



Texas Franchise Tax EZ Computation Report

Annualized total revenue must be \$10,000,000 or less to file this form

■ **Tcode** 13272 Final

■ Taxpayer number						■ Report year			Due date		

Taxpayer name						Secretary of State file number or Comptroller file number							
Mailing address													
City			State			Country			ZIP Code		Plus 4		
Blacken circle if this is a combined report <input type="checkbox"/>						Blacken circle if Total Revenue is adjusted for Tiered Partnership Election, see instructions <input type="checkbox"/>						Blacken circle if the address has changed <input type="checkbox"/>	
												Blacken circle to request a Certificate of Account Status <input type="checkbox"/>	

Accounting year begin date **			Accounting year end date			SIC code			NAICS code		
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REVENUE (Whole dollars only, items 1 -12)

1. Gross receipts or sales	1.															0	0
2. Dividends	2.															0	0
3. Interest	3.															0	0
4. Rents (can be negative amount)	4.															0	0
5. Royalties	5.															0	0
6. Gains/losses (can be negative amount)	6.															0	0
7. Other income (can be negative amount)	7.															0	0
8. Total gross revenue (Add items 1 thru 7)	8.															0	0
9. Exclusions from gross revenue (see instructions)	9.															0	0
10. TOTAL REVENUE (item 8 minus item 9 if less than zero, enter 0)	10.															0	0
11. Gross receipts in Texas	11.															0	0
12. Gross receipts everywhere	12.															0	0
13. Apportionment Factor (Divide item 11 by item 12) (Round to 4 decimal places)	13.																
14. Apportioned revenue (Multiply item 10 by item 13) (Dollars and cents)	14.																
15. Tax due before discount (Multiply item 14 by 0.00575) (Dollars and cents)	15.																
16. Discount (see instructions, applicable to report years 2008 and 2009)	16.																
17. TOTAL TAX DUE (item 15 minus item 16) (Do not include payment if this amount is less than \$1,000)	17.																

Do not include payment if item 17 is less than \$1,000 or if annualized total revenue is less than the no tax due threshold (see instructions).

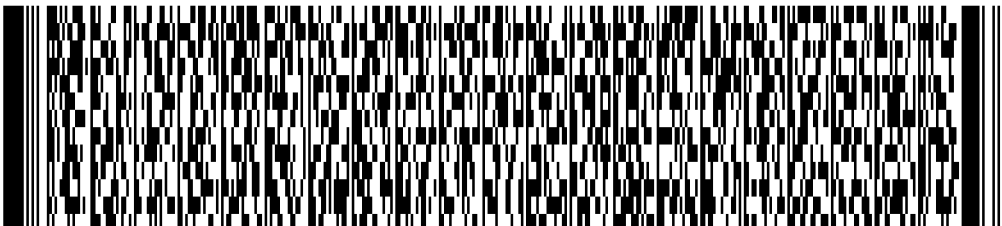
If the entity makes a tiered partnership election, ANY amount in item 17 is due. Complete Form 05-170 if making a payment.

Print or type name						Area code and phone number () -					
I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief.						Mail original to: Texas Comptroller of Public Accounts P.O. Box 149348 Austin, TX 78714-9348					
			Date								

If you have any questions regarding franchise tax, you may contact the Texas Comptroller's field office in your area or call (800) 252-1381 or (512) 463-4600. Instructions for each report year are online at www.window.state.tx.us/taxinfo/taxforms/05-forms.html.

** If not 12 months, see instructions for annualized revenue.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>
PM Date	

