



David T. Hudson
President
New Mexico, Texas

790 S Buchanan, 7th floor
Amarillo, TX 79101
david.hudson@xcelenergy.com
Phone: 806.378.2824

August 14, 2020

Dr. Brian Bibb
Superintendent
Petersburg Independent School District
1411 West 4th Street
PO Box 160
Petersburg, Texas 79250

Re: Assignment of Agreement for Limitation on Appraised Value of Property for School District Maintenance and Operations Taxes by and between Petersburg Independent School District and Hale Petersburg Wind LLC – Application 1134

Dear Superintendent Bibb:

Hale Petersburg Wind LLC (“Hale”), party to the above referenced Agreement for Limitation on Appraised Value of Property for School District Maintenance and Operations Taxes (the “Agreement”), has merged into its sole owner, Southwestern Public Service Company (“SPS”), with SPS surviving the merger. Pursuant to Sections 10.2 and 10.3 of the Agreement, in order for SPS to succeed to Hale’s rights and obligations under the Agreement, SPS (on behalf of Hale) and the District must execute an amendment to the Agreement assigning the Agreement to SPS. Attached is a copy of a proposed Agreement amendment accomplishing this.

Also attached is a completed copy of a Chapter 313 Agreement Assignment Information sheet setting forth information requested by the Texas Comptroller of Public Accounts regarding the proposed assignment.

Please let me know if you have any questions or comments regarding this proposed assignment or any of the attached material.

Sincerely,

David T. Hudson
President,
Southwestern Public Service Company

Chapter 313 Agreement Assignment Information Sheet

Section 1: Assignor Information

1. Authorized Company Representative (Assignor)	
a. First Name	David
b. Last Name	Hudson
c. Title	President
d. Organization	Southwest Public Service Company, the successor by merger to Hale Petersburg Wind, LLC
e. Street Address	790 South Buchanan St
f. Mailing Address	790 South Buchanan St
g. City State ZIP	Amarillo, TX 79101
h. Phone Number	806-378-2824
i. Fax Number	806-378-2995
j. Mobile Number (optional)	
k. Business Email Address	David.hudson@xcelenergy.com

2. Agreement associated with this Request for Assignment	
a. School District	Petersburg Independent School District
b. Legal Name of Original Applicant/ Counterparty	Hale Wind Energy, LLC
c. Application #	1134
d. Agreement Execution Date	November 17, 2016
e. Business Email Address	David.hudson@xcelenergy.com

a. Attach the agreement to be assigned as Tab 1.

3. Is the Assignor eligible to assign the Agreement.	Yes
4. Does the Assignor represent that this assignment is being made free of encumbrances or additional PILOT payments not covered in the Agreement?	Yes

Section 2: Assignee Information

5. Authorized Company Representative (Assignee)	
a. First Name	David
b. Last Name	Hudson
c. Title	President
d. Organization	Southwestern Public Service Company
e. Street Address	790 South Buchanan St
f. Mailing Address	790 South Buchanan St
g. City State ZIP	Amarillo, TX 79101
h. Phone Number	806-378-2824
i. Fax Number	806-378-2995
j. Mobile Number (optional)	
k. Business Email Address	David.hudson@xcelenergy.com

6. Will a company official other than the authorized company representative be responsible for responding to future information requests? Yes or No	Yes
---	-----

If yes, please provide contact information for that person.

a. First Name	Chris
b. Last Name	Arend
c. Title	Sr. Director, Tax Services
d. Organization	Xcel Energy Services Inc.
e. Street Address	401 Nicollet Mall
f. Mailing Address	401 Nicollet Mall
g. City State ZIP	Minneapolis, MN 55401
h. Phone Number	612-330-5729
i. Fax Number	612-330-6335
j. Mobile Number (optional)	612-618-1465
k. Business Email Address	Christopher.a.arend@xcelenergy.com

7. Does the assignee authorize the consultant to provide and obtain information related to this application? Yes or No	Yes
--	-----

