Please follow the steps below for a Voluntary Retirement submission in GRB. You can access GRB <u>here</u>.

1. After logging into GRB, select the Retirement Button to view your Retirement information.



2. If eligible for Retirement, you will be presented with the "Start Application" process button to apply for a Voluntary Retirement.



<u>NOTE:</u> All other types of retirement are processed with case management within GRB. Please contact the RSSO at 866-330-7366 if you have issues or questions.

 Next ~ GRB allows users to digitally sign documentation within the application. You may be prompted to setup your signature within GRB. Please provide your official signature to include your middle initial for processing. <u>NOTE:</u> signature errors will create processing delays.

Change Signature	×
This signature will be used as your official signature w the Retirement Dashboard. Please enter your signatu would like it to appear on forms.	vhen signing forms in ire exactly as you
Joe J. Coo	
If you need to change your signature before you app do so by clicking on Account from the main menu.	bly it to a form, you can
Save Cancel	

4. Next ~ you will be presented with a "Date of Final Separation" screen. Enter your date of final separation <u>(this is your retirement date).</u>

NOTE: Please see:

Appendix A – Picking the best retirement date Appendix B – RSSO workflow for retirement Appendix C – Hyperlinks to additional information

FERS Employees – It is in your best financial interest to select the LAST day of any given month as your retirement date (does not have to be end of a pay period), to prevent any NON-PAID days.

<u>CSRS Employees</u> - It is in your best financial interest to select the LAST day of any given month or up to the 3rd of each proceeding month as your retirement date (does not have to be end of a pay period), to prevent any NON-PAID days.

Date of Final S	eparation	×
To begin, please enter for retirement. You wi submitting your applic	the date you intend to separate from federal servic Il be able to change this date prior to electronically cation.	e
Date of Final Separation	on	
MM/OD/YYYY		
Date of Final Separation	an of accerto change this date prior to exclusion any tation.	_

5. *Next* ~ you will be presented with several on-line forms to edit. You must complete each item to receive a green check mark of completion, before reviewing your final submission.

tatus N	ot Submitted		
late of R	etrement 01/01/2025		
mporta	nt Retirement Application Instructions		_
	2	(3)	— (<u>4</u>)
$\mathbf{}$		9	<u> </u>
repare	Complete	Review and Sign	Submit
	Application	Forms	
omplete	each application section below. When you compl	ete a section the status indicator will display a	green check mark. To begin
Status	Application Section	en mar you nave entered, vinen all sectors a	Show All Details
0	Identifying Information		Edit 🗸
•	Employment Information		Edit 🗸 🗸
•	Military Information		Edit 🗸 🗸
•	Insurance information		Fdit 🗸 🗸
3	Marital Information		Edit 🗸 🗸
8	Dependent Children		Edit 🗸 🗸
8	Workers Compensation		Edit 🗸 🗸
8	Previous Claims		Edit 🗸 🗸
8	Annuity Election		Edit 🗸 🗸
8	Payment Information		Edit 🗸 🗸
8	Tax Withholding		Edit 🗸 🗸

The following steps will provide additional clarity for your submission.

6. Identifying Information ~

Identifying Information
Other SSNs you have used
[*] [*]
Privacy Act
Daytime Telephone after retirement
(999) 999-9999
Best Time to reach you
8-5
Fax Number
Home Email
Address Line 1
Rockin Ave
Address Line 2
Address Line 3
City
Smallvite
State
District of Columbia
Zip Code
99999
Zorustan
Country Code
US
Are you a citizen of the United States of America?
Yes 💽 No 🔿
Save

- a. Home Email (NOT VA Email) is required for post-retirement contact. Enter NONE if not applicable.
- b. Please provide the mailing address you will be using to receive mail after you have retired on "Address Line1*"
- c. Before clicking "Save" please review ALL information you have entered above is correct.
- 7. Employment Information ~ (SF50 is located in your eOPF EHRI Electronic Official Personnel Folder (opm.gov))
 - a. Department or Agency Department of Veterans Affairs
 - b. Address of Department or Agency Please type only the address of the facility you work at; please do not include additional specific (ex. Heart Center, Facilities Dept., floor number, room number, etc.). Just the address is needed. If you work remote from home, please provide the address of your local servicing VA facility, *NOT* your home address.
 - c. Date of Final Separation Please VERIFY the date you previously entered is there and is the CORRECT date you've chosen. Again, this is the date of your retirement.
 - d. Title of position from which you are retiring Please use the <u>official</u> title of your position. You can find this in Block 7 of your latest SF50 in your eOPF.

