I have been informed concerning, and agree to, the following conditions:

1. That this contribution limit formula is subject to retroactive opinions and rulings issued and to be issued by the Internal Revenue Service affecting Section 403(b) and Section 415 of the Internal Revenue Code of 1986, as amended (the Code).

2. I am responsible for ensuring that the proper amounts are calculated based upon my own factual situation. I understand that this worksheet is used only for guidance and does not cover all possible factual variations which may affect the calculation of my contribution limit formula.

3. Any change in interpretation of applicable sections of the Code may require recalculation of this contribution limit formula and a change in the amount and/or tax status of annuities purchased under provisions of the Code.

4. In the event of any adverse ruling by the Internal Revenue Service regarding the calculation of this contribution limit formula or my purchase of tax sheltered annuities, I agree that I am responsible to the Internal Revenue Service for the satisfaction of any federal income tax deficiency and agree that The University of Texas System has my permission to make such adjustments in the amount of my contribution limit formula as is deemed necessary by the University for compliance with such rulings.

________________________________
Employee Signature

______________________________
Employee Name

______________________________
Employee Identifier

______________________________
Date

Revised: 1/6/05