

RESERVE INCOME REPLACEMENT PROGRAM (RIRP) ELIGIBILITY VERIFICATION

PRIVACY ACT STATEMENT

AUTHORITY: Public Law 109-163, Div A, title VI, Subtitle A, Section 614(a), 119 Stat. 3292 or 37 USC Section 910, and Executive Order 9397.
PRINCIPAL PURPOSE: To verify a military member's entitlement to Reserve Income Replacement.
ROUTINE USE(S): Information may be released to appropriate agencies in the Department of Defense and the Department of Homeland Security to substantiate eligibility for the Reserve Income Replacement Program.
DISCLOSURE: Voluntary; however, failure to provide the requested information will preclude processing of the Reserve Income Replacement Program Eligibility Verification documentation which will prevent participation in the program.

PART I: DESIGNATED USE (*X appropriate box*) INITIAL SUBMISSION RESUBMISSION FOR CHANGES TO RIRP

PART II: MEMBER INFORMATION

1. MEMBER'S NAME (<i>Last, First, Middle</i>)	2. SSN	3. GRADE	4. CONTACT TELEPHONE NUMBER
5. ORGANIZATION (<i>Permanent Drilling Unit UIC/Unit of Assignment</i>)	6. SERVICE	7. EMAIL ADDRESS	

PART III: VERIFICATION OF QUALIFYING INVOLUNTARY ACTIVE DUTY (*NOTE: A copy of all orders MUST be attached to this request.*)

a. ACTIVE DUTY ORDERS	b. ACTIVE DUTY START DATE(S) (YYYYMMDD)	c. ACTIVE DUTY STOP DATE(S) (YYYYMMDD)	d. INVOLUNTARY ORDER AUTHORITY (10 USC 12301(a), 12301(g), 12302, 12304; 32 USC 502(f)(1), and 14 USC 712 (for USCG))	e. NAMED CONTINGENCY	f. CUMULATIVE TOTAL NUMBER OF COMPLETE QUALIFYING MONTHS OF INVOLUNTARY ACTIVE DUTY FROM ALL ORDERS (See Instructions Part III for computation)
(1) CURRENT					NUMBER OF FULL MONTHS: _____
(2) PRIOR					
(3) PRIOR					
(4) PRIOR					
(5) PRIOR					
(6) PRIOR					

PART IV: VERIFICATION OF PAYMENT DATES AND REASON CODE FOR RIRP (*RIRP Implementation Date is August 1, 2006.*)

a. FIRST FULL CALENDAR MONTH PAYMENT START DATE (YYYY/MM)	b. LAST FULL CALENDAR MONTH PAYMENT DATE (YYYY/MM)	c. ENTER ELIGIBILITY CRITERIA CODE (A, B, or C)	RIRP ELIGIBILITY CRITERIA
			A - Completed 18 continuous months of service on active duty under such an involuntary order(s). B - Completed 24 months on active duty during the previous 60 months under such involuntary orders beginning on or after 1 Aug 2001. C - Was involuntarily mobilized for service on active duty for a period of 180 days or more within six months or less following the member's separation from a previous period of involuntary active duty for a period of 180 days or more.

