

Corporate Farm, Office: 651-201-6083

Minnesota's Corporate Farm Application

Minnesota Statute § 500.24 requires that all pension or investment funds, corporations, limited partnerships, limited liability companies, and trusts must be certified by the Minnesota Department of Agriculture before engaging in farming or having an interest in agricultural land.

Corporation Application

Registration #

(For Office Use)

Name of Corporation:

File # (Issued by the Secretary of State)

Address:

City:

State:

Zip:

Phone:

Email:

My land is not considered highly erodible therefore a conservation plan is not needed.

Part or all of my land is considered highly erodible and I am implementing my conservation plan.

If you are unsure, consult with your county soil & water department. If you have highly erodible land, you will need to submit a conservation plan proposed by the Soil & Water Conservation District for Highly Erodible Land.

Return this form with your check made payable to:

Minnesota Department of Agriculture
Attn: Cashier
625 Robert Street North
Saint Paul, MN 55155-2538

Filing Fee

Total Due **\$15.00**

600524 (3100)

I, _____ hereby state that I am the
(Name)

_____ of the entity reporting herein, and that
(Title)

the information contained herein is true and correct.

(Signature)

(Date)

For Office Use Only

Please **DO NOT** return Explanation of Exemptions with your application!

1. Basis of Exemption ~ Check one between a ~ i; if unsure of the basis, please see Explanation of Exemptions.

a. Family Farm	d. Aquatic Farm	g. Grandfathered In
b. Authorized Farm	e. Religious Farm	h. Commissioner
c. Authorized Livestock Farm (Each member must fill out the attached affidavit)	f. Public Utility	i. Non-Profit

Check one between j ~ o if one of the following is the Basis of Exemption.
If so, please complete the relevant question on page 5 under Special Basis of Exemption.

j. Research Farm	l. Gifted Land	n. Repossessed Land
k. Breeding Stock	m. Development Organization	o. De Minimis

2. Number of acres owned by the corporation. (A copy of the title to agricultural land MUST be attached.)
Please total acres per county.

Acres	County	Township	Section	Date Acquired

3. Number of acres being leased by the corporation from someone else. Please total acres per county.

Acres	County	Township	Section	Date Acquired

4. Address of principal office, **non-Minnesota corporations only.**

Street	City	State	Zip

5. State of Incorporation _____
 Name of registered Minnesota agent _____
 Address of registered Minnesota agent _____

6. List all officers and directors of the corporation.

Name:	Title:		
Address:	City:	State:	Zip:
Name:	Title:		
Address:	City:	State:	Zip:
Name:	Title:		
Address:	City:	State:	Zip:

7. List all shareholders owning more than 10% of the corporation's stock.

Name:	Title:		
Address:	City:	State:	Zip:
Name:	Title:		
Address:	City:	State:	Zip:
Name:	Title:		
Address:	City:	State:	Zip:

8. **Religious** farms: Is your entire income derived from agriculture? Yes No

9. **Utility** corporations:

a. Do you own agricultural land for purposes described in MN Statute Chapter 216 B? Yes No

b. Are you an electric generation or transmission coop? Yes No

If yes, is the land being farmed? Yes No

If yes, who operates it? Name _____

Address _____

10. **Non-profit** corporations:

a. Are you organized under state non-profit corporate law or qualified for tax exempt status under federal law? Yes No

b. Are you using the land for a non-farming purpose? Yes No

If yes, for what? _____

If no, are you farming the land? Yes No

If yes, provide evidence that all profit derived from the ag land is being used for educational purposes.

If no, who is farming the land? _____

The following information is required for all **family farm** corporations, **authorized farm** corporations and **authorized livestock** farm corporations:

11. List all shareholders of the corporation.

Name:				Resides on Farm?	Yes	No
Address:				Engages in Farm Activity?	*Yes	No
City:	State:	Zip:		Shares %:	Relationship:	
Name:				Resides on Farm?	Yes	No
Address:				Engages in Farm Activity?	*Yes	No
City:	State:	Zip:		Shares %:	Relationship:	
Name:				Resides on Farm?	Yes	No
Address:				Engages in Farm Activity?	*Yes	No
City:	State:	Zip:		Shares %:	Relationship:	
Name:				Resides on Farm?	Yes	No
Address:				Engages in Farm Activity?	*Yes	No
City:	State:	Zip:		Shares %:	Relationship:	
Name:				Resides on Farm?	Yes	No
Address:				Engages in Farm Activity?	*Yes	No
City:	State:	Zip:		Shares %:	Relationship:	

Please add a separate sheet listing shareholder information **if** there are not enough spaces above.

