

Request for Certificate of Account Status to Terminate a Taxable Entity's Existence in Texas

An entity that intends to terminate its legal existence must satisfy filing requirements for all taxes administered by the Comptroller under Title 2 of the Texas Tax Code. In addition, all accounts for those taxes must be closed. To determine if the entity is current in tax requirements, or to close any open tax accounts, call us at (800) 252-1381 or (512) 463-4600. More information about this process is available online at www.franchisetax.tx.gov.

Section A - Entity Information

Entity's legal name	Taxpayer number	File number (from the Texas Secretary of State)
<p>1. Is the entity a member of an affiliated group that will be required to file a combined report? <input type="checkbox"/> YES <input type="checkbox"/> NO If "YES," enter the following information for the entity that will report on your behalf. If "NO," skip to Section B.</p> <p>Legal name of reporting entity _____ Texas taxpayer number / FEI number _____</p>		
<p>2. Is the entity's accounting year begin date on or after the combined group's accounting year begin date on its franchise tax report? <input type="checkbox"/> YES <input type="checkbox"/> NO If "YES," this entity's information must be included in the combined group report. If "NO," enter the following information:</p> <p>This entity's accounting year begin date _____ month _____ day _____ year _____ The day before the combined group's accounting year begin date _____ month _____ day _____ year _____</p>		

Section B - Texas Entity - If the entity was formed in Texas, indicate the filing for which the certificate is required.

Termination
 Merger
 Entity conversion

Section C - Non-Texas Entity - If the entity was formed outside of Texas, please complete the following information.

1. Is the entity still conducting business in Texas? YES NO
 month _____ day _____ year _____

2. If "NO," enter the entity's last day of business in Texas _____ month _____ day _____ year _____

3. Does the entity currently have an active charter in its home state? YES NO

4. If "NO," indicate the type and date of termination:

Termination effective date _____ month _____ day _____ year _____

Merger effective date _____ month _____ day _____ year _____ Name of survivor _____

Entity conversion effective date _____ month _____ day _____ year _____

Note: If the home state charter has been terminated, home state documentation must be included. The home state documentation must bear the seal of the appropriate filing agency and the effective date of the filing.

Section D - Receiving Your Certificate

The Secretary of State offers filing of termination and withdrawals through the SOSDirect System online at www.sos.state.tx.us/corp/sosda/index.shtml.

Please indicate how you would like to receive your certificate:

FAX FAX number (area code and number) _____ Telephone number (area code and number) _____

.PDF E-mail address _____

Mail Mailing address _____ City _____ State _____ ZIP code _____

Your account will be reviewed to determine eligibility. If eligible, a certificate will be sent using the format selected. If not eligible, we will notify you in writing what is required to be eligible. All requests are processed in the order they are received regardless of the format you select. Assistance is also available at your local field office. Field office locations are available online at www.window.state.tx.us/taxinfo/fieldoff.html.

Your name (Please type or print)	Phone number and extension
Authorized agent 	
Visit us online at www.franchisetax.tx.gov or call (800) 252-1381 or (512) 463-4600.	Mail to: Comptroller of Public Accounts P.O. Box 149348 Austin, Texas 78714-9348