10. Sections 303-305 were repealed on 29 May 1954.
- In June 1969, a Comptroller General decision was rendered which allowed the Coast Guard to retire a warrant officer under Title 14, Section 292, in lieu of title 10, Section 1293, and as a result, have his/her retired pay based on the basic pay rates in effect on the date of retirement instead of the day before retirement.
- It does not appear that the 1969 Comptroller General ruling would have applicability today as Article 12.C.5.a, CG Personnel Manual explicitly precludes warrant officers from being retired under Title 14, Section 292 and 291.

DD-2656 Establishing Your Retired Account

Necessary forms are included in this document and can also be accessed online (link to PPC forms web page is below). Please complete the forms and worksheets legibly. We strongly recommend you fill them out online using the Adobe Acrobat program on the Coast Guard, PHS, or NOAA Standard Workstation. Completion of the Data for Payment of Retired Personnel Form (DD 2656) is **mandatory** to establish your account so you can be **paid on time**.

The completed form must be scanned and attached to a PPC Help Ticket to PPC (RAS) at least 90 days prior to your date of retirement.

PPC (RAS) accepts:

Completed on-line forms with digital (with CAC) signatures (if notary not required).

Completed on-line forms with notary signature, date and stamp that are faxed.

Completed on-line forms with notary signature, date and stamp that are scanned and emailed to PPC-DGCustomerCare@uscg.mil.

Completed on-line forms with notary signature, date and stamp that are scanned and entered into a help ticket via the Customer Care website at Procedure for Submitting PPC Customer Care Trouble Tickets.

Forms can be found at: www.dcms.uscg.mil/ppc/pd/forms. Listed

below are some problems frequently noted on the Form DD-2656:

- Form not signed where required.
- Form not witnessed where required.
- Not signed and witnessed on same date.
- Incomplete or inaccurate state tax request. If no state tax designator is entered, the state defaults to the state listed in your home mailing address.
- Witnessed by relative.
- Current mailing address, e-mail address and/or phone for contact not provided.

★ It is very important that we be able to contact you in case we need additional information in order to establish your retired account.

DATA FOR PAYMENT OF RETIRED PERSONNEL

OMB No. 0704-0569 OMB approval expires: 20230731

The public reporting burden for this collection of information, 0704-0569, is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PRIVACY ACT STATEMENT

AUTHORITY: 10 United States Code (U.S.C.) Chapter 71, Computation of Retired Pay; 10 U.S.C. 73, Annuities Based On Retired Or Retainer Pay; DoD Instruction 1332.42, Survivor Benefit Plan; and DoD Financial Management Regulation, 7000.14-R, Volume 7B.

PRINCIPAL PURPOSE(S): To collect information needed to establish a retired/retainer pay account, including designation of beneficiaries for unpaid retired pay, state tax withholding election, information on dependents, and to establish a Survivor Benefit Plan election.

ROUTINE USE(S): To the Department of Veterans Affairs (DVA) regarding establishments, changes and discontinuing of DVA compensation to retirees and annuitants. To former spouses for purposes of providing information, consistent with the requirements of 10 U.S.C. 1450(f)(3), regarding Survivor Benefit Plan coverage. To spouses for purposes of providing information, consistent with the requirements of 10 U.S.C. 1448(a), regarding Survivor Benefit Plan coverage. Additional routine uses are available in the applicable system of records notice T7347b, Defense Military Retiree and Annuity Pay System Records, available at: http://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570196/t7347b/

DISCLOSURE: Voluntary; however, failure to provide requested information will result in delays in initiating retired/retainer pay.										
WARNING Read the instructions at the end of this form in their entirety prior to completing.										
PART I - RETIRED PAY INFORMATION										
SECTION I - PAY IDENTIFICATION										
1. NAME (Last, First, Mid	dle Initial)				2. SSN		TE OF BIRTH YYYMMDD)	4. RETIREMENT DATE (YYYY)	NT / TRANSFER (MMDD)	
5. PAY GRADE		6. BRANCH C	OF SERVIC	CE a. ARMY	b. MARINE	E CORPS	c. NAVY	d. COAST	GUARD	
				e. AIR FO			g. NOAA	h. USPHS		
7. MEMBER OR FORM	ER MEM	IBER OF THE	8. PART	ICIPANT IN THE F	OLLOWING RETIRE	MENT PLAN	N (See instruction	ons, check only c	one)	
a. REGULAR CO	OMPON	ENT	Па	ı. FINAL PAY (only	those members who first j	ioined the ser	vice prior to Septe	ember 8. 1980)		
b. RESERVE CO	OMPONE	ENT		, ,	own as the "High 36")	-		,		
(all members of National Guard	f the Res	serves and		•	y members who elected th	•	tus Bonus upon co	ompletion of 15 yea	ars of service)	
Reserve and Fu	ıll-Time S	Support)		, ,	REMENT SYSTEM (BI		•	•	·	
(1) REG	ULAR R	RETIREMENT		e. DISABILITY	-	,				
' '	I-REGUL IREMEN									
9. ADDRESS (Ensure D	FAS - C	leveland Center,	or the Coε	ast Guard PPC for	non-DOD members, is	advised wh	enever your cor	rrespondence ac	ldress changes)	
a. STREET (Include apa	artment r	number)		b. CITY		c. STATE	d. ZIP CODE	e. COUN	TRY	
f. APO/FPO	g. TEL	EPHONE (Incl. a	rea code)	h. EMAIL ADDR	ESS	i. P	REFERRED CO	ONTACT METHO	OD (check one)	
							TELEPHON	1E EM	IAIL	
SECTION II - DIRECT D	DEPOSIT	: / ELECTRONIC	C FUND TF	RANSFER (DD/EF	T) INFORMATION (Se	e Instruction	ns)			
ACTIVE DUTY (ONLY (ch	neck here if you	want to cor	ntinue using financi	ial information currently	y on file, oth	erwise fill out Ite	ems 10 through	13)	
10. ACCOUNT TYPE (Check one	e)	11. R	ROUTING NUMBER	R (See Instructions)	12.	ACCOUNT NU	IMBER (See Instr	uctions)	
CHECKING	<u> </u>	'INGS			_					
13. FINANCIAL INSTIT	UTION									
a. NAME		b. STRI	EET (Includ	ide apartment numb	per)	c. CITY		d. STATE	e. ZIP CODE	
SECTION III - SEPARA	TION PA	YMENT INFOR	MATION							
14. a. PAYMENT TYPE	RECEIV	/ED (Check one)						b. GROSS AN	OUNT	
□ NONE □	DISABIL	LITY SEVERANC	CE PAY (D	SP) INVOLUI	NTARY / VOLUNTARY	Y SEPARAT	ION PAY (SP)			
UVOLUNTARY SE	EPARAT	ION INCENTIVE	Ξ (VSI)	SPECIAI	L SEPARATION BONU	JS (SSB)	OTHER			
NOTE: If any paymer	nt type w	as selected, atta	ach a COP	Y OF THE ORDER	S which authorized the	e payment a	and a COPY OF	THE DD FORM	214.	
List Of Attachments										

MEMBER NAME (Last, First, Mid	dle Initial)					SSN	
SECTION IV - DEPARTMENT O	OF VETERANS AFFAIRS (V	A) DISABILITY CO	MPENSATION INFORM	ATION			
15. VA DISABILITY COMPENS	ATION						
a. IN THE EVENT I AM AWARI COMPENSATION BY THE V DFAS (OR THE COAST GUA DOD MEMBERS) OF THE AI AWARD, AS IT MAY IMPAC BENEFIT. Agree	A, I WILL NOTIFY ARD PPC FOR NON- MOUNT OF ANY		LIED FOR OR ARE VA COMPENSATION TY? No	VA COMPENSATION PAYMENT (YYYYMMDD) Y?			
SECTION V - DESIGNATION O	F BENEFICIARIES FOR UN	IPAID RETIRED PA	AY (See Instructions)				
Check this box if you wa	nt to designate your spouse	as 100% beneficia	ry of any unpaid retired p	ay upon death O l	R complete	Item 16.	
16. BENEFICIARY OR BENEFI	CIARIES INFORMATION						
Complete this section if you was lif you do not complete this se							J.S.C. §2771.
a. NAME (Last, First, Middle Initi	al) b. SSN	c. ADDRESS (Str	eet, City, State, ZIP Code)		d. RELATI	ONSHIP	e. SHARE
1)							%
2)							%
3)							%
4)							%
5)							%
6)							%
SECTION VI - FEDERAL INCO Please refer to the following IRS					RS Form W	-4 for tax pu	rposes.)
17. MARITAL STATUS (Check or SINGLE OR MARRIED	•		18. MULTIPLE JOBS OR SPOUSE WORKS (Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs)				
MARRIED FILING JOIN	TLY (Or qualifying widow/er)		Do only one of the follo	U			
MARRIED, BUT WITHH	OLDING AT THE HIGHER S	SINGLE RATE	(a) Use the estimator estimator for most accu			luals/tax-wit	nholding-
) married and pay more than h me for yourself and a qualify		or (b) If there are only to same on Form W-4 for with similar pay; otherw withheld.	the other job. Thi	is option is a	accurate for	
19. ARE YOU A UNITED STATE	S CITIZEN? Yes	No (See instruction	ons)				
20. CLAIM DEPENDENTS If your income will be \$200,000 o Number of qualifying childr	en under age 17	0, ,,	21. OTHER INCOME (I withheld for other incomes the control of the	me you expect the r the amount of o	is year that ther income	won't here.	
	ng children under age 17 by \$2,0	00) ———	22. DEDUCTIONS If yo				
Number of other dependen (Multiply the number of other de			than the standard dedu withholding, review the	Deductions Wor	ksheet on p		
Add the amounts above and er			of the IRS Form W-4 a (Estimate your deductions	ions this year OR		evious	
23. EXTRA WITHHOLDINGS. E	nter any additional tax you w	ant withheld each r	year's total deductions	/			
SECTION VII - VOLUNTARY S	TATE TAX WITHHOLDING II	NFORMATION (Co	emplete only if monthly wi	ithholding is desir	red.)		
	25. MONTHLY AMOUNT	26. RESIDENCE	ADDRESS (If different from	m address listed in l	Item 9)		
11202112 1701	Whole dollar amount not less han \$10.00)	a. STREET (Inclu	de apartment number)	b. CITY		c. STATE	d. ZIP CODE