PART V: WORKSHEET FOR CALCULATING ESTIMATED MONTHLY ACTIVE DUTY INCOME DIFFERENTIAL

10. STEP I - VERIFIED AVERAGE MONTHLY CIVILIAN EARNED INCOME		
AVERAGE MONTHLY CIVILIAN EARNED INCOME (<i>See Instructions Part V(a) to calculate the Average Monthly Civilian Earned Income. A copy of all documents used to calculate monthly civilian earned income MUST be attached.</i>)		\$
11. STEP II - VERIFIED MEMBER INFORMATION USED TO DETERMINE MONTHLY REGULAR MILITARY COMPENSATION (RMC)		
a. PAY GRADE (<i>For resubmissions enter the effective date of change (YYYY/MM):</i> _____)		
b. YEARS OF SERVICE (<i>For resubmissions enter the effective date of change (YYYY/MM):</i> _____)		
c. IF LIVING OCONUS OR NOT RECEIVING BASIC ALLOWANCE FOR HOUSING, X THIS BOX AND PROCEED TO BLOCK 11.f., "FAMILY SIZE".	<input type="checkbox"/>	
d. ZIP CODE FOR PRIMARY RESIDENCE (<i>CONUS only</i>)		
e. MARRIED TO ANOTHER MILITARY MEMBER WHO IS SENIOR TO YOU AND IS CURRENTLY ON ACTIVE DUTY FOR GREATER THAN 30 DAYS (<i>X one</i>) (<i>For resubmissions enter the effective date the senior military member entered or left Active Duty (YYYY/MM):</i> _____)	<input type="checkbox"/> YES <input type="checkbox"/> NO	
f. FAMILY SIZE AS INDICATED ON FEDERAL INCOME TAX RETURN LINE 6d, IRS FORM 1040 (<i>For resubmissions enter the effective date of change (YYYY/MM):</i> _____)		
g. ESTIMATED ITEMIZED DEDUCTIONS (<i>Enter the dollar amount of the Estimated Itemized Deductions or the amount on line 40, IRS Form 1040, or enter 0 to accept standard deduction</i>)		
h. MONTHLY REGULAR MILITARY COMPENSATION (<i>From the OSD RIRP calculator</i>)		\$
12. STEP III - OTHER MONTHLY PAYS (<i>Approximation</i>)		
a. INCENTIVE PAY(S)		
b. BONUS PAYMENTS		
c. COLA (CONUS/OCONUS)		
d. SPECIAL DUTY ASSIGNMENT PAY		
e. HEALTH PROFESSIONAL SPECIAL PAYS		
f. FAMILY SEPARATION ALLOWANCES		
g. HARDSHIP DUTY PAY		
h. SPECIAL PAY FOR SEA DUTY		
i. HOSTILE FIRE/ IMMINENT DANGER PAY		
j. OVERSEAS HOUSING ALLOWANCE (OHA)		
k. OTHER (<i>Specify</i>)		
I. TOTAL OTHER MONTHLY PAYS		\$
13. STEP IV - TOTAL MONTHLY MILITARY COMPENSATION (<i>Add Total RMC (Step II) and Other Monthly Pays (Step III)</i>)		\$
14. STEP V - ESTIMATED MONTHLY ACTIVE DUTY INCOME DIFFERENTIAL (<i>Subtract Total Monthly Military Compensation (Step IV) from the Average Monthly Civilian Earned Income Amount (Step I).</i>) (<i>If the Monthly Active Duty Income Differential is greater than \$50.00 the Service submits a DD Form 2919, on behalf of the member, to the respective Service pay systems authority for final verification and payment.</i>)		\$

PART VI: MEMBER'S CERTIFICATION *(Select and initial the desired option.)*

_____ I do not meet the requirements for eligibility for Reserve Income Replacement.

(Initials)

_____ I have reviewed the above and I am requesting Reserve Income Replacement. I certify the above information is accurate to the best of my knowledge. I understand that knowingly making a false statement or claim against the United States Government is subject to disciplinary action under the Uniform Code of Military Justice. Furthermore, I understand that failure to comply with the applicable requirements may result in cancellation of my entitlement and may cause involuntary collection of any resulting indebtedness retroactive to the date the entitlement became erroneous.

(Initials)

15. MEMBER'S SIGNATURE

16. DATE

PART VII: SERVICE VERIFYING OFFICIAL

I have reviewed and verified that to the best of my knowledge, the above information is true and correct.

17. NAME OF CERTIFYING OFFICIAL *(Last, First, Middle)*

18. GRADE/RANK

19. TITLE

20. ORGANIZATION

21. SIGNATURE

22. DATE

23. NAME OF AUTHORIZING OFFICIAL *(Last, First, Middle)*

24. GRADE/RANK

25. TITLE

26. ORGANIZATION

27. SIGNATURE

28. DATE

**INSTRUCTIONS FOR COMPLETING DD FORM 2919,
RESERVE INCOME REPLACEMENT PROGRAM (RIRP) ELIGIBILITY VERIFICATION**

I. INITIAL SUBMISSION FOR RESERVE INCOME REPLACEMENT ELIGIBILITY VERIFICATION:

PART I: Mark (X) the box indicating an initial submission.

