## **REPORT ON EXEMPTION FOR DEPENDENTS, ETC. FOR XXXX**

To: Hongo Tax office

This form is to file your exemption for spouses, dependents, and disabled This form is still needed to be submitted despite of no dependents.

This form can be submitted to only one employer even if you have multiple.

Name of employer: Employer's ID #	University of Tokyo	(Name in Katakana)		Date of Birth			
		Name of Employee	ISignature or Har	(YYYY/MM/DD iko )			
Employer's ID #		Individual Number(12 digits)	Head of Fam	ily	Relationship		
Employer's Address	7-3-1 Hongo, Bunkyo-ku, Tokyo	Present home address:			Spouse	Yes No	

	NameName Individual Number (12 digits)	Relationship	Date of Birth (YYYY/MM/DD)	Elderly qualified dependent DOB before 1/1/1947	Special Dependent DOB 1/2/94-1/1/98		Address	Estim 	ate Income Fact of dependency	Reason for change
Exemption for Spouses	Spouse Name	-////						 Yes	;	
Exemption for Dependent (older than 16 years old)	1 Name ID #	-						 Yes	;	
	2 Name  ID #	-						- Tes	\$ <b></b>	•
	3 Name	-						 Yes	,	•
	4 Name I	-						· _ Yes	; <b></b> -	
	5 Name	-						- Ye	s <b></b>	
0	1. Disabled	Taxpayer	Exempt spouse	Exempt Dependent	2 Widow (	yourself)		(	Mark up wher	e applicable.
	Disabled					widow (yourself)				
	Special Disabled Special disabilities living with the taxpayer					r (yourself) g student (yourself)				
Exempt dependent other tax payer takes the exemption	Nama		Date of Birth (YYYY/MM/DD)	Address		Information of the	the taxpayer who takes the exemption		an abanas	
	Name	Relationship				Name	Relationship	Address	Reason	for change

## Name Individual Number (12digits) Relationship (12digits) Date of Birth (YYYY/MW/DD) Address Non-resident Dependent Estimated Income Reason for change (if any within 2016) Exemption for Dependent (younger than 16) Image: Comparison of the second of th