CUI (when	n filled in)	
MEMBER NAME (Last, First, Middle Initial)		SSN
DO NOT COM If you ARE NOT covered by the Blended Retirement Sys	PLETE PART II, stem OR DO NOT want to elect a lo	ump sum of retired pay
PART II - LUMP	SUM ELECTION	
This election must be made NO LATER THAN 90 days prior to the For example, if the date in Item 4 is June 1, 2018, the		
SECTION VIII - BRS LUMP SUM ELECTION		
Members who participate in the BRS retirement plan may upon retirement (reguretirement) elect to receive a portion of their retired pay as a lump sum. Lump s financial advisor before electing a lump sum of retired pay.		
27. LUMP SUM PERCENTAGE (Check one only, if electing to receive a LUMP SUM; if no choice is indicated you will default to receiving your full retired pay on a monthly basis)	28. LUMP SUM PAYMENTS (Check one only. Complete Item 28 only, if e	
a. I elect to receive a <u>25 PERCENT</u> lump sum that is a discounted	a. ONE INSTALLMENT	
portion of my retired pay for the period from when I am eligible to begin receiving retired pay until I reach full social security retirement age.	b. TWO EQUAL ANNUAL INSTA	ALLMENTS
b. I elect to receive a <u>50 PERCENT</u> lump sum that is a discounted portion of my retired pay for the period from when I am eligible to begin	C. THREE EQUAL ANNUAL INS	STALLMENTS
receiving retired pay until I reach full social security retirement age.	d. Four Equal annual inst	FALLMENTS
29. LUMP SUM CONSIDERATIONS (Read the following carefully before signi	ng in Item 30.)	
 If you are retiring with a disability retirement under 10 U.S.C., Chapt A lump sum election must be made NO LATER THAN 90 days prior to the date you are eligible to begin receiving retired pay (for Non-Re You may elect to receive either a 25 percent or 50 percent discounte in exchange for reduced monthly retired pay until you reach your full As a result of electing a lump sum, your monthly retired pay will be r whether you elect to receive 25 or 50 percent. At full Social Security The discount rate used to calculate your lump sum is the rate publis of your retirement or year you first become eligible for retired pay, be A lump sum payment is earned income for purposes of Federal Inco The amount of the lump sum is based on your calculated military ret become eligible to begin receiving retired pay, and the remaining am distributed, you do not have the ability to seek review of or challenge used to compute the amount of the lump sum. Survivor Benefit Plan premiums (Part III) will still be deducted from y premiums and your beneficiary's coverage will be based on the unre lump sum, unless you indicate otherwise in Item 37 of Part III. If you expect to receive a disability rating from the Department of Vedisability compensation could be affected by the lump sum. It is important to understand that a lifetime of full monthly payments retired pay. It is highly recommended that you consult with a financial COMPARE YOUR ESTIMATED RETIREMENT BENEFITS WITH OR WITHOUN http://militarypay.defense.gov/Calculators/ 	to the date of your retirement (for Regular Retirement), as indicated in Pagular Retirement Age. Social Security Retirement Age. Social Security Retirement Age. Social Security Retirement of Defense in Retirement Age, your monthly retire hed by the Department of Defense in ased on the date in Part I, Section I, I was a receipt of it may have significed pay, the discount rate in effect for a social pay, the discount rate in effect for a social pay of the amount of the lump sum with restricted amount of the lump sum with restricted amount of your monthly retired pay statements Affairs, depending upon your will most likely be worth more than the counselor before electing a lump statement.	egular Retirement) or 90 days prior art I, Section I, Item 4. etired pay as a discounted lump sum its normal amount depending on ed pay will be restored in full. In June of the year prior to the year litem 4. ificant tax implications. For the year in which you retire or al Security Retirement Age. Once egard to any assumptions or factors thould you elect the lump sum. The ed pay, as if you had not elected a rating, your ability to receive
30. LUMP SUM ACKNOWLEDGEMENT		
By signing below, I am indicating I am aware that I am electing to receil lump sum will likely be less than I would have received if I had not elect in making this decision, to include training available on JKO and the avainstallations.militaryonesource.mil/ to discuss my personal situation. A and without a lump sum. I am aware that once accepted, I may not see particularly in regard to deviations from future cost of living adjustment.	eted to receive it. I am aware there a vailability of financial counselors that dditionally, I have reviewed a compa ek review of, or otherwise challenge t	are resources available to assist me can be located via https:// urison of my retirement benefits with the amount of the lump sum,
a. MEMBER SIGNATURE (Sign only if electing a lump sum in Item 28)		b. DATE SIGNED (YYYYMMDD)

MEMBER NAME (Last, First, Middle Initial)					SSN
P/	ART III - SUF	RVIVOR BENEFIT	PLAN		I
SECTION IX - DEPENDENCY INFORMATION (This sec	tion must be comple	ted regardless of SBP Election	n.)		
31. SPOUSE (If no spouse enter N/A)					
a. NAME (Last, First, Middle Initial)				b. SSN	c. DATE OF BIRTH (YYYYMMDD)
32. DATE OF MARRIAGE (YYYYMMDD)		33. PLACE OF N	MARRIAG	GE (See Instructions)	
34. DEPENDENT CHILDREN (If no dependent children	•	·			
Indicate which child or children resulted from marriag Add rows or continue on separate paper if necessary		use by entering (FS) after	relations	ship in column d.	
a. NAME (Last, First, Middle Initial)	b. SSN	c. DATE OF BIRTH		LATIONSHIP , daughter, stepson, etc.) gnate which children resulted iage to a former spouse, if an ating (FS) after the relationsh	y, by disabling condition
1)					Yes No
2)					Yes No
3)					Yes No
4)					Yes No
SECTION X - SURVIVOR BENEFIT PLAN (SBP) ELECTIFY	blished for your s to the decision you p to retire, in most ca ualifying years of ility for a non-regu- revious election in em 36. (Check on the company of the company election until elimate and the time you were under OPTION C — ction to participate to Explanation	pouse and/or eligible deper previously made on the DD For ases you do not have the right service make the election ular retirement not when a littem 35.a. through 35.c. the ally one in Item 35.a. through igible to receive retired p (Do not make an election in Ite e notified of eligibility for non-rado not make an election in Ite e in RC-SBP.	endent cl orm 2656- t to make at to partic pplying f before pr gh 35.c.) pay (Prod tem 36, 37 make an e ge.)	hildren 5 or the old form, the DD Form a new election on this form) ipate in the Reserve Comporereired pay, unless that coceeding to Item 36. If you For Active Guard/Reserve seed to Item 36 to make election and the seed to the seed to the seed to lection in Item 36, 37, or 39, you	connection (RC) SBP on DD member previously but previously elected and Full-Time Support (and coverage.)
I I O TELECTINOT TO PARTICIPATE IN SBP	I have Dependent HILD(REN) ILY (Spouse cond AMED IN ITEM 3 POUSE INDICATE (SBP) Election State OUSE INDICATE (vor Benefit Plan (SE ave eligible dependent)	t Child(ren) Yes Currence required in Part \ 9 WHO HAS AN INSURA ED IN ITEM 40 (See Instruction of Former Spouse Covered in ITEM 40 AND DEPE	ABLE INT ctions) erage." At ENDENT rmer Spou	TEREST IN ME (See Instru tach/Include court orders or a CHILD(REN) OF THAT IN	ctions) greements impacting on SBP
("	mannou c		/		

MEMBER NAME (Last, First, Middle Initial)				SSN							
27 222 EVEL 25 20VEDAGE (2)											
37. SBP LEVEL OF COVERAGE (Check one only. Complete UNLESS Option B or Option C was selected in 35 OR Check Box 36.d. or 36.g. was selected. See Instructions. Your base amount will increase by the same rate of increase as your retired pay)											
a. I ELECT COVERAGE BASED ON FULL GROSS PAY (If I elected the Career Status Bonus under REDUX or a lump sum of retired pay under the Blended Retirement System (Part II), full gross pay is the amount of retired pay											
I would have received had I NOT elected the Career Status Bonus or Lump Sum.)											
(Spouse concurrence is required in Part V)											
C. CSB/REDUX MEMBERS ONLY	I elect coverage based on my		-	e Concurrenc	ce in nart V						
I understand that this represents a Reduced Base Amount and requires Spouse Concurrence in part V. (See Instructions)											
d. I ELECT COVERAGE BASED ON TH (Spouse concurrence is required in Part V)	E THRESHOLD AMOUNT IN	I EFFECT ON THE DATE	OF RETIREMENT.								
38. SPECIAL NEEDS TRUST (Check only if you in You must elect eith	intend to designate a special needs ner 36.b., 36.c., or 36.f. to be eligib										
I INTEND TO DESIGNATE AN SNT AS	BENEFICIARY FOR THE CH	IILD OR CHILDREN DESI	IGNATED AS DISABLE	ED IN ITEM 34	4.						
(It is your responsibility to separately submit a v and the name and tax identification number for	vritten statement of the decision to the SNT)	o have the annuity paid to the	SNT, an attorney's certifica	ition of that SN	Γ,						
39. INSURABLE INTEREST BENEFICIARY (Se	ee instructions prior to completing	this section - DO NOT compl		.E SPOUSE or	FORMER SPOUSE)						
a. NAME (Last, First, Middle Initial)		b. SSN	c. DATE OF BIRTH (YYYYMMDD)	d. RELATIO	ONSHIP						
e. STREET (Include apartment number)		f. CITY	1	g. STATE	h. ZIP CODE						
i. TELEPHONE (Incl. area code)	j. EMAIL ADDRESS										
40. FORMER SPOUSE INFORMATION (Compl	lete only if you have a former spot	use)									
a. NAME (Last, First, Middle Initial)		b. SSN	c. DATE OF BIRTH (YYYYMMDD)	d. DATE OF							
e. DATE OF MARRIAGE TO FORMER SPOUSE (YYYYMMDD)	f. TELEPHONE (Incl. at	rea code)	g. EMAIL ADDRESS								
h. HAS YOUR FORMER SPOUSE REMARRIED)? Yes No										

MEMBER NAME (Last, First, Middle Initial)				
	PART IV – C	ERTIFICATION		
SECTION XI - CERTIFICATION				
41. MEMBER (DATE SIGNED must be before the	date of retirement listed in	Part I, Section I, Item 4)		
Under penalties of perjury, I certify that the nur am entitled, and that all statements on this forn not more than a \$10,000 fine, or 5 years in pris spouse, with the exception of a former spouse the date of my signature and prior to the date of	m are made with full knowle son, or both. Also, I underst or former spouse and child	dge of the penalties for making fals and that if I am married and I electon election, I will need my spouse's n	se statements (18 U.S ed less than full SBP o notarized concurrence	.C. §287 and §1001) of coverage for my signed no earlier than
a. NAME (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·). SIGNATURE		c. DATE SIGNED (YYYYMMDD)
42. WITNESS (This cannot be a spouse or depend Witness date MUST match the member's date		ficiary listed on this form or anyone	e under the age of ma	iority)
a. NAME (Last, First, Middle Initial)	k). SIGNATURE		c. DATE SIGNED (YYYYMMDD)
d. RELATIONSHIP TO THE RETIRING MEMBER	R			
e. ADDRESS	f	. CITY/BASE OR POST	g. STA	TE h. ZIP CODE
Required ONLY when the member is married and	d elects either: (a) child only			
	d elects either: (a) child only er spouse or former spouse a tem 41.c., or on or after the	SBP coverage, (b) does not elect and child elections. The date of the	e spouse's signature ir	Item 43.c. MUST NOT
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in I MUST be notarized. Electronic signatures are allowed SECTION XII - SBP SPOUSE CONCURRENCE	d elects either: (a) child only er spouse or former spouse a tem 41.c., or on or after the	SBP coverage, (b) does not elect and child elections. The date of the	e spouse's signature ir	Item 43.c. MUST NOT
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allow SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan	d elects either: (a) child only er spouse or former spouse attem 41.c., or on or after the owed.	SBP coverage, (b) does not elect and child elections. The date of the date of retirement listed in Part I, S	e spouse's signature in Section I, Item 4. The s	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allowed SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE	d elects either: (a) child only er spouse or former spouse attem 41.c., or on or after the owed.	SBP coverage, (b) does not elect and child elections. The date of the date of retirement listed in Part I, S	e spouse's signature in Section I, Item 4. The s	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allowed SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan effects of those options. I know that retired pa	d elects either: (a) child only er spouse or former spouse attem 41.c., or on or after the owed.	SBP coverage, (b) does not elect and child elections. The date of the date of retirement listed in Part I, S	e spouse's signature in Section I, Item 4. The s	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allow SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan effects of those options. I know that retired para. NAME (Last, First, Middle Initial)	d elects either: (a) child only er spouse or former spouse attem 41.c., or on or after the owed.	c. EMAIL ADDRESS	e spouse's signature in Section I, Item 4. The s	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in I's MUST be notarized. Electronic signatures are allow SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan effects of those options. I know that retired para. NAME (Last, First, Middle Initial) b. TELEPHONE (Incl. area code)	elects either: (a) child only or spouse or former spouse of tem 41.c., or on or after the owed. election made by my spouse of the stops on the day the retire of the company of the spouse of the spo	c. EMAIL ADDRESS	e spouse's signature in Section I, Item 4. The s	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allowed SECTION XII - SBP SPOUSE CONCURRENCE 1 hereby concur with the Survivor Benefit Plan effects of those options. I know that retired para. NAME (Last, First, Middle Initial) b. TELEPHONE (Incl. area code) d. SIGNATURE	d elects either: (a) child only er spouse or former spouse attern 41.c., or on or after the owed. election made by my spouse y stops on the day the retire (YYYYMMDD)	c. EMAIL ADDRESS	e spouse's signature in Section I, Item 4. The section I, Item 4. The section I is the sect	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allowed as SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan effects of those options. I know that retired para. NAME (Last, First, Middle Initial) b. TELEPHONE (Incl. area code) d. SIGNATURE	d elects either: (a) child only er spouse or former spouse attern 41.c., or on or after the owed. election made by my spouse y stops on the day the retire (YYYYMMDD)	c SBP coverage, (b) does not elect and child elections. The date of the date of retirement listed in Part I, See. I have received information that see dies. I have signed this statement.	e spouse's signature in Section I, Item 4. The section I, Item 4. The section I is the sect	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allow SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan effects of those options. I know that retired para. NAME (Last, First, Middle Initial) b. TELEPHONE (Incl. area code) d. SIGNATURE 44. NOTARY WITNESS (Please stamp using a notation of this	election made by my spouse by stops on the day the retires election made by my spouse by stops on the day the retires e. DATE SIGNED (YYYYMMDD) otary seal) , 20, before	c. EMAIL ADDRESS c. SBP coverage, (b) does not elect and child elections. The date of the date of retirement listed in Part I, Sc. I have received information that he dies. I have signed this statement.	e spouse's signature in Section I, Item 4. The section I, Item 4. The section I is the sect	n Item 43.c. MUST NOT spouse's signature
Required ONLY when the member is married and SBP coverage. This is not required for any forme be before the date of the member's signature in It MUST be notarized. Electronic signatures are allowed SECTION XII - SBP SPOUSE CONCURRENCE 43. SPOUSE I hereby concur with the Survivor Benefit Plan effects of those options. I know that retired para. NAME (Last, First, Middle Initial) b. TELEPHONE (Incl. area code) d. SIGNATURE 44. NOTARY WITNESS (Please stamp using a notation of this day of appeared (Name of Spouse in Item 43.a.)	elects either: (a) child only er spouse or former spouse or tem 41.c., or on or after the owed. election made by my spouse of stops on the day the retire of temporal of temp	c. EMAIL ADDRESS To SBP coverage, (b) does not elect and child elections. The date of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of retirement listed in Part I, State of the date of t	e spouse's signature in Section I, Item 4. The section I, Item 4. The section I is the sect	n Item 43.c. MUST NOT spouse's signature

