



1250019105

Date Received (Official Use Only)

**RCT-125** 08-19 (FI) **PAGE 1 OF 3**  
**CORPORATE NET INCOME TAX**  
**COOPERATIVE AGRICULTURE ASSOCIATION**

C

Revenue ID  Federal ID (FEIN)  Parent Corporation (FEIN)

Tax Year Begin:

Tax Year End:

**Due Date: (See Instructions)**

Taxpayer Name   
First Line of Address   
Second Line of Address   
City  State  ZIP   
Phone   
Email

Check to Indicate a Change of Address

Amended Report (Include REV-1175.)

First Report

Payment Made Electronically

Final Report (See Instructions.)

Out of Existence Date:

**USE WHOLE DOLLARS ONLY**

1. Cooperative Agriculture Association Corporate Net Income Tax (Page 2, Line 4)
2. Total Estimated Payments
3. Total Payments Carried Forward From Prior Year Return
4. Total "Restricted" Tax Credits
5. Total Credit: (Line 2 plus Line 3 plus Line 4)
6. Tax Due: (If Line 1 is more than Line 5, enter the difference here.)
7. Remittance
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)

1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>
4.	<input type="text"/>
5.	<input type="text"/>
6.	<input type="text"/>
7.	<input type="text"/>
8.	<input type="text"/>
9.	<input type="text"/>
10.	<input type="text"/>



**Corporate Officer Information:**

Officer Last Name   
Officer First Name   
Title of Officer

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 provision providing for a shorter period of retention. For purposes of this extension, an original report filed before the due date is deemed filed on the due date. I am authorized to execute this consent to the extension of the assessment period.

<b>Signature of Officer</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>

**RCT-125** 08-19 (FI) **PAGE 2 OF 3**  
**CALCULATION OF TAX**

**USE WHOLE DOLLARS ONLY**

**C**

**ATTACH FEDERAL FORMS**

- 1. Net Income (Dividends declared or declared and paid, Schedule A, Line 9)
- 2. Allocation Decimal (Schedule B, Line 3)
- 3. Net Income allocated to Pennsylvania (Line 1 times Line 2)
- 4. Tax (4 percent of Line 3)

1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>
4.	<input type="text"/>

**SCHEDULE A--RECONCILIATION OF BEGINNING AND ENDING UNAPPROPRIATED RETAINED EARNINGS**

- 1. Balance--Beginning of Year
- 2. Net Income per Books
- 3. Other Increases (Attach Schedule.)
- 4. Total (Sum of Lines 1 through 3)

1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>
4.	<input type="text"/>

**Deductions:**

- 5. Patronage refunds
- 6. Transferred to reserves
- 7. Statutory reserve
- 8. Other Decreases (Attach Schedule.)
- 9. Dividends on capital stock declared or declared and paid
- 10. Total Decreases (Total Line 5 through Line 9)
- 11. Balance - End of year (Line 4 minus Line 10)

5.	<input type="text"/>
6.	<input type="text"/>
7.	<input type="text"/>
8.	<input type="text"/>
9.	<input type="text"/>
10.	<input type="text"/>
11.	<input type="text"/>

**SCHEDULE B - DETERMINATION OF ALLOCATION DECIMAL**

- 1. Total gross receipts assignable to Pennsylvania
- 2. Total gross receipts from all business
- 3. Allocation decimal (Divide Line 1 by Line 2 and carry to six decimal places)

1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>

**Preparer's Information:**



Firm Name

Firm FEIN

Address

City

State

ZIP

Individual Preparer Name

Phone

Email

Social Security Number or PTIN

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.

<b>Signature of Preparer</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>

**GENERAL INFORMATION**

Location of records	
Records in care of	
State of incorporation or organization	
Date of incorporation or organization	
Other states where business is transacted	

**SCHEDULE OF REAL PROPERTY IN PA**

(Attach schedule if additional space is needed.)

