	pennsylvania DEPARTMENT OF REVENUE	750075707		
	RCT-126 (09-14) PAGE 1 OF 2 MEMBERSHIP REPORT ELECTRIC COOPERATIVE CORPORATIO	DNS	Date Received (C	Official Use Only)
Revenue ID	Federal ID (FEIN) Parent Corporation	(FEIN)	Tax Year Begin:	
			Tax Year End:	5/37/50 <sup></sup>
Taxpayer Name		Check	to Indicate a Change of	Address
First Line of Addr	ress		All Correspondence to the led Report	e Preparer
Second Line of A	ddroce	First R	•	
	uuress	Payme	nt Made Electronically	
City	State ZIP	Last Re	eport	
Phone	LI L	Out of	Existence as of:	
Email				

Tax Year Begin:		]
Tax Year End: La Due Date: July 1	./31/50 <sup>-</sup>	-
ck to Indicate a Change of A d All Correspondence to the ended Report t Report ment Made Electronically	-	
t Report		]
of Existence as of:		

## **USE WHOLE DOLLARS ONLY**

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9.	
10.	



	Social Security Number of Officer	
	Phone	
	Email	

I affirm under penalties prescribed by law this report, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. If this report is an amended report, the taxpayer hereby consents to the extension of the assessment period for this tax year to one year from the date of filing of this amended report or three years from the filing of the original report, whichever period last expires, and agrees to retain all required records pertaining to that tax and tax period until the end of the extended assessment period, regardless of any statutory I am authorized to execute this consent to the extension of the assessment period. Signature of Officer Date



Officer Last Name Officer First Name Title of Officer

2. Total Estimated Payments

4. Total "Restricted" Tax Credits 5. Total Credit: (Line 2 plus Line 3 plus Line 4)

3. Total Payments Carried Forward From Prior Year Return

1. Electric Cooperative Corporation Fee (Page 2, Line 3)

- 6. Tax Due: (If Line 1 is more than Line 5, enter the difference here.)
- 7. Remittance: (Include interest and penalty, if applicable.)
- 8. OVERPAYMENT: (If Line 5 is more than Line 1, enter the difference here.)
- 9. Refund: (Amount of Line 8 to be refunded after offsetting all unpaid liabilities)
- 10. Transfer: (Amount of Line 8 to be credited to the next tax year after offsetting all unpaid liabilities)

RCT-126 (09-14) PAGE 2 OF 2 CALCULATION OF TAX	7560075507	Revenue ID		L
Street Address of Corporation's Principal Office City State ZIP				
<ol> <li>Did the corporation provide retail electric services out the tax period covered by this report?</li> </ol>	side its certified territory during		Y/N	
If yes, the co-op must also file the Gross Receipts Tax Report for Electric, Hydro-Electric and Water Power Companies,				

2. Total number of members in the corporation

RCT-112.

3. Fee of \$10 per 100 members or fraction thereof. Enter amount on Page 1, Line 1.



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## **Preparer's Information:**

Firm Name	Individual Preparer Name	
Firm FEIN	Phone	
Address	Email	
City	Social Security Number	
State	or PTIN	
ZIP		

I affirm under penalties prescribed by law this report, including any accompanying schedules and statements, has been prepared by me and to the best of my knowledge and belief is a true, correct and complete report.
Signature of Preparer
Date