INSTRUCTIONS

GENERAL

- 1. Read these instructions and Privacy Act Statement carefully before completing the data form.
- 2. The Defense Finance and Accounting Service (DFAS) Cleveland Center will establish your retired/retainer pay account based on the data provided on this form and your retirement/transfer orders. Your personnel office, disbursing/finance office, and SBP Counselor will assist you in the proper completion and submission of this form. You should maintain these instructions along with a copy of the form as a permanent record. Please complete the form electronically or by typing or printing in ink. The Coast Guard Pay and Personnel Center (CG-PPC) will establish the retired pay account for retiring Coast Guard, USPHS, and NOAA members
- 3. Ensure that you promptly advise DFAS Cleveland Center of changes to your marital/family status and any changes to your correspondence address or direct deposit information. Gray Area retirees (retired reservists who are not yet eligible for retired pay) should contact their Reserve Component directly to report changes. Retired members of the Coast Guard, USPHS or NOAA should contact the CG-PPC.
- 4. If completed electronically, this form automatically disables certain fields based on information you entered. If one of the items listed below does not appear on the form, it is due to information you previously entered that indicates this item is not applicable to you.

PART I - RETIRED PAY INFORMATION

SECTION I - PAY IDENTIFICATION.

ITEMS 1 through 3. Self-explanatory.

ITEM 4. If you are retiring from active service, enter the date you will transfer to the Fleet Reserve or date of retirement. If you are a Reserve/National Guard member qualified to retire under 10 U.S.C., Chapter 1223, enter either the date of your 60th birthday or, a later date on which you desire to begin receiving retired pay. If you are eligible for reduced age retirement earlier than your 60th birthday, you will need to enter that date.

ITEMS 5 and 6. Self-explanatory.

ITEM 7. Indicate whether you are (or were) a member of the Regular Component or a member of the Reserve Component. The Reserve Component includes all reserve and National Guard members, including full-time reservists on active duty, such as Active Guard/Reserves (AGR) and Full-Time Support (FTS). If in the Reserve Component, indicate the type of retirement, regular or non-regular retirement.

ITEM 8. Indicate which retirement plan covers you:

- If your Date of Initial Entry into Military Service (DIEMS) is prior to September 8, 1980, you should enter "Final Pay" UNLESS you elected to opt into the Blended Retirement System.
- If your DIEMS is on or after September 8, 1980, but before January 1, 2018, you should enter "High-3" <u>UNLESS</u> you elected to participate in the CSB/REDUX retirement plan or the Blended Retirement System (BRS).
- If your DIEMS is on or after August 1, 1986, <u>AND</u> you elected to receive the Career Status Bonus (CSB) upon completion of 15 years of service, you should enter "CSB/REDUX."
- If you elected to opt into the Blended Retirement System, <u>OR</u> your DIEMS is on or after January 1, 2018, you should enter "Blended Retirement System."
- If you are retiring with a disability retirement, regardless of your DIEMS enter "Disability."

ITEM 9. Self-explanatory.

SECTION II - DIRECT DEPOSIT/ELECTRONIC FUND TRANSFER INFORMATION.

ITEMS 10 through 13. Enter the routing and account information for your bank or financial institution. Indicate whether your account is (S) for Savings or (C) for Checking account in Item 10. Also, provide the nine digit Routing Transit Number (RTN) of your financial institution in Item 11, your account number in Item 12, and your financial institution name and address in Item 13. This section must be completed. Your net retired/retainer pay must be sent to your financial institution by direct deposit/electronic fund transfer (DD/EFT).

REGULAR COMPONENT RETIREES ONLY: If you are directing your retired pay to the same account number and financial institution to which you directed your active duty pay, check the box immediately below "Section II". If you have a copy of the Direct Deposit Authorization form used to establish your DD/EFT for your active duty pay, attach a copy to this form.

SECTION III - SEPARATION PAYMENT INFORMATION.

ITEM 14. Indicate in 14.a. if you previously received separation or severance pay. If you mark one of the boxes in 14.a., complete 14.b. by entering the gross amount for Severance, (In)voluntary Separation, Separation Incentive and Special Separation Bonus payments and the annual installment gross amount for Voluntary Separation Incentive payments. Attach a copy of the orders that authorized the payment and a copy of previous DD Form 214.

SECTION IV - VA DISABILITY COMPENSATION.

ITEM 15. All retirees must read and acknowledge Item 15.a. Note that if you later apply for and are awarded VA disability compensation, you must notify DFAS - Cleveland Center (Retired members of the Coast Guard, PHS or NOAA should contact the CG-PPC) of the amount of the award. Indicate in Item 15.b. if you are currently, or have previously, received or applied for VA disability compensation. If you mark YES in 15.b., complete 15.c., and 15.d.

SECTION V - DESIGNATION OF BENEFICIARIES FOR UNPAID RETIRED PAY.

ITEM 16. Upon your death, 10 U.S.C. §2771 provides that any pay due and unpaid will be paid to the surviving person highest on the following list: (1) beneficiary(ies) designated in writing; (2) your spouse; (3) your children and their descendants, by representation; (4) your parents in equal parts, or if either is dead, the survivor; (5) the legal representative of your estate, and (6) person(s) entitled under the law of your domicile. You may choose to designate your spouse as the primary beneficiary for 100% of your unpaid retired pay by checking the box directly below "Section V" and leaving items 16.a. through 16.e. blank. If you choose to designate a different beneficiary or beneficiaries, you must complete Items 16.a. through 16.e. If you designate multiple beneficiaries, you can either provide a SHARE percentage to be paid to each person or leave the SHARE percentage blank. If you leave the SHARE percentage blank, any retired pay you are owed when you die will be divided equally among your designated beneficiaries. If you list more than one person with a 100% SHARE, the beneficiaries will be paid in the order as you list them on the form. If, for example, you designate two beneficiaries, then the SHARE percentage must either be 100% for each beneficiary, or the SHARE percentages when added together must equal 100%. If you designate more than one person, and the total percentage designated is greater than 100%, the person listed first is considered the primary beneficiary. If you check the box designating your spouse as 100% beneficiary, that election will take precedence over any designation made in Items 16.a. through 16.e.

If you do not designate a beneficiary or beneficiaries in Item 16, or all designated beneficiaries have died before the date of your death, any unpaid retired pay will be paid to the living person or persons in the highest category of beneficiary listed above, as required by law.

SECTION VI - FEDERAL INCOME TAX WITHHOLDING INFORMATION.

Complete this section after determining your dependents with the aid of your disbursing/finance office, or from the instructions available on IRS Form W-4, or other available IRS publications. Leave Items 17 through 19 blank if completing Item 20.

ITEM 17. Mark the status you desire to claim.

ITEM 18. This refers to the whole dollar amounts of total withholding(s) claimed.

ITEM 19. If you are not a U.S. citizen, provide, on an additional sheet, a list of all periods of ACTIVE DUTY served in the continental U.S., Alaska, and Hawaii. Indicate periods of service by year and month only. List only service at shore activities; do not report service aboard a ship.

For example:

FROM (Year/Month) DUTY STATION TO (Year/Month) 2021/06 NAVSTA, Norfolk, VA 2021/07

NOTE: This information may affect the portion of retired/retainer pay which is taxable in accordance with the Internal Revenue Code if you maintain a permanent residence outside the U.S., Alaska, or Hawaii.

- ITEM 20. Enter the dollar amount as they relate to claim dependents.
- **ITEM 21.** Enter other income that is not from jobs. This may include interest, dividends, and retirement income.
- **ITEM 22.** Enter deductions if you expect to claim deductions other than the standard deduction and want to reduce your withholdings.
- **ITEM 23.** Enter extra withholdings. Enter any additional tax you want withheld each month. If exempt from Federal taxes, enter 'EXEMPT'.

SECTION VII - VOLUNTARY STATE TAX WITHHOLDING.

Complete this section only if you want monthly state tax withholding. If you choose not to have a monthly deduction, you remain liable for state taxes, if applicable.

- ITEM 24. Enter the name of the state for which you desire state tax withheld.
- **ITEM 25**. Enter the dollar amount you want deducted from your monthly retired/retainer pay. This amount must not be less than \$10.00 and in whole dollars (Example: \$50.00, not \$50.25).
- ITEM 26. Enter only if different from the address in Item 9.

PART II - LUMP SUM ELECTION.

OPTIONAL. Only complete Part II if you are:

- Covered under the Blended Retirement System; AND,
- Want to elect a partial lump sum of retired pay

If you ARE NOT covered under the Blended Retirement System or DO NOT want to elect a partial lump sum, proceed to PART III of the form.

SECTION VIII - BLENDED RETIREMENT SYSTEM LUMP SUM ELECTION.

ITEM 27. Indicate in Item 27.a. or 27.b. whether you intend to receive a 25 percent or 50 percent lump sum of retired pay.

ITEM 28. If indicating in Item 27.a. or 27.b. that you desire to receive a lump sum of retired pay, indicate in 28.a. through 28.d. whether you would like that in one payment or a series of equal, annual installments over 2, 3, or 4 years.

ITEM 29. Before signing in Item 30, you must read the considerations listed in Item 29. You are highly encouraged to review your options with a financial professional and compare your estimated retirement benefits with or without a lump sum using the online calculator located at

https://militarypay.defense.gov/calculators/BRS.

ITEM 30. If you mark Items 27 and Items 28, you must sign Item 30.a., and indicate the date you are signing in 30.b. The date in 30.b. must be at least 90 days prior to the date of your retirement or the date you transfer to the Fleet Reserve (shown in Item 4, this is also the same date indicated on your DD 108 request for retirement). If you are a Reserve/National Guard member qualified to receive retired pay with a non-regular retirement, the date in 27.b. must be 90 days prior to the date upon which you will be eligible to begin receiving retired pay (shown in Item 4, this is also the same date indicated on your DD 108 request for retirement).

If you are NOT electing a lump sum of retired pay, DO NOT SIGN Item 30.

PART III - SURVIVOR BENEFIT PLAN.

