Comptroller of Public Accounts FORM 01-149 (Rev.5-19/9) HHHH b.

PRINT FORM CLEAR FIELDS

a. ■ **27160 original**

Page _____ of _____

Texas Direct Pay Tax Return

Credits Schedule

c. Taxpayer number	d. Filing period	e.	f. Due date
■		■	

g. **Taxpayer name and mailing address** *(Make corrections next to any incorrect information.)*

- ***Do not staple or paper clip.***
- ***Do not write in shaded areas.***

h. ■ i. ■

PLEASE PRINT YOUR NUMERALS LIKE THIS

0 1 2 3 4 5 6 7 8 9

Examples of these credits include:

-- mistakenly paying tax to a vendor on exempt manufacturing equipment.
-- paying tax to the Comptroller on a non-taxable purchase.
-- remitting tax to the Comptroller after paying sales tax to a vendor.

Local Tax

Local tax (city, county, MTA, CTD and SPD taxes) can be included in the credit examples above only if the purchaser reported to the same local jurisdictions as the vendor. If the local tax jurisdictions do not match, or if the jurisdiction for which the local tax was collected is not known, a refund claim must be filed for the local tax. See Comptroller's website at **www.comptroller.texas.gov/taxes/sales/refunds/** for refund instructions.

If you answered "YES," to Item j of your Direct Payment Return, Form 01-119, you must complete Items 1 and 2, below.

NOTE: The data entered here is for information purposes only. It is not used in calculating tax due on this report

1. Amount of tax credit being taken on this return *(Enter dollars and cents.)* ■

2. Earliest date of the tax paid in error for this credit *(mm-dd-yy)* ■ MONTH DAY YEAR

I declare that the information in this document and any attachments is true and correct to the best of my knowledge.

sign here ▶ Taxpayer or duly authorized agent	Date	Daytime phone *(Area code & number)*

If you have any questions, call 1-800-252-5555.
Details are also available online at www.comptroller.texas.gov.

Mail to Comptroller of Public Accounts
P.O. Box 149354
Austin, TX 78714-9354

You have certain rights *under Chapters 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at the address or phone number listed on this form.*