Dependent/Spouse
Graduate Tuition Remission
Taxation Form

Date: _____________________________________________________

Employee Name: _____________________________________________________

Employee “C” Number: _____________________________________________________

Dependent/Spouse Name: _____________________________________________________

Name of graduate program: _____________________________________________________

The following is an estimate of the number of graduate course credits my dependent/spouse plans to take during the 20____ calendar year. Please begin taxing my payroll check as soon as possible, so that I may avoid heavy taxation at the end of the calendar year.

I understand that I should submit a revised form to notify HR-Benefits of any changes in graduate course credits during the year.

<table>
<thead>
<tr>
<th></th>
<th># of credits</th>
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<tbody>
<tr>
<td>Spring</td>
<td></td>
</tr>
<tr>
<td>Summer I</td>
<td></td>
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<tr>
<td>Summer II</td>
<td></td>
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<td>Fall</td>
<td></td>
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</tbody>
</table>

NOTE: Incomplete forms cannot be processed.

Signature of Employee: ___________________________ Date: ________________

For questions regarding Graduate Tuition Remission Taxation, please contact HR-Benefits at 305-284-3004 or complete the online form at www.miami.edu/benefits/ask.

Submit completed form to:
(Fax) 305-284-4568  OR (Email) benefitsmessages@miami.edu