Employment Information ~ continued

Departn	sent or Agency from which you are retiring (include bureau or
division)	
Veteran	s Attairs
Address Address	of Department or Agency Line 1
12345 V	eterans Way
Address	Line 2
Address	Line 3
City	
Nashvil	ê
State	
District	of Columbia 👻
Zip Cod	8
99999	
Zip Plus	Four
Date of	Final Separation
01/01/20)25
Title of p	osition from which you are retiring
Famous	Actor
Pay Plan	
GS	
Occupat	ional Series
0201	

- e. Title of position from which you are retiring Please use the <u>official</u> title of your position. You can find this in *Block 7* of your latest SF50 in your eOPF.
- f. Pay Plan Also in your SF 50, *Block 8* will provide you your pay plan (2 letters).
- **g. Occupational Series** Also in your SF50, *Block* **9** will provide you your occupational series (4-digit number).

<u>NOTE:</u> If you desire a change to your Final Date of Separation, your application can be returned to you by the RSSO for resubmission. Change the date and resubmit for continued processing.

8. Military Service ~ (multiple entries may be required)

Military Serv	vice			
Have you perform Yes No (ned active honorab	ele service in the	Armed Forces or oth	er uniformed services of the United States?
Enter all periods of	of active duty milita	ry service.		
Branch	From	То	Last Grade/Rank	Serial Number
Space Force	01/01/2000	01/01/2021	CWO5	SSN
Add If any of your mili Yes No (tary service occurre	ed on or after 1/	1/1957, have you paid	a deposit to your agency for this service?
Next Can	cel			

a. **Serial Number** – enter your Serial Number if you were issued one, otherwise, please enter your Social Security Number.

Next Page

- b. Last Grade or Rank enter your rank displayed for DD214 being entered. Please enter as listed on the DD214 Member-4 Copy.
- c. **Organization at Discharge** enter Honorable or Dishonorable.
- d. Please mark "Yes" if you have retired from the military in any capacity or will become eligible for a military retirement once you've reached a certain age (Active Duty, Reserves, or National Guard). You will be asked to provide Member-4 DD214s, DD215s, and/or retirement award letters as they apply to your military service.

Military Service ×
Are you receiving or have you ever applied for military retired or retainer pay? (Answer "yes" if you are receiving payments from the Department of Veterans Affairs instead of military retired pay.) Yes No
Was your military retired or retainer pay awarded for reserve service under Chapter 1223, Title 10, US Code, Section 12731 through 12739? (Formerly, Chapter 67, Title 10.) Yes O No O
Was your military retired or retainer pay awarded for a disability incurred in combat or caused by an instrumentality of war an incurred in the line of duty during a period of war? Yes O No O
Are you waiving your military retired or retainer pay in order to receive credit for military service for FERS retirement benefits? Yes ONO
Save Previous Cancel

NOTE: Submission progress is confirmed by the green check mark.

atus	Applicatio	on Section				Show All Detail
0	Identifying	g Information				Edit 🗸 🗸
0	Employme	ent Information				Edit 🗸 🗸
9	Military In	formation				Edit 🔺
Have y	ou performe	ad active honorable	service in the Armed	Forces or other uniform	ed services of the United	States? Yes
Militar Branch	ry Service	From	То	Last Grade/Rank	Serial Number	
Space	Force	01/01/2000	01/01/2021	CWO5	SSN	
If any of Are yo Was yo throug Was yo	of your milit u receiving o our military r ph 12739? (Fo our military r	ary service occurred or have you ever app retired or retainer p prmerly, Chapter 67, retired or retainer p	on or after 1/1/1957 blied for military retir by awarded for reserv Title 10.) No by awarded for a disal riod of um?	7, have you paid a deposi ed or retainer pay? Yes re service under Chapter bility incurred in combat	t to your agency for this 1223, Title 10, US Code, or caused by an instrum	service? No Section 12731 nentality of war an

9. Insurance Information ~

<u>NOTE:</u> This section is <u>NOT</u> asking if you want to continue benefits. If you have health insurance and/or life insurance, please select "Yes" so the system will include the necessary applicable retirement forms for your case.

a. Answer all questions to the best of your ability. A Retirement Specialist will review your record to validate eligibility.