O=Owns R=Rents	Street Address	City	County





**pennsylvania**

DEPARTMENT OF REVENUE

# Instructions for RCT-125

## Corporate Net Income Tax - Cooperative Agriculture Association

### GENERAL INFORMATION

#### REMINDER

- The RCT-125 can now be filed electronically at [my-path.pa.gov](http://my-path.pa.gov).
- All payments of \$1,000 or more must be made electronically or by certified or cashier's check remitted in person or by express mail courier.
- Use only whole dollars when preparing tax reports.
- Taxpayers may request a 60 day extension to file this report electronically via myPATH or by filing the REV-426.



**NOTE:** The automatic PA extension provided by Act 52 of 2013 to those with valid federal extensions DOES NOT apply to this tax.

- Use **ONLY** the most current, non-year-specific tax form and instructions for filing **ALL** years. **If an amended report must be filed, taxpayers must use the most current, non-year-specific tax form, completing all sections of the form. REV-1175, Schedule AR (explanation for amending), must be included when filing an amended report.**

#### ANNUAL REPORT CHECKLIST

Make sure you include the following to file your annual report properly and completely:

- Negative amounts must be written using a minus sign preceding the number. Do not use parentheses.
- Complete RCT-125, Corporate Net Income Tax - Cooperative Agriculture Association.
- Copies of federal Form 1120-C or federal Form 1120.
- Corporate officer's signature on Page 1 and preparer's signature and PTIN on Page 2, if applicable.

#### IMPOSITION, BASE AND RATE

Cooperative agriculture association corporate net income tax is imposed at the rate of 4 percent on the net income attributable to business transacted in Pennsylvania of incorporated cooperative agriculture associations having capital stock, and either doing business or having capital or property employed or used in Pennsylvania. This tax is imposed under the Act of May 23, 1945, P.L. 893 (72 P.S. § 3420-21).

#### REVENUE ID, FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN), PARENT CORPORATION FEIN, NAME AND ADDRESS

The Revenue ID number, FEIN, name, and complete mailing address must be provided. If the taxpayer is a subsidiary of a corporation, the parent corporation's FEIN must be provided. Also provide the telephone number and email address of the taxpayer.

#### TAX YEAR

Enter month, day, and year (MMDDYYYY) for the tax year beginning and year (YY) for the tax year end.

#### REPORT DUE DATE

This report is due April 15 for an association reporting on a calendar year basis. For associations reporting on a fiscal year basis, the report is due on or before the 15th day of the fourth month after the close of the fiscal year. If either date falls on a Saturday, Sunday, or holiday, the report is due the next business day. A 10 percent late-filing penalty will be imposed on late reports and assessed at the time of filing.

#### ADDRESS CHANGE

Enter "Y" in the block on Page 1 if the address of the corporation has changed from prior tax periods. The current mailing address should be reflected on the report.

#### AMENDED REPORT

Enter "Y" in the block on Page 1 if you are filing an amended report to add, delete or adjust information. Provide documentation to support all changes being made. An amended report should only be filed if an original report was filed previously for the same period.

The taxpayer has three (3) years after the due date of the original report to file an amended report. If the original report was properly extended, then the taxpayer has three (3) years after the extended due date to file an amended report. The department may adjust the tax originally reported based on information from the amended report. The taxpayer must consent to extend the assessment period. If the amended report is timely filed and the taxpayer consented to extend the assessment period, the time period in which to assess tax will be the greater of three years from the filed date of the original report or one year from the filed date of the amended report.

Regardless of the tax year being amended, taxpayers must use the most current non-year-specific tax form, completing all sections of the report. This includes those sections originally filed and those sections being amended. All tax liabilities should be recorded on Page 1. Taxpayers must check the Amended Report check box on Page 1 and include Schedule AR, REV-1175, with the report.

#### FIRST REPORT

Enter "Y" in the block on Page 1 if this is the taxpayer's first PA cooperative tax filing.

#### ELECTRONIC PAYMENT

Enter "Y" in the block on Page 1 if the taxpayer has made any electronic payments using myPATH.