It is very important that you are counseled and are fully aware of your options under the Survivor Benefit Plan (SBP). SBP pays your eligible beneficiary or beneficiaries an inflation-protected annuity, based on your retired pay, in the event of your death. The cost of SBP is subsidized by the government, but you will be required to pay a portion of the cost of SBP through deductions from your retired pay. All retiring active duty members and all members of the Reserves / National Guard who complete 20 qualifying years of service are automatically fully covered under the SBP or the Reserve Component SBP (RC-SBP) unless electing to reduce or decline this coverage. Special requirements for reducing or declining coverage are provided in Part III.

SECTION IX - DEPENDENCY INFORMATION.

ITEM 31. Provide your spouse's name, SSN, and date of birth. If no current spouse, enter "N/A" and proceed to Item 34.

ITEMS 32 and 33. Enter the date and location of your marriage to your current spouse. In Item 32, if marriage occurred outside the United States, include city, province, and name of country.

ITEM 34. If you do not have dependent children, enter "N/A" in this Item. If you do have dependent children, provide the requested information. Designate which children resulted from marriage to a former spouse, if any, by indicating (FS) after the relationship in Item 34.d.

ITEM 34.e. Enter YES or NO as appropriate. A disabled child is an unmarried child who meets one of the following conditions: a child who has become incapable of self-support before the age of 18 or a child who has become incapable of self-support after the age of 18 but before age 22 while a full-time student. Substantiation is required. Submit a medical evaluation prepared by a medical professional showing the disabling condition, the age of onset of the condition, the past medical history and how the condition precludes the potential beneficiary from being-self supporting now and in the future. If answering yes, attach documentation.

SECTION X - SURVIVOR BENEFIT PLAN (SBP) ELECTION.

In this section, you will be able to indicate your desired SBP election and designate the beneficiary for SBP in the event of your death. If you make no election, you will automatically receive maximum coverage for all eligible family members (spouse and/or children). If you elect to reduce or decline your coverage, your spouse will have to concur with that decision, with the exception of a former spouse or former spouse and child election. You may discontinue your SBP participation within one year after the second anniversary of the commencement of retired/retainer pay. Termination of SBP is effective the first of the month after DFAS - Cleveland Center (or the Coast Guard PPC for non-DOD members) receives the SBP disenrollment request. There will be no refund of SBP costs paid for the period before the SBP disenrollment. You are advised to consult with a SBP Counselor or Retirement Services Officer prior to completing this section.

ITEM 35. RESERVE COMPONENT ONLY. Information to complete this section can be found on the DD Form 2656-5 or the previous DD Form 1883, you submitted when you were first notified that you had completed 20 years of creditable service, known as your "Notification of Eligibility (NOE)." If you received your NOE prior to January 1, 2001 and did not make an election within 90 days of your NOE, RC-SBP was declined by default. Reserve or National Guard members who previously completed 20 qualifying years of service are automatically covered under the RC-SBP unless electing, within 90 days of receiving their Notification of Eligibility, to decline this coverage. Indicate in Item 35.a., 35.b., or 35.c. your previous election. If you elected immediate coverage (Item 35.c., or "Option C"), elected coverage to begin at age 60 (Item 35.b., or "Option B") or made no election previously, this remains your coverage and cannot be changed. However, Reserve/National Guard members who declined to make an election until reaching the age of eligibility to receive retired pay (Item 35.a., or "Option A"), or who were unmarried and had no eligible children at initial RC-SBP election and made no subsequent RC-SBP election must complete Items 36 and 37 (and Items 38 through 40 if applicable). If you elected either Immediate (Option C) or Deferred (Option B) RC-SBP coverage and the elected beneficiary is no longer eligible, provide supporting documentation with this form.

ITEM 36. Enter your desired coverage in Items 36.a. through 36.g. You may only select one Item. If you elect 36.a., 36.c., or 36.g., you MUST also indicate whether you are declining coverage for other eligible dependents.

ITEM 36.d. Mark if you are not married, have no eligible children, and desire coverage for a person with an insurable interest in you, and provide the requested information about that person in Item 39. A person designated as an insurable interest beneficiary must have a reasonable and lawful basis, founded upon the relationship of parties to each other, either pecuniary or of blood or affinity, to expect some benefit or advantage from the continuance of the life of the retiree. Proof of financial benefit from the continuance of the life of the member is required for persons other than your (former) spouse or child(ren). An election of this type must be based on your full gross retired/ retainer pay. If the person is a non-relative or as distantly related as a cousin, attach evidence that the person has a financial interest in the continuance of your life. Under provisions of Public Law 103-337, you are permitted to withdraw from insurable interest coverage at any time. Such a withdrawal will be effective on the first day of the month following the month the request is received by DFAS - Cleveland Center (or the Coast Guard PPC for non-DOD members). Therefore, no refund of SBP costs collected before the effective date of withdrawal will be paid.

ITEMS 36.e and 36.f. Mark Item 36.e. if you elect coverage for a former spouse. Mark Item 36.f. if you desire coverage for a former spouse and dependent child(ren) of that marriage, and provide the requested information about these children in Item 34 as appropriate. Provide a certified photocopy of final decree that includes separation agreement or property settlement which discusses SBP for former spouse coverage. The DD Form 2656-1, "Survivor Benefit Plan (SBP) Election Statement for Former Spouse Coverage," must also be completed and accompany the completed DD Form 2656 to DFAS - Cleveland Center (or the Coast Guard PPC for non-DOD members).

ITEM 36.g. Mark if you decline coverage under SBP. If married and declining coverage, Items 43 and 44 of Part V, Section XI MUST be completed.

ITEM 37. This Item allows you to designate the amount of your retired pay that will be the "base amount" for determining your SBP premiums and the resulting SBP annuity. If you make no entry, you will default to the full base amount.

ITEM 37.a. Mark if you desire the coverage to be based on your full gross retired/retainer pay. For members who previously elected the Career Status Bonus (CSB) or members covered by the Blended Retirement System who elect a lump sum of retired pay, the full gross retired/retainer pay is what your retired pay would have been had you not elected (CSB) or the lump sum.

ITEM 37.b. Mark if you desire the coverage to be based on a reduced portion of your retired/retainer pay. This reduced amount may not be less than \$300.00. If your gross retired/retainer pay is less than \$300.00, the full gross pay is automatically used as the base amount. Enter the desired amount in the space provided to the right of this Item.

ITEM 37.c. Used by a REDUX member who wants coverage based on actual retired pay received under REDUX. If this option is selected, Items 43 and 44 of Part V must be completed, if married.

ITEM 37.d. Mark if you desire the higher threshold amount in effect on the date of your retirement to be used as your base amount. If this option is selected, Items 43 and 44 of Part V must be completed, if married.

ITEM 38. You may elect payment of the SBP benefit, for beneficiary categories designated in Items 36.b., 36.c., or 36.f., to a special needs trust (SNT) who meets the criteria of a disabled child for SBP, and is indicated as such in Item 34.e. of these instructions. You must provide to DFAS - Cleveland Center (or the Coast Guard PPC for non-DOD members) a copy of the SNT established for the child, documents to support the child is incapable of self-support, age when incapacitated, and if temporary or permanent, and separate statement from an actively licensed attorney certifying that the Trust is an SNT created for the benefit of the child and is in compliance with all applicable federal and state laws. Additional procedures for establishing an SNT as SBP beneficiary are in DoDI 1332.42.

ITEM 39. Enter the information for insurable interest beneficiary. See instruction for Item 36.d.

ITEM 40. Enter the information for your former spouse, if applicable.

PART IV - CERTIFICATION.

SECTION XI - CERTIFICATION

ITEM 41. Read the statement carefully, then sign your name and indicate the date of signature. For your SBP election to be valid, you must sign and date the form prior to the effective date of your retirement/transfer, or the date you are eligible to begin receiving retired pay. (Note: if you elected a lump sum of retired pay in Part II, this form must be signed and dated no later than 90 days prior to your retirement/transfer date, or the date you are eligible to begin receiving retired pay).

ITEM 42. A witness to your signature must also sign and provide their information in Items 42.a. through 42.g. A witness cannot be named as beneficiary in Sections V, IX or X.

PART V - SPOUSE SBP CONCURRENCE

SECTION XII - SBP SPOUSE CONCURRENCE.

Completion of this section is required only in certain circumstances if you declined to elect SBP coverage, elected less than the maximum coverage, or elected child-only coverage while having an eligible spouse. If you are completing this form electronically and this section does not appear, you do not have to obtain spousal concurrence.

ITEM 43. 10 U.S.C. §1448 requires that an otherwise eligible spouse concur if the member declines to elect SBP coverage, elects less than maximum coverage, or elects child-only coverage. This is not required for any former spouse or former spouse and child election. Therefore, a member with an eligible spouse upon retirement, who elects any combination other than Items 36.a. or 36.b. AND 37.a. must obtain the spouse's concurrence in Section XIII, with the exception of an election of Item 36.e. or 36.f. If the current eligible spouse concurs with declining the SBP election, that spouse will need to provide their phone number and email address in boxes b. and c. By signing Item 43, you are concurring with the Survivor Benefit Plan election made by your spouse.

ITEM 44. A Notary Public must witness the signature of the spouse in Item 44. This witness cannot be a named beneficiary in Section V, IX, or X. The spouse's concurrence must be obtained and dated on or after the date of the member's election, but before the retirement / transfer date. If concurrence is not obtained when required, maximum coverage will be established for your spouse and child(ren) if appropriate.

Retired Pay Computation - (3 formulas)

When did you enter the service?

- * Prior to 8 September 1980 20 years = 50% of base pay.

 Computation is 2-1/2% per year X base pay on date of retirement.
- * Between 8 September 1980 and 31 July 1986; and after 31 July 1986 if you did not take the 15 year bonus. 20 years = 50% of average of high 36 months.

 Computation is 2-1/2% per year X average of highest 36 months of active duty.
- * After 31 July 1986 (REDUX) if 15 year bonus was taken 20 years = 40% of average of high 36 months.

Computation is 2-1/2% per year, less 1% for each year less than 30 years X the average of highest 36 months of active duty.

Considerations in Computing Retired Pay

- Your highest grade held
- Active Duty Base Date (ADBD) Designates time served on active duty and determines multiplier (percentage) to be used for retired pay computation. (Only active duty time applies)
- Pay Base Date (PBD) Designates what Pay Scale will be used to establish retired pay. (Active & inactive time applies)
- Date Initial Entry Military Service (DIEMS) Designates retirement law that will be used for retirement)
- 10% for Heroism. USCG Pay Manual COMDTINST M7220.29A, 16.A.5.
- Reserve Points
- Base pay from current active duty pay scale.

Computation Of Non-Disability Retired Pay

Members who entered Service Prior to 8 September 1980:

- ✓ Regular Officers and Enlisted based on basic pay rates in effect on the first day of retirement. Warrant Officers based on basic pay rates in effect on the day before date of retirement. *Please see page 4*.
- ✓ 2.5% for each full year of creditable active service. (Pro-rated percentage given for each additional full month. See Exhibit #1, page 18.)
- ★ Example: E-7 retires with 20 years, 1 month active service

\$5,757.90 (base pay for E-7) <u>x .5020</u> (see exhibit 1, conversion table included.)

\$2,890.47 Gross retired pay

Members who entered Service between 8 September 1980 and 31 July 1986 and those after 31 July 1986 who did not take the 15 year bonus:

- ✓ Retired pay computation based on average of member's highest 36 months basic pay of active service only.
- ✓ 2.5% for each full year of creditable active service. (Pro-rated percentage given for each additional full month. See exhibit #1, page 18.)
- ★ Example: Member retires with 20 years active service. The average of the member's highest 36 months basic pay is \$1,500.00.

\$1,500.00 (average high 36 months)

 \underline{x} .5000 (see exhibit 1 conversion table included.)

\$_750,00 Gross retired pay

Computation Of Non-Disability Retired Pay (Continued)

Members who entered Service after 31 July 1986 <u>and took the 15 year bonus:</u> (REDUX Retirement – Please see note below.)

- ✓ Retired pay computation based on average of member's highest 36 months basic pay of active service only.
- ✓ Receive reduced percentage of retired pay, e.g., 40% upon completion of 20 years active service. (Reduction of 1 percentage point for each full year of creditable service less than 30)
- ★ Example: Member retires with 20 years active service. The average of the member's highest 36 months basic pay is \$1,500.00.

