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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 2104/4 of 31.12.2018)

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

1. 1	Name of the MNE Group (Multinational Group):																
2. 1	Name of the Const	the Constituent Entity of the MNE Group, Tax Resident in Sri Lanka or subject to Tax in Sri Lanka														Lanka:	
3.	Taxpayer Identif	ficatio	on Nu	ımbe	r (TI	N):											
4.	Tax Status of the constituent Entity *: Tax Resident in Sri Lanka Subject to Tax in Sri Lanka																
5. \$	5. Starting Date of the Fiscal Year of the MNE Group: D D M M M Y 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 Reporting Entity of the MNE Group:																	
ii. Country of Tax Residency:																	
iii. Taxpayer Identification Number of the MNE Group :																	
Full Name of the Declarant																	
Designation																	
Telephone No																	
E-mail																	
Signature of the Declarant			Official								rial F	ran	k				
Date		D	D	/	Μ	Μ	/	Y	Y	Y	Y		VIIIVIMI I I MIIII				