Insurance Information ×
Are you eligible to continue Federal Employees Health Benefits (FEHB) coverage as a retiree? Yes No
Does a court or administrative order require that you provide health benefits coverage for one or more children? Yes No
Are you eligible to continue Federal Employees' Group Life Insurance (FEGLI) coverage as a retiree? Yes No No
Are you currently enrolled in the Federal Long Term Care Insurance Program (FLTCIP)? Yes No
Are you currently enrolled in the Federal Dental and Vision Insurance Program (FEDVIP)? Yes No
Next Cancel

Insurance Information ~ next

Insurance Information	
Current Coverage Basic, Option A, Option B 5X	
Basic Life Insurance	
Do you want to have Basic Life insurance in retirement/compensation	on if y
are eligible?	
Yes	
What level of Basic Life insurance do you want in	
retirement/compensation?	
75% Reduction	
Ontion A - Standard Ontional Insurance	
Do you want to have Option A in retirement/compensation if you a	re
eligible?	
Var	
103	
Option B - Additional Optional Insurance	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction?	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction?	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Ves How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1 Option C - Family Optional Insurance	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1 Option C - Family Optional Insurance Do you want to have Option C in retirement/compensation if you a	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Ves How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1 Option C - Family Optional Insurance Do you want to have Option C in retirement/compensation if you a eligible?	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Ves How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1 Option C - Family Optional Insurance Do you want to have Option C in retirement/compensation if you a eligible? I don't have Option C	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1 Option C - Family Optional Insurance Do you want to have Option C in retirement/compensation if you a eligible? I don't have Option C	re
Option B - Additional Optional Insurance Do you want to have Option B in retirement/compensation if you a eligible? Yes How many multiples of Option B do you want at No Reduction? 4 How many multiples of Option B do you want at Full Reduction? 1 Option C - Family Optional Insurance Do you want to have Option C in retirement/compensation if you a eligible? I don't have Option C	re

10. Marital Information ~ answer all questions completely for current and or former spouse's. Please provide a copy of your Marriage Certificate/Marriage License, this is a requirement.

Marital Information	×
Do you have a living former spouse(s) to whom a court order gives a survivor annuity or portion of retirement benefits or to whom you wish to leave a survivor annuity? Yes No	
Former Spouse's Information List each former spouse for which you intend to provide a survivor benefit. To add a former spouse, select the A New Former Spouse button at the bottom of the table. To delete or change an existing former spouse, select the icons next to the former spouse. Add New Former Spouse Save Previous Cancel	400 e

11. Dependent Children ~ answer all questions to complete. This ONLY refers to any unmarried dependent children. Multiple entries may be required.

Dependent (Children				×
This section is option survivor benefits in Do you have unma Yes No	onal, however co the event of yo arried dependen)	ompleting it now may h ur death. It children?	elp expedite the processi	ng of claims	for
List all unmarried d 22 and incapable o of 18.	lependent childr of self-support b	ren under the age of 22 ecause of a mental or p	2. Also list any child who is ohysical disability incurred	over the ag before the	ge of age
First Name	Middle I	nitial Last Name	Date of Birth		
Joey	т	Cool	01/01/2023	*	ŵ
Add New Deper	ndent Child				

12. Workers Compensation ~ Claim Numbers are administered at your local Claims Department. National Claims can be found here – <u>ECOMP - U.S.</u> <u>Department of Labor (dol.gov)</u>

List each claim for which y Compensation Programs I claim, select the icons nex	OU are receiving or have (OWCP). To add a claim t to the claim.	e received workers' co , select the add new o	ompensation from the Offic laim button. To delete or c	te of Workers' hange an existing
Compensation Claim #	Type of Benefit	From	То	
99999999999999	Other	01/01/2021	01/01/2022	火 前
Add New Claim For workers' compensatio requested information. Compensation Claim #	n you have applied for l	but are not receiving	benefits, indicate the reaso	n and provide th
Add New Claim For workers' compensatio requested information. Compensation Claim # 9999999	n you have applied for l	out are not receiving	benefits, indicate the reaso	n and provide th
Add New Claim For workers' compensatio requested information. Compensation Claim # 9999999 Type of Benefit	n you have applied for l	out are not receiving	benefits, indicate the reaso	n and provide th
Add New Claim For workers' compensatio requested information. Compensation Claim # 9999999 Type of Benefit Claim Denied	n you have applied for l	out are not receiving	benefits, indicate the reaso	n and provide th
Add New Claim For workers' compensatio requested information. Compensation Claim # 9999999 Type of Benefit Claim Denied Claim Denied Date	n you have applied for l	but are not receiving	benefits, indicate the reaso	n and provide th