## FINAL REPORT

- Enter “Y” in the block on Page 1 if this report will be the final report filed with the department. Indicate the effective date of the event as MMDDYYYY.
- Include a completed Schedule of Disposition of Assets, REV-861.
- Include a copy of the regulatory authority’s approval of the merger, dissolution, plan of reorganization, and/or articles of merger.
- Provide the Revenue ID and FEIN of the surviving entity, if applicable.

## CORPORATE OFFICER INFORMATION

A corporate officer must sign and date the tax report. The signature must be original; photocopies or faxes will not be accepted. Print the first and last name, title, Social Security number, telephone number, and email of the corporate officer.

## PREPARER’S INFORMATION

Paid preparers must sign and date the tax report. If the preparer works for a firm, provide the name, FEIN, and address of the firm along with the name, telephone number, email, and PTIN/SSN of the individual preparing the report. If the preparer is an individual without any association to a firm, provide the name, address, telephone number, email, and PTIN/SSN of the individual preparing the report.

## EXTENSION REQUEST DUE DATE

To request a due date extension of up to 60 days to file the annual report, you must file an extension request by the original report due date. You can request an extension on [my.path.pa.gov](http://my.path.pa.gov) or by mailing in the REV-426. However, an extension of time to file does not extend the deadline for payment of tax, and an extension request must be accompanied by payment of taxes owed for the taxable year for which the extension is requested.

Mail the extension coupon separately from all other forms. A taxpayer using an electronic method to make a payment with an extension request should not submit the extension coupon. Do not use the extension coupon to remit other unpaid liabilities within the account.

## PAYMENT AND MAILING INFORMATION

All payments of \$1,000 or more must be made electronically or by certified or cashier’s check remitted in person or by express mail courier. Returns may also be filed by express mail courier. Mail payments and returns to the following address:

**PA DEPARTMENT OF REVENUE  
1854 BROOKWOOD ST  
HARRISBURG PA 17104**

Payments under \$1,000 may be remitted by mail, made payable to the PA Department of Revenue. Mail payments, extension requests and returns to the following address:

**PA DEPARTMENT OF REVENUE  
PO BOX 280427  
HARRISBURG PA 17128-0427**

Failure to make a payment by an approved method will result in the imposition of a 3 percent penalty of the tax due, up to \$500. For more information on electronic filing options, visit [my.path.pa.gov](http://my.path.pa.gov).

## CURRENT PERIOD OVERPAYMENT

If an overpayment exists on Page 1 of the RCT-125, the taxpayer must instruct the department to refund or transfer overpayment as indicated below.

## REFUND

Identify the amount to refund from the current tax period overpayment. Prior to any refund, the department will offset current period liabilities and other unpaid liabilities within the account.

## TRANSFER

Identify the amount to transfer from the current tax period overpayment to the next tax period. Prior to any transfer, the department will offset current period liabilities and other unpaid liabilities within the account.



**NOTE:** If no option is selected, the department will automatically transfer any overpayment to the next tax year after offsetting current period liabilities and other unpaid liabilities within the account.

A tax period overpayment summary will be mailed to the taxpayer confirming the disposition of the credit.

## REQUESTS FOR REFUND OR TRANSFER OF AVAILABLE CREDIT

Requests for refund or transfer of available credit from prior periods can be requested on company letterhead, signed by an authorized representative, and emailed to [RA-CORP\\_ACC\\_FAX@PA.GOV](mailto:RA-CORP_ACC_FAX@PA.GOV).

Please do not duplicate requests for refund and/or transfer by submitting both RCT-125 and written correspondence.

## CONTACT INFORMATION

- For additional information regarding electronic payments visit the departments Online Customer Service Center at [revenue.pa.gov](http://revenue.pa.gov).
- Questions regarding payments or refunds, email [RA-CORP\\_ACC\\_FAX@PA.GOV](mailto:RA-CORP_ACC_FAX@PA.GOV).
- General business tax questions, visit the department’s Online Customer Service Center at [revenue.pa.gov](http://revenue.pa.gov).
- Business taxpayers and tax practitioners have the ability to receive and view department issued electronic statement of accounts and correspondence electronically, visit [my.path.pa.gov](http://my.path.pa.gov) for more information.

