

**Portability Move - Nonappropriated Fund (NAF) to Civil Service
Checklist for Processing Civil Service Employee Elections to Retain NAF
Retirement Coverage**

This checklist is for Civil Service Appropriated Fund (APF) HRO use in processing a civil service employee’s election to retain NAF retirement coverage following a qualifying move from a NAF position to a civil service APF position.

Complete the portability eligibility in-processing checklist for APF HROs before completing this checklist. The in-processing checklist helps determine eligibility for the retirement coverage election. Section 7 of that checklist contains instructions on providing the election.

When the eligible APF employee chooses Option 1 on the election form, RI 38-134, to retain NAF retirement coverage, this checklist is used to process the election and continue the employee’s NAF retirement coverage.

Employee Name:	Last 4 SSN:
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1. CONFIRM THAT FORM RI 38-134, IS COMPLETE

<input type="checkbox"/> Confirm that appointing civil service APF HRO completely filled out Part 1. <ul style="list-style-type: none"> • Every block in Part 1 should be filled with appropriate information. • The date of the move should be the date of appointment to the civil service retirement-covered position. • The signature should be that of the appointing APF Human Resources official authorized to confirm the employee’s eligibility for the election.
<input type="checkbox"/> Confirm that employee signed and dated the acknowledgement in Part 2.
<input type="checkbox"/> Confirm that employee signed and dated the Option 1 election under Part 3.
<input type="checkbox"/> Confirm that the date of receipt of the employee’s election is marked on the form.
<input type="checkbox"/> Give a copy of the signed and dated form to the employee.
<input type="checkbox"/> Combine APF and NAF personnel records in an OPM Merged Record Personnel Folder (MRPF).
<input type="checkbox"/> File the form with the original Part 3 signature on the right side of the MRPF. Destroy any earlier versions of the form that contain only Part 2 information.
<input type="checkbox"/> Place the Notice of NAF Retirement Election flag on the right side of the OPF.

**2. COMPLETE AND SUBMIT APPROPRIATE FORMS TO CONTINUE THE
EMPLOYEE IN NAF RETIREMENT COVERAGE**

<input type="checkbox"/> Notate employee’s SF-50 to show that employee moved under P.L. 107-107 retirement portability provisions and elected to retain NAF retirement coverage.
<input type="checkbox"/> Confirm that the correct NAF retirement code is used for data and payroll purposes. In addition to using code “5” to indicate “Other Retirement System,” include the appropriate

<p>NAF retirement indicator to identify the specific DoD NAF employer retirement plan: A = Army; B=Navy (CNIC/BUPERS); C = NEXCOM; D = Air Force; E = Marine Corps; F = AAFES.</p>
<p><input type="checkbox"/> Contact the appropriate NAF employer retirement plan point of contact to obtain necessary forms and information (contact information found on Table 9 of the DCPAS Portability of Benefits Reference Guide).</p>
<p><input type="checkbox"/> Confirm whether the employee is a reemployed NAF annuitant. If an employee is receiving a NAF annuity, an election to continue the same NAF retirement coverage results in the employee becoming covered by that NAF plan’s reemployed annuitant rules as an APF employee. The APF HRO should consult with the NAF retirement benefit office to determine how the employee’s retirement coverage, annuity, and retiree benefits will be affected. Under most NAF retirement plans, a reemployed annuitant’s annuity ceases and the individual re-enrolls in the NAF retirement plan as an employee.</p> <p>Is the employee a reemployed NAF annuitant?</p> <p><input type="checkbox"/> Yes. Follow NAF retirement plan rules regarding whether re-enrollment is permitted.</p> <p><input type="checkbox"/> No. Continue through the checklist.</p>
<p><input type="checkbox"/> Confirm with former NAF employer the current percentages of employer and employee contributions to the NAF defined benefit plan and calculation and remittance instructions. (The Component NAF plans differ in the use of basic pay versus gross pay to calculate contributions and deductions. Components may also differ in the treatment of bonuses, allowances, overtime, holiday, and military pay.)</p> <p>DoD NAF retirement plan points of contact are found in Section 12 of the DCPAS Portability of Benefits Reference Guide (see Table 9).</p>
<p><input type="checkbox"/> Coordinate with APF payroll to confirm that NAF deductions and contributions began on date of coverage (date of qualifying move).</p>
<p><input type="checkbox"/> Confirm appropriate FICA deductions.</p>
<p><input type="checkbox"/> Notify the appropriate Component NAF retirement plan point of contact of the employee’s election. The NAF retirement plan point of contact will advise on the required documents and how to submit those documents.</p>
<p><input type="checkbox"/> Confirm that the retirement coverage election took effect on the date of the qualifying move.</p>
<p><input type="checkbox"/> Make any necessary corrections to personnel and payroll records. See Section 6.6.a. of the DCPAS Portability of Benefits Reference Guide for guidance. Additionally, HROs should follow guidance in the OPM Guide to Processing Personnel Actions to correct the personnel records. Payroll offices should follow guidance in OPM Payroll Office Letter 96-06, dated November 5, 1996, to correct the payroll records.</p>

3. **COMPLETE AND SUBMIT APPROPRIATE FORMS TO CONTINUE THE EMPLOYEE IN THE NAF 401(k)**

<input type="checkbox"/> Confirm percentages and calculation method of employee and employer 401(k) contributions and deductions, and method of transmission.
<input type="checkbox"/> Provide employee with appropriate NAF 401(k) election form, if required, or points of contact and instructions for implementing the 401(k) election. Some Components may require that a transferring employee complete a new NAF 401(k) enrollment form or contact the NAF 401(k) plan administrator directly for instructions.
<input type="checkbox"/> Confirm whether there are any employee NAF 401(k) loan deductions that must be remitted and instructions for remittance (the employee may need to make payments directly to the NAF plan, instead of through payroll deductions).

4. **PROVIDE SERVICING CIVIL SERVICE APF HRO INFORMATION:**

APF HRO Rep Name: Title: Organization: Phone number:	Today's Date:
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5. **FILE A COPY OF THIS COMPLETED CHECKLIST ON THE LEFT (TEMPORARY) SIDE OF THE EMPLOYEE'S MRPF**