



CT-185

New York State Department of Taxation and Finance

Cooperative Agricultural Corporation Franchise Tax Return

Tax Law — Article 9, Section 185

For calendar year 2014

Final return Amended return

Employer identification number (EIN)		File number	Business telephone number ()	If you claim an overpayment, mark an X in the box <input type="checkbox"/>	
Legal name of corporation			Trade name/DBA		
Mailing name (if different from legal name above) and address c/o Number and street or PO box			State or country of incorporation	Date received (for Tax Department use only)	
City State ZIP code			Date of incorporation	Foreign corporations: date began business in NYS	
NAICS business code number (from NYS Pub 910)	If address/phone above is new, mark an X in the box <input type="checkbox"/>	If you need to update your address or phone information for corporation tax, or other tax types, you can do so online. See Business information in Form CT-1.			Audit (for Tax Department use only)
NYS principal business activity					

A. Pay amount shown on line 13. Make payable to: New York State Corporation Tax	Payment enclosed
Attach your payment here. Detach all check stubs. (See instructions for details.)	<input type="checkbox"/>

Computing tax (See Form CT-185-I, Instructions for Form CT-185, for assistance in completing this return.)

1 Value of issued capital stock (the larger of line 19, line 20, or line 21) ...	1		
2 New York base (multiply line 1 by _____ %, from line 30)	2		
3 Tax on allocated issued capital stock at one mill (multiply line 2 by .001)	3		
4 Tax (based on dividend rate) from line 45	4		
5 Minimum tax	5		1000
6 Tax due (amount from line 3, 4, or 5, whichever is largest; authorized foreign corps see instructions)	6		
7a Have you been convicted of an offense, or are you the owner of an entity convicted of an offense, defined in New York State Penal Law Article 200 or 496, or section 195.20? (See Form CT-1; mark an X in one box)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
7b Tax credits: Mark an X in the box(es) indicating the form(s) filed and attach form(s): CT-40 • <input type="checkbox"/> CT-41 • <input type="checkbox"/> CT-43 • <input type="checkbox"/> CT-243 • <input type="checkbox"/> CT-249 • <input type="checkbox"/> CT-259 • <input type="checkbox"/> CT-501 • <input type="checkbox"/> CT-502 • <input type="checkbox"/> CT-601 • <input type="checkbox"/> CT-603 • <input type="checkbox"/> CT-606 • <input type="checkbox"/> CT-607 • <input type="checkbox"/> CT-611 • <input type="checkbox"/> CT-611.1 • <input type="checkbox"/> CT-612 • <input type="checkbox"/> CT-613 • <input type="checkbox"/> CT-631 • <input type="checkbox"/> CT-633 • <input type="checkbox"/> CT-637 • <input type="checkbox"/> CT-639 • <input type="checkbox"/> DTF-630 • <input type="checkbox"/> Other credits: _____ • <input type="checkbox"/>	7b		
8 Total tax (subtract line 7b from line 6)	8		
9 Prior payments	9		
10 Balance (if line 9 is less than line 8, subtract line 9 from line 8)	10		
11 Interest on late payment (see instructions)	11		
12 Late filing and late payment penalties (see instructions)	12		
13 Balance due (add lines 10, 11, and 12 and enter here; enter the payment amount on line A above)	13		
14 Overpayment (if line 8 is less than line 9, subtract line 8 from line 9)	14		
15 Amount of overpayment to be credited to next period	15		
16a Amount of overpayment to be refunded (subtract line 15 from line 14)	16a		
16b Refund of unused tax credits (attach appropriate forms)	16b		
16c Amount of refundable credit to be applied as an overpayment to next year's tax	16c		

Schedule A — Assets and liabilities (use end of year values only)

End of year values

17 Total assets from your balance sheet	17	
18 Total liabilities from your balance sheet	18	
19 Net value of assets (subtract line 18 from line 17)	19	

Schedule B — Computing net value of issued capital stock (see instructions)

Part 1 — Average value

A — Class of stock	B — Number of shares at year end	C — Selling price during year		D — Average selling price	E — Net value (column B x column D)
		High	Low		
Common					
Preferred					
No-par-value					
Total				Net value (add column E)	20

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Attach a copy of your federal return.

Part 2 — Computing net value at \$5 per share

Total number of shares from Schedule B, Part 1, column B: _____ . Multiply by \$5 per share **21**

Schedule C — Computing tax rate if dividend rate is 6% or more on some or all classes of capital stock (see instructions)

A Class of stock	B Value of stock on which dividends were paid	C Dividends paid	D Dividend rate (C ÷ B)	E If column D is 6% or more, multiply each percent, including fractions of a percent, in column D by .00025 (¼ mill)
Common			%	Tax rate (enter on line 33)
Preferred			%	Tax rate (enter on line 36)
No-par-value			%	Tax rate (enter on line 39)

Schedule D — Allocation percentage/issuer's allocation percentage — if all of your assets are in New York, enter 100 on line 30 (see instructions)

Average value for the year of:		A — New York State	B — Everywhere
22 Cash and bank balance	22		
23 Accounts receivable.....	23		
24 Shares of stock of other companies owned (attach list showing corporate name, shares held, and actual value)	24		
25 Bonds, loans, and other securities held, used, or employed.....	25		
26 All other assets.....	26		
27 Leaseholds	27		
28 Real estate owned.....	28		
29 Total (add lines 22 through 28)	29		
30 Allocation percentage/issuer's allocation percentage (divide line 29, column A, by column B; use this amount to compute lines 2, 32, 35, 38, and 43)	30	%	

Schedule E — Computing tax (based on dividend rate if Schedule C, column D, is 6% or more; see instructions)

31 Par value common stock (from Schedule C, column B)	31		
32 Taxable base (multiply line 31 by _____ %, from line 30)	32		
33 Tax (multiply line 32 by _____, the tax rate from Sched. C, col. E)	33		
34 Par value preferred stock (from Schedule C, column B)	34		
35 Taxable base (multiply line 34 by _____ %, from line 30)	35		
36 Tax (multiply line 35 by _____, the tax rate from Sched. C, col. E)	36		
37 No-par-value stock (from Schedule C, column B)	37		
38 Taxable base (multiply line 37 by _____ %, from line 30)	38		
39 Tax (multiply line 38 by _____, the tax rate from Sched. C, col. E)	39		
40 Remaining value of capital stock	40		
41 Value of stock used in computing line 40 on which dividends of 6% or more were paid	41		
42 Taxable stock (subtract line 41 from line 40)	42		
43 Taxable base (multiply line 42 by _____ %, from line 30)	43		
44 Tax on one mill (multiply line 43 by .001)	44		
45 Tax on allocated issued capital stock using dividend rates (add lines 33, 36, 39, and 44; enter here and on line 4) ...	45		

Third - party designee (see instructions)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Designee's name (print)	Designee's phone number ()
	Designee's e-mail address		PIN

Certification: I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Authorized person	Printed name of authorized person	Signature of authorized person	Official title
	E-mail address of authorized person	Telephone number ()	Date
Paid preparer use only (see instr.)	Firm's name (or yours if self-employed)	Firm's EIN	Preparer's PTIN or SSN
	Signature of individual preparing this return	Address	City State ZIP code
	E-mail address of individual preparing this return	Preparer's NYTPRIN	Date

See instructions for where to file.

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