

CT-185

New York State Department of Taxation and Finance

Cooperative Agricultural Corporation Franchise Tax Return

Employer identification number Legal name of corporation Mailing name (if different from legal name above) and address c/o Number and street or PO box City State Z NAICS business code number (from federal return) If address/phone above is new, mark an X in the box Principal business activity	I SE TAX Article 9, 9					For calend	dar year 20	009	
Mailing name (if different from legal name above) and address C/O Number and street or PO box City State Z NAICS business code number (from federal return) If address/phone above is new, mark an X in the box Principal business activity	Business telepho	ne number				I	f you claim an		
Mailing name (if different from legal name above) and address C/O Number and street or PO box City State Z NAICS business code number (from federal return) If address/phone above is new, mark an X in the box Principal business activity	()						overpayment, mar an X in the box	k	
C/O Number and street or PO box City State Z NAICS business code number (from federal return) If address/phone above is new, mark an X in the box Principal business activity			Trade name/DBA			1			
Number and street or PO box City State Z NAICS business code number (from federal return) If address/phone above is new, mark an X in the box principal business activity			State or country of incorpo	ration	Date re	eceived (for Tax D	epartment use onl	'y)	
City State Z NAICS business code number (from federal return) If address/phone above is new, mark an X in the box Principal business activity			5						
NAICS business code number (from federal return) If address/phone above is new, mark an X in the box Principal business activity			Date of incorporation						
above is new, mark an X in the box Principal business activity	IP code		Foreign corporations: date business in NYS	egan					
mark an X in the box type Trincipal business activity	ii you lied to update you address of prior					Audit (for Tax Department use only)			
	/pes, you can d	o so onlir	e. Visit our Web site at						
			for the change my add siness information in th						
A. Pay amount shown on line 13. Make payable to: New Yo		orporat	ion Tax			Paymen	t enclosed		
Attach your payment here. Detach all check stubs. (See in	nstructions fo	r details.)		A.				
computing tax (See Form CT-185-I, Instructions for Form CT-185	5, for assistan	ce in co	mpleting 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.		10	00	
6 Tax due (amount from line 3, 4, or 5, whichever is largest; authorized to the control of the c	orized foreign	corps se	ee instructions)	•	6.				
7 Tax credits: Mark an X in the box(es) indicating the form(s) filed and	attach f	orm(s): CT-40 • [
CT-41•☐ CT-43•☐ CT-243•☐ CT-249•☐ CT-259•[☐ CT-601•[☐ CT-6	603 • □ CT-606 • [
CT-611 • ☐ CT-611.1 • ☐ CT-612 • ☐ CT-613 • ☐ CT	-631 • 🗆 D	TF-630	•						
Other: •				•	7.				
8 Total tax (subtract line 7 from line 6)					8.				
9 Prior payments		•	9.						
10 Balance (if line 9 is less than line 8, subtract line 9 from line 8)									
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	he payment a	mount o	n line A above)		13.				
14 Overpayment (if line 8 is less than line 9, subtract line 8 from line 9)									
15 Amount of overpayment to be credited to next period									
6a Amount of overpayment to be refunded (subtract line 15 from 15)	om line 14)				16a.				
6b Refund of unused tax credits (attach appropriate forms)									
6c Amount of refundable credit to be applied as an overpay		t year's	tax		16c.				
chedule A — Assets and liabilities (use end of year val						End of yea	ar values		
7 Total assets from your balance sheet	ues only)								
8 Total liabilities from your balance sheet				17.					
9 Net value of assets (subtract line 18 from line 17)			•	17. 18.					
chedule B — Computing net value of issued capita art 1 — Average value			•						
- Class of stock B - Number of C - Selling price			•	18.					
shares at year end High	l stock (see	e instruc	etions)	18. 19.	ce	E – N	et value		
Common	l stock (see	e instruc	•	18. 19.	се		et value x column D)		
Preferred	I stock (see	e instruc	etions)	18. 19.	ce				
No-par-value	I stock (see	e instruc	etions)	18. 19.	ce				

Net value (add column E) 20.

Total

		outing net value at \$5 f shares from Schedule		nn B	:		. Multiply by \$5 per share	21.				
Sch	nedule C -	- Computing tax rate	if dividend ra	te is	6% or mor	e on	some or all classes of	capi	tal stoc	k (se	e instructi	ions)
С	A lass of stoc	Value of stock on which dividends were paid	C Dividends pa	id	D Dividend ra (C ÷ B)	ate	If column D is 6% or more fractions of a percent, i	E , mult n colu	iply each ımn D by	perce	ent, includ 25 (¼ mill)	ing
(Common			%	Ta	x rate	(enter on	line (33, Schedu	ule E)		
F	Preferred			%	Ta	x rate	e (enter on	line (36, Schedu	ule E)		
1	No-par-value				%	Ta	x rate	e (enter on	line (39, Schedu	ule E)	
Scl	nedule D -	 Allocation percen enter 100 on line 3 				cent	age – if all of your ass	ets a				
Ave	verage value for the year of:						A — New York State B — Everywher					
22	Cash and bank balance					22.						
		Accounts receivable										
24	Shares of stock of other companies owned (attach list											
		orporate name, shares hel				24.						
		ns, and other securities		-	-	25.						
26	All other as	sets				26.						
		3				27.						
		e owned				28.		<u> </u>				
		nes 22 through 28)				29.		•				\perp
30		percentage/issuer's allo	•	_								
_		by column B; use this amount t					%		-			
							plumn D, is 6% or more; se	e ins	tructions)		
		common stock (from Sch	,	,		31.		-				
		se (multiply line 31 by				32.			T			_
						1		33.				\bot
	-	oreferred stock (from Sch						-				
		se (multiply line 34 by				35.			1			
	Tax (multiply line 35 by, the tax rate from Schedule C, column E)						36.				\bot	
	No-par-value stock (from Schedule C, column B)							-				
		se (multiply line 37 by				38.						\blacksquare
								39.				
	_	value of capital stock				40.		-				
		used in computing line 40 on			-			-				
		ock (subtract line 41 from l	,			42.		-				
		se (multiply line 42 by				43.		4.4	Τ			
		mill <i>(multiply line 43 by .0</i>	,				d 44; enter here and on line 4)	44.				+
		'	asing dividend rai	.es (a	da iiries 33, 36, c	39, an	a 44; enter here and on line 4)		Designee's	nhone	number	\dashv
	ird – party	Yes No No	grice 3 riarrie (print)					()	prioric	Tidifiboi	
	designee e instructions)	Designee's e-mail address								PIN [
		certify that this return a	nd any attachm	ents	are to the he	et of	f my knowledge and belief	true			complete	
		Signature of authorized perso		.51110	, 410 10 1110 00		Official title	a ac,	3011001,	4114	- STIPICLE	· —
Α	uthorized											
	person	E-mail address of authorized	person						Da	ate		
	Firm'	s name (or yours if self-employed)							ID numbe	r		
1	Paid											
1 -	eparer Signa use	ature of individual preparing thi	s return	Addr	ess		City				ZIP code	
1		il address of individual prepari	ng this return						Da	ate		

See instructions for where to file.