8. Authorized Company Consultant (If Applicable)	
a. First Name	Matt
b. Last Name	Larsen
c. Title	Partner
d. Organization	Baker Botts L.L.P.
e. Street Address	2001 Ross Avenue, Suite 900
f. Mailing Address	2001 Ross Avenue, Suite 900
g. City State ZIP	Dallas, TX 75201
h. Phone Number	214-953-6673
i. Fax Number	214-661-4673
j. Mobile Number (optional)	214-725-9166
k. Business Email Address	matt.larsen@bakerbotts.com

Section 3: Business Applicant Information

1. What is the legal name of the assignee under which this assignment is made?	Southwestern Public Service Company
2. List the Texas Taxpayer I.D. number of entity subject to Tax Code, Chapter 171 (11 digits)	17505754006
3. List the NAICS code	221100
4. Is the assignee a party to any other pending or active Chapter 313 agreements?	NO

- a. If yes, please list application number, name of school district and year of agreement:

Section 4: Assignee Business Structure

1. Identify Business Organization of Assignee (corporation, limited liability corporation, etc)	Corporation
2. Is assignee a combined group, or comprised of members of a combined group, as defined by Tax Code §171.0001(7)? (Yes or No?)	Yes

- a. If yes, attach a copy of Texas Comptroller Franchise Tax Form No. 05-165, No. 05-166, or any other documentation from the Franchise Tax Division to demonstrate the assignee's combined group membership and contact information. Please make sure to list the reporting number for the entities. All entities have attested to compliance with the agreement to date.

3. Is the assignee current on all tax payments due to the State of Texas?	Yes
4. Are all members of the assignee's combined group current on all tax payments due to the State of Texas?	Yes
5. If the answer to question 3 or 4 is no, please explain and/or disclose any history of default, delinquencies and/or any material litigation, including litigation involving the State of Texas.	

Section 5: Assignee Eligibility Under Tax Code Chapter 313.024

1. Is the assignee an entity subject to the tax under Tax Code, Chapter 171? Yes or No	Yes
2. The property will be used for which one of the following activities	
a. Manufacturing	
b. research and development	
c. a clean coal project, as defined by Section 5.001, Water Code	
d. an advanced clean energy project, as defined by Section 382.003, Health and Safety Code	
e. renewable energy electric generation	Yes
f. electric power generation using integrated gasification combined cycle technology	
g. nuclear electric power generation	
h. a computer center that is used as an integral part or as a necessary auxiliary part for the activity conducted by applicant in one or more activities described by Subdivisions (a) through (h)	
i. a Texas Priority Project, as defined by 313.024(e)(7) and TAC 9.1051	

<Signature Page Follows>

Authorized Signatures:

1) Authorized School District Representative

Name: Brian Bibb Title: Superintendent
Signature: Brian Bibb Date: August 20, 2020

2) Assignor:

The information contained in this application is true and correct to the best of my knowledge and belief:

Name: David Hudson Title: President, Southwestern Public Service Company
Signature: David Hudson Date: August 18, 2020

Notary:



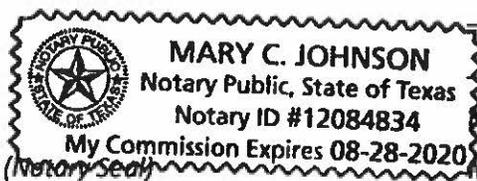
Given under my hand and seal of office this, the
18 day of August, 2020
Mary C Johnson
Notary Public in and for the State of Texas
My Commission Expires: 8-28-2020

3) Assignee:

The information contained in this application is true and correct to the best of my knowledge and belief:

Name: David Hudson Title: President, Southwestern Public Service Company
Signature: David Hudson Date: August 18, 2020

Notary:



Given under my hand and seal of office this, the
18 day of August, 2020
Mary C Johnson
Notary Public in and for the State of Texas
My Commission Expires: 8-28-2020

Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number
17505754006

Report year
2019

Reporting entity taxpayer name
SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate SOUTHWESTERN PUBLIC SERVICE COMPANY		2. Affiliate taxpayer number (if none, use FEI number) 17505754006		3. Affiliate NAICS code 221100	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 1946595967 .00			
10. Gross receipts in Texas (before eliminations) 1341183022 .00		11. Cost of goods sold or compensation (before eliminations) 1457263589 .00			
1. Legal name of affiliate XCEL ENERGY INC.		2. Affiliate taxpayer number (if none, use FEI number) 410448030		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 536097 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate NORTHERN STATES POWER COMPANY, MINNESOTA		2. Affiliate taxpayer number (if none, use FEI number) 32043109316		3. Affiliate NAICS code 221500	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 4725024439 .00			
10. Gross receipts in Texas (before eliminations) 939511 .00		11. Cost of goods sold or compensation (before eliminations) 3734563990 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

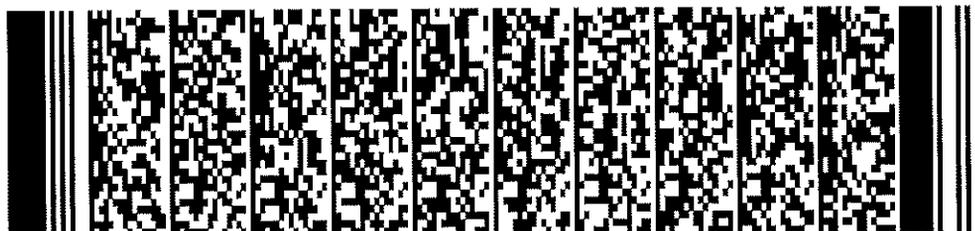
Reporting entity taxpayer number: 17505754006
Report year: 2019
Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate NSP NUCLEAR CORPORATION		2. Affiliate taxpayer number (if none, use FEI number) 411965910		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 3479 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate UNITED POWER AND LAND COMPANY		2. Affiliate taxpayer number (if none, use FEI number) 416021414		3. Affiliate NAICS code 531190	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 20860 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate NORTHERN STATES POWER COMPANY, WISCONSIN		2. Affiliate taxpayer number (if none, use FEI number) 390508315		3. Affiliate NAICS code 221500	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 857767746 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 576159786 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE FM



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

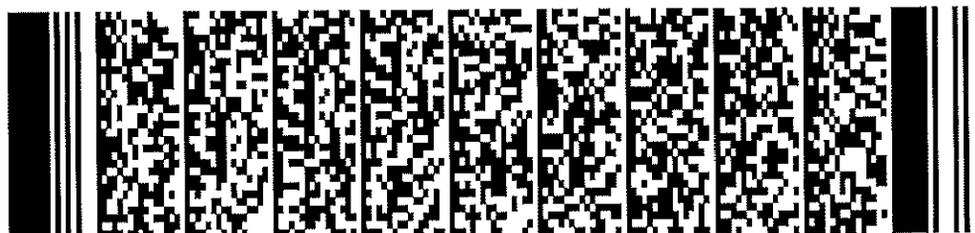
Reporting entity taxpayer number: 17505754006
Report year: 2019
Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate CHIPPEWA AND FLAMBEAU IMPROVEMENT COMPANY		2. Affiliate taxpayer number (if none, use FEI number) 390207140		3. Affiliate NAICS code 541990	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 177374 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate CLEARWATER INVESTMENTS, INC.		2. Affiliate taxpayer number (if none, use FEI number) 391714342		3. Affiliate NAICS code 531110	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 230960 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate NSP LANDS, INC.		2. Affiliate taxpayer number (if none, use FEI number) 391729563		3. Affiliate NAICS code 531390	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 142 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

