



# TFFR RETIRED MEMBER EMPLOYMENT NOTIFICATION (330)

NORTH DAKOTA RETIREMENT AND INVESTMENT OFFICE

TEACHERS' FUND FOR RETIREMENT DIVISION

SFN 52161 (11-2019)

**General Information:** State statutes (NDCC 15-39.1-19.1) allow a retired TFFR member to return to TFFR-covered employment under certain employment limitations. A summary of retiree employment options is outlined on the reverse side of this form. This form, along with a copy of the retiree's contract or employment agreement, must be submitted to the administrative office within 30 days of the retiree's return to covered employment **each year** the retiree is employed.

## Section 1: Completed by Retiree

Name of Retiree (First, Middle, Last)		Person ID	Telephone Number	Retirement Date
Employer	Position\Subject	Post Retirement – first day of work	Post Retirement – last day of work	
Number of Compensated Hours (Exclude Extra Curricular)	Salary (Include Extra Curricular)	Were you employed during the previous fiscal year? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Employer: Position:	

Select only one option for July 1 \_\_\_\_\_ - June 30 \_\_\_\_\_ fiscal year:

**General Rule - Annual Hour Limit**

- 9 month contract = 700 hours
- 10 month contract = 800 hours
- 11 month contract = 900 hours
- 12 month contract = 1,000 hours

**Exception A – Critical Shortage Area (CSA)**

Approved CSA  Yes  No  Subject Area  Geographic

ESPB Signature	Date
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**Exception B – Benefit Suspension and Recalculation**

Year 1  Year 2  Year 3  Year 4  Year 5

Approximate date annual hour limit is reached (first year only)

I certify that I have reviewed the retiree return to work options on the reverse of this form and understand the employment limitations and the payment of employee contribution requirements. The above information is a complete and accurate description of my employment arrangement. I will notify TFFR of any change in the employment relationship.

Signature of Retiree	Date
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## Section 2: Completed by Employer

Employer Name	Employer Number	Telephone Number	Written Employment Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach.
Business Manager Name	Superintendent Name		

I certify that I have reviewed the retiree return to work options on the reverse of this form and understand the employer reporting requirements including payment of employee and employer contributions on all retirement salary paid to a retiree based on our employer payment model. The above information is a complete and accurate description of the employment arrangement with the retired TFFR member. I will notify TFFR of any change in the employment arrangement.

Signature of Employer	Date
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### Return to:

ND Retirement and Investment Office  
 3442 East Century Avenue  
 PO Box 7100  
 Bismarck ND 58507-7100  
 Telephone: 701-328-9885  
 Toll free: 800-952-2970  
 Fax: 701-328-9897  
[www.nd.gov/rio](http://www.nd.gov/rio)

This form is available in an alternate format upon request.

### RIO Use Only

Letter Sent
Benefits Continue <input type="checkbox"/> Y <input type="checkbox"/> N
Benefits Suspended
Form Filed Within 30 Days <input type="checkbox"/> Y <input type="checkbox"/> N

### **Summary of Retiree Return to Work Options**

A retiree may return to TFFR covered employment under certain employment limitations. The limits apply to TFFR covered employment which includes teaching, supervisory, and administrative services in a ND public school or state institution covered by TFFR except for extracurricular duties and professional development. The limits **do not** apply to:

- Teaching in public colleges and universities
- Teaching in private schools
- Employment outside of education
- Employment outside of ND

Non-contracted substitute teaching does not apply to the annual hour limit. However, in-staff substitute teaching performed during an existing contract period does apply to the annual hour limit.

The employer and retiree are required to notify TFFR in writing within 30 days of the retiree's employment. Notification must be made each year the retiree is employed. Failure to notify TFFR will result in the loss of one month's annuity benefit for the retiree and \$250 penalty to the employer.

### **General Rule - Annual Hour Limit**

After 30 days elapse from the retirement date, a retiree may return to TFFR covered employment for a maximum number of hours in a fiscal year (July 1 – June 30) and continue to receive TFFR monthly retirement benefits. Employer and member contributions will be paid to TFFR on all retirement salary paid to the retiree (including extra curricular duties, professional development, and in-staff subbing). The member contributions will be added to the retiree's TFFR account value, but the monthly TFFR benefit amount will not be affected. The annual hour limit is based on the length of employment.

9 month contract =	700 hours
10 month contract =	800 hours
11 month contract =	900 hours
12 month contract =	1000 hours

### **Exception A – Critical Shortage Area**

A retiree may return to TFFR covered employment in an approved critical shortage area (CSA) and exceed the annual hour limitation without losing retirement benefits. If retired prior to January 1, 2001, no waiting period is required. However, if the retirement date is after January 1, 2001, a one-year waiting period is required. A retiree may perform non-contracted substitute teaching during the one-year waiting period. Critical shortage areas will be determined each year by the Education Standards and Practices Board (ESPB) by rule. Each year, the retiree must re-apply for this exception and receive verification that it remains a critical shortage area. As in the General Rule, retirement benefits will continue, employer and member contributions will be paid to TFFR on all retirement salary paid to the retiree, and the monthly TFFR benefit amount will not be affected.

### **Exception B – Benefit Suspension and Recalculation**

After 30 days elapse from the retirement date, a retiree may return to TFFR covered employment and exceed the annual hour limitation. Under this option, employer and member contributions will be paid to TFFR on all retirement salary paid to the retiree and the TFFR benefits will be suspended the first of the month following the month the annual hour limit is reached. A completed Member Action form is also required. Upon re-retirement, benefits will be recalculated. If the re-retirement occurs with:

- Less than 2 years of additional earned service credit – receive discontinued benefit plus benefit increases granted during the benefit suspension and a refund of the additional member contributions paid after the benefit suspension, plus interest. The member contributions paid prior to the benefit suspension will be added to the retiree's TFFR account value.
- 2-5 years – receive greater of the discontinued annuity, plus additional years at the current multiplier, plus benefit increases granted during the suspension **or** all the years recalculated at the current multiplier, less an actuarial offset for the amount of benefits already paid. All member contributions will be added to the retiree's TFFR account value.
- 5 or more years – receive greater of the calculation above or the retirement benefit recalculated using all the years at the current multiplier with no actuarial offset. All member contributions will be added to the retiree's TFFR account value.

**Additional retiree re-employment information can be found in the TFFR Handbook on our website—  
[www.nd.gov/rio](http://www.nd.gov/rio).**

**If you have any questions, please contact the administrative office.**