

Date submitted:

district director	Name of salary payer (name)	(Pronunciation (furigana)) Your name Donald Smith	Your date of birth 1973/1/1
Director	<small>*To be filled in by the salary payer who received this application form.</small>	Your individual number	Head of household Donald
Mayor of municipality	(address)	Your domicile or residence (Postal code) 000 0000 0-0-0 Room000 Ookayama, Meguro-ku, Tokyo	Relationship with you myself
		Marital status Married / Single	

If submitted,
please mark "O".

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Example

If you have no relatives listed in the columns below and you yourself are not a disabled person, a widow, a single parent, or a working student, please fill in the above columns and submit to your employer.

Category or the like	(Pronunciation (furigana)) Name	Individual number		Elderly dependent relatives (born on or before Jan. 1, 1957) Specified dependent relatives * Specified relatives (born between Jan. 2, 2004 and Jan. 1, 2008)	Estimated income in 2026	Non-resident relative (Note 1) Fact that he/she lives in the same household (If applicable, please mark "○".)	Domicile or residence	Date of change and reason (Fill in if any change occurred in 2026 (The same shall apply hereinafter.))
		Relationship with you	Date of birth					
A Spouse qualified for withholding deduction (Note 1)	マリースミス Mary Smith		1975 / 1 / 1		0 yen		1234 science street, ...USA	
	ピーター スミス Peter Smith	son	2006 / 1 / 1	<input type="checkbox"/> Elderly parent living together or the like <input type="checkbox"/> Others <input type="checkbox"/> Specified dependent relative <input type="checkbox"/> Specified relatives	0 yen	500,000yen	1234 science street, ...USA	
B Relatives qualified for withholding deduction (16 years of age or older)			/ /	<input type="checkbox"/> Elderly parent living together or the like <input type="checkbox"/> Others <input type="checkbox"/> Specified dependent relative <input type="checkbox"/> Specified relatives	yen			
			/ /	<input type="checkbox"/> Elderly parent living together or the like <input type="checkbox"/> Others <input type="checkbox"/> Specified dependent relative <input type="checkbox"/> Specified relatives	yen			
			/ /	<input type="checkbox"/> Elderly parent living together or the like <input type="checkbox"/> Others <input type="checkbox"/> Specified dependent relative <input type="checkbox"/> Specified relatives	yen			
			/ /	<input type="checkbox"/> Elderly parent living together or the like <input type="checkbox"/> Others <input type="checkbox"/> Specified dependent relative <input type="checkbox"/> Specified relatives	yen			
Content of a disabled person or working student (Read (3) of "2. Notes on describing this application" on the back side regarding how to describe this column.) <input type="checkbox"/> Widow <input type="checkbox"/> Single parent <input checked="" type="checkbox"/> Working student				Institute of Science Tokyo, October 1, 2024 entrance 400,000 yen (earned income)		Date of change and reason		
Domicile or residence					Other workers who receive deductions Name Relationship with you Domicile or residence			Date of change and reason

IMPORTANT
Requirements for qualifying non-resident dependents have been revised and will take effect January 2023.

To claim tax exemptions for your non-resident dependents, you must verify that **they receive remittances from you as financial support during the year AND that they meet one of the following conditions:**

- Under age 30
- Age 70 or older
- Studying abroad
- Disabled
- The amount of the remittances is JPY 380,000 or more per month

Exemption for working students
→ In the case that your earned income is less than 1,500,000yen, and other income except for earned income is less than 100,000yen.

☐ This application is to be submitted to receive exemptions for dependents, disabled persons or etc., regarding your salary, and if you receive salary from two or more salary payers, you can only submit this application to one of them.

☐ Read "1. Notes on the application" or the like on the back side when describing this declaration.

IMPORTANT

Requirements for qualifying non-resident dependents have been revised and will take effect from January 2023.

If you claim tax exemptions for your non-resident dependents, you must verify that **they receive remittances from you as financial support during the year AND that they meet one of the following conditions:**

- ① Under age 30
- ② Age 70 or older
- ③ Studying abroad
- ④ Disabled
- ⑤ The amount of the dependent

To verify their dependency status, you need to submit supporting documents.
For details, please see the following website.

National Tax Agency:

https://www.nta.go.jp/publication/pamph/gensen/gaikokugo/pdf/0022011-082_01.pdf

Spouse/ dependent relatives/ specified relatives with retirement allowance, etc.	(Pronunciation (furigana)) Name	Individual number	Relationship with you	Date of birth	Domicile or residence	Non-resident relative (If applicable, please mark "N")	Estimated income in 2026(*)	Disabled person category	Date of change and reason	Widow or single parent
					/ /		<input type="checkbox"/> Spouse <input type="checkbox"/> Under 30 years of age or 70 years of age or older <input type="checkbox"/> Unrelated person <input type="checkbox"/> Studying abroad <input type="checkbox"/> Payment of 380,000 yen or more	yen	<input type="checkbox"/> General <input type="checkbox"/> Special	