Next Page

Previous Retirement Claims ×
Have you previously filed any application under the Civil Service Retirement System or Federal Employees Retirement System for retirement, refund, etc.? Yes No
Type of application (check all that apply) Retirement
Claim Number(s)
Unknown
Vnknown
Refund of Excess Deductions
Deposit or Redeposit
Voluntary Contributions
Save Cancel

14. Annuity Election ~

Annuity Election – is what your spouse / insurable interest would receive should you pass away. You must leave a partial survivor benefit in order for your spouse to continue insurance in the event of your passing.

<u>NOTE</u>: If you are single and do not wish to leave a survivor benefit, please select the first option.

<u>NOTE</u>: if you are married and choosing anything less than the full survivor benefit, your spouse will need to complete an additional form (SF 3107-2 Spouses Consent to Survivor Elections) in the presence of a notary public.

Annuity Election ×
Indicate your annuity election
I choose a reduced annuity to provide a survivor benefit(s). $\qquad \checkmark$
Indicate who will receive a survivor benefit (check all that apply) Current Spouse Former Spouse(s) Insurable Interest
Note: If you wish to provide survivor benefits to a current spouse and former spouse(s), the combined survivor benefits cannot exceed 50% of your annuity. Additionally, you must have your current spouse's consent to choose this option.
Next Cancel

15. Payment Information ~ Please be sure you are entering your BANK'S information and not your personal information here.

Payme	nt Information
Payment N	Method
Please ser	nd my annuity payments to my checking or savings account
Financial Name US Bank	Institution Information
Address Li	ne 1
12345 Bar	ikers Way
Save	Cancel

16. Tax Withholding ~

Do you want Federal income tax withheld? Yes No Complete the following to specify your Federal income tax withholding Filing Status
Complete the following to specify your Federal income tax withholding Filing Status
Single/Married Filing Separately Married Filing Jointhy/Qualifying Widew(ar)
Head of Household

<u>NOTE</u>: Federal taxes are exclusively determined by the income from the VA annuity as indicated in the estimate. For tax calculations including income beyond the VA, consult a financial advisor or accountant.

17. Designation of Beneficiaries ~ Select for a Retirement System AND/OR Life Insurance beneficiary as required.

For each benefit shown below indicate if you would like to complete a pe	
designation of beneficiary at this time. You may complete a new designation of beneficiary any time in the future. Retirement	N
New Designation	~
Life Insurance	
New Designation	~

<u>NOTE</u>: Retirement System "New Designation" will require you to complete an additional form (SF 3102 Designation of Beneficiary) with two (2) witnessing confirmation signatures. The Retirement System beneficiary will receive a refund of retirement contributions in the case of death.

Designation of Beneficiaries			
Retirement System First Name	Last Name	Relationship	Percent Designated
Donnie	Cool	Step Son	100.00%
Add New Beneficiary			
Next Previous	Cancel		

<u>NOTE</u>: Life Insurance "New Designation" will require you to complete an additional form (SF 2823 Designation of Beneficiary) with two (2) witnessing confirmation signatures. The Life Insurance beneficiary will receive any FEGLI payable benefits.

Designation	of Beneficiaries		
Life Insurance (FEG First Name	LI) Beneficiaries Last Name	Relationship	Percent Designated
Joey	Cool	Step Son	100.00%
Add New Benefi	ous Cancel		

18. Retirement Application ~ Review and Sign

	and Sign	
tatus	Application Section	Show All Detail
S	Identifying Information	Edit 🗸
S	Employment Information	Edit 🗸
S	Military Information	Edit 🗸
0	Insurance Information	Edit 🗸
\bigcirc	Marital Information	Edit 🗸
S	Dependent Children	Edit 🗸
S	Workers Compensation	Edit 🗸
\bigcirc	Previous Claims	Edit 🗸
0	Annuity Election	Edit 🗸
0	Payment Information	Edit 🗸
0	Tax Withholding	Edit 🗸
0	Designation of Beneficiaries	Edit 🗸

Once complete, select the "Review and Sign" button to review generated documents for processing. You must continue the process to submit your application.