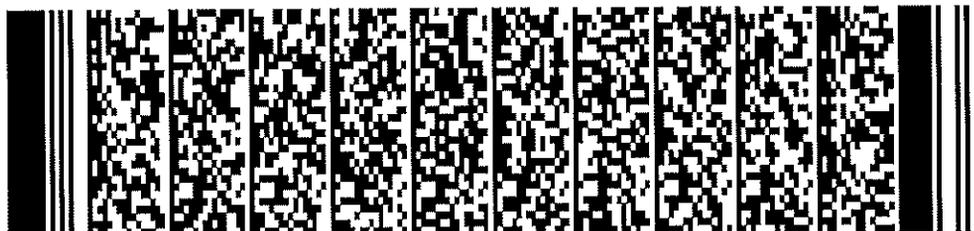
Reporting entity taxpayer number: 17505754006
 Report year: 2019
 Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate PUBLIC SERVICE COMPANY OF COLORADO		2. Affiliate taxpayer number (if none, use FEI number) 32064786612		3. Affiliate NAICS code 221500	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 4397958888 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 3042741565 .00			
1. Legal name of affiliate 1480 WELTON, INC.		2. Affiliate taxpayer number (if none, use FEI number) 846015504		3. Affiliate NAICS code 531120	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 173295 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate GREEN AND CLEAR LAKES COMPANY		2. Affiliate taxpayer number (if none, use FEI number) 846015505		3. Affiliate NAICS code 531120	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 3 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number: 17505754006
Report year: 2019
Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate P.S.R. INVESTMENTS, INC.		2. Affiliate taxpayer number (if none, use FEI number) 841008701		3. Affiliate NAICS code 525100	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 1324 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate NICOLLET HOLDINGS COMPANY, LLC		2. Affiliate taxpayer number (if none, use FEI number) 813681791		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 4635982 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate NICOLLET PROJECT HOLDINGS LLC		2. Affiliate taxpayer number (if none, use FEI number) 821919562		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

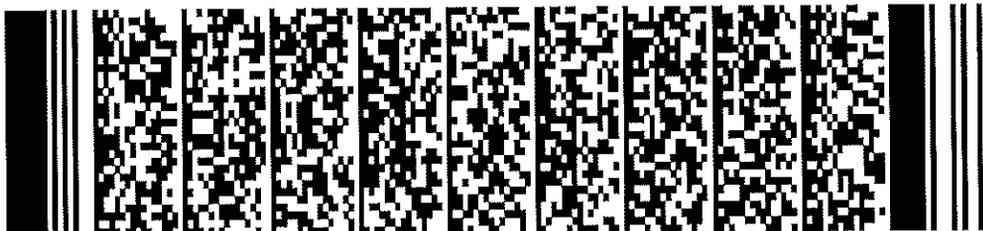
Reporting entity taxpayer number: 17505754006
 Report year: 2019
 Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate NICOLLET PROJECTS I LLC		2. Affiliate taxpayer number (if none, use FEI number) 821920869		3. Affiliate NAICS code 221100	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 1270091 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY COMMUNICATIONS GROUP INC.		2. Affiliate taxpayer number (if none, use FEI number) 411980447		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 518 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate SEREN INNOVATIONS, INC.		2. Affiliate taxpayer number (if none, use FEI number) 411856779		3. Affiliate NAICS code 517000	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE FM



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

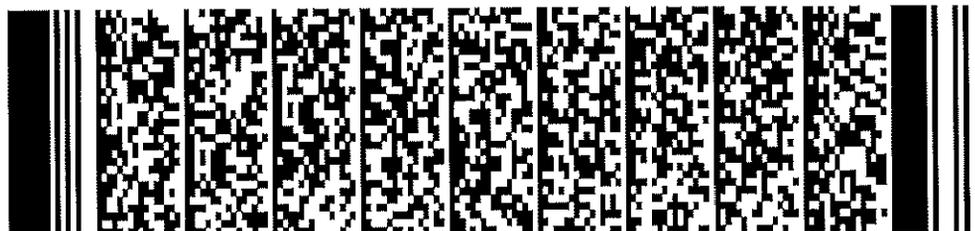
Reporting entity taxpayer number: 17505754006
 Report year: 2019
 Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY MARKETS HOLDINGS INC.		2. Affiliate taxpayer number (if none, use FEI number) 411980451		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 1404829 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate E PRIME, INC.		2. Affiliate taxpayer number (if none, use FEI number) 841294626		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 554868 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY INTERNATIONAL INC.		2. Affiliate taxpayer number (if none, use FEI number) 841396518		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 779 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number
17505754006

Report year
2019

Reporting entity taxpayer name
SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY RETAIL HOLDINGS INC.		2. Affiliate taxpayer number (if none, use FEI number) 411980452		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	

8. Gross receipts subject to throwback in other states (before eliminations) 0 .00	9. Gross receipts everywhere (before eliminations) 3448 .00
10. Gross receipts in Texas (before eliminations) 0 .00	11. Cost of goods sold or compensation (before eliminations) 0 .00

