

## **FARMER'S TANGIBLE PERSONAL** PROPERTY ASSESSMENT RETURN

State Form 50006 (R19 / 10-18)

Prescribed by the Department of Local Government Finance

# **FORM 102**

**PRIVACY NOTICE** This form contains information confidential pursuant to IC 6-1.1-35-9. **JANUARY 1, 2019** 

For Assessor's Use Only

| NOTE: For taxpayers with less than \$20 you are declaring this exemption, check of this form. If you are declaring this exe  | this box, enter the total ac  | cauisition cost of vo                   | our personal property in the cou                                | in 2015 which exempts this property. If<br>unty, and complete only sections I and IV   |  |  |  |
|--|---|---|---|--|--|--|--|
| □ \$   |   |   |   |  |  |  |  |
| RETURN THIS FORM TO THE APPLICABLE ASSESSOR BY MAY 15, 2019.   |   |   |   |  |  |  |  |
| An exemption granted under IC 6-1.1-10 because the taxpayer applied for and way include fully completing the person  | as granted an exemption b   | rsedes this exemp<br>by the county must | tion. In other words, a taxpaye follow all applicable procedure | r whose personal property is exempt<br>s for the approved exemption, which   |  |  |  |
| INSTRUCTIONS: This form must be <u>filed</u> later than May 15, 2019 with this return unless t   | unless an extension of u  | ın to thirty (30) day                   | s is granted in writing. Please                                 | y in which the property is located not<br>type or print. A Form 104 must be filed<br>allable at http://www.in.gov/dlgf/2440.htm. |  |  |  |
| SECTION I  |   | (34)                                    | Aut.  |  |  |  |  |
| Name of taxpayer   |   |   |   | Federal Identification number **   |  |  |  |
| Name under which business is conducted   |   |   |   | DLGF taxing district number  |  |  |  |
| Address where property is located (number and  | d street, city, state, and ZIP co   | de)                                     |   | DLGF taxing district name  |  |  |  |
| Type of operation (grain, dairy, etc.)   | Type of operation (grain, dairy, etc.)  NAICS Code number *   |   |   |  |  |  |  |
| Name and address to which Assessment and   | ax Notice is to be mailed (If di  | ifferent than above)                    |   | County   |  |  |  |
|  | (   |   |   |  |  |  |  |
| 1. Did you own, hold, possess or control any lifyes, report it on Page 3 or file the Form 1 Note: Failure to properly disclose lease info  | 03-N or 103-O (See 50 IAC 4   | 2-8-3 & <i>4).</i>                      | anuary 1?   | ☐ Yes ☐ No   |  |  |  |
|  | otal number of acres owned  |   | umber acres leased or rented                                    | Total number acres farmed on share basis   |  |  |  |
| Name and address of owner(s) of land share o   | n rent basis  |   |   |  |  |  |  |
| 3. Type of farm: Livestock:  |   |   | Specify other livestock:  |  |  |  |  |
| ☐ Dairy ☐ Beef ☐ Hogs  | ☐ Feeder Pigs ☐ C   | Other                                   | Opedity office investoors.                                      |  |  |  |  |
| GRAIN: Total number of acres raised previous year.   | Soybeans  | Wheat                                   | Specify other (Grains, Forage, I                                | Efc.):   |  |  |  |
| 4. Was any land removed from production since  | ce the last assessment date?  | Number of acres                         | Land Is now used for:   |  |  |  |  |
| Yes No   |   |   |   |  |  |  |  |
| * NAICS - North American Industry Classific<br>NOTE: The NAICS Code Number appears<br>** An individual using his/her Social Securit  | on your federal income tax reti<br>y number as the federal identif  | um.<br>fication number is onl           | y required to provide the last four (4                          | 4) digits of that number. IC 4-1-10-3  |  |  |  |
| In completing a personal property return for owned, held, possessed or controlled on the   | a year, a taxpayer must make<br>e assessment date. [IC 6-1.1-3  | e a complete disclosu<br>3-9 (a)].      | re of all information relating to the v                         | value, nature or location of personal property   |  |  |  |
| (30) days after such return is due, a penalty reported will be imposed. A personal prope 6-1.1-3-7(b). If the total assessed value that if the amount of the undervaluation exceeds percent (20%) of the additional taxes finally  | Failure to file a return on or before the due date as required by law will result in the imposition of a twenty-five dollar (\$25) penalty. In addition, if return is not filed within thirty (30) days after such return is due, a penalty equal to twenty percent (20%) of the taxes finally determined to be due with respect to the property which should have been reported will be imposed. A personal property return is not due until the expiration of any extension period granted by the Township Assessor or County Assessor under IC 6-1.1-3-7(b). If the total assessed value that a person reports on a personal property return is less than the total assessed value that the person is required by law to report and if the amount of the undervaluation exceeds five percent (5%) of the value that should have been reported on the return, then the County Auditor shall add a penalty of twenty percent (20%) of the additional taxes finally determined to be due as a result of the undervaluation. |   |   |  |  |  |  |
| This information would include, but not be limited to, completion of the heading and related information, and answers to all questions on the face of the return, and entries on all of the appropriate lines of Schedule A. If such information is not provided, the taxpayer will be contacted and directed to provide that information. In addition, a penalty of twenty five dollars (\$25) shall be imposed. [IC 6-1.1-37-7(d)] |   |   |   |  |  |  |  |