\$1,500.00	(average high 36 months)
<u>x .4000</u>	(see exhibit 2, page 19.)
\$_600.00	Gross retired pay

NOTES

- Members who have prior reserve service will receive additional credit for such reserve service. One year of retirement credit is given for each group of 360 reserve points earned. For example, if a member retiring from active duty with 20 years active service had prior reserve time and earned 720 points in the reserve, the member's retired pay will be based on 22 years active service.
- If a member held a higher grade than the one held at retirement, the Coast Guard may authorize retired pay to be based on such higher grade. Only applicable to those with DIEMS prior to September 8, 1980.
- The FY-2000 DoD Authorization Act repealed/modified the REDUX retirement law. Effective October 1999 those entering the service after July 1986 will have a choice at 15 years of service: \$30K immediate bonus and stay in REDUX; or no bonus and move to pre-1986 high-three retirement system as explained above.

Disability Retired Pay

Members with over 20 years service:

The member's retired pay will be the greater of:

- ✓ Basic Pay (or high 36 month average) times percentage of disability; or
- ✓ Basic pay (or high 36 month average) times years of service times 2.5%.
- ✓ The maximum percentage allowed is 75%.

The above provisions have no impact on the tax-exempt status of Veterans Administration (VA) disability compensation. VA disability compensation is tax-exempt regardless of when the member entered the service.

* September 2022

Table 3-4. Post-1981 – Pre-2018 Retirement Percentage Multiplier Conversions (Continued)

PO	ST-1981	– PRE-2	018 RE	TIREME	NT PE	RCENT	AGE MU	LTIPLI	ER CO	VERSIC	ONS
Serv	Service Multiplier			rice Multi	plier	Serv	rice Multi	plier	Serv	vice Multi	plier
Years	Months	(%)	Years	Months	(%)	Years	Months	(%)	Years	Months	(%)
12	Test 1	30.00	15	Terrolly (37.50	18	Sime.	45.00	21		52.50
12	1	30.20	15	1	37.70	18	1	45.20	21	1	52.70
12	2	30.43	15	2	37.93	18	2	45.43	21	2	52.93
12	3	30.63	15	3	38.13	18	3	45.63	21	3	53.13
12	4	30.83	15	4	38.33	18	4	45.83	21	4	53.33
12	5	31.05	15	5	38.55	18	5	46.05	21	5	53.55
12	6	31.25	15	6	38.75	18	6	46.25	21	6	53.75
12	7	31.45	15	7	38.95	18	7	46.45	21	7	53.95
12	8	31.68	15	8	39.18	18	8	46.68	21	8	54.18
12	9	31.88	15	9	39.38	18	9	46.88	21	9	54.38
12	10	32.08	15	10	39.58	18	10	47.08	21	10	54.58
12	11	32.30	15	11	39.80	18	11	47.30	21	11	54.80
13		32.50	16	In the	40.00	19	WILLIAM .	47.50	22		55.00
13	1	32.70	16	1	40.20	19	1	47.70	22	1	55.20
13	2	32.93	16	2	40.43	19	2	47.93	22	2	55.43
13	3	33.13	16	3	40.63	19	3	48.13	22	3	55.63
13	4	33.33	16	4	40.83	19	4	48.33	22	4	55.83
13	5	33.55	16	5	41.05	19	5	48.55	22	5	56.05
13	6	33.75	16	6	41.25	19	6	48.75	22	6	56.25
13	7	33.95	16	7	41.45	19	7	48.95	22	7	56.45
13	8	34.18	16	8	41.68	19	8	49.18	22	8	56.68
13	9	34.38	16	9	41.88	19	9	49.38	22	9	56.88
13	10	34.58	16	10	42.08	19	10	49.58	22	10	57.08
13	11	34.80	16	11	42.30	19	11	49.80	22	11	57.30
14		35.00	17		42.50	20	STEEL .	50.00	23		57.50
14	1	35.20	17	1	42.70	20	1	50.20	23	1	57.70
14	2	35.43	17	2	42.93	20	2	50.43	23	2	57.93
14	3	35.63	17	3	43.13	20	3	50.63	23	3	58.13
14	4	35.83	17	4	43.33	20	4	50.83	23	4	58.33
14	5	36.05	17	5	43.55	20	5	51.05	23	5	58.55
14	6	36.25	17	6	43.75	20	6	51.25	23	6	58.75
14	7	36.45	17	7	43.95	20	7	51.45	23	7	58.95
14	8	36.68	17	8	44.18	20	8	51.68	23	8	59.18
14	9	36.88	17	9	44.38	20	9	51.88	23	9	59.38
14	10	37.08	17	10	44.58	20	10	52.08	23	10	59.58
14	11	37.30	17	11	44.80	20	11	52.30	23	11	59.80

* September 2022

Table 3-4. Post-1981 – Pre-2018 Retirement Percentage Multiplier Conversions (Continued)

PO	ST-1981	– PRE-2	018 RE	TIREME	NT PEI	RCENTA	AGE MU	LTIPLI	ER CO	NVERSIC	NS
Serv	ice Multi	plier	Serv	ice Multi	plier	Serv	ice Multi	plier	Serv	vice Multi	plier
Years	Months	(%)	Years	Months	(%)	Years	Months	(%)	Years	Months	(%)
24		60.00	27	Taradi,	67.50	30	edian.	75.00	33	Tallant.	82.50
24	1	60.20	27	1	67.70	30	1	75.20	33	1	82.70
24	2	60.43	27	2	67.93	30	2	75.43	33	2	82.93
24	3	60.63	27	3	68.13	30	3	75.63	33	3	83.13
24	4	60.83	27	4	68.33	30	4	75.83	33	4	83.33
24	5	61.05	27	5	68.55	30	5	76.05	33	5	83.55
24	6	61.25	27	6	68.75	30	6	76.25	33	6	83.75
24	7	61.45	27	7	68.95	30	7	76.45	33	7	83.95
24	8	61.68	27	8	69.18	30	8	76.68	33	8	84.18
24	9	61.88	27	9	69.38	30	9	76.88	33	9	84.38
24	10	62.08	27	10	69.58	30	10	77.08	33	10	84.58
24	11	62.30	27	11	69.80	30	11	77.30	33	11	84.80
25	bbank	62.50	28	black	70.00	31	htesk	77.50	34	The second	85.00
25	1	62.70	28	1	70.20	31	1	77.70	34	1	85.20
25	2	62.93	28	2	70.43	31	2	77.93	34	2	85.43
25	3	63.13	28	3	70.63	31	3	78.13	34	3	85.63
25	4	63.33	28	4	70.83	31	4	78.33	34	4	85.83
25	5	63.55	28	5	71.05	31	5	78.55	34	5	86.05
25	6	63.75	28	6	71.25	31	6	78.75	34	6	86.25
25	7	63.95	28	7	71.45	31	7	78.95	34	7	86.45
25	8	64.18	28	8	71.68	31	8	79.18	34	8	86.68
25	9	64.38	28	9	71.88	31	9	79.38	34	9	86.88
25	10	64.58	28	10	72.08	31	10	79.58	34	10	87.08
25	11	64.80	28	11	72.30	31	11	79.80	34	11	87.30
26		65.00	29	Transity	72.50	32	MILLIA.	80.00	35	Made 1	87.50
26	1	65.20	29	1	72.70	32	1	80.20	35	1	87.70
26	2	65.43	29	2	72.93	32	2	80.43	35	2	87.93
26	3	65.63	29	3	73.13	32	3	80.63	35	3	88.13
26	4	65.83	29	4	73.33	32	4	80.83	35	4	88.33
26	5	66.05	29	5	73.55	32	5	81.05	35	5	88.55
26	6	66.25	29	6	73.75	32	6	81.25	35	6	88.75
26	7	66.45	29	7	73.95	32	7	81.45	35	7	88.95
26	8	66.68	29	8	74.18	32	8	81.68	35	8	89.18
26	9	66.88	29	9	74.38	32	9	81.88	35	9	89.38
26	10	67.08	29	10	74.58	32	10	82.08	35	10	89.58
26	11	67.30	29	11	74.80	32	11	82.30	35	11	89.80

* September 2022

Table 3-4. Post-1981 – Pre-2018 Retirement Percentage Multiplier Conversions (Continued)

PO	POST-1981 – PRE-2018 RETIREMENT PERCENTAGE MULTIPLIER CONVERSIONS											
Serv	ice Multi	plier	Service Multiplier Service Multiplier					Service Multiplier				
Years	Months	(%)	Years	Months	(%)	Years	Months	(%)	Years	Months	(%)	
36		90.00	38	Tenelly 1	95.00	40	- Marie	100.00	42	Made	105.00	
36	1	90.20	38	1	95.20	40	1	100.20	42	1	105.20	
36	2	90.43	38	2	95.43	40	2	100.43	42	2	105.43	
36	3	90.63	38	3	95.63	40	3	100.63	42	3	105.63	
36	4	90.83	38	4	95.83	40	4	100.83	42	4	105.83	
36	5	91.05	38	5	96.05	40	5	101.05	42	5	106.05	
36	6	91.25	38	6	96.25	40	6	101.25	42	6	106.25	
36	7	91.45	38	7	96.45	40	7	101.45	42	7	106.45	
36	8	91.68	38	8	96.68	40	8	101.68	42	8	106.68	
36	9	91.88	38	9	96.88	40	9	101.88	42	9	106.88	
36	10	92.08	38	10	97.08	40	10	102.08	42	10	107.08	
36	11	92.30	38	11	97.30	40	11	102.30	42	11	107.30	
37	Soul	92.50	39	Mari	97.50	41	Shu	102.50	43	Pal	107.50	
37	1	92.70	39	1	97.70	41	1	102.70	43	1	107.70	
37	2	92.93	39	2	97.93	41	2	102.93	43	2	107.93	
37	3	93.13	39	3	98.13	41	3	103.13	43	3	108.13	
37	4	93.33	39	4	98.33	41	4	103.33	43	4	108.33	
37	5	93.55	39	5	98.55	41	5	103.55	43	5	108.55	
37	6	93.75	39	6	98.75	41	6	103.75	43	6	108.75	
37	7	93.95	39	7	98.95	41	7	103.95	43	7	108.95	
37	8	94.18	39	8	99.18	41	8	104.18	43	8	109.18	
37	9	94.38	39	9	99.38	41	9	104.38	43	9	109.38	
37	10	94.58	39	10	99.58	41	10	104.58	43	10	109.58	
37	11	94.80	39	11	99.80	41	11	104.80	43	11	109.80	

NOTE: To derive multipliers for service in excess of 43 years and 11 months, divide the number of whole months by 12, compute the quotient to three digits, round to two digits, and add this to the number of years. Then, multiply by .025.

Example 1: 20 years, 7 months, 13 days

7 months \div 12 = .583 (.58) 20.58 \times .025 = 51.45%

Example 2: 44 years, 8 months, 28 days

8 months \div 12 = .667 (.67) 44.67 \times .025 = 111.68%

Exception: Members who retire between January 1, 1982 and September 30, 1983 and meet requirements of paragraph 2.7 will round service credit of 6 months or more, as shown on the Table.

Veterans Administration (VA) Disability Compensation

- Retired members who receive disability compensation from the VA have their retired pay reduced for each dollar of VA compensation received. If the amount of VA compensation exceeds retired pay, retired pay stops.
- The major advantage of VA compensation is that it is tax-free
- Members with a VA disability rating of 30 percent of more receive an additional allowance for dependents.
- DAV and VFW are Service Organizations who may assist you with your VA claim.

Rates of VA Compensation effective December 2023

% of Disability	Rate
10%	\$171.23
20%	\$338.49
30%	\$524.31
40%	\$755.28
50%	\$1,075.16
60%	\$1,361.88
70%	\$1,716.28
80%	\$1,995.01
90%	\$2,241.91
100%	\$3,737.85

Note: Disability ratings awarded by the Department of Veterans Affairs are separate ratings and do not have any impact on a disability rating that may have been awarded by the *Coast Guard*.

If you are awarded VA compensation and it is not being deducted from your retired pay, you will need to notify PPC immediately at (866) 772-8724.

