

Phone XXXXXXXXXXXXXXXXXXXX

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999/99

Date DD Mmmmmmmm YYYY

Taxpayer-Name-line-1-XXXXXX  
Taxpayer-Name-line-2-XXXXXX  
Taxpayer-Address-Line-1-XXXX  
Taxpayer-Address-Line-2-XXXX  
Taxpayer-Address-Line-3-XXXX  
Taxpayer-Address-Line-4-XXXX  
Taxpayer-Address-Line-5-XXXX  
Taxpayer-Address-Line-6-XXXX  
POSTCODE

HM Revenue & Customs  
Office-Name-line-XXXXXXXXXX  
Office-Address-line-1-XXXXXX  
Office-Address-line-2-XXXXXX  
Office-Address-line-3-XXXXXX  
Office-Address-line-4-XXXXXX  
POSTCODE

**UTR 99999 99999**  
Tax Reference AA 99 99 99 A  
Employer Reference 999/99/999999999

Capacity-Role-XXXXXXXXXXXXXXXXXX  
Capacity-Name-1-XXXXXXXXXXXXXXXXXX  
Capacity-Name-2-XXXXXXXXXXXXXXXXXX

**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 2009 to 5 April 2010.

**Deadlines**

We must receive your tax return by these dates:

- if you are using a **paper** return - by **31 October 2010**, (or 3 months after the date of this notice if that's later), or
- if you are filing a return **online** - by **31 January 2011**, (or 3 months after the date of this notice if that's later).

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](http://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

- 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](http://www.hmrc.gov.uk)

**Your personal details**

<p><b>1</b> Your date of birth - <i>it helps get your tax right</i> DD MM YYYY</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p><b>3</b> Your phone number</p> <p><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"/></p>
<p><b>2</b> 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><input type="checkbox"/></p>	<p><b>4</b> Your National Insurance number - <i>leave blank if the correct number is shown above as your 'Tax Reference'</i></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>









## Your tax adviser, if you have one

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

<b>20</b> If this tax return contains provisional or estimated figures, put 'X' in the box <input type="checkbox"/>	<b>21</b> If you are enclosing separate supplementary pages, put 'X' in the box <input type="checkbox"/>
<b>22</b> 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 <span style="float: right;">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"/></span>	
<b>23</b> If you have signed on behalf of someone else, enter the capacity. For example, executor, receiver <input type="text"/>	<b>25</b> If you filled in boxes 23 and 24 enter your name <input type="text"/> <input type="text"/>
<b>24</b> Enter the name of the person you have signed for <input type="text"/> <input type="text"/>	<b>26</b> and your address <input type="text"/> <input type="text"/>

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