**LINE INSTRUCTIONS**

**RCT-125 should be completed in the following order:**  
(Page instructions start with Page 2 below.)

**STEP 1**

Complete the taxpayer information section and any applicable questions at the top of Page 1.

**STEP 2**

Enter the Revenue ID number and other taxpayer information in the designated fields at the top of each page.

**STEP 3**

Complete Page 2, Schedule A, Reconciliation of Beginning and Ending Unappropriated Retained Earnings.

**STEP 4**

Complete Page 2, Schedule B, Determination of Allocation Decimal.

**STEP 5**

Complete Page 2, Calculation of Tax.

**STEP 6**

Complete Page 1, Lines 1 through 10.

**STEP 7**

Complete Page 3, General Information.

**STEP 8**

Complete Page 3, Schedule of Real Property in PA.

**STEP 9**

Complete the corporate officer information section, sign, and date at the bottom of Page 1.

**STEP 10**

Complete the preparer's information section, sign, and date at the bottom of Page 2, if applicable.

**STEP 11**

Mail the complete report and any supporting schedules to the PA Department of Revenue.

**PAGE 2****SCHEDULE A****RECONCILIATION OF BEGINNING AND ENDING UNAPPROPRIATED RETAINED EARNINGS****LINE 1****BALANCE – BEGINNING OF YEAR**

Enter the beginning retained earnings.

**LINE 2****NET INCOME PER BOOKS**

Enter the net income per books.

**LINE 3****OTHER INCREASES (ATTACH SCHEDULE)**

Enter the amount of other increases.

**LINE 4****TOTAL**

Enter the sum of Lines 1 through 3.

**LINE 5****PATRONAGE REFUNDS**

Enter the patronage refunds.

**LINE 6****TRANSFERRED TO RESERVES**

Enter the amount that was transferred to reserves.

**LINE 7****STATUTORY RESERVE**

Enter the amount from the statutory reserve.

**LINE 8****OTHER DECREASES**

Enter the amount of other decreases; detail of all decreases must be provided.

**LINE 9****DIVIDENDS ON CAPITAL STOCK DECLARED OR DECLARED AND PAID**

Enter the dividends on capital stock declared or declared and paid.

**LINE 10****TOTAL DECREASES**

Enter the sum of Lines 5 through 9.

**LINE 11****BALANCE – END OF YEAR**

Enter the difference of Line 4 minus Line 10.

**SCHEDULE B****DETERMINATION OF ALLOCATION DECIMAL****LINE 1****TOTAL GROSS RECEIPTS ASSIGNABLE TO PENNSYLVANIA**

Enter the total gross receipts assignable to PA.

**LINE 2****TOTAL GROSS RECEIPTS FROM ALL BUSINESS**

Enter the total receipts from all business.

**LINE 3****ALLOCATION DECIMAL**

Divide Line 1 by Line 2. Carry to six decimal places.

**CALCULATION OF TAX**

**LINE 1**

**NET INCOME**

Enter the dividends declared or declared and paid from Schedule A, Line 9.

**LINE 2**

**ALLOCATION DECIMAL**

Enter the decimal from Schedule B, Line 3.

**LINE 3**

**NET INCOME ALLOCATED TO PENNSYLVANIA**

Multiply Line 1 by Line 2.

**LINE 4**

**TAX**

Multiply Line 3 by 0.04. Carry the tax to Page 1, Line 1.

**PAGE 3**

**GENERAL INFORMATION**

Taxpayers should provide the following information:

Where and with whom the business records are located

The state where the entity was incorporated or organized and the date it occurred

A list of all other states where the entity conducts business

**SCHEDULE OF REAL PROPERTY IN PA**

Taxpayers must report the location of any real property utilized in Pennsylvania during the current tax period. Provide the requested information if the property was owned or rented by the taxpayer.