

UTR
Tax reference
Employer reference

Issue address

Date

HM Revenue & Customs office address

Telephone

For
Reference

Your Tax Return

This Notice requires you, by law, to make a return of your taxable income and capital gains, and any documents requested, for the year from 6 April 2008 to 5 April 2009.

Deadlines

We must receive your Tax Return by either:

- **31 October 2009** - if you are going to send us a **paper** Return, or
- **31 January 2010** - if you are going to file **online**.

Please note the new filing date for paper Returns.

You will be charged a **£100 penalty** if your Tax Return is received after the appropriate deadline. If you pay late you will be charged interest and possibly a surcharge.

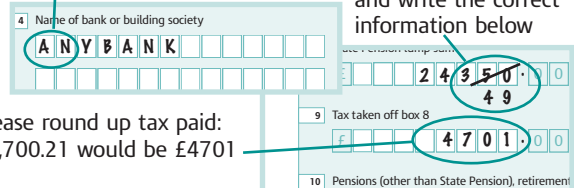
To file online, go to www.hmrc.gov.uk and under *do it online* select *Self Assessment*.

How to fill in this form

This form is designed to be read by machine - please follow the rules below so that the Tax Return is read correctly.

Use black ink and capital letters

Cross out any mistakes and write the correct information below



4 Name of bank or building society
A N Y B A N K

9 Tax taken off box 8
£ 4 7 0 1 . 0 0

Please round up tax paid:
£4,700.21 would be £4701

- Enter your figures in whole pounds - ignore the pence. Round down income and round up expenses and tax paid - it is to your benefit.
- If a box does not apply, please leave it blank - do not strike through empty boxes or write anything else.

Starting your Tax Return

Before you start to fill it in, look through your Tax Return to make sure there is a section for all your income and claims - you may need some separate supplementary pages (see page TR 2 and pages TRG 2 to 6 of the Tax Return guide). If you need help please use the guide, phone the number above or **0845 9000 444**, or go to www.hmrc.gov.uk

Your personal details

<p>1 Your date of birth - <i>it helps get your tax right</i> DD MM YYYY</p> <p>□□ □□ □□□□</p>	<p>3 Your contact phone number</p> <p>□□□□□□□□□□□□□□</p>
<p>2 Your name and address - <i>if it is different from what is on the front of this form. Please write the correct details underneath the wrong ones, and put 'X' in the box</i></p> <p>□</p>	<p>4 Your National Insurance number - <i>leave blank if the correct number is shown above as your 'Tax Reference'</i></p> <p>□□ □□ □□ □□ □□</p>

Your tax adviser, if you have one

15 Your tax adviser's name <input type="text"/> <input type="text"/>	17 The first line of their address and the postcode <input type="text"/> <input type="text"/> <input type="text"/>
16 Their phone number <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	18 The reference your adviser uses for you <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Any other information

19 Please give any other information in this space

Signing your form and sending it back

20 If this Tax Return contains provisional or estimated figures, put 'X' in the box <input type="checkbox"/>	21 If you are enclosing separate supplementary pages, put 'X' in the box <input type="checkbox"/>
22 If you give false information, you may have to pay financial penalties and face prosecution. Please sign and date this form. The information I have given on this Tax Return and any supplementary pages is correct and complete to the best of my knowledge and belief Signature Date DD MM YYYY <input type="text"/><input type="text"/> <input type="text"/><input type="text"/> <input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
23 If you have signed on behalf of someone else, enter the capacity. For example, executor, receiver <input type="text"/>	25 If you filled in boxes 23 and 24 enter your name <input type="text"/> <input type="text"/>
24 Enter the name of the person you have signed for <input type="text"/> <input type="text"/>	26 and your address <input type="text"/> <input type="text"/>

Finally, please send us your completed form in the envelope provided.