19. Retirement Application ~ Document Review/Submission

Edit App	lication	
Forms Requ	uiring Sig	Inature
Status		Form Name
Sign	i	SF3107 : Application for Immediate Retirement (FERS)
Sign	(i)	SF2818 : Continuation of Life Insurance Coverage
Add	(1)	SF2823 : Designation of Beneficiary (FEGLI)
Add	i	SF3102 : Designation of Beneficiary (CSRS and FERS)
Sign		SF3107-ABC : Schedules A,B,C- A- Military Service Information, B- Military Retired
Sign	(1)	W-4P : Federal Withholding Certificate for Pension or Annuity Payments
Additional	Documer	nts
Status		Document Name
Add	0	Court Order (Divorce Decree, Administrative Order, etc.)
Add	0	DD 214- Millitary Discharge Document

Upload ~ select to upload documents from your computer.
Sign ~ select to electronic signature authorization.
Edit Application ~ return to the on-line forms for changes.

<u>NOTE</u>: The following documents require downloading and printing off for witness/notary verifications prior to completing your retirement submission.

SF 3102 Designation of Beneficiary (FERS) SF 3107-2 Spouse's Consent to Survivor Election SF 2823 Designation of Beneficiary (FEGLI) (Life Insurance)

Next Page

20. Retirement Application ~ Submission

Edit App	lication	Submit
orms Requ	uiring Sig	Inature
Status		Form Name
0	(1)	SF3107 : Application for Immediate Retirement (FERS)
•	(i)	SF2818 : Continuation of Life Insurance Coverage
0	(i)	SF2823 : Designation of Beneficiary (FEGU)
0	(1)	SF3102 : Designation of Beneficiary (CSRS and FERS)
0		SF3107-ABC : Schedules A,B,C- A- Military Service Information, B- Military Retired Pay, C- Federal Employees' Compensation Information (FERS)
0	()	W-4P : Federal Withholding Certificate for Pension or Annuity Payments
	_	
Status	Docume	Document Name
Add	0	Court Order (Divorce Decree, Administrative Order, etc.)
Add	0	DD 214- Military Discharge Document

Once all required documents are signed and complete ~ click <u>SUBMIT</u> to complete your request.

<u>NOTE:</u> If you do not have all documents currently, you can still submit the application and send the documents later.

The RSSO will be reaching out to you within approximately 60 days of your final date of separation to complete your processing.

Appendix A - Pay & Benefits

Why is it important to retire at the end of the month?

When you're old enough to be eligible for retirement and have enough service to get an unreduced benefit, your retirement will begin on the first day of the month after you retire. In other words, whether you retire on the 1st, 6th, 15th, or 31st of a month, your first retirement check will be for the month following your retirement date. Your last paycheck will provide compensation through the last day you are on the payroll. The reason why the last day is great is so that you can be paid your salary through the end of the month and your retirement will begin to accrue the first day of the following month.

For example, if you decide to retire on Friday, Feb. 12, 2023, your salary will be paid through close of business Feb. 12 and you would accrue annual and sick leave for leave period three of 2023. Your first interim retirement check would be paid for the month of March and should be received by April 1 (retirement payments are paid on the 1st of the month for the prior month's payment). If you chose to retire on Feb. 27 instead, then you would be paid your salary through close of business on Feb. 26 (or Feb. 27 if you normally work on Saturday) and you should receive your first interim retirement payment on April 1 for the month of March. The difference is that if you retire on Feb. 10, you then forfeit 10 days of salary (Feb. 13-28), one paid holiday (Feb. 15) and another leave accrual for leave period four. Also, you should be aware that due to retirement processing delays, the first payment may be an estimate, and it might not hit your bank account until after the first of the month. The final processing may take more than one month to complete. Once your retirement claim is finalized by the Office of Personnel Management, the payments will be retroactive to the starting date of your retirement.

Are there only four great dates to retire?

Absolutely not. The last day of any month works very well, because you'll be paid through the end of the month and your retirement will begin to accrue the next day.

Should I always choose the last day of the month even if it isn't a work day?

In general, it doesn't make too much difference. For retirement computation purposes, all months have 30 days. No credit is given for the 31st day of the month. So, for example, it doesn't really matter if you make your retirement effective on Saturday, Jan. 30, 2021, or Sunday, Jan. 31. Feb. 28 constitutes three days (or Feb. 29, during leap years, constitutes two days).

A retirement specialist at your agency should be able to help you project your sick leave credit and confirm your retirement service computation date to determine if extra weekend days would increase your benefit.

Does it make sense to work a few more days if that means my retirement will be computed on an additional month of service?