**SECTION III** SUMMARY (round all numbers to nearest ten dollars) REPORTED BY TAXPAYER **CHANGE BY ASSESSOR** CHANGE BY THE COUNTY BOARD \$ \$ SCHEDULE A - PERSONAL PROPERTY \$ FINAL ASSESSED VALUE \$

# SIGNATURE AND VERIFICATION

Under penalties of perjury, I hereby certify that this return (including any accompanying schedules and statements), to the best of my knowledge and belief, is true, correct, and

| on the assessment date, as required by law; and is              | erty subject to taxation owned, ne<br>prepared in accordance with | IC 6-1.1 et seq., as amended, and regulations promulgate             | ed with respect thereto. |  |  |
|---|---|--|--------------------------|--|--|
| Signature of authorized person                                  |   | Printed name of authorized person                                    | Date (month, day, year)  |  |  |
| Title   | Telephone number ( )  | Signature of person preparing return, if different than authorized p | ierson                   |  |  |
| E-mail address Printed name and contact information of preparer |   |  |                          |  |  |

# SECTION V

|      | FORM 102<br>See 50 IAC 4.2-4        | TANGIBLE PERSONAL PROPERTY CONFIDENTIAL             | JANUARY 1, 2019 |
|------|-------------------------------------|---|-----------------|
| LINE | (Round all figures below to neares  | st dollar)  |                 |
| 1    | Total cost of Tangible Depreciable  | \$  |                 |
| 2    | Add: cost of all Depreciable Persor |   |                 |
|      | Deduct exempt property: (See 50     | AC 4.2-11.1)  |                 |
| 3    |                                     | ial Waste Control Facilities - Attach Form 103-P \$ |                 |
| 4    | Airplanes Subject to Excise Tax     | Number of units                                     |                 |
| 5    | Vehicles Subject to Excise Tax      | Number of units                                     |                 |
| 6.   | Total cost of Exempt Property (Lin  | \$  |                 |
| 7    | Total cost of Assessable Deprecia   | \$  |                 |

