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Comptroller of Public Accounts FORM

05-170
(9-09/4)
■ **Tcode** 13030 Initial

TEXAS FRANCHISE TAX PAYMENT FORM

FILING REQUIREMENTS

Taxpayer number

Report year

Due date

Taxpayer name

1.	**Total tax due on this report** *(Item 34 from Form 05-158-B or Item 17 from Form 05-169)*	**1.**
2.	**Enter prior payment** *(e.g. extension payment)*	**2.**
3.	**Net tax due** *(Item 1 minus Item 2)*	**3.**
4.	**Penalty** *(See instructions)*	**4.**
5.	**Interest** *(See instructions)*	**5.**
6.	**TOTAL AMOUNT DUE AND PAYABLE** *(Add Items 3, 4 and 5)* *Make amount payable to STATE COMPTROLLER*	**6.** ■

Taxpayers who paid $10,000 or more during the preceding fiscal year (September 1 thru August 31) are required to electronically pay their franchise tax. For more information visit: http://www.window.state.tx.us/webfile/req-franchise.html

Mail original to:
COMPTROLLER OF PUBLIC ACCOUNTS
P.O. Box 149348
Austin, TX 78714-9348

If you have any questions regarding franchise tax, you may contact the Texas State Comptroller's field office in your area or call (800) 252-1381 or (512) 463-4600.
For instructions on completing the franchise tax reports, see Form 05-392(2008), Form 05-393(2009) or Form 05-394(2010).

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VE/DE	
PM Date	