Comptroller of Public Accounts FORM (Rev.9-16/9)

Texas Franchise Tax Extension Request

| ■ Tcode 13278 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 the address has changed |
| Blacken circle if this is a combined report | · | | |

If this extension is for a combined group, you must also complete and submit Form 05-165.

Note to mandatory Electronic Fund Transfer(EFT) payers: When requesting a second extension do not submit an Affiliate List Form 05-165.

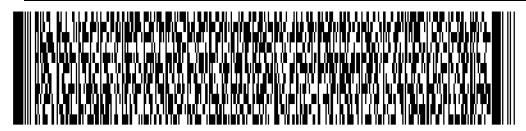
| 1. | Extension payment (Dollars and cents) | 1. = | ł | | ł I | Į. | | ŀ | 1 1 | · I | |
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| Print or type name | | Area code and phone | e number - | | | |
|--|---|--|---------------|--|--|--|
| I declare that the information in this document and any attachments is true and correct to the | Mail original to: Texas Comptroller of Public Accounts | | | | | |
| sign here | Date | P.O. Box 149348 Austin, TX 78714-9348 | | | | |

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.

Taxpayers who paid \$10,000 or more during the preceding fiscal year (Sept. 1 thru Aug. 31) are required to electronically pay their franchise tax. For more information visit www.comptroller.texas.gov/taxes/franchise/filing-requirements.php.

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| PM Date | | | | | | | | |

