



**ADOPTION REIMBURSEMENT CLAIM FORM**

<b>EMPLOYEE INFORMATION (please print)</b>	
<b>Name (Last, First, Middle Initial):</b>	
<b>Department:</b>	<b>EE ID:</b>

<b>CONTACT INFORMATION</b>			
<b>Home Address:</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Email:</b>		<b>Daytime Phone:</b>	

<b>CHILD INFORMATION</b>		
<b>Child's Name:</b>	<b>Date of Birth:</b>	<b>Original Country of Birth or Residence:</b>
<b>Date Adoption was Finalized:</b>		<b>Date of Placement:</b>

**EXPENSES (Attach copies of the adoption agreement and itemized receipts )**

<b>Date(s) of Service</b>	<b>Service Provider</b>	<b>Type of Service (Fees, Travel or Medical Expense)</b>	<b>Amount (\$)</b>

**I certify that all statements and documentation submitted by me or on my behalf relating to this claim are complete and true. I understand that I must notify the Employee Service Center of any change regarding the adoption.**

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
**Today's Date (xx/xx/xxxx)**

## YALE UNIVERSITY ADOPTION REIMBURSEMENT PROGRAM

Effective January 1, 2011, Yale will reimburse Eligible Employees for Qualified Adoption Expenses up to \$5,000 per finalized adoption on or after January 1, 2011 under the Yale University Adoption Reimbursement Program (the "Program") set forth below.

### Eligibility

*Eligible Employees:* You are an "Eligible Employee" if you are (i) a faculty member who regularly works 50% or more of the required full-time workload or (ii) a Managerial & Professional staff member who regularly works 20 hours or more per week. An Eligible Employee does not include post-doctoral/graduate fellow, post-doctoral/graduate associate, casual employee, temporary employee, any individual whose employment is incidental to his or her educational or training program, or employees whose terms of employment are the subject of collective bargaining unless the collective bargaining agreement specifies eligibility.

*Eligible Child:* An "Eligible Child" is any individual who, at the time the Qualified Adoption Expenses are paid, is under the age of 18 or is physically or mentally incapable of caring for him or herself and is being adopted by an Eligible Employee. An Eligible Child does not include a blood relative or a child or blood relative of your spouse, same sex spouse, civil union partner, or domestic partner.

### Benefit Amount

Reimbursement for Qualified Adoption Expenses (as described below) will only be made after a finalized adoption of an Eligible Child and if you are an Eligible Employee at the time that the expense was paid and the reimbursement is requested. The Program will reimburse up to \$5,000 of Qualified Adoption Expenses per Eligible Child. Qualifying Adoption Expenses paid in an unsuccessful attempt to adopt an otherwise Eligible Child are eligible for reimbursement following the successful completion of an adoption of another Eligible Child but any such reimbursement shall be applied against a single \$5,000 limit.

### Qualified Adoption Expenses

"Qualifying Adoption Expenses" are reasonable and necessary adoption related expenses (as defined in Section 36C(d)(1) of the Internal Revenue Code), and currently include:

- Domestic and foreign agency and placement fees;
- Counseling fees associated with the placement and initial adjustment;
- Immigration, immunization, and translation fees;
- Temporary foster care provided before placement of the Eligible Child in your home;
- Home inspections costs;
- Medical expenses paid on behalf of the Eligible Child prior to adoption that are not otherwise covered by insurance; and
- Travel expenses (including amounts expended for meals and lodging while away from home)

Qualifying Adoption Expenses do not include the following expenses:

- Expenses paid while not an Eligible Employee
- Expenses paid in violation of state or federal law;
- Expenses paid in carrying out any surrogate parenting arrangement;
- Expenses for establishing legal guardianship;
- Expenses paid for the routine care of an Eligible Child;
- Expenses reimbursed under another program; and
- Expenses claimed as a credit on your personal tax return.

### Tax Exclusion or Tax Credit?

This tax information described in this Section is not intended to give specific tax or legal advice; the information provided is a summary of the current tax laws as they apply to the Program. The tax laws regarding the adoption tax credit are complicated and they affect different individuals in different ways. A professional tax advisor is your best source of information about whether you should seek reimbursement of Qualifying Adoption Expenses from the Program or claim the tax credit. You may also obtain further information from IRS Form 8839, Qualified Adoption Expenses and its instructions that can be obtained from the IRS website at [www.irs.gov](http://www.irs.gov).

### Reimbursement Procedures

Eligible employees may apply for reimbursement of qualified adoption expenses upon placement of the eligible child in the employee's home. Applications for reimbursement must be made within six (6) months following the finalization of the adoption.

Submit the completed adoption reimbursement claim form with verifying documents and invoices to:

**Employee Service Center**  
**221 Whitney Ave.**  
**P.O. Box 208256**  
**New Haven, CT 06520-8256**

*This program description summarizes the major features of the Program as in effect on January 1, 2011 but it is not intended as a substitute for the legal plan document. If a provision in the legal plan document and this program description conflict, the provisions of the legal plan documents will control. The University also retains the right to terminate or change the Program at anytime.*

**Questions? Contact [employee.services@yale.edu](mailto:employee.services@yale.edu)**