1. Legal name of affiliate REDDY KILOWATT CORPORATION		2. Affiliate taxpayer number (if none, use FEI number) 410995530		3. Affiliate NAICS code 541800	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	

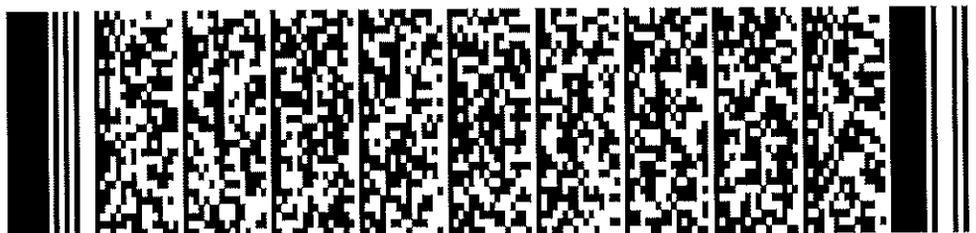
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00	9. Gross receipts everywhere (before eliminations) 0 .00
10. Gross receipts in Texas (before eliminations) 0 .00	11. Cost of goods sold or compensation (before eliminations) 0 .00

1. Legal name of affiliate XCEL ENERGY PERFORMANCE CONTRACTING INC.		2. Affiliate taxpayer number (if none, use FEI number) 411759883		3. Affiliate NAICS code 541990	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	

8. Gross receipts subject to throwback in other states (before eliminations) 0 .00	9. Gross receipts everywhere (before eliminations) 482 .00
10. Gross receipts in Texas (before eliminations) 0 .00	11. Cost of goods sold or compensation (before eliminations) 0 .00

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number

Report year

Reporting entity taxpayer name

17505754006

2019

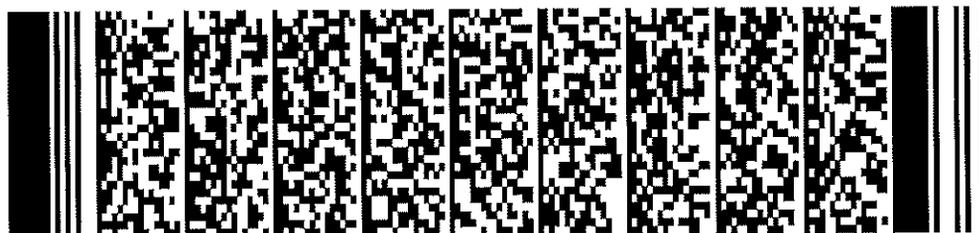
SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY TRANSMISSION HOLDING COMPANY, LLC		2. Affiliate taxpayer number (if none, use FEI number) 465483780		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY TRANSMISSION DEVELOPMENT COMPANY, LLC		2. Affiliate taxpayer number (if none, use FEI number) 465483683		3. Affiliate NAICS code 221100	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY SOUTHWEST TRANSMISSION COMPANY, LLC		2. Affiliate taxpayer number (if none, use FEI number) 465628607		3. Affiliate NAICS code 221100	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

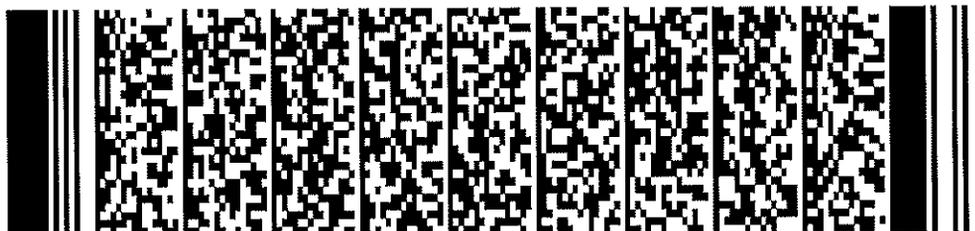
Reporting entity taxpayer number: 17505754006
Report year: 2019
Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY WEST TRANSMISSION COMPANY, LLC		2. Affiliate taxpayer number (if none, use FEI number) 472822967		3. Affiliate NAICS code 221100	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY VENTURES INC.		2. Affiliate taxpayer number (if none, use FEI number) 411980449		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 18 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate ELOIGNE COMPANY		2. Affiliate taxpayer number (if none, use FEI number) 411750076		3. Affiliate NAICS code 531110	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 931322 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

