

Texas Nexus Questionnaire

				Texas taxpayer number				
		File number						
				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.				
1 . E	Entity name			2. Federal employer identification number (FEIN)				
3. N	Mailing address (if different than above address)							
	Street							
	City	State		ZIP code				
4a.	Contact person		4b. Contact phone (Area code and number)					
5a.	Contact email		5b. Website address					
6.	Organization Structure — Profit corporation (CF) — General partnership (PB,PI) — Limited partnership (PB,PI)							
	Professional corporation (cu)			Real estate investment trust (TI)				
	☐ Nonprofit corporation (CM)	-		☐ Joint venture (PW)				
	Limited liability company (ci)	ability company (CI) Business trust (TF)		Other				
7	7. In what state or country was this entity formed? Formation date							
	. If this entity is registered with the Texas Secretary of State, please provide the file number.							
	Please provide the entity's North American Industry Classification System (NAICS) code. (NAICS codes are available at https://www.census.gov/eos/www/haics/)							
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10a.	a. Please list any tax permits or licenses issued to this entity by the Texas Comptroller.							
	Type of permit or license		Taxpayer number for permit or license					
10b.	ь. If included in a combined group Texas Franchise Tax Report,							
100.	provide the reporting entity's Texas taxpayer number							
11.	Please describe this entity's business a	ctivities in Texas:						
12.	Please provide the earliest date this entity had a physical presence in Texas. Examples of physical presence in Texas include but are not limited to the items below. See Rule 3.586 Start Date month day year for further details. Check all that apply.							
	Place of Business (maintaining a place of business, manufacturing plant, office, warehouse or retail outlet, owned or leased)	Loan Production Activities (solicit sales/loan contracts, gather data, make or other financial activities in Texas with own e						
	Real/Personal Property (hold, acquire, lease, install, erect, modify, maintain, repair or dispose of real or personal	independent contractors or agents) Delivery/Transportation (facilities, vehi	independent contractors or agents) Delivery/Transportation (facilities, vehicles, partnership that is doing business in					
	property used or located in Texas) Employees/Independent Representatives (including temporary employees, contractors, agents)	employees, or representatives for transportatio passengers or property in Texas, including the maintenance, and repair of vehicles or other ec coordinating/directing the transportation of pas	service, Juipment a	Shows/Sporting Events (staging of or participation in shows, theatrical performances, sporting events)				
	Inventory/Storing Goods (including consigned goods)	or property) Perform a Contract (with own employee	_	Advertising (enter Texas to purchase, place or display advertising for the benefit of another)				
	Provide a Service (through employees, independent contractors, agents or other representatives)	labor or contractors)		Federal Enclave (doing business in Texas				
	Holding Company (maintain place of business, manage, direct and/or perform services for subsidiaries	Sell and License Software in Texas Franchisor (contracts where a franchisee is		even if the area is leased, owned or controlled by the federal government)				
	or related entities) Manufacturing/Shipping	right to engage in business under a marketing plan/system substantially prescribed by the franchisor or if franchisee's business is substantially associated with the franchisor's brand service mark or other compercial symbol)		☐ Warranty Work (with own employees or third party) ☐ Manage or Operate Business from Texas				

13a.	Will the entity exceed \$500,000 in gross receipts f		Yes No							
13b.	If yes, please provide the start date of any federal gross receipts from business done in Texas excee	h _{moi}	Start Date month day year							
14.	If nexus ended, provide the reason and the last da ceased to exist.		cuments if the entity Nexus end date month day year							
15.	5. Please complete this information for all members, all general partners and each limited partner with a 10% or more interest in the partnership. (For limited partnerships, general partnerships, joint ventures and joint stock companies.) (Attach additional sheets if necessary.)									
	Name Type of owner Membe	er General Partner	Limited Partner	FEIN		Percentage of ownership %				
	Mailing address City)	Begin date in Partnership							
	sign here	nted name			Title					
	Name Type of owner	General –	Limited	FEIN		Percentage of ownership				
	Membe	^{er} Partner	Partner			%				
	Mailing address City	State		ZIP code		Begin date in Partnership				
	sign here	nted name		Title						
	Name Type of owner Membe	er General Partner	Limited Partner	FEIN		Percentage of ownership %				
	Mailing address City	State ZIP cod			9	Begin date in Partnership				
	Pri	Title								
	sign here									
I declare that the information in this document and any attachment is true and correct to the best of my knowledge and belief.										
	t preparer's name	Title			Phone (Area code and number)					
sig he	in)		Date							
	Information about franchise tax is available online at www.com For taxpayer assistance, call 800-252-1381 or 512-463-4600.	ptroller.texas.gov/taxes/fr	gov/taxes/franchise/. Please return this com Texas Comptrol P.O. Box 14934 Austin, TX 7871			of Public Accounts				