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Form No: TP/CbCR/01

Commissioner General of Inland Revenue Inland Revenue Department Sri Lanka.

## NOTICE ON FILING THE COUNTRY BY COUNTRY REPORT OF THE MNE GROUP

(For the purpose of Transfer Pricing Regulation 6 of the Gazette Extra Ordinary Number 2217/7 of 02.03.2021)

Please fill up the form using BLOCK LETTERS Please Tick (✓) the fields marked with \*

1.	Name of the MNE	e of the MNE Group (Multinational Group):															
2.	Name of the Cons	tituent Entity of the MNE Group, Tax Resident in Sri Lanka or subject to Tax in Sri Lanka:															
3.	Taxpayer Identif	ficatio	on Nı	ımbe	er (Tl	N):											
4.	Tax Status of the c	the constituent Entity *:															
5.	Starting Date of th	Starting Date of the Fiscal Year of the MNE Group:  D D M M Y Y Y												Y			
6.	Is the Declarant required to file CbCR in Sri Lanka? * YES NO																
7.	If "YES" to item 6; *the Declarent is: Ultimate Parent Entity Surrogate Parent Entity Constituent Entity																
8.	If "NO" to item 6	;															
	i. Name of the R	eport	ing Eı	ntity (	of the	MNE	Grou	p:			• • • • • • •						••••
	ii. Country of Tax	x Res	idenc	y :													
	iii. Taxpayer Iden	tificat	tion N	lumbe	er of	the M	NE G1	oup	:								
Full Name of the Declarant																	
Designation																	
Telephone No																	
E-mail																	
Signature of the Declarant													Offi	cial l	Frani	k	
Date		D	D	/	Μ	Μ	/	Y	Y	Y	Y		724	J		-	