Non-Contributing List (NCL)

Presented by: OPERS Employer Services





What is a Non-Contributing List?

A list of individuals who, in the prior year, provided services to the employer and were classified as an independent contractor or any other classification other than a public employee.

Included on NCL

Independent contractors

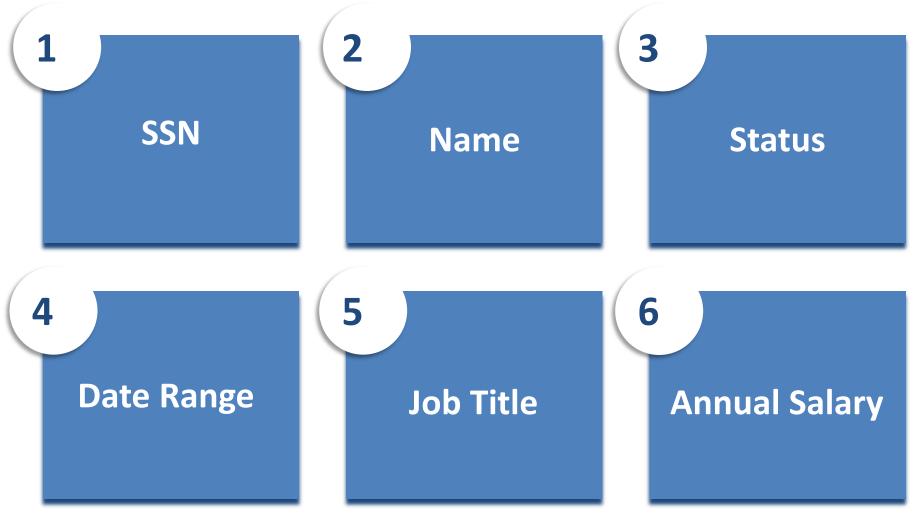
Individuals paid non-earnable salary

Elected officials who have opted out

Individuals excluded from membership

Ohio Public Employees Retirement System

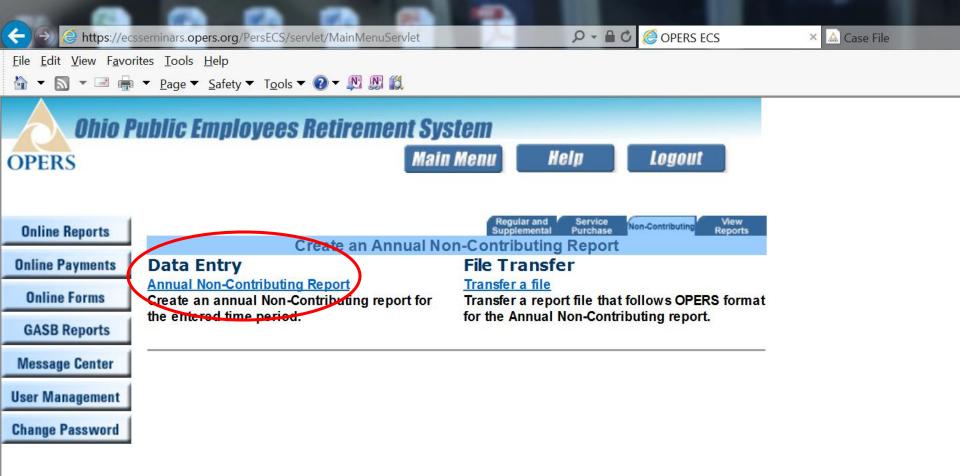
Data reported on the NCL

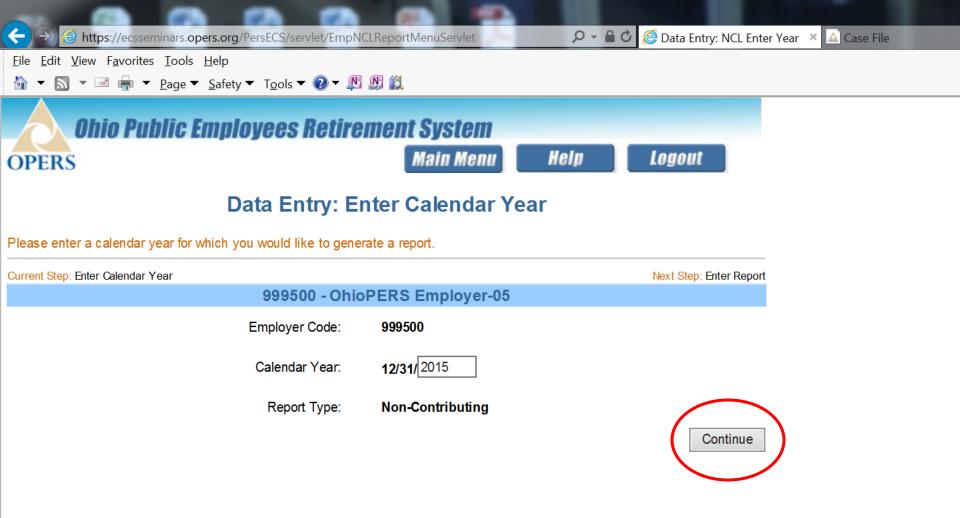


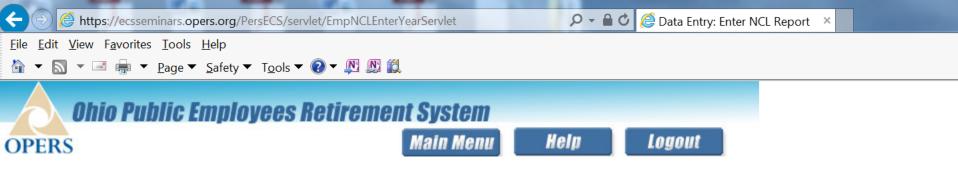
Ohio Public Employees Retirement System

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Online Forms	Welcome		_	
GASB Reports	ECS Tip: Certifying Changes for Authorized	Recent Activity		
Message Center	Contacts	Message Center		
User Management Change Password	Due to the recent elections, some employers may have changes for the authorized contact(s) for OPERS purposes. OPERS needs to be notified of any changes concerning authorized contacts to prevent any delay in reporting and communication. The Employer Contact Distribution List provides			
	a way for the employer to update the main contact information assign appropriate contact reasons for each contact and	Pending Requests		
	designate the individual(s) who are authorized signers. This list requires a co-signer if the employer has a single point of	Certification of Final Payroll <u>4</u>		
	contact. Requesting the list before a change occurs allows for a valid alternate signature.	Clarifications Rejected Large Earnings 2		
	vana alternate signature.	Large Earnings Inquiries 5		
	To request the Employer Contact Distribution List, contact your	Search by Employee 7		
	employer account representative at 888-400-0965 or by e-mail at, <u>employeroutreach@opers.org</u> .	Reporting Last Submission Date 02/01/2012		
		PaymentsLast Payment DateN/ALast Payment AmountN/AReturned Payments0		

