

ABN/ACNC instruction sheet

DETAILS REQUIRED FOR ABN APPLICATION (only complete if you require an ABN)

Entity/Trust name

Entity Type

- Company limited by guarantee Charitable trust
- Incorporated association Public ancillary fund
- Private ancillary fund Other (please describe)

Main business activity

Date ABN to be registered from (cannot be prior to company registration date or trust deed date)

Does the entity have a TFN?

YES or NO If the answer is NO does the Entity wish to apply for an TFN: YES or NO

Does the entity want to register for:

Fringe benefit tax: YES or NO
Luxury Car tax: YES or NO
Wine equalisation tax: YES or NO

Business address

Postal address

Authorised contact for the organisation/trust (include all contact details)

Associated individual, responsible person or organisation details

If the entity type is a company, please complete associated individual/responsible person details for each director, secretary and public officer. A secretary and public officer must be appointed.

If the entity type is a trust and the trustee is:

1. an individual or individuals, please complete associated individual/responsible person details;
or
2. a company, please complete associated organisation details.

If there are more than five associated individuals/responsible persons , please provide the requisite details on an additional page.

Associated individual/responsible person details (e.g. director, trustee)

Full name

Position (director, secretary, public officer or trustee)

Residential Address
(not a PO Box)

Business phone number

Date of birth

Email address

Place of birth

Tax file number (if not provided will delay ABN registration – your name above must match your assessment notice)

Associated individual/responsible person details (e.g. director, trustee)

Full name

Position (director, secretary, public officer or trustee)

Residential Address
(not a PO Box)

Business phone number

Date of birth

Email address

Place of birth

Tax file number (if not provided will delay ABN registration – your name above must match your assessment notice)

Associated individual/responsible person details (e.g. director, trustee)

Full name

Position (director, secretary, public officer or trustee)

Residential Address
(not a PO Box)

Business phone number

Date of birth

Email address

Place of birth

Tax file number (if not provided will delay ABN registration – your name above must match your assessment notice)

Associated individual/responsible person details (e.g. director, trustee)

Full name

Position (director, secretary, public officer or trustee)

Residential Address
(not a PO Box)

Business phone number

Date of birth

Email address

Place of birth

Tax file number (if not provided will delay ABN registration – your name above must match your assessment notice)

Associated individual/responsible person details (e.g. director, trustee)

Full name

Position (director, secretary, public officer or trustee)

Residential Address
(not a PO Box)

Business phone number

Date of birth

Email address

Place of birth

Tax file number (if not provided will delay ABN registration – your name above must match your assessment notice)

Associated organisation details (e.g. company that is the trustee)

Company name

ACN/ARBN

ABN

Position

Address

Date of incorporation

Tax file number
(if not provided will delay registration)

DETAILS REQUIRED FOR ACNC APPLICATION

Entity/Trust name

ACN/ABN/ARBN

Address for service
(postal and email address)

Business address:

Primary contact for the
entity/trust (include all
contact details – full name,
date of birth, contact phone
number, email address)

Have you provided your
organisation's governing
documents to Paxton-Hall
Lawyers

Entity's subtype
(please tick the applicable
box)

Describe the entity's
activities

Please describe the entity's
activities and how they
achieve or fulfil the
charitable purpose

YES/NO

Advancing health

Advancing the security or
safety of Australia or the
Australian public

Advancing education

Preventing or relieving the
suffering of animals

Advancing social or public
welfare

Advancing the natural
environment

Advancing religion

Any other purpose beneficial
to the general public which is
analogous to, or within the spirit
of the other subtypes

Advancing culture

Advancing public debate

Promoting reconciliation,
mutual respect and tolerance
between groups of individuals
that are in Australia

Health promotion charity
(NB: an additional schedule is required)

Promoting or protecting
human rights

Public benevolent institution
(NB: an additional schedule is required)

Describe who is (or who will be) helped by the entity's main activities

Does or will the entity provide funding to an organisation operating overseas?

Does or will the entity conduct activities overseas?

YES/NO

If yes, please describe the entity, its purpose and activities:

YES/NO

If yes, please describe the activities, where the activities will be conducted, and who will benefit from the activities:

Financial information

Last financial year ending 30 June 2017

(if the entity/trust was established in the current financial year than this is not applicable)

What was the gross amount of income?

\$

What was the gross amount of expenditure?

\$

Current financial year

What is the estimated gross income for your organisation in the current financial year?

\$

What percentage of income that comes from donations?

%

What percentage of income comes from other fundraising activities?

%

What percentage of income comes from government grants and payments (if any)?

%

What percentage of your organisation's expenditure is devoted to pursuing its purposes outside Australia?

%

What percentage of your organisation's expenditure is devoted to funding other organisations which operate and pursue their purpose outside Australia?

%

Where does your organisation get funds from now?

Where does your organisation intend to get funds from in the future?

Does your financial year end 30 June?

YES/NO. If no, when does your financial year end?

Your contact details

Name

Company Name

Address

Telephone No

Email

Authority

I/we authorise Paxton-Hall Lawyers Pty Ltd to lodge an ABN and/or ACNC application on our behalf online and that the information supplied in this information sheet is complete and accurate.

Dated: 2018