COMBAT-RELATED SPECIAL COMPENSATION FOR DISABLED RETIREES

Combat-Related Special Compensation (CRSC) was authorized by the FY 2003 National Defense Authorization Act (P.L. 107-314, sec. 636) for certain retirees with combat- or operations-related disabilities.

<u>Eligible Retirees</u>: Must meet certain criteria. Retirees are not eligible if they have waived military retired pay to credit military service toward their civil service retirement, or for any other reason, other than to receive Department of Veterans Affairs (DVA) disability compensation.

<u>Application Processing:</u> Eligible retirees must apply for CRSC using the approved application form <u>DD-2860</u> in accordance with the instructions published on the form.

Processing times have not been established, however, payments will be retroactive to June 1, 2003, for those determined to have qualifying disabilities that existed as of that date.

The Coast Guard (PSC-PSD-MED) will determine which disabilities qualify under the above criteria and notify applicants of their decision. Applicants who qualify for CRSC will have their applications forwarded to the Retiree & Annuitant Services Branch of the Pay & Personnel Center (RAS) for computation of the actual CRSC payment.

Effective January 1, 2004, CRSC eligibility was extended to retirees with combat-related VA disability ratings between 10% and 50%. Additionally, reservists needed only 20 years of qualifying service in order to be eligible. The other eligibility requirements remained unchanged.

Effective January 1, 2008, CRSC eligibility was extended to Chapter 61 Title 10 disability retirees with fewer than 20 years of active duty service, as well as Temporary Early Retirement Authority (TERA) retirees.

CONCURRENT DISABILITY PAYMENTS OF RETIRED PAY AND VA DISABILITY COMPENSATION

The FY 2004 National Defense Authorization Act (P.L. 108-136, sec. 641) authorized Concurrent Disability Payments (CDP). Section 641 of the Act approves the phase-in of full concurrent receipt of military retired pay and veterans' disability compensation for certain military retirees. Member's veterans' disability compensation must have been rated at 50 percent or higher to be eligible. In general, this change authorizes "a member of the uniformed services who is entitled for any month to retired pay and who is also entitled for that month to veterans' disability compensation for a qualifying service-connected disability is entitled to be paid both for that month without regard to Sections 5304 and 5305 of Title 38, U.S. Code. The phase-in begins January 1, 2004 and ends on December 31, 2013. This act also repealed Section 1413, Title 10, U.S. Code, which was the SCFSDR.

<u>Eligible Retirees</u>: Any Regular, Reserve, or Disability retiree with at least 20 years of creditable service that has been rated 50% or higher by the Department of Veterans Affairs (DVA).

The CRDP is taxable income, except in limited circumstances, and is reported on a Form 1099-R unless member qualifies for tax exclusion as follows:

- Retiree was a member of the Armed Forces on or before 24 September 1975.
- Member receives payment by reason of a combat-related injury.

A person who is a qualified retiree under the above guidelines and is also an eligible CRSC disabled retiree may receive special compensation in accordance with the CRSC law or retired pay in accordance with above guidelines, but not both.

Allotment Information

All of your allotments will be automatically stopped on the active duty pay system.

The Retired Allotment Authorization Form (CG-7221) is an optional form. Submit to PPC (RAS) whenever you want to start, stop or change an allotment or bond. Any allotments you request to be carried forward will be restarted in the retired pay system. The types of allotments authorized for continuation into retirement are listed on the reverse side of the form. Instructions for filling out the form (CG-7221) are on the form itself. The form can also be obtained from our web site: www.dcms.uscg.mil/ppc/pd/forms. You can also use Direct Access Self-Service to start, stop or change allotments. Visit https://www.dcms.uscg.mil/ppc/ras/gp for more information.

If you elect to carry allotments forward from active duty, you may do so by making a copy of your active duty Payslip (Direct Access "View My Payslip" page), lining out the allotments you want stopped, and sending it to PPC (RAS) with your Data for Payment of Retired Personnel Form (DD 2656).

All allotments must be made by direct deposit.

In order to start a new allotment, you need to provide a signed letter request, including your account number, the name of the financial institution, and a voided check or pre-printed deposit slip; or provide the information in the EFT section of the Retired Allotment Authorization Form (CG-7221) or simply notify PPC (RAS) or use Self-Service to start it yourself.

Your active duty allotments will be paid through your final month of active duty and deducted from your separation pay.

In the event the number of allotments paid from your active duty pay exceeds available entitlements, then the overpayment will be collected from your retired pay account. Typically, this would happen only if your retirement date is other than the first of the month.

SGLI (active duty) continues for 120 days after separation from active duty at no cost to you. Information concerning conversion to VGLI will be sent to you by the Office of Servicemembers Group Life Insurance. VGLI allotments must be started through the Office of Service Members' Group Life. Their number is 1-800-419-1473.

Premium deductions for the Federal Employees Dental and Vision Insurance Program (FEDVIP) are not made via allotment. When you enroll in the program you are authorizing the provider(s) to make a deduction each month from your retired account. Cancellations or changes must also be made directly through the provider(s). You will find provider contact information at: https://tricare.benefeds.com/InfoPortal/indexAction.

Allotments are not authorized for CFC.

DEPARTM U.S. COAS CG-5209(F	T GUARI)		URIT	0.0.0	OAST G	ARNII	NGS ST		MEN	T ¦	MEMBE NAME/ NIT.	JOI	NES /JP		
1. Period Covered 2. SSN 123-45-6789			-6789	3 Pey Base Date 4. AD Ba 80-01-23							5. Exp Ad Term Date 00-01-30		6. Exp Loss Date 00-01-30			
0101	7. Mid Mo	1	PAY SEN			1 00 0		VE IN			ON	00 0	1 00	00 01	00	
YOUR	788	10	9. Aod Nr. 12345678				11.Bal Rr	12.Eso		13. Used 14. SoutPd			15. Bal tom 16. LosPyFY 17. Sole		SoldC\d	
NET	8. End Mo	_							9 5		0					
PAY	787	the same of	10. Rottle Nr: 1001100010											XT MONTH		
18. USCGR Tra/Pa												PA	Y PEF	RIOD ESTIMA	TES	
20. Rank/Rate/Grade E-5 22. Mailing Address											23. Date Amount					
21. Cost Code: 47400 2409 ROLE BLV				·V							00-	00-02-15 783		87.56		
PERSRU:	53-47400-	02 .	JABRONI	KS 6	6604-3020							24. Date Amo			mount	
Unit OPFAC:	53-4740	0										00-	-03-01 798.92			
2	25. ENTIT	LEME	NTS		2	6. ALLOTI	MENTS					7. DEI	DUCTI	ONS		
BASIC PA			1433	70	SAVINGS 001B 300				00		BASR	EG		8	38	
CLOTHING STD 21			42	CFC	004₿		4	00	SGL	-			16	00		
	IL BAS REG 251 40 SINGLE DE							8	09							
LVRATS			7	43				FEDERAL TAX				AX		148	18	
BAH WITI	H DEP		452	59						FICA	TAX			109	68	
					sar Joh	tinue E vings a wP.Jo 2 Feb 1	llot mes									
TOTALS	PA	Y BRE	2166	54 I FOR	THIS PERIOD			301	00 ST/	ATE IN	COME	ΓΑΧ ΙΝ	FORM	290	33	
28. Amount BF	29. Entit		30. Allotme			32. Net Earnings	33. Aml	to be CF 3	4. Income		35. Tax W/		36. Exem		esidence	
0	0 216	6 54	301	00	290 33	1575 21		00		00		00		M		
					FEDERAL TA									BUY	J.S.	
				41. Allowances								45. FICA Tax YTD SAVI				
1433 7	0 1260	3 00	128	8 58	S 0	1	00	1433	70	12	603 00	9	64 1	3 BON	DS	

REMARKS ARE ON BACK

- PLEASE VERIFY YOUR ADDRESS SHOWN IN BLOCK 22 OF THIS LES. IF IT IS NOT YOUR CORRECT MAILING ADDRESS, PLEASE PROVIDE A NEW ADDRESS TO YOUR PERSRU.
- YOU CAN MAKE A DIFFERENCE BY DECIDING TO BECOME AN ORGAN DONOR, WHICH CAN POTENTIALLY SAVE OR IMPROVE THE LIVES OF UP TO 50 PEOPLE. FOR MORE INFORMATION ON ORGAN DONATION, CALL 1 800 452-1369.
- THE COAST GUARD AUXILIARY IS A VOLUNTEER CIVILIAN ORGANIZATION. AUXILIARY
 MEMBERSHIP IS OPEN TO ALL CURRENT ACTIVE DUTY, RESERVE, OR FORMER MEMBERS
 OF THE COAST GUARD. FOR MORE INFORMATION, CONTACT:
 WWW.CGAUX.ORG/PUBLIC/TBJOIN.HTM OR CALL 1 800 GET-USCG.
- THIS LES REFLECTS TRANSACTIONS PROCESSED AS OF 18SEP98.
- 30.0 DAYS LEAVE EARNED AND 31.0 DAYS LEAVE USED TO DATE IN FY98.
- MOST RECENT DATE OF ASSIGNMENT DATA FORM IS 29FEB96
- CHARGED 01DAYS REGULAR LEAVE FOR PERIOD 04SEP98 TO 04SEP98.

Department of Homeland Security Retired Allotment Authorization Form U. S. Coast Guard CG-7221 (Rev. 01/2010) **Employee ID** Name (Last, First, MI) Rank/Rate PURPOSE: Use this form to start, stop, or change an allotment and to report a change of address to an allotment **Purpose of request:** Change of Allotment Stop Change Allotment Allotment Alloument Address (Applies to Stops & Changes) Blanket Code (If known): Stop Amount: Enter allotment title/name from pay slip: Month of Last Deduction: Start Amount: Month of First Deduction: For payment dated: **ALLOTMENT TYPE** Enter type of allotment (B,D,H,I,L,M,N,O,S,T, or X) from table on reverse of this form: ELECTRONIC FUNDS TRANSFER (EFT) INFORMATION Complete if allotment is to be paid by EFT Savings Type of Account Checking Allotee Name (person/company who will receive allotment) **Routing Transit Number** Check Digit (RTN) (can be obtained from the financial institution or found on the bottom of a check or deposit slip) **Account Number Account Title** (Account Holder's Name) **Financial Institution Name**

Reverse of CG PPC-7221 (Rev. 01/2010)

C- 1-	T ! !4	Toma	Use	of Rules				
Code	Limit	Туре	1	any financial institution, other	r than a finance company			
S	One	Savings						
Н	One	Mortgage	Payable for loans for the purchase of a home, mobile home or trailer used as a residence by the retiree.					
N	One	NSLI	National Service Life Insurance premiums.					
L	No Limit	Loan	Payable ONLY to Coast Guard Mutual Assistance or morale fund offices and the allotment MUST have a stop date.					
T	No Limit	Indebtedness	Payable to IRS or other Government agency and MUST have a stop date.					
I	No Limit	Insurance	Payable to any insurance company for payments of insurance premiums for the life of the retiree or retiree and family.					
D	No Limit	Dependent	Support of dependents, including a former spouse.					
Х	No Limit	Dues	Payable to CPOA, CWOA, Academy Alumni Association, Coast Guard Foundation, Naval Aviation Museum Foundation, and CGHQ Mutual Assistance Campaign.					
I	One	VGLI	Payable to the Office of Servicemember's Group Life Insurance (OSGLI) for Veterans Group Life Insurance. This allotment cannot be started through PPCit must be started through OSGLI, Newark, NJ, \$\mathbb{Z}\$1 800 419-1473					
M	One	Insurance	Payable to the Navy Mutual Aid Association.					
0	One	AAFES	Army Air Force Exchange Service DPP Program					
22a(e)(3), th	e following info	ccordance with 5 Urmation is provided rmation to the U.S.	l to you	Member's Signature	Date:			
Coast Guard: Authority - 10 USC Section 2771. Principal urpose(s) - Used to indicate the type of allotment member				For PPC Use Only				
quested. Ro	outine Use(s) - U	pdating allotment:		Action Completed:				
isclosure - I	Disclosure is vol	untary		Date:	Initials:			

Garnishment

May be court ordered to enforce child support and/or alimony obligations.

Are carried forward from Active Duty.