|          | YEAR OF ACQUISITION   | COLUMN A                         | COLUMN B  | COLUMN C      |         | COLUMN D       |
|----------|---|----------------------------------|---|---------------|---------|----------------|
|          | POOL NUMBER 1:<br>(1 TO 4 YEAR LIFE)  | TOTAL COST OR<br>BASE YEAR VALUE | ADJUSTMENTS **<br>Detail Must Be Shown<br>On Form 106 | ADJUSTED COST | T.T.V.% | TRUE TAX VALUE |
| 8        | 1-2-18 To 1-1-19  |                                  |   |               | 65      |                |
| 9        | 1-2-17 To 1-1-18  |                                  |   |               | 50      |                |
| 10       | 1-2-16 To 1-1-17  |                                  |   |               | 35      |                |
| 11       | Prior To 1-2-16   |                                  | ,   |               | 20      |                |
| 12       | TOTAL POOL NUMBER 1   | \$                               | \$  | \$            |         | \$             |
|          |   | POOL                             | NUMBER 2: (5 TO 8 Y                                   | EAR LIFE)     |         |                |
| 13       | 1-2-18 To 1-1-19  |                                  |   |               | 40      |                |
| 14       | 1-2-17 To 1-1-18  |                                  |   |               | 56      | ·              |
| 15       | 1-2-16 To 1-1-17  |                                  |   |               | 42      |                |
| 16       | 3-2-15 To 1-1-16  |                                  |   |               | 32      |                |
| 17       | 3-2-14 To 3-1-15  |                                  |   |               | 24      |                |
| 18       | 3-2-13 To 3-1-14  |                                  |   |               | 18      |                |
| 19       | Prior To 3-2-13   |                                  |   |               | 15      |                |
| 20       | TOTAL POOL NUMBER 2   | \$                               | \$  | \$            |         | \$             |
|          | · (1) · 在本面的 · (1) · (1 | POOL I                           | NUMBER 3: (9 TO 12 Y                                  | EAR LIFE)     |         |                |
| 21       | 1-2-18 To 1-1-19  |                                  |   |               | 40      |                |
| 22       | 1-2-17 To 1-1-18  |                                  |   |               | 60      |                |
| 23       | 1-2-16 To 1-1-17  |                                  |   | -             | 55      |                |
| 24       | 3-2-15 To 1-1-16  |                                  |   |               | 45      |                |
| 25       | 3-2-14 To 3-1-15  |                                  |   |               | 37      |                |
| 26       | 3-2-13 To 3-1-14  |                                  |   |               | 30      |                |
| 27       | 3-2-12 To 3-1-13  |                                  |   |               | 25      |                |
| 28       | 3-2-11 To 3-1-12  |                                  |   |               | 20      |                |
| 29       | 3-2-10 To 3-1-11  |                                  |   |               | 16      |                |
| 30       | 3-2-09 To 3-1-10  |                                  |   |               | 12      |                |
| 31       | Prior To 3-2-09   |                                  |   |               | 10      |                |
| 32       | TOTAL POOL NUMBER 3   | \$                               | \$  | \$            |         | \$             |
| Report . |   | POOL NUME                        | BER 4: (13 YEAR AND                                   | LONGER LIFE)  |         |                |
| 33       | 1-2-18 To 1-1-19  |                                  |   |               | 40      |                |
| 34       | 1-2-17 To 1-1-18  |                                  |   |               | 60      |                |
| 35       | 1-2-16 To 1-1-17  |                                  |   |               | 63      |                |
| 36       | 3-2-15 To 1-1-16  |                                  |   |               | 54      |                |
| 37       | 3-2-14 To 3-1-15  |                                  |   |               | 46      |                |
| 38       | 3-2-13 To 3-1-14  |                                  |   |               | 40      |                |
| 39       | 3-2-12 To 3-1-13  |                                  |   |               | 34      |                |
| 40       | 3-2-11 To 3-1-12  |                                  |   |               | 29      |                |
| 41       | 3-2-10 To 3-1-11  |                                  |   |               | 25      |                |
| 42       | 3-2-09 To 3-1-10  |                                  |   |               | 21      |                |
| 43       | 3-2-08 To 3-1-09  |                                  |   |               | 15      |                |
| 44       | 3-2-07 To 3-1-08  |                                  |   |               | 10      |                |
| 45       | Prior To 3-2-07   |                                  |   |               | 5       |                |
| 46       | TOTAL POOL NUMBER 4   | \$                               | \$  | \$            |         | \$             |

