



# Public country-by-country registration

## How to complete this form

- Read the instructions on [Public country-by-country registration](#) to complete this form.
- Ensure you are completing this form using Adobe Acrobat Reader.
- You must type all responses. Do not complete this form by hand.
- You MUST answer all questions marked with an asterisk (\*)
- Email your completed form to [PublicCBCreports@ato.gov.au](mailto:PublicCBCreports@ato.gov.au)
- For questions about completing or lodging this form, email [PublicCBC@ato.gov.au](mailto:PublicCBC@ato.gov.au)



## Important – Below actions will result in processing errors:

- **DO NOT** use “Print”, “Print to PDF”, “Save as PDF”, or “Export to PDF”. Save the form using “Save” or “Save As” only.
- **DO NOT** use third-party applications to convert, process, or resave the form.

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## Section A: Public CBC reporting parent entity details

### 1 Is this a new registration of an entity or an update of details to an existing entity?\*

New registration       Update of details

### 2 Australian business number (ABN) or ATO reference number (ARN)

The Public CBC reporting parent entity might not have either of these identifiers if they are a foreign entity.

ABN of the registering entity (if applicable)

ARN of the registering entity (if applicable)

#### Privacy

Taxation laws authorise the ATO to collect information and disclose it to other government agencies. This includes information of the person authorised to complete the declaration. For information about your privacy go to [ato.gov.au/privacy](https://ato.gov.au/privacy)

### 3 Registering entity type\*

Trust       Partnership       Company

### 4 Registering entity's full legal name\*

### 5 Registering entity's jurisdiction\*

### 6 Registering entity's reporting period\*

Day / Month / Year to Day / Month / Year  
  /   /    to   /   /



## Section B: Australian member entity details

An Australian member entity is a CBC reporting entity that is a member of the CBC reporting group that either is a resident in Australia for taxation purposes or operates an Australian permanent establishment.

### 10 Is the Public CBC reporting parent entity a foreign entity?\*

Yes  Go to Question 11

No  Go to Section C

### 11 Australian member entity's ABN\*

<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"/>
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### 12 Full legal name of Australian member entity\*

### 13 Australian member entity's address

Postal address\*

  

Suburb/town/locality\*

State/territory

(Australia only)

Postcode

(Australia only)

Country if outside Australia

Email\*

### 14 Australian member entity's contact\*

Provide details of a person we can contact for more information about the Australian member entity.

Name\*

Title: Mr  Mrs  Miss  Ms  Other

Family name\*

First given name\*

Position held\*

Phone\*

Area code\*

Phone number\*

Email\*



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## Section D: Declaration

Only a person who has authority to act on behalf of the entity can complete this declaration. Domestic entities must have the declaration completed by a public officer or authorised contact currently on our records. Foreign entities must have the declaration completed by a duly appointed authorised representative.

For more information, visit our website at [Registration by Public CBC reporting parents](#)

I declare that I am the\*

public officer or authorised contact

authorised representative

By providing my details below, I declare that:

- this document has been prepared in accordance with information supplied by the entity,
- I have received a declaration in writing from the entity stating that the information is true and correct,
- I am authorised by the entity to give this document to the Commissioner of Taxation.

Name

Title: Mr  Mrs  Miss  Ms  Other

Family name\*

First given name\*

Position held (e.g. public officer or authorised representative)\*

Phone\*

Country code/area code

Phone number

Email\*

Registered tax agent number

Date when form completed by public officer,  
authorised contact or authorised representative\*

Day  / Month  / Year

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## Section E: Lodging this form

Before lodging this form, confirm

- All mandatory (\*) fields are completed
- The form is saved using "Save" or "Save As" only. **DO NOT** use "Print", "Print to PDF", "Save as PDF", or "Export to PDF"
- Only one form is attached per email