

Withholding Declaration

Complete this declaration to authorise your payer to adjust the amount withheld from payments made to you.

1. What is your name?

Title Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

Given names

2. What is your date of birth?

Day	Month	Year
/	/	

3. What is your tax file number (TFN)?

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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If you have not provided your TFN, indicate if any of the following reasons apply:

<input type="checkbox"/> I have lodged a TFN application	<input type="checkbox"/> I am claiming an exemption because I am a pensioner	<input type="checkbox"/> I am claiming an exemption because I am under 18 and do not earn enough to pay tax
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4. Are you? (select only one)

<input type="checkbox"/> An Australian resident for tax purposes	<input type="checkbox"/> A foreign resident for tax purposes
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5. Do you want to claim the tax-free threshold from this payer?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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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.

Declaration by Payee

I declare that the information I have given on this form is true and correct.

Signature of Payee

Day Month Year

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We recommend you consult with the Australian Tax Office (ATO) or seek professional tax advice to determine your specific obligations regarding the completion of this withholding declaration.