

#### 1260024105

# RCT-126 06-24 (FI) PAGE 1 OF 2 MEMBERSHIP REPORT ELECTRIC COOPERATIVE CORPORATIONS

Date	Received	(Official	Use	Only)

Tax Year Begin:

Tax Year End: 12/31/20  Due Date: July 1  Taxpayer Name  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. Electric Cooperative Corporation Fee (Page 2, Line 3)
Taxpayer Name    First Line of Address   Amended Report (Include REV-1175.)
First Line of Address  Second Line of Address  City  State ZIP  Phone  Out of Existence Date:  USE WHOLE DOLLARS ONLY
First Report Second Line of Address  City State ZIP Final Report (See Instructions.)  Out of Existence Date:  USE WHOLE DOLLARS ONLY
First Report Second Line of Address  City State ZIP Final Report (See Instructions.)  Out of Existence Date:  USE WHOLE DOLLARS ONLY
Second Line of Address  City State ZIP Final Report (See Instructions.)  Phone  Email  USE WHOLE DOLLARS ONLY
City State ZIP Final Report (See Instructions.)  Phone  Email  USE WHOLE DOLLARS ONLY
Phone  Email  USE WHOLE DOLLARS ONLY
Phone Out of Existence Date:  USE WHOLE DOLLARS ONLY
Email  USE WHOLE DOLLARS ONLY
Email  USE WHOLE DOLLARS ONLY
USE WHOLE DOLLARS ONLY
Electric Cooperative Corporation Fee (Page 2, Line 3)     1.
Electric Cooperative Corporation Fee (Page 2, Line 3)     1.
1. Electric Cooperative Corporation Fee (Page 2, Line 3)
2. Total Estimated Payments 2.
3. Total Payments Carried Forward From Prior Year Return 3. 4. Total "Restricted" Tax Credits 4.
5. Total Credit: (Line 2 plus Line 3 plus Line 4) 5.
6. Tax Due: (If Line 1 is more than Line 5, enter the difference here.)
7. Remittance 7.
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) 9.
9. Refund: (Amount of Line 8 to be refunded after offsetting all unpaid liabilities) 9. 10. Transfer: (Amount of Line 8 to be credited to the next tax year after offsetting all unpaid liabilities) 10. all unpaid liabilities)

### 

#### **Corporate Officer Information:**

Officer Last Name		Social Security Number of Officer	
Officer First Name		Phone	
Title of Officer		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.

	•	
Signature of Officer		Date

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	RCT-126 06-24 (FI) PAGE 2 OF 2 CALCULATION OF TAX				
Stroot	Address of Corporation's Principal Office				6
Street	Address of Corporations Filingial Office				С
City	State ZIP				
1.	Did the corporation provide retail electric services outside its certifithe tax period covered by this report?	ed territory during		Y/N	
If ye RCT-	is, the co-op must also file the Gross Receipts Tax Report for E $112$ .	Electric, Hydro-Electric, ar	nd Water F	Power Companies,	
2. 3.	Total number of members in the corporation  Fee of \$10 per 100 members or fraction thereof. Enter amount on the second sec	Page 1, Line 1.			
	•				
_				12600242 12600242	
Prep	arer's Information:			75800545	U.5
Ein **		dividual Duana N			
Firm N Firm F		dividual Preparer Name			
Addres	ss Er	mail			
City State		ocial Security Number or			
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.

Date

Signature of Preparer



RCT-126 IN 06-24

### **Instructions for RCT-126**

Membership Report - Electric Cooperative Corporations

#### **GENERAL INFORMATION**

#### REMINDER

- The RCT-126 can now be filed electronically at mypath.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.
- Fill in form using all CAPS.
- Do not use dashes (-) or slashes (/) in any field.
- 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-126, Membership Report for Use by Electric Cooperative Corporations
- Corporate officer's signature on Page 1 and preparer's signature and PTIN on Page 2, if applicable

#### IMPOSITION, BASE AND RATE

Electric cooperative membership fee is imposed at the rate of \$10 for each 100 members, or fraction thereof, on electric cooperative corporations, including electric light, waterpower, and hydro-electric companies providing generation electric service at retail to customers outside their service territories. For more information, see Act of June 21, 1937, P.L. 1969 (15 Pa.C.S.A. § 7333).

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

The 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 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**

The report is due on July 1 for the preceding year ended Dec. 31. If July 1 falls on a Saturday, Sunday, or holiday, the report is due the next business day.

#### **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.pa.gov**.

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#### **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 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 **mypath.pa.gov** or by sending 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 280407 HARRISBURG PA 17128-0407

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 **mypath.pa.gov**.

#### **CURRENT PERIOD OVERPAYMENT**

If an overpayment exists on Page 1 of the RCT-126, 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**.

Please do not duplicate requests for refund and/or transfer by submitting both RCT-126 and written correspondence.

#### CONTACT INFORMATION

- For additional information regarding electronic payments or general business tax questions visit the department's Online Customer Service Center at revenue.pa.gov.
- Questions regarding payments or refunds, email RA-CORP\_ACC\_FAX@PA.GOV.
- Business taxpayers and tax practitioners have the ability to receive and view department issued electronic statement of accounts and correspondence electronically at mypath.pa.gov.

#### LINE INSTRUCTIONS

#### RCT-126 should be completed in the following order:

#### STEP 1

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

#### STEP 2

Enter the FEIN in the designated field at the top of each page.

#### STEP 3

Complete Page 2, Calculation of Tax.

#### STEP 4

Complete Page 1, Lines 1 through 10.

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#### STEP 5

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

#### STFP 6

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

#### STEP 7

File the completed report and any supporting schedules at **mypath.pa.gov**.

#### PAGE 2

#### **CALCULATION OF TAX**

#### LINE 1

## DID THE CORPORATION PROVIDE RETAIL ELECTRIC SERVICES OUTSIDE ITS CERTIFIED TERRITORY DURING THE TAX PERIOD COVERED BY THIS REPORT?

Enter "Y" in the block if the taxpayer sold electric services outside its certified boundaries. If the answer is yes, the co-op must also file the Gross Receipts Tax Report for Electric, Hydro-Electric, and Water Power Companies, RCT-112.

#### LINE 2

#### TOTAL NUMBER OF MEMBERS IN THE CORPORATION

Enter the total number of members in the corporation as of Dec. 31.

#### LINE 3

### FEE OF \$10 PER 100 MEMBERS OR FRACTION THEREOF

Divide the total number of members by 100, and multiply by \$10 (fee must be in multiples of \$10 only). Carry the tax (fee) to RCT-126 Page 1, Line 1.

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