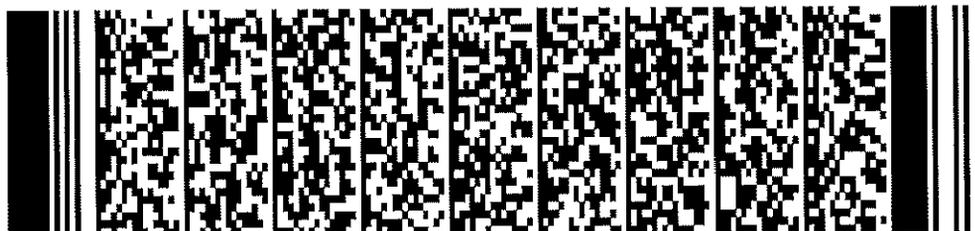
Reporting entity taxpayer number: 17505754006
 Report year: 2019
 Reporting entity taxpayer name: SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY VENTURE HOLDINGS, INC.		2. Affiliate taxpayer number (if none, use FEI number) 475211817		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate ENERGY IMPACT FUND INVESTMENT, LLC		2. Affiliate taxpayer number (if none, use FEI number) 475213982		3. Affiliate NAICS code 525990	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 2679180 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY INVESTMENTS LLC		2. Affiliate taxpayer number (if none, use FEI number) 822892602		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number
 17505754006

Report year
 2019

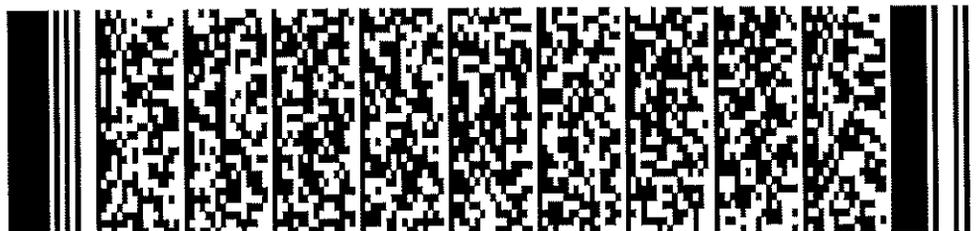
Reporting entity taxpayer name
 SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY WHOLESALE GROUP INC.		2. Affiliate taxpayer number (if none, use FEI number) 411980450		3. Affiliate NAICS code 551112	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 7755 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate QUIXX CAROLINA, INC.		2. Affiliate taxpayer number (if none, use FEI number) 30117871878		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate QUIXX CORPORATION		2. Affiliate taxpayer number (if none, use FEI number) 17520522230		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 1201 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number
17505754006

Report year
2019

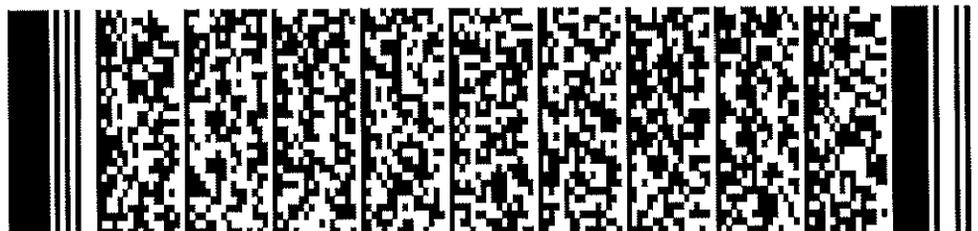
Reporting entity taxpayer name
SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate QUIXXLIN CORP.		2. Affiliate taxpayer number (if none, use FEI number) 752716996		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 0 .00			
10. Gross receipts in Texas (before eliminations) 7 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate XCEL ENERGY WYCO INC.		2. Affiliate taxpayer number (if none, use FEI number) 841516453		3. Affiliate NAICS code 523900	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 24247915 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			
1. Legal name of affiliate WESTGAS INTERSTATE, INC.		2. Affiliate taxpayer number (if none, use FEI number) 841146601		3. Affiliate NAICS code 486000	
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input checked="" type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118		7. Affiliate reporting end date m m d d y y 123118	
8. Gross receipts subject to throwback in other states (before eliminations) 0 .00		9. Gross receipts everywhere (before eliminations) 176478 .00			
10. Gross receipts in Texas (before eliminations) 0 .00		11. Cost of goods sold or compensation (before eliminations) 0 .00			