PART II: Member Information. Enter applicable Service member's information in blocks 1 through 7. In Block 2, for U.S. Coast Guard Reserve personnel use the Employee I.D. (EMPLID) number instead of the SSN.

PART III: Verification of Qualifying Involuntary Active Duty.

(a) Blocks 8.a., 8.b., 8.c.: List and attach active duty orders, in reverse chronological order, which establish eligibility for RIRP. For the purposes of RIRP, active duty is defined as: an involuntary mobilization order under 12301(a), 12301(g), 12302, or 12304 of title 10, U.S.C., or order to full-time National Guard duty under section 502(f)(1) of Title 32, U.S.C., and section 712 of title 14 U.S.C. for members of the Coast Guard.

(b) Block 8.d.: Cite the appropriate order (statute) authorization for each set of orders entered (i.e., 10 U.S.C. 12301(a)).

(c) Block 8.e.: Enter the name of the contingency each order supports (i.e., Enduring Freedom, Iraqi Freedom, etc.).

(d) Block 8.f.: Enter only the cumulative number of full months of involuntary active duty derived from the orders listed in block 8.a.(1) through (6); do not enter any remaining days (partial month). Complete, or full, months of active duty necessary to qualify for RIRP are determined as follows:

(i) Through continuous active duty under one set of involuntary orders, or accumulated through successive involuntary active duty orders provided no break in service has occurred. Full months will be used for determining eligibility. For example: if continuous service on active duty began on February 15, 2006, the 18 months to establish eligibility would end at midnight on August 14, 2007 (RIRP Eligibility Criteria "A").

(ii) Twenty-four (24) cumulative months of involuntary active duty during the previous sixty (60) months. The member must be on active duty for an entire, or full, month. For the purposes of RIRP, the 60-month period will begin on or after August 1, 2001. Partial or increments of months of active duty will not be credited or combined to equal a full month(s) of active duty. For example, a member involuntarily ordered to 45 days of active duty from April 1, 2006 to May 15, 2006 receives credit for only one month of active duty (1-30 April) for RIRP purposes (RIRP Eligibility Criteria "B").

(iii) Involuntary active duty for a period of 180 days or more which commenced within six months following the member's separation from a previous period of involuntary active duty for a period of 180 days or more. For the purposes of the 180-day criterion, it is a day-for-day count of all days on continuous active duty. For the purposes of the six-month interim period, only full consecutive months will be used to determine this period. For example, a month that begins on February 14 shall end at midnight on March 13 (RIRP Eligibility Criteria "C").

PART IV: Verification of Pay Dates and Reason Code for RIRP:

A reserve component member is entitled to receive a payment for any full calendar month of active duty under an involuntary mobilization order, following the date on which a member: (1) completes 18 continuous months of service on active duty under such an order (**Eligibility Criteria "A"**), (2) completes 24 months on active duty during the previous 60 months under such an order (**Eligibility Criteria "B"**), or (3) is involuntarily mobilized for service on active duty for a period of 180 days or more within six months or less following the member's separation from a previous period of involuntary active duty for a period of 180 days or more (**Eligibility Criteria "C"**).

(a) Block 9.a.: Enter the first full calendar month following the month in which the member's eligibility is established (i.e., if eligibility is established as of 15 July 2006, the first full month for payment would be August 2006. Enter 2006/08 in block 9.a.). Payments are based on full calendar months of qualifying service and paid on a monthly basis. The RIRP payments will begin in August 2006.

(b) Block 9.b.: Enter the last full calendar month that a member will receive a RIRP payment (i.e., if the last eligible month to receive a payment is April 2007, enter 2007/04 in block 9.b.).

(c) Block 9.c.: Enter the applicable eligibility criteria code (A, B, or C) that qualifies the member to receive reserve income replacement as determined from block 8.

PART V: Worksheet for Calculation of Reserve Income Replacement.