* If yes, list **farming** activity in detail.

12. Please list farm products, including livestock, produced on the above acres.

For **authorized farm** corporations and **authorized livestock farm** corporations:

13. Are there more than one class of shares for the corporation? Yes No

14. List the percentage of gross receipts derived from the following sources:

a. Rent _____%	c. Royalties _____%	e. Annuities _____%
b. Dividends _____%	d. Interest _____%	Total sum of a through e _____ %

Special Basis for Exemption

1. If a research or experimental farm:

- a. Describe the research/experimental purpose for the agricultural land.

- b. Will there be any commercial sales from the operation? Yes No
If yes, what is the percentage of gross income? _____%

- c. With initial application, you must submit to the Minnesota Department of Agriculture a proposal of the intended method of operation, including copies of any operational contracts.

2. If a breeding stock:

- a. Are all castrated animals being sold to farming operations permitted under Minn. Stat. § 500.24, that are neither directly, nor indirectly owned by the operating entity? Yes No

- b. You must submit a report detailing total production and sales annually to the Minnesota Department of Agriculture. Yes No

3. If a development organization:

- a. Has the land been acquired for a specific non-farm purpose? Yes No
If yes, what? _____

- b. Is the land zoned non-agricultural? Yes No

- c. Is the land located within an incorporated area? Yes No

- d. Is the land currently being farmed? Yes No
If yes, by whom? Name _____
Address _____

4. If De Minimis exception:

- a. Do you annually receive less than \$150/acre in gross revenue from rental or ag production? Yes No

- b. How many acres do you have an interest in? _____

5. If gifted land:

- a. Was the land given to you through grant or devise? Yes No

- b. Are you an education, religious, or charitable non-profit corporation, LP LLC, or pension/investment fund? Yes No

6. If repossessed land:

- a. Did you acquire land in the collection of debt, enforcement of a lien or claim on land? Yes No

- b. Is the land currently being farmed? Yes No
If yes, by whom? Name _____
Address _____

**Affidavit of Shareholder Qualifications
for Authorized Livestock Farm Corporations only!**

Each shareholder must submit this form with this application

Name of Corporation _____

I, _____, a member of _____

hereby certify that as a shareholder, the following requirements that are checked and initialed are met:

Check the box and initial on the corresponding line of all that apply.

1. Shareholder is a **natural person**.
2. Shareholder is a **family farm corporation***.
3. I/we reside in Minnesota or we are a resident Minnesota **family farm corporation**.
4. I/we as an individual or a **family farm corporation** regularly participate in physical labor or operation management of our farming operation and file Schedule F as part of our annual form 1040 filing with the United States Internal Revenue Service.
5. I/we regularly perform day-to-day physical labor or day-to-day operations management that significantly contributes to livestock production in the functioning of a livestock operation.

Type of livestock produced _____

6. Shareholder is not a shareholder in other authorized farm corporations that directly or indirectly in combination with the authorized farm corporation own not more than 1,500 acres of real estate used for farming or capable of being used for farming in this state.

** "Family farm corporation" means a corporation founded for the purposes of farming and the ownership of agricultural land in which the majority of the voting stock is held by and the majority of the stockholders are persons or the spouses of persons related to each other within the third degree of kindred according to the rules of the civil law, and at least one of the related persons is residing on or actively operating the farm, and none of whose stockholders are corporations, provided that a family farm corporation does not cease to qualify by reason of any devise or bequest of shares of voting stock.*

Shareholder _____

By (If family farm corporation, include title) _____

Address _____

City _____ State _____ Zip _____ Phone _____

State of _____ County of _____

On this ____ day of _____ 20 ____

Before me the undersigned notary public, personal appeared

Personally known or proved to me through satisfactory evidence of identification, to be the person(s) whose name(s) is/are signed on the preceding or attached document and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.

Notary Public _____

My commission expires _____