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GASB Reports	the entered time period.	for the Annual Non-Contributing report.	
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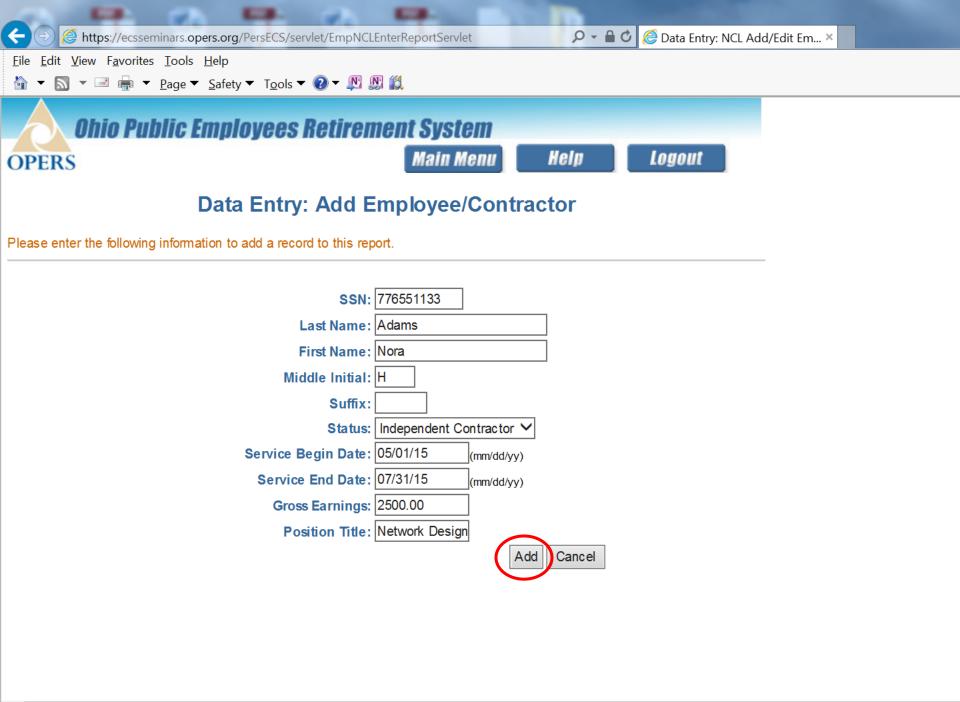
Data Entry: Enter Report

To complete this report, please enter the employment information for each employee/contractor in the appropriate field. To add employees to the report, click the "Add Employees" button and complete the information on the pop-up screen. Please do not click "Submit Report for Verification" until you have finished filling in all pages of the report.

If you are entering a large report, please save your report frequently to prevent loss of data.

WARNING: Your report session will expire in the next 30 minutes. Please save your report frequently to avoid loss of data.

Current S	Step: Enter	Report			Next	Step: Verify Report	
	OhioPERS Employer-05 - 999500						
	Emp	loyer Code:	Employer Name:	Calendar '	Year:		
		999500	Ohio	PERS Employer-05	2015		
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Name	SSN/ID	Status	Service Begin MM/DD/YYYY	Service End MM/DD/YYYY	Gross Earnings	Position Title	
There a	are no e	mployees in	this report				
Name	SSN/ID	Status	Service Begin MM/DD/YYYY	Service End MM/DD/YYYY	Gross Earnings	Position Title	
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G s	ave	+ Add Employee/ Contractor	$\mathbf{)}$		√i	Submit Report or Verification	
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Data Entry: Enter Report

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WARNING: Your report session will expire in the next 30 minutes. Please save your report frequently to avoid loss of data.

Current Step: Enter Report					Ne	ext Step: Verify Report
	OhioPERS Employer-05 - 999500					
Employer Code:			Employer Name	e:	Calenda	r Year:
999500			OhioPERS Employe	er-05	201	15
1 - 1 of 1 Records				Previous Page	Page 1 of 1 Go	Next Page 🕨
Name	SSN/ID	Status	Service Begin MM/DD/YYYY	Service End MM/DD/YY	YYY Gross Earnings	Position Title
ADAMS, NORA H	776551133	T	05/01/2015	07/31/2015	2,500.00 N	ETWORK DESIGNER
Name	SSN/ID	Status	Service Begin MM/DD/YYYY	Service End MM/DD/YY	YYY Gross Earnings	Position Title
1 - 1 of 1 Records				Previous Page	Page 1 of 1 Go	Next Page 🕨
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To complete this report, please enter the employment information for each employee/contractor in the appropriate field. To add employees to the report, click the "Add Employees" button and complete the information on the pop-up screen. Please do not click "Submit Report for Verification" until you have finished filling in all pages of the report.

If you are entering a large report, please save your report frequently to prevent loss of data.

WARNING: Your report session will expire in the next 29 minutes with no activity. Please save your report frequently to avoid loss of data.