(a) Block 10, Step I: Enter member's average monthly civilian earned income in the space provided in block 10. Earned average monthly civilian income is the member's total earned income for the 12 full months immediately preceding mobilization, divided by 12, or the member's earned income reported on the most recent Federal income tax filing that covers 12 months prior to mobilization divided by 12. Earned income is defined as wages, salaries, tips, professional fees, other compensation received for personal services and employee compensation included in gross income plus any net earnings from self-employment for the taxable year. Earned income includes taxable compensation received by members of the Reserve components (to include the National Guard) for the performance of Reserve duties. Generally income reflected on Item 1 of an individual's W-2 form as reported on lines 7, 12, and 18 of IRS Form 1040. In the case of a member who files Federal income tax jointly with a spouse, record only the earned income attributable to the member.

(b) Block 11, Step II: To determine monthly Regular Military Compensation (RMC), complete blocks 11.a. through 11.g., then access the Office of the Secretary of Defense RIRP calculator at the Income Replacement window on the Office of the Assistant Secretary of Defense for Reserve Affairs Home Page at <http://www.defenselink.mil/ra/>. The RIRP calculator will automatically calculate the RMC. Enter this amount in block 11.h.

(c) Blocks 12.a. through 12.l., Step III: Enter the approximate dollar amount of any and all other monthly special pays or allowances a member receives or anticipates receiving on the first month he/she becomes entitled to receive reserve income replacement (the actual amounts will be completed and verified by the servicing payroll office if a member qualifies for reserve income replacement). Total the amount of blocks 12.a. through 12.k. and enter this amount in block 12.l.

(d) Block 13, Step IV: Compute total monthly military compensation by adding blocks 11.h. and 12.l. and enter this amount in block 13.

(e) Block 14, Step V: Compute the Estimated Monthly Active Duty Income Differential, as explained in block 14, and enter the amount in block 14. If the differential is more than \$50.00, the Service shall submit the member's DD Form 2919 to the Defense Finance and Accounting Service, or the Coast Guard Personnel Services Center for Coast Guard Reserve members, for final validation and appropriate payment.

PART VI: Initialed and signed by the Service member. Subsequent changes in a member's military pay grade, years of service and family size that could affect monthly payments may be submitted by the member's Service, with or without the member's signature (see below).

PART VII (Initial submission): Completed by the Service Representative and forwarded to the respective Service pay system authorities for processing and initiation of RIRP payments.

II. RESUBMISSION OF RESERVE INCOME REPLACEMENT ELIGIBILITY VERIFICATION:

Resubmit a request for continued RIRP payments, for members already receiving monthly payments, when a member's entitlement changes due to a change in: a member's demobilization date, in pay grade, years of service for pay purposes, in BAH when the senior spouse of a military member married to another member is ordered to active duty for greater than 30 days or is released from active duty, or in family size. Changes will be reflected in the RIRP payment in the month following the change. For all resubmissions complete the following portions of the DD Form 2919:

PART I: Mark (X) the box indicating a resubmission.

PART II: Enter Service member's information in blocks 1 through 7.

PART III: Block 8.c.(1): If a member's demobilization date has changed, enter the revised active duty stop date in block 8.c.(1) and attach a copy of the applicable order to the form.

PART IV: Block 9.b.: If there has been a change to the member's demobilization date, enter the revised last full calendar month that a member will be eligible to receive RIRP payment.

PART V: Block 11, Step II: To recompute Regular Military Compensation (RMC), complete blocks 11.a. through 11.g., making sure to enter the effective date of any change in a member's demobilization date, or in pay grade, years of service for pay purposes, in BAH when the senior spouse of a military member married to another member is ordered to active duty for greater than 30 days or is released from active duty, or in family size (blocks 11.a., b., e., or f.) then access the Office of the Secretary of Defense RIRP calculator (see above).

PART VI: To be initialed and signed by the Service member if he/she is available. Resubmissions may be initiated by the member's Service, with or without the member's signature.

PART VII (For resubmissions): Completed by the Service Representative and forwarded to the respective Service pay system authorities for processing if a change in Reserve Income Replacement for the member is indicated.