TX-MSG	TX ELECTRONIC FILING MESSAGES MUST be corrected before electronic filing is allowed.	PAGE 1
Name(s) as shown on return TEXAS INSTRUMENTS ALUMNI ASSOCIATIO		SSN/FEIN 84-4815053

0077 The TX main form is already accepted.

Name(s) as shown on return
TEXAS INSTRUMENTS ALUMNI ASSOCIATIO

SSN/FEIN
84-4815053

052 The No Tax Due Report is no longer available for 2024 reports. Effective for reports due on or after Jan.1, 2024, an entity that has annualized total revenue less than or equal to the no tax due threshold of $2.65 million is not required to file a No Tax Due Report.

However, the entity is still required to file a Public Information Report (PIR) or an Ownership Information Report (OIR) unless this is a Final Report.

2026 TX05102 Filing Instructions
TEXAS INSTRUMENTS ALUMNI ASSOCIATIO

Form filed:

TX05102 form is due.

Filing method:

Your return has been e-filed, do not mail your return

Due date:

05-15-2026

Other instructions:

The return reflects neither a refund nor a balance due

TX2026 Ver. 17.0

05-102 (Rev.2-24/35)

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP), Professional Associations (PA) and Financial Institutions.

Tcode 13196 Franchise

Taxpayer number	Report year	Due date
32073475918	2026	05/15/2026

You have certain rights *under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you.*

Taxpayer name: TEXAS INSTRUMENTS ALUMNI ASSOCIATIO

☐ Check box if the mailing address has changed.

Mailing address: PO BOX 740181

Secretary of State (SOS) file number or Comptroller file number: 0803552347

City	State	ZIP code plus 4
DALLAS	TX	75243

☒ Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office: PO BOX 740181 DALLAS TX 75243

Principal place of business: PO BOX 740181 DALLAS TX 75243

You must report officer, director, member, general partner and manager information as of the date you complete this report.

Mail signed report to:
Texas Comptroller of Public Accounts
P.O. Box 149348
Austin, Tx 78714-9348

For locations and phone numbers visit www.comptroller.texas.gov/about/contact.

Please sign below! **This report must be signed to satisfy franchise tax requirements.**

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

Name	Title	Director	Term expiration (m m d d y y)
CHRISTIE RAMBIN	TREASURER	☐ YES	
Mailing address	**City**	**State**	**ZIP Code**
13900 N CENTRAL EXPY FL 2ND	DALLAS	TX	75243
Name	Title	Director	Term expiration (m m d d y y)
		☐ YES	
Mailing address	City	State	ZIP Code
Name	Title	Director	Term expiration (m m d d y y)
		☐ YES	
Mailing address	City	State	ZIP Code

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

Registered agent and registered office currently on file *(see instructions if you need to make changes)*

You must make a filing with the Secretary of State to change registered agent, registered office or general partner information.

Agent:			
Office:	City	State	ZIP Code

The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

sign here	Title	Date	Area code and phone number
	TREASURER	04/15/2025	(214) 762-8394

Texas Comptroller Official Use Only

VE/DE	☐	PIR IND	☐
PM Date			

1024

TXDEDWK	Texas Total Revenue Exclusions	2026

Name(s) as shown on return

TEXAS INSTRUMENTS ALUMNI ASSOCIATIO

Taxpayer Number

32073475918

1	Bad Debt expensed for Federal Tax purposes (related to prev. reported receipts	
2	Foreign royalties and foreign dividends	
3	Net distributive income from taxable entities treated as ptrships or S Corps.	
4	Schedule C Dividends on Form 1120	4,151
5	Items of income attributable to disregarded entity for Federal tax	
6	Flow-through Funds	
7	Dividends and Interest from Federal obligations	
8	Tiered Partnership Total Revenue passed to upper tier entity	
8	Other Exclusion	
	TOTAL DEDUCTIONS	4,151