Current Step: Enter Report						Next Step: Verify Report
		C	DhioPERS Employer	-05 - 999500		
Employer Code:			Employer Nam	e:	Calen	idar Year:
999500			OhioPERS Employ	er-05		2015
1 - 4 of 4 Records				Previous Page	Page 1 of 1	Go Next Page >
Name	SSN/ID	Status	Service Begin MM/DD/YYYY	Service End MM/DD/Y	YYY Gross Earnings	Position Title
ADAMS, NORA H	776551133	I.	05/01/2015	07/31/2015	2,500.00	NETWORK DESIGNER
JONES, GREGORY A	661773321	Е	01/01/2015	12/31/2015	1,200.00	COUNCIL MEMBER
SMITH, ADAM	772991515	Ν	01/01/2015	12/31/2015	6,500.00	BLDG INSPECTOR
WILLIAMS, HEIDIL	449772231	х	04/01/2015	12/31/2015	5,000.00	FIREFIGHTER
Name	SSN/ID	Status	Service Begin MM/DD/YYYY	Service End MM/DD/Y	YYY Gross Earnings	Position Title
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Data Entry: Verify Report

To complete this report, please enter the employment information for each employee/contractor in the appropriate field. To add employees to the report, click the "Submit to OPERS" button to complete the submission process. Your report will be submitted to OPERS until you complete this step.

If you wish to change any information on the report, click the "Back to Report" to make your updates.

Current Step: Verify Report			Next Step: Confirm Report
Employer Code	Employer Name	Calendar Year	Report Details
999500	OhioPERS Employer-05	2015	View
		Back to Report	Submit to OPERS

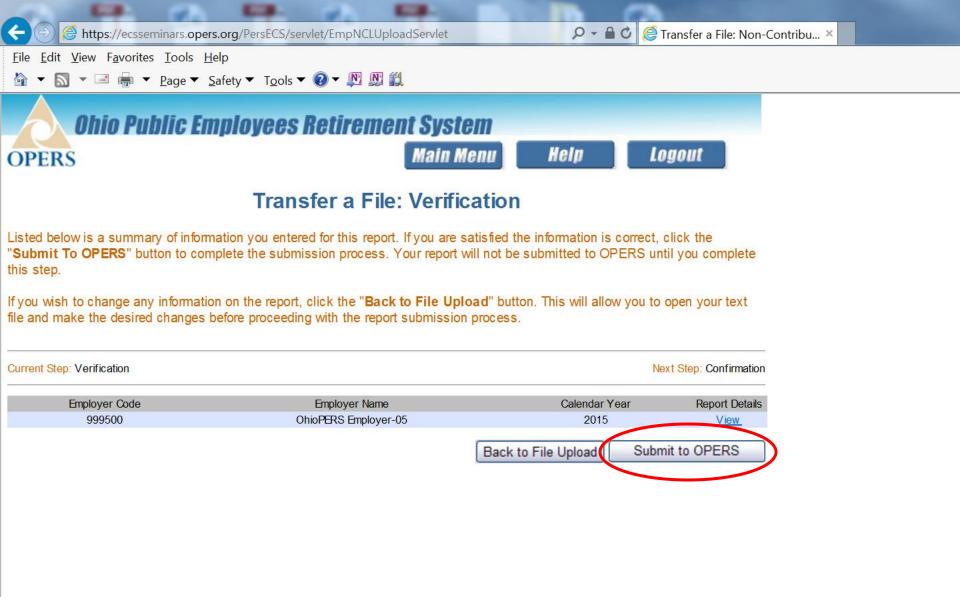
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	Data Entry:	Submitted		
Your 2015 Non-Contribution report has	been successfully submitte	d to OPERS.		
Current Step:Report Submitted				
	Submitted Date/Time:	04/13/2016 02:20 PM		
	Submitted By:			
	Report Type:	Non-Contributing		
Employer Code	Employer Name	Calendar Year	Report Details	
999500	OhioPERS Employer-05	2015	<u>Print</u>	
If you have any questions, please sen Employer Call Center at 1-888-400-09		essage Center, or contact the OPERS	Done	

