



# Texas Franchise Tax EZ Computation Report

Annualized total revenue must be \$20,000,000 or less to file this form

### Tcode

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 the address has changed   
 Blacken circle if this is a combined report  Blacken circle if Total Revenue is adjusted for Tiered Partnership Election, see instructions

Is this entity a corporation, limited liability company, professional association, limited partnership or financial institution?  Yes  No

Accounting year begin date        Accounting year end date        NAICS code

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 0.00331) (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.

**sign here**  Date

**Mail original to:**  
 Texas Comptroller of Public Accounts  
 P.O. Box 149348  
 Austin, TX 78714-9348

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 1-800-252-1381.  
 \*\* If not 12 months, see instructions for annualized revenue.

### Texas Comptroller Official Use Only

VE/DE   
 PM Date

