	ORIGINAL – ATO copy
	<b>Tax file number declaration</b> This declaration is NOT an application for a tax file number.
	<ul> <li>Use a black or blue pen and print clearly in BLOCK LETTERS.</li> <li>Print X in the appropriate boxes.</li> <li>Read all the instructions including the privacy statement before you complete this declaration.</li> </ul>
Section A: To be completed by the	PAYEE   6 On what basis are you paid? (Select only one.)
1     What is your tax file number (TFN)?	Full-time     Part-time     Labour     Superannuation or annuity income stream     Casual employment
<ul> <li>For more information, see question 1 on page 2 of the instructions.</li> <li>OR I have made a separa the ATO for OR I am claiming an exemp 18 years of age and do not</li> </ul>	or a new or existing TFN / Are you an Australian resident for tax purposes? Yes No at question 8. (Visit ato.gov.au/residency to check)
receipt of a pensi	8 Do you want to claim the tax-free threshold from this payer?         remption because I am in ion, benefit or allowance.         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.
2 What is your name? Title: Mr Mrs	Miss Ms Ms No No No Answer no at questions 9 and 10 unless you are a foreign resident claiming a seniors and pensioners, zone or overseas forces tax offset.
First given name	9       Do you want to claim the seniors and pensioners tax offset by reducing the amount withheld from payments made to you?         Yes       Complete a Withholding declaration (NAT 3093), but only if you are claiming the tax-free threshold from this payer if you have
	more than one payer, see page 3 of the instructions.
3 If you have changed your name since you last deal	10 Do you want to claim a zone, overseas forces or invalid and invalid carer tax offset by reducing the amount withheld from payments made to you?           It with the ATO,
provide your previous family name.	Yes       Complete a Withholding declaration (NAT 3093).       No         11 (a) Do you have a Higher Education Loan Program (HELP) or
	Month Year Your payer will withhold additional amounts to cover any compulsory
4 What is your date of birth? / 5 What is your home address in Australia?	(b) Do you have a Financial Supplement debt?
	Yes Your payer will withhold additional amounts to cover any compulsory No 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. Signature
Suburb/town/locality	You MUST SIGN here     Day     Month     Year
State/territory Postcode	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.	
Section B: <b>To be completed by the PAYER</b> (if you are not lodging online) <b>1 What is your Australian business number (ABN) or</b> Branch number <b>  4 What is your business address?</b>	
your withholding payer number?	
2 If you don't have an ABN or withholding payer num	nber,
have you applied for one? Yes No	Suburb/town/locality
3 What is your legal name or registered business nai (or your individual name if not in business)?	me State/territory Postcode
	5 Who is your contact person?
	Business phone number
<b>6</b> If you no longer make payments to this payee, print X in this box.         Signature of payer	
Date	Month       Year       Return the completed original ATO copy to:       IMPORTANT         For WA, SA, NT, VIC or TAS       For NSW, QLD or ACT       See reverse side of         Australian Taxation Office       Australian Taxation Office       PO Box 9004         PO Box 795       PO Box 9004       Dayer obligations
ALBURY NSW 2640 PENRITH NSW 2740 I lodging online.	
	Sensitive (when completed) 30920715

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