

New York State Department of Taxation and Finance

CT-47.1

Election or Termination of Election to Deem Income For Purposes of the Farmers' School Tax Credit

En	nployer iden	tification number (EIN)		lelephone number		For office use	e only	
	Logal nam	o of corporation		()				
	Legal name of corporation				Date received	Date received		
SS	DBA or tra	DBA or trade name (if any)					•	
address						4		
ing	C/O Number ar	C/O Number and street or PO box						
Mailing	Trainbor at	anibol and street of 1 0 box						
	City			State ZIP	code	_		
1	Mark an	Mark an X in the appropriate box:						
	Termination of election due to shareholder(s) consent Termination of election due to cessation of corporation eligibility (complete line 4)							
2	Due date,	date, disregarding any extension, of the corporation's tax return for the year for which the election is to be effective (see instr.)						
3	Ending d	ng date for tax year for which this election is to be effective (see instructions)						
4 Date of cessation (see instructions)								
inc tha	ome and p in one-half	e the election, then all shareholders, othe rincipal payment on farm indebtedness a by vote and value, of the shares of stock ins if a continuation sheet or a separate or	s required in Ta c of the corpora	x Law section 606(n)(tion agree to such ten ent is needed.	9). Such electi		if shareholders holding more	
A Name and address of each shareholder agreeing to election or termination (include ZIP code; see instructions)			ion			be valid, all share	Shareholder's signature (see instructions) be valid, all shareholders agreeing to election mination must signify consent by signing below.	
	rtificatio d comple	 n: I certify that this election or termin te. 	ation and any	attachments are to	the best of n		and belief true, correct,	
Αι	uthorized	Printed name of authorized person	Signat	ure of authorized person		Official title		
	person E-mail address of authorized person			Telephone (ne number	e number Date	
	Paid	Firm's name (or yours if self-employed)			Firm's EIN	<i>'</i>	Preparer's PTIN or SSN	
ŗ	oreparer	Signature of individual preparing this election Address				City	State ZIP code	
use only		E-mail address of individual preparing this election Prepar				parer's NYTPRIN	Date	
		aaa. 555 5a. / laaa proparing tillo 616			1.10			