LIMITATIONS:

50% x Net Disposable Earnings (NDE) 55% x NDE if more than 12 weeks in arrears. 60% x NDE if NOT supporting second family. 65% x NDE if more than 12 weeks in arrears.

TOTAL MAXIMUM: 65% x NDE - if combined with FSPA

NDE Computation equals Gross Pay less -

Amounts owed to the United States
Amounts required by law to be deducted
SBP spouse & child costs
VA disability compensation

Note: Internal Revenue Tax Levy deduction is based on number of allowable exemptions as established by IRS.

FSPA

FORMER SPOUSE PROTECTION ACT

A former spouse may receive direct payments from a member's retired pay for Alimony, Child Support or Division of Retired Pay as Marital Property.

Purpose of Deduction	Rules that Apply
Alimony	No minimum length of marriage
	No minimum length of mililtary service
	Deduction normally limited to 50% of "Disposable Retired Pay
Child Support	No minimum length of marriage
	No minimum length of military service
	Deduction can be as much as 50% of "Disposable Retired Pay"
	For PPC Enforcement
Community Property	Ten years of marriage while member was in the military service
or Property Division	Deduction can be as much as 50% of "Disposable Retired Pay"

Taxes

Federal Income Tax Withholding (FITW)

- ♦ There is a new W4 form as of January 2020. (Several changes in how they want it calculated)
- Additional tax may be withheld in even dollar amount.

State Income Tax Withholding (SITW)

- ♦ Each State has different laws concerning taxability of retired pay.
- ♦ SITW is optional by request of retiree.
- ♦ Information on State tax requirements may be found in the Retired Military Almanac.
- Retiree may elect to have SITW withheld from retired pay if residing in one of the states that has an agreement with DoD for SITW. List of states that currently have an agreement may be found in this handout.
- ♦ The amount of withholding is not based on marital status or number of exemptions claimed. Retiree must specify monthly amount to be withheld of at least \$10.00 and in even dollar increments.

More Tax Information

- ♦ Retired Pay is not subject to Social Security Withholding (FICA.)
- ♦ The 1099R (tax statement), mailed annually, is sent to the home mailing address we have for you on the retired pay system. The 1099R is normally mailed during the month of January.

States with an Agreement to Withhold State Tax (SITW) from Military Retired Pay

This is a current list of States that have an agreement with the Coast Guard to withhold State taxes. This does not mean that all of these States tax retired pay. For example, Kansas does not tax military retired pay; however, if a member wants Kansas state tax withheld from his/her pay, we can withhold it because we have an agreement with them.

List of States

Alabama Kansas North Carolina Arizona Louisiana North Dakota Arkansas Maine Ohio California Maryland Oklahoma Colorado Massachusetts Oregon Connecticut Minnesota Rhode Island Delaware Missouri South Carolina District of Columbia Montana Utah Georgia Nebraska Vermont Idaho New Jersev Virginia Indiana New Mexico West Virginia New York Wisconsin Iowa

Reminder: Withholding of state tax is voluntary. If your state has an agreement with us and you would like state tax withheld, you should send your request in writing, provide the amount of monthly withholding of at least \$10.00, in even dollar increments or you can use the self service system to change your SITW.

Note: States with Agreement for withholding is subject to change at any time.

If no state tax withholding is requested, the state of residence is sent the taxable gross information each year. For example if you live in North Carolina and work in Virginia, unless otherwise instructed the taxable amount of Coast Guard retired pay will be reported to North Carolina each year.

Changing a home mailing address does not automatically change the SITW information. If you want to change the state tax identifier, please update it on the self service system or send PPC a written request to do so.

RETIREE/ANNUITANT PAY STATEMENT (RAS Statement)

- The RAS Statement is your "LES" in retirement.
- The Statement is only sent when your retired pay changes. They are not issued monthly like active LES'.
- The Statement is produced and sent at least once a year when you receive a Cost-of-Living Adjustment (COLA). Other than that it is only issued when a change has occurred to your retired pay account.
- Correct home mailing address is very important. If three pieces of mail are returned to RAS your pay is held until we can contact you.
- The Statement gives you an opportunity to review for accuracy, dates of birth and SBP information.
- The reverse of your Statement will provide remarks about the change made to your retired account.

DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD U.S. COAST GUARD CG-5209-RET (REV 12-07) RETIREE/ANNUITANT STATEMENT OF MONTHLY INCOME Period Covered Pay Delivery Pay Grade Employee ID 1-31 DEC 2008 E6 FFT **BIRTHDATES FOR SBP PURPOSES** SBP INFORMATION Base Amount Member Beneficiary/Spouse Youngest Child Coverage Type Anomity 905.00 1967-JUL-28 N/A 2003-OCT-22 1-Child 1645.19 ENTITLEMENTS OLD NEW DEDUCTIONS OLD NEW RETIRED PAY 1555.00 1645.00 857.00 811.00 VA COMP CRDP 595.00 628.00 SBP-CH FREMIUM 6.69 7.07 TOTAL ENTITLEMENTS 2150.00 2273.00 **COURT GARN** 704.47 666.16 ALLOTMENTS OLD NEW DEPENDENT 400.00 400.00 1568 54 400 00 400.00 TOTAL DEDUCTIONS 1483.85 TOTAL ALLOTMENTS YOUR Old Amt Name Bank Name Route Nbr Amount **USCG RET** NET 266.15 BM1 Rbs Citizens, Nation 211070175 304.46 PAY New Amt 304.46 FEDERAL TAXES STATE TAXES Withheld YTD Exemptions Mo Tax Income State #1 Withheld YTD State #2 Withheld YTD Income YTD 1408.93 1408.93 0.00 0.00

COMMENTS ARE ON REVERSE SIDE

REMARKS:

This Pay Slip reflects a Cost of Living Adjustment effective 1 December 2008. The percentage of your COLA is:

Entered Service Before	Entered Service After 7 Sep	Entered Service After 31 Jul
8 Sep 80	80 and No 15-Year Bonus	86 and 15-Year Borns
5.8%	5.8%	4.8%
5.0%	5.0%	4.2%
5.0%	3.8%	3.3%
5.0%	1.2%	1.0%
5.0%	0.0%	0.0%
	5.8% 5.0% 5.0% 5.0% 5.0%	8 Sep 80 80 and No 15-Year Bonus 5.8% 5.8% 5.0% 5.0% 5.0% 3.8% 5.0% 1.2%

YOUR PAY DATA CHANGES:

RETIRED PAY HAS CHANGED DUE TO STATUS CHANGE OR COLA ADJUSTMENT CONCURRENT RETIREMENT DISABILITY PAYMENT (CRDP) CHANGED

VA OFFSET DEDUCTION AMOUNT CHANGED

SBP CHILD PREMIUM CHANGED

COURT ORDERED GARNISHMENT DEDUCTION CHANGED

IF YOU HAVE QUESTIONS, CONTACT:

COMMANDING OFFICER (RAS)

USCG PERSONNEL SERVICE CENTER

444 SE QUINCY STREET

TOPEKA, KS, 66683-3591 PHONE: 1-800-772-8724

RETIRED PAY RECORDS ARE COMPUTER MATCHED WITH OTHER FEDERAL EMPLOYMENT AND BENEFIT RECORDS FOR DEBT PURPOSES.
BE SURE TO VERIFY ALL DATES OF BIRTH LISTED ABOVE FOR DEERS PURPOSES.
BUY U.S. SAVINGS BONDS

Differences In Retired And Active Duty Pay

	Retired Pay	VS	Active Duty
Pay Day	Once per month First Calendar day of month (defaults backward if weekend)		Twice per month First Calendar day of month (defaults backward if weekend)
Notice of Account (LES's)	Issued only when change occurs (RAS Statement)		Issued every month (LES)
Pay Change Request	No form required (written request or update self service system)		Prescribed CG Form
Taxable Income	Form 1099R		Form W-2
SPO Support	PPC (RAS) 1 866 772-8724		SPO
Retiree Newsletter	Issued Quarterly & mailed to your home		None
Cost-of-Living Allowances	Partial COLA first year Full COLA thereafter		Full Pay Raises each year

Retired Cost Of Living Adjustments (COLAs)

* Each December (unless changed by Congress), military retired pay and SBP annuities receive a Cost of Living Adjustment (COLA) to account for inflation. The COLA is reflected in the retired payment received the last working day of December.

The retired pay COLA for those who first became a member of a Uniformed Service before September 8, 1980, is specified according to the effective date of their retirement, as follows:

Retired Pay Based on		
Rates of Pay Effective	Percent Increase	10 U.S.C. Authority
Before January 1, 2023	3.2 percent	1401a(b)(2)
January 1 – December 31,2023	3.1 percent	1401a(c)

The retired pay COLA for those who first became a member of a Uniformed Service on or after September 8, 1980, including those members covered by the High-3 or Blended Retirement System (BRS), is specified according to the effective date of their retirement as follows:

Retirement Effective:	Percent Increase	10 U.S.C. Authority
Before January 1, 2023	3.2 percent	1401a(b)(2)
January 1 - March 31, 2023	3.1 percent	1401a(d)
April 1 - June 30, 2023	2.2 percent	1401a(d)
July 1 - September 30, 2023	0.9 percent	1401a(d)
October 1 - December 31, 2023	0.0 percent	1401a(d)

The retired pay COLA for those who first became a member of a Uniformed Service on or after August 1, 1986, who elected to receive a career status bonus under the provisions of section 354 of title 37 United States Code is specified according to the date of their retirement as follows:

Retirement Effective	Percent Increase	10 U.S.C. Authority
Before January 1, 2023	2.2 percent	1401a(e)
January 1 - March 31, 2023	2.2 percent	1401a(e)
April 1 - June 30, 2023	1.7 percent	1401a(e)
July 1 - September 30, 2023	0.7 percent	1401a(e)
October 1 - December 31, 2023	0.0 percent	1401a(e)

Recall To Active Duty

Even though you may be immediately recalled to active duty, with no break in service, your account must be established on the retired pay system. You are required to make an SBP election prior to your retirement date, and you must waive retired pay to receive active duty pay. Please do not delay sending in your retirement forms.

- Recall Orders Issued: PSC-opm-1 for officers, PSC-epm-1 for enlisted, and PSC-rpm for all reservists.
- Retiree waives retired pay for period of recall.
- Recall period less than 30 days: Retired pay continues and upon completion of recall period, entitlements to active duty pay and allowances are computed and a special payment is issued for the difference between active duty and retired pay. A Form W-2 for taxable active duty pay received during the recall period is issued at year-end.
- Recall period more than 30 days: Retired pay is suspended and member is paid from the active pay system.
- Immediate Recall (*No break in service*): Even if scheduled for immediate recall to active duty, with no break in service, the retirement Form (DD 2656) needs to be completed and submitted to RAS.
- At completion of recall period, retired pay is reviewed to determine if pay adjustment (additional time, etc.) is applicable.
- Members that elected to participate in the SBP prior to their original retirement date may only modify their existing election if they have had a change in marital or dependent status during the recall period, or if they resume retired status during an SBP open season.

Conditions That May Affect Retired Pay

FOREIGN CITIZENSHIP

- Retired regular officers and enlisted members who lose their United States Citizenship by applying for citizenship in a foreign country or by taking an oath of allegiance to a foreign state lose their entitlement to retired pay.
- A citizen of the United States may live outside the United States indefinitely without losing United States citizenship.
- Retirees who reside in a foreign country and acquire foreign citizenship by operation of that country's law, but do not relinquish U.S. citizenship, are considered to have dual citizenship. Dual citizenship alone does not require a member to lose entitlement to retired pay.
- Reference: DoD Financial Management Regulation, Volume 7B, Chapter 6.

