THE RESEARCH FOUNDATION
The State University of New York

Dependent Tax Affidavit for Enrolling Domestic Partner in the Benefits Program

STATE OF)
SS:
COUNTY OF)

The undersigned, being duly sworn, depose and declare as follows:

My domestic partner, _____,
(Name and Social Security Number)

fully qualifies as my dependent under Internal Revenue Code rule 152. I understand that if my partner's dependent status under IRC 152 changes at any time during the tax year, I will be responsible for reporting and paying tax on any resulting imputed income.

_____
Print Name (Enrollee)

_____
Address

_____
Address

_____
Signature

Sworn to before me this day of _____.
Date

_____
Notary Public

Note: *It is recommended that you seek the advice of an attorney prior to completing this affidavit.*