



# Texas Franchise Tax Report - Page 1

## ■ Tcode

<b>■ Taxpayer number</b>	<b>■ Report year</b>	<b>Due date</b>

Taxpayer name				Secretary of State file number or Comptroller file number	
Mailing address					
City	State	Country	ZIP code plus 4	Blacken circle if the address has changed <input type="checkbox"/>	
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 entity is Passive and/or a REIT, see instructions <input type="checkbox"/> Passive <input type="checkbox"/> REIT		
Blacken circle to request a Certificate of Account Status <input type="checkbox"/>					

\*\* If not twelve months, see instructions for annualized revenue

<b>Accounting year begin date**</b>	m m d d y y	<b>Accounting year end date</b>	m m d d y y	<b>SIC code</b>	<b>NAICS code</b>

**REVENUE** (Whole dollars only)

<b>1. Gross receipts or sales</b>	<b>1. ■</b>		0	0
<b>2. Dividends</b>	<b>2. ■</b>		0	0
<b>3. Interest</b>	<b>3. ■</b>		0	0
<b>4. Rents</b> (can be negative amount)	<b>4. ■</b>		0	0
<b>5. Royalties</b>	<b>5. ■</b>		0	0
<b>6. Gains/losses</b> (can be negative amount)	<b>6. ■</b>		0	0
<b>7. Other income</b> (can be negative amount)	<b>7. ■</b>		0	0
<b>8. Total gross revenue</b> (Add items 1 thru 7)	<b>8. ■</b>		0	0
<b>9. Exclusions from gross revenue</b> (see instructions)	<b>9. ■</b>		0	0
<b>10. TOTAL REVENUE</b> (item 8 minus item 9 if less than zero, enter 0)	<b>10. ■</b>		0	0

**COST OF GOODS SOLD** (Whole dollars only)

<b>11. Cost of goods sold</b>	<b>11. ■</b>		0	0
<b>12. Indirect or administrative overhead costs</b> (Limited to 4%)	<b>12. ■</b>		0	0
<b>13. Other</b> (see instructions)	<b>13. ■</b>		0	0
<b>14. TOTAL COST OF GOODS SOLD</b> (Add items 11 thru 13)	<b>14. ■</b>		0	0

**COMPENSATION** (Whole dollars only)

<b>15. Wages and cash compensation</b>	<b>15. ■</b>		0	0
<b>16. Employee benefits</b>	<b>16. ■</b>		0	0
<b>17. Other</b> (see instructions)	<b>17. ■</b>		0	0
<b>18. TOTAL COMPENSATION</b> (Add items 15 thru 17)	<b>18. ■</b>		0	0

**Texas Comptroller Official Use Only**

VE/DE	<input type="checkbox"/>				
PM Date	<table border="1" style="display: inline-table; width: 40px; height: 20px;"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				





# Texas Franchise Tax Report - Page 2

■ Tcode 13271 Final

■ Taxpayer number	■ Report year	Due date	Taxpayer name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**MARGIN** (Whole dollars only)

19. 70% revenue (item 10 x .70) 19.

20. Revenue less COGS (item 10 - item 14) 20.

21. Revenue less compensation (item 10 - item 18) 21.

22. Revenue less \$1 million (item 10 - \$1,000,000) 22.

23. MARGIN (see instructions) 23.

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**APPORTIONMENT FACTOR**

24. Gross receipts in Texas (Whole dollars only) 24.

25. Gross receipts everywhere (Whole dollars only) 25.

26. APPORTIONMENT FACTOR (Divide item 24 by item 25, round to 4 decimal places) 26.

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**TAXABLE MARGIN** (Whole dollars only)

27. Apportioned margin (Multiply item 23 by item 26) 27.

28. Allowable deductions (see instructions) 28.

29. TAXABLE MARGIN (item 27 minus item 28) 29.

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**TAX DUE**

30. Tax rate (see instructions for determining the appropriate tax rate) X X X 30.

31. Tax due (Multiply item 29 by the tax rate in item 30) (Dollars and cents) 31.

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**TAX ADJUSTMENTS** (Dollars and cents) (Do not include prior payments)

32. Tax credits (item 23 from Form 05-160) 32.

33. Tax due before discount (item 31 minus item 32) 33.

34. Discount (see instructions, applicable to report years 2008 and 2009) 34.

35. TOTAL TAX DUE (item 33 minus item 34) 35.

Do not include payment if item 35 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 35 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.		<b>Mail original to:</b> Texas Comptroller of Public Accounts P.O. Box 149348 Austin, TX 78714-9348	
	Date		

Instructions for each report year are online at [www.comptroller.texas.gov/taxes/franchise/forms/](http://www.comptroller.texas.gov/taxes/franchise/forms/). If you have any questions, call 800-252-1381.

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VE/DE	<input type="radio"/>
PM Date	<input type="text"/>