FOREIGN GOVERNMENT EMPLOYMENT

The U.S. Constitution prohibits military retirees from accepting any office, title, or employment from a foreign government unless the retiree first obtains the approval of the Secretary of Homeland Security and the Secretary of State. Employment with a private company, enterprise, or organization that is owned by a foreign government, is an instrumentality of a foreign government, is also prohibited without prior approval. Approvals by the Secretary of DHS and Secretary of State cannot be given retroactively. For example, if a retiree goes to work for a foreign government, does not report such fact for six months, and receives Secretarial approval two months later, the retiree is subject to forfeiture retired pay for a period of 8 months. CG military retirees must submit a written request for approval for Foreign Government Employment to the Director of Reserve and Military Personnel (CG-13). CG-13 will submit requests, as appropriate, to the U. S. Department of State (DoS) for approval. Prior to submitting requests, contact Mr. Robert Hinds, CG Retiree Services Program Manager, at 202-475-5451 or email at Robert. C. Hinds@uscg.mil. Mr. Hinds will provide additional guidance on the approval process and sample letter and forms. Requests may be e-mailed, encrypting documents containing PII, or mailed to Mr. Hinds at the following address:

COMMANDANT, U. S. COAST GUARD 2703 MARTIN LUTHER KING JR AVE SE STOP 7907 WASHINGTON, DC 20593-7907 ATT: CG RETIREE SERVICES

• Reference: DoD Financial Management Regulation, Volume 7B, Chapter 5, Section 4.

Conditions That May Affect Retired Pay (Continued)

Retired members lose their retired pay if:

- Convicted by court-martial or federal court of an offense involving the national security of the United States, including espionage, sabotage, disclosure of defense or classified information, seditious or subversive activities, or a violation of national security.
- The retiree refuses or willfully fails to appear, testify or produce papers before a federal grand jury, court, court-martial, or congressional committee in a proceeding concerning the retiree's relationship with a foreign government or a matter relating to national security or defense.
- Found guilty of perjury under U.S. laws by falsely testifying or concealing any material fact in connection with a crime involving national security.
- Reference: DoD Financial Management Regulation, Volume 7B, Chapter 5, Section 3.

EMPLOYMENT OF RETIRED MILITARY MEMBERS

 After being approved for appointment to a civilian position, a retiring military member should be able to demonstrate his or her availability for work within 45 days, the standard time period applicable for all Coast Guard civilian appointments. Additionally, prolonged delays in requesting waivers may be viewed as holding the position open for a military member, and may result in denial of the request. (COMDTINST 12300.6J)

Physical Or Mental Incapacitation

Incapacitation of Retiree

- A physically or mentally incapacitated retiree is one who is impaired by physical disability, mental illness, mental deficiency, advanced age, chronic use of drugs or alcohol, or other causes which prevent sufficient understanding or capacity to competently manage their own affairs.
- Upon receipt of information that a retiree may be mentally incapacitated, a team of members who are specially trained in mental disorders must determine whether the retiree is competent.
- If retiree is declared incompetent by a judge or doctor, a trustee or court appointed guardian must be appointed. A Power-of-Attorney is no longer valid at the Federal level.
- Reference: DoD Financial Management Regulation, Volume 7B, Chapter 16.

Trustee Appointment

Persons over the age of 21 that may be considered for appointment by Commandant as trustee are:

- Lawful spouse (not subject to age requirement.)
- Legitimate son or daughter or legally adopted son or daughter.
- Parents
- Head of an institution, if member is a patient.
- Any other person or person if in the best interest of the member.

Court Appointed Guardian

The incapacitated retiree or any person interested in the welfare of the retiree may petition a
court of competent jurisdiction for a finding of incapacity and appointment of a guardian or
other legal representative. A copy of the appropriate court order certifying to the
appointment of the guardian must be forwarded to CG PPC (RAS) before payments may be
made to appointee.

DEERS

Updating your CG retired pay account does NOT update DEERS.

They are separate systems (this also includes the VA). If required information is not the DEERS system, an ID card **cannot** be issued. DEERS (RAPIDS) information can be found at: https://dwp.dmdc.osd.mil/dwp/app/main

Members should update their DEERS information whenever there is a:

Change in your status

Change in status of a family member (i.e. birth, death, marriage, divorce, adoption, etc.)

Change of address or telephone number

o Address changes can be made online at: https://dwp.dmdc.osd.mil/dwp/app/id-management/personneldata

Loss or theft of identification card

- ID cards must be kept current in order to receive benefits.
 Expired ID cards may result in refusal of medical treatment, payment of claims or base privileges.
- o ID cards may usually be obtained or renewed at any military installation that has the ID card computer program.
- o Call your local ID issuing office or call toll free at: 1-800-538-9552 (in CA call 1-800-334-4162, in AK & HI call 1-800-527-5602).
- o You can locate the nearest ID card office using: https://idco.dmdc.osd.mil/idco/

FEDVIP Dental and Vision

When you choose to enroll in the retirees Federal Employees Dental and Vision Insurance Program, you make an agreement directly with FEDVIP to have your premiums for dental and/or vision insurance withdrawn from your retired pay. You do not start an allotment with RAS when you enroll in the plan, you authorize FEDVIP to deduct the money for your monthly premiums. In order to change the amount of your payment or to cancel your enrollment you must contact FEDVIP directly. An additional note is that when you enroll in the Plan you also authorize any yearly increase in the monthly premium that is deducted from your retired pay.

Please contact FEDVIP if you have any questions concerning their retiree dental/vision plan. You may reach them at --

877-888-3337 (Enrollment) https://www.benefeds.com/Portal/EducationSupport

Making Changes To Your Retired Account

By using Direct Access (DA) Self-Service, you may make many changes (with nearly immediate results) to your account by accessing https://hcm.direct-access.uscg.mil/.

The U. S. Coast Guard Retired Pay System "DA" offers self-service, a web-based access for retirees. Our RAS web page at https://www.dcms.uscg.mil/ppc/ras/gp/ provides access information and detailed instructions.

Click the First Time Logon Guide for Retired Pay Self-Service link and review the user ID and default password instructions before clicking the Sign into Direct Access link. Currently retirees must reset their passwords every 35 days.

In addition to viewing and printing payslips, 1099R and 1095B forms, you can make the following account changes online:

Allotments (Start, Stop, Change)
Change direct deposit account
Change mailing address
Change phone number(s)
E-mail address changes
Change your Federal and/or State Income Tax Withholding
View Final Pay Beneficiaries

* Changes that require written requests:

Survivor Benefit Plan (SBP): You must write or fax us with requests to make any changes to your SBP. Include substantiating documentation (i.e. divorce decree, death certificate).

* Reporting the Death of Coast Guard, NOAA, or PHS Retiree:

To report the death of a Coast Guard, NOAA, or PHS retiree, (also annuitant, spouse or former spouse), please notify by telephone (preferably) as soon as possible.

* How to Contact us: By Phone: 1-866-772-8724

By E-Mail: <u>PPC-DG-CustomerCare@uscg.mil</u>

By Mail: Commanding Officer (RAS)

United States Coast Guard Pay & Personnel Center

444 SE Ouincy St

Topeka KS 66683-3591

By Fax: 785 339-3770

RAS web page: https://www.dcms.uscg.mil/ppc/ras/

What happens to your retired pay when you die?

ALL PAYMENTS STOP!!

RETIRED PAY

ALL ALLOTMENTS

FORMER SPOUSE PAYMENTS

Payment in the form of an annuity begins only if you have elected to participate in the Survivor Benefit Plan (SBP).

Common Questions About SBP

- Q: I understand my retired pay stops when I die. However, my spouse will be eligible for other Government benefits from the VA and Social Security Administration, right?
- A: Your spouse could be entitled to a benefit called Dependency and Indemnity Compensation (DIC) from the VA. However, DIC is <u>only</u> payable if your death is found to be "service connected". A surviving spouse can also get social security survivor benefits if the spouse is over age 59, or if you have minor children. However, if you turn down SBP and you die from a non-service connected cause, and you don't have any minor children, your spouse will be without <u>any</u> Government benefits until reaching age 60.
- Q: Does my spouse lose SBP if she or he remarries after I die?
- A: If your spouse remarries before age 55, the monthly SBP annuity will be stopped. If this remarriage terminates, the annuity restarts.
- Q: Does my spouse have any say in what SBP decision I make?
- A: A spouse sure does. If you don't elect full coverage, your spouse must be notified and must sign a statement agreeing to your election of no coverage or reduced coverage. If your spouse doesn't agree or doesn't sign the statement, you are put on automatic full SBP coverage.
- Q: What are some of the differences between SBP and life insurance?
- A: (1) SBP has no cash value, whereas whole life insurance has a cash value and can be borrowed against.
 - (2) SBP is government-subsidized.
 - (3) SBP annuities rise with inflation, but insurance policies don't.
 - (4) SBP premiums are exempt from taxes, whereas insurance premiums are not exempt.
 - (5) SBP annuities paid out are taxable income, whereas insurance proceeds generally are not taxable.
 - (6) SBP coverage cannot be denied due to your age or health, whereas insurance coverage can be.
- Q: What are probably the most important factors in making an SBP decision?
- A: Your health and that of your spouse, your family longevity and that of your spouse, the difference between you and your spouse's age, and your private financial planning (commercial insurance, etc.).

Common Questions About SBP (Continued)

- **Q:** Is my SBP decision irrevocable?
- A: Yes, with the following exceptions.
 - (1) For future retirees, the window to discontinue SBP will open on the second anniversary after the retired member begins to receive retired pay, and will close on the third anniversary date. Retirees may not elect to discontinue participation without the written concurrence of the spouse, and participants who elect to withdraw will not be entitled to a refund of premiums.
 - (2) There have been open enrollment seasons in the past about every 10 years since SBP was adopted in 1972, whereby a retiree could come into the program. The open season is determined by congress and are extremely rare. However, the costs to come in during open season were much higher based on the retiree's age and how many years the retiree had been retired.
- Q: Are there any cases where I should consider SBP a must-an extremely good buy?
- A: Yes, in the case of an incapacitated child. If you have a mentally or physically handicapped child, SBP provides excellent protection at little cost. The child must meet service-specific requirements. Contact the PPC (RAS) DEERS desk at 1-785-339-3441 for application procedures and requirements.
- Q: If I buy SBP coverage for my four children, do they each receive an annuity of 55 percent of my SBP base amount?
- A: No, the annuity will be equally divided among your four children. When the oldest child reaches majority age, it would be divided into thirds, etc., etc.
- Q: Is there a down side to purchasing SBP coverage for both my spouse and children?
- A: One down side might be that the children will only be eligible for an annuity if you have no surviving spouse and your children are still under age 18 thus you may end up paying for coverage that won't reap benefits. However, remember that child costs are very inexpensive.
- **Q:** When do my children become ineligible under SBP?
- A: At age 18, or if they attend school full-time, at age 22.

Common Questions About SBP (Continued)

- Q: Is there ever a point that SBP will be considered paid up?A: Yes, when the member has paid into SBP for 30 years and reaches age 70.
- Q: What about dependents I acquire after I retire can I cover them under SBP?
- A: It really depends on your status at retirement. If you have a spouse at retirement, and elect not to cover your spouse under SBP, you would be precluded from electing SBP coverage for a new spouse acquired after retirement, unless there was an SBP open enrollment season. On the same hand, if you have eligible children at retirement, but don't elect SBP child coverage, you would be precluded from electing coverage for children you acquire after retirement. If you have no dependents at retirement, then later acquire dependents, you have one year to request SBP coverage for these dependents.
- **Q:** Just how important is the COLA protection of SBP?
- A: Extremely. SBP annuities, for instance, increased 296% between 1972 and 1988 an annuity that was \$500 in 1972 was \$1,483 in 1988.

Another good example of the COLA protection would be SGLI. In 1972, SGLI coverage was \$15,000. Now, 20 years later, SGLI coverage is \$400,000. Just think, at this rate, 20 years from now, SGLI would have to be worth between \$600,000 and \$2,000,000!!!

Be sure to remember the COLA features of SBP when your insurance salesman presents information about purchasing a life insurance policy.

- Q: Once I elect SBP, what responsibilities do I have after I retire?
- A: To notify PPC if your family status changes. If your spouse or child dies, you divorce, your child marries or reaches age 18, immediately notify PPC so we can stop the SBP deductions from your pay.
- Q: Can I cover my same sex partner under the SBP or Reserve Component SBP?
- A: Yes, on June 26, 2013 the Supreme Court ruled Section 3 of the Defense of Marriage Act (DOMA) unconstitutional. Based on this ruling, same sex married couples are now entitled to the same SBP/RCSBP benefits as all married couples.