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------



Texas Franchise Tax Affiliate Schedule

Tcode 13253 Annual

Reporting entity taxpayer number
17505754006

Report year
2019

Reporting entity taxpayer name
SOUTHWESTERN PUBLIC SERVICE COMPANY

Reporting entity must be included on Affiliate Schedule. Affiliate reporting period dates must be within combined group's accounting period dates.

1. Legal name of affiliate XCEL ENERGY SERVICES INC.		2. Affiliate taxpayer number (if none, use FEI number) 18413934011		3. Affiliate NAICS code 541990	
---	--	---	--	-----------------------------------	--

4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y 010118	7. Affiliate reporting end date m m d d y y 123118
---	---	--	--

8. Gross receipts subject to throwback in other states (before eliminations) 0 .00	9. Gross receipts everywhere (before eliminations) 136992127 .00
---	---

10. Gross receipts in Texas (before eliminations) 137210984 .00	11. Cost of goods sold or compensation (before eliminations) 0 .00
--	---

1. Legal name of affiliate		2. Affiliate taxpayer number (if none, use FEI number)		3. Affiliate NAICS code	
----------------------------	--	--	--	-------------------------	--

4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y	7. Affiliate reporting end date m m d d y y
---	---	--	--

8. Gross receipts subject to throwback in other states (before eliminations) 0 .00	9. Gross receipts everywhere (before eliminations) 0 .00
---	---

10. Gross receipts in Texas (before eliminations) 0 .00	11. Cost of goods sold or compensation (before eliminations) 0 .00
--	---

1. Legal name of affiliate		2. Affiliate taxpayer number (if none, use FEI number)		3. Affiliate NAICS code	
----------------------------	--	--	--	-------------------------	--

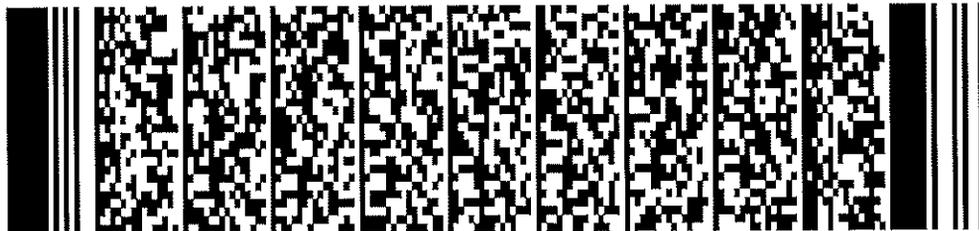
4. Check box if entity is disregarded for franchise tax <input type="checkbox"/>	5. Check box if this affiliate does NOT have NEXUS in Texas <input type="checkbox"/>	6. Affiliate reporting begin date m m d d y y	7. Affiliate reporting end date m m d d y y
---	---	--	--

8. Gross receipts subject to throwback in other states (before eliminations) 0 .00	9. Gross receipts everywhere (before eliminations) 0 .00
---	---

10. Gross receipts in Texas (before eliminations) 0 .00	11. Cost of goods sold or compensation (before eliminations) 0 .00
--	---

The reporting entity of a combined group with a temporary credit for business loss carryforwards preserved for itself and/or affiliates must submit common owner information. This information must be provided to satisfy franchise tax reporting requirements. Learn more at www.comptroller.texas.gov/franchise/. An information report (Form 05-102 or Form 05-167) must be filed for each affiliate that is organized in Texas or that has a physical presence in Texas.

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	FM	<input type="checkbox"/>
-------	--------------------------	----	--------------------------