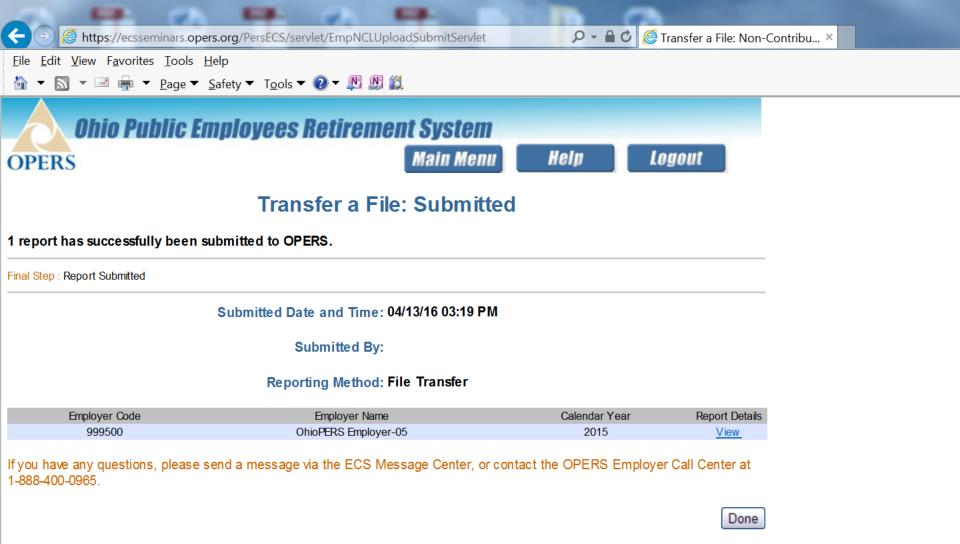
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GASB Reports	the entered time period.	for the Annual Non-Contributing report.	
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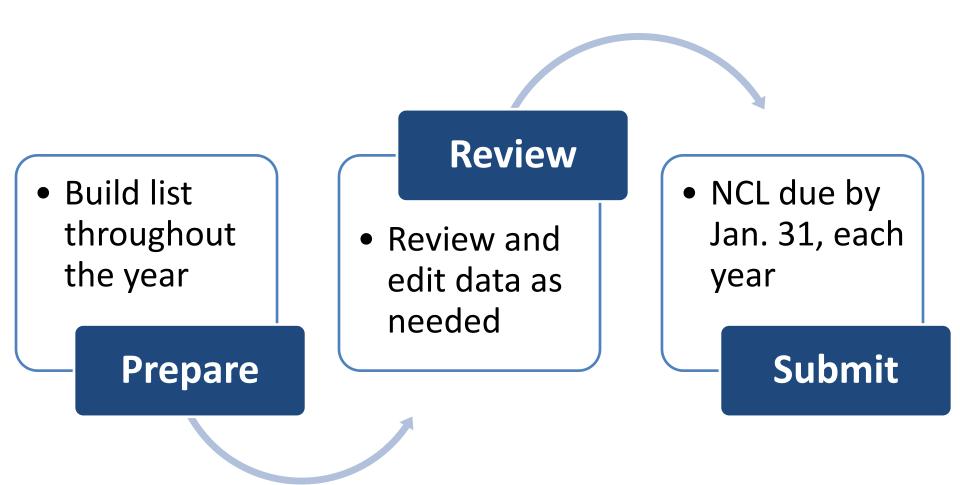
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Current Step: Locate Non-Contributing File		Next \$	Step: Report Verification
	OhioPERS Employer-05 - 999500		
File Location:	C:\Users\Inorman\Desktop\NCLReport999500.txt	Browse	
Submitting a file may take a fe	w minutes. Please do not press any buttons	in your bro	Submit Report for Verification





Non-Contributing List



Employer Services

Call Center: Fax: 888-400-0965 614-857-1152

Email:

employeroutreach @opers.org

Website:

www.opers.org