

## **Australian Government**

**Australian Taxation Office** 

Tax file number declaration

This declaration is NOT an application for a tax file number.

■ Use a black or blue pen and print clearly in BLOCK LETTERS.

■ Print X in the appropriate boxes.

	ato.gov.au ■ Read all the instructions	including the privacy statement before you complete this declaration.
S	ection A: To be completed by the PAYEE	5 What is your primary e-mail address?
1	What is your tax file number (TFN)?	
	For more information, see question 1 on page 2  OR I have made a separate application/enquiry to the ATO for a new or existing TFN.  OR I am claiming an exemption because I am under	Day Month Year
	of the instructions.  18 years of age and do not earn enough to pay tax.  OR I am claiming an exemption because I am in	6 What is your date of birth?
	receipt of a pension, benefit or allowance.	7 On what basis are you paid? (select only one) Full-time Part-time Labour Superannuation Casual
2	What is your name? Title: Mr Mrs Miss Ms Surname or family name	employment employment fire from or annuity employment income stream
	First given name	8 Are you: (select only one)  An Australian resident
	Other shap person	9 Do you want to claim the tax-free threshold from this payer?
	Other given names	Only claim the tax-free threshold from one payer at a time, unless your total income from all sources for the financial year will be less than the tax-free threshold.
3	What is your home address in Australia?	Yes No No Answer no here if you are a foreign resident or working holiday maker, except if you are a foreign resident in receipt of an Australian Government pension or allowance.
		10 Do you have a Higher Education Loan Program (HELP), VET Student Loan (VSL), Financial Supplement (FS), Student Start-up Loan (SSL) or
	Suburb/town/locality	Trade Support Loan (TSL) debt?  Your payer will withhold additional amounts to cover any compulsory
	State/territory Postcode	repayment that may be raised on your notice of assessment.  DECLARATION by payee: I declare that the information I have given is true and correct.
	States territory 1 districted	Signature Date
4	If you have changed your name since you last dealt with the ATO, provide your previous family name.	You MUST SIGN here  Day Month Year  Year
		There are penalties for deliberately making a false or misleading statement.
Once section A is completed and signed, give it to your payer to complete section B.		
S	ection B: To be completed by the PAYER (if you are n	ot lodging online)
1	What is your Australian business number (ABN) or Branch number withholding payer number?  Branch number (if applicable)	5 What is your primary e-mail address?
	withholding payer number? (if applicable)	
2	If you don't have an ABN or withholding payer number, have you applied for one?	
3	What is your legal name or registered business name	6 Who is your contact person?
	(or your individual name if not in business)?	Business phone number
		7 If you no longer make payments to this payee, print X in this box.  DECLARATION by payer: I declare that the information I have given is true and correct.
4	What is your business address?	Signature of payer  Date
		Day Month Year
	Suburb/town/locality	There are penalties for deliberately making a false or misleading statement.
	State/territory Postcode	Return the completed original ATO copy to:  Australian Taxation Office PO Box 9004 PENRITH NSW 2740  IMPORTANT See next page for: Impayer obligations In lodging online,
		is loughly online,

