RESET FORM | PRINT FORM

Comptroller of Public Accounts FORM 05-163 (Rev.9-17/9)

Texas Franchise Tax No Tax Due Report

■ **Tcode** 13255 Annual Franchise

FILING REQUIREMENTS

The law requires No Tax Due Reports originally due on or after Jan.1, 2016 to be filed electronically. Filing this paper report means you are requesting, and we are granting, a waiver from the electronic reporting requirement for this report year ONLY.

Taxpayer number	■ Report year	Due date
	2020	05/15/2020

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 ○				NAICS code ■
Blacken circle if Total Revenue is adjusted for Tiered Partnership Election, see instructions. *(Note: Upper tiered partnerships do not qualify to use this form.)* ○				
Is this entity a corporation, limited liability company, professional association, limited partnership or financial institution?	○ Yes	○ No		

If any of the statements below are true, you qualify to file this No Tax Due Report *(Blacken all circles that apply.)* **:**

1. **This entity is a passive entity as defined in Texas Tax Code Sec. 171.0003.** *(See instructions.)* (Passive income does NOT include rent.) **1.** ■ ○
2. **This entity's annualized total revenue is below the no tax due threshold.** **2.** ■ ○
3. **This entity has zero Texas Gross Receipts.** **3.** ■ ○
4. **This entity is a Real Estate Investment Trust (REIT) that meets the qualifications specified in Texas Tax Code Sec. 171.0002(c)(4).** **4.** ■ ○
5. **This entity is a new veteran-owned business as defined in Texas Tax Code Sec. 171.0005.** *(See instructions.)* *(Must have formed after Jan.1, 2016, and must be pre-qualified.)* **5.** ■ ○

6a. Accounting year begin date 6a. ■ m m d d y y

6b. Accounting year end date 6b. ■ m m d d y y

7. TOTAL REVENUE *(Whole dollars only)* 7. ■ . 0 0

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
sign here ▶ Date	

Instructions for each report year are online at www.comptroller.texas.gov/taxes/franchise/forms/. If you have any questions, call 1-800-252-1381.

Texas Comptroller Official Use Only

VE/DE	○
PM Date	