A month of additional service under the Federal Employees Retirement System is worth 1/12 of 1% of your high-three average salary in your benefit. (Some FERS retirement benefits use a 1.1% factor. For Civil Service Retirement System employees, the factor is 2%.) For example, if your high-three average is 80,000, then one month of additional FERS service credit would be worth 1/12 x 1% x 80,000 = 66.67 per year, or 5.55 per month. If 5.55 is make or break for you in terms of financial security in retirement, then it might be a good idea to consider working another year or two rather than another month or day of service.

What if the end of the month is a Monday or Tuesday? Should I just retire on the previous Friday?

May 31, 2023 is a good illustration of this situation. You may think that there is not much difference between Friday, May 28 and Monday, May 31, but the latter is a better date. This is because:

Both dates allow your retirement to commence on June 1.

May 31 is a holiday and you would be paid for this day and not have to report to work (unless you typically work on holidays).

If your annual salary is \$80,000 (so your hourly pay rate is \$38.33), one day of salary (eight hours worth) would be \$306. That's a nice bit of cash.

You will also receive credit for two additional days of service, which may add another month to your retirement computation.

Appendix B – RSSO Voluntary Retirement Process Flow



Appendix C - Hyperlinks

RETIREMENT FAQS & LIFE INSURANCE

43211 LotB (opm.gov) FEGLI program booklet

Retirement FAQs (opm.gov) "what happens to my life insurance when I turn 65"

<u>MYPAY</u>

<u>https://mypay.dfas.mil/#/</u> Check remarks for OASDI amount still owed. Make sure you add your personal email & address to your file so you have access to it after retirement for any questions or concerns, and to see final balance of sick and annual leave.

SICK LEAVE

Sick leave chart <u>https://www.usgs.gov/about/organization/science-support/human-capital/sick-leave-conversion-chart</u>

SOCIAL SECURITY

Filing for Social Security, you can get an estimate, create a my Social Security account my Social Security | SSA Retirement Estimator | SSA

BENEFICIARY FORM FOR LIFE INSURANCE

<u>https://www.opm.gov/forms/pdf_fill/sf2823.pdf</u> Life Insurance Beneficiary form if you'd like, all beneficiary forms from your personnel file will be included, but you can submit another one and our office can certify.

INTERIM PAYMENTS

Interim Payment: Learn more about interim retirement pay | OPM.gov

EOPF/PERSONNEL FOLDER

<u>EHRI Electronic Official Personnel Folder (opm.gov)</u> This is the website if you'd like to look at your Electronic Personnel File, what is used to document your service history. You can request a username and password if you need.

DENTAL/VISION- BENEFEDS

<u>https://www.benefeds.com/</u> Dental/Vision providers, make sure to pay bills received from BENEFEDS until it comes out of your annuity check.

FEDERAL LONG TERM CARE INSURANCE

<u>https://www.ltcfeds.com/</u> Long term care insurance is available to employees, eligible family members, and retirees.

FEHB and Medicare Questions

Frequently Asked Questions : Insurance : Continuing FEHB Coverage into Retirement - OPM.gov

Coordination of Medicare and FEHB Benefits (opm.gov)

Medicare vs FEHB Enrollment (opm.gov)

Medicare (opm.gov)

TSP INFORMATION

<u>www.tsp.gov</u> Recommend setting up an online account to match your TSP, they will need to send you a post card so it may take a while. TSP is notified 45 days after your retirement application is submitted, which will open withdrawal options for you.

OPM ONLINE

Services Online (opm.gov) Once you get your CSA and PIN (8-10 weeks after retirement) can log in and make adjustments:

WHAT YOU CAN DO AFTER YOU SIGN IN

Get your monthly annuity payment statement to verify your income

Get your annual summary of payment

Verify life insurance enrollment (FEGLI)

Get your 1099-R tax form

Change your Federal and state income tax withholdings

Check your interim retirement pay status

View or print your retirement card

Start or change direct deposit

Start or change a checking or savings account allotment

Start or change allotment to an organization

Request a copy of your annuity booklet

Update your profile and contact information

Change your mailing address

DEATH BENEFITS

Frequently Asked Questions : Retirement : Death Benefits - OPM.gov

TAX INFORMATION/ ESTIMATE

Federal Tax Withholding Calculator (opm.gov)

Please speak with a financial advisor if you have any questions about state or Federal taxes. FEDERAL taxes are taken out of your retirement annuity. If you have state taxes you'll be able to submit your state tax status through OPM after retirement.