| 47 | Total Cost All Pools (Column A) \$   |                             |               |  |    |      |   |
|----|--|-----------------------------|---------------|--|----|------|---|
| 48 | Total Column B Adjustments Per Form 106  | \$                          |               |  |    |      |   |
| 49 | Total Column C Adjusted Cost ALL POOLS   |                             | \$            |  |    |      |   |
| 50 | Total Column D True Tax Value of Pools 1, 2, 3 and   | 14                          |               |  |    | \$   |   |
| 51 | 30% of Line 49, Column C \$  |                             |               |  |    |      |   |
| 52 | Greater of Lines 50 or 51 (Must Not Be Less Than   | 30% of Line 49) 50 IAC 4.2- | 4-9           |  |    | \$   |   |
| 53 | Additions @ True Tax Value: Equipment Not Place  | Cost \$                     | Cost \$ X 10% |  | \$ | 0.00 |   |
| 54 | Permanently Retired Equipment Per Form 106 - 50  | IAC 4.2-4-3 (d)**           |               |  |    |      | - |
| 55 | Total Additions to Line 52 True Tax Value (Line 53   | + Line 54)                  | `             |  |    | \$   |   |
| 56 | Total True Tax Value before adjustment for Abnormal Obsolescence (Line 52 + Line 55)                             |                             |               |  |    | \$   |   |
| 57 | Abnormal Obsolescence adjustment Per Form 106  | - 50 IAC 4.2-4-8            |               |  |    |      |   |
| 58 | Total True Tax Value of Personal Property other than inventory (To Page 1, Form 102 Summary) (Line 56 - Line 57) |                             |               |  |    | \$   |   |

<sup>\* \*</sup> The total of Permanently Retired Equipment is to be deducted in full in Column B above. The True Tax Value of such is to be computed on the Form 106, and recorded on Line 54.

| Line 54.  |  |                       |     |  |   |  |  |  |  |
|---|--|-----------------------|-----|--|---|--|--|--|--|
| SECTION VI  |  |                       |     |  |   |  |  |  |  |
| Information of Not-Owned Personal Property  NOTE: This section is for the reporting of five or less lease agreements. For other leases, the Form 103-N (for the lessee or the person in possession) and the Form 103-O (for the lessor or the owner of the equipment) should be utilized. For more information on the reporting of leased equipment, refer to 50 IAC 4.2-8. |  |                       |     |  |   |  |  |  |  |
| NOTE: Failure to properly disclose lease inf  | NOTE: Failure to properly disclose lease information may result in a double assessment. (IC 6-1.1-2-4(a))  |                       |     |  |   |  |  |  |  |
| Please check one only:  |  |                       |     |  |   |  |  |  |  |
| Operating Lease which is assessa  | able to the owner of the equipment (not a  | ssessed on this retur | n). |  |   |  |  |  |  |
| Capital Lease which is assessable   | e to the person in possession and is asse  | essed on this return. |     |  |   |  |  |  |  |
| Name and Address of Owner   | Name and Address of Owner  Location of Property  Location of Property  Date of Lease (month, day, year)  Date of Number and Oescription  Reported on Line Number, if Applicable  Known |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   | ,  |                       |     |  | , |  |  |  |  |
| c.  |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |
| 1   |  |                       |     |  |   |  |  |  |  |
|   |  |                       |     |  |   |  |  |  |  |

#### Filing Basics:

- Effective July 1, 2015, IC 6-1.1-3-7.2 was amended to allow an exemption for taxpayers with less than \$20,000 in acquisition costs to be reported within a county. Failure to timely file a personal property tax return with the applicable assessor declaring the exemption will result in a \$25 penalty. For more information, refer to this link: <a href="https://www.in.gov/dlgf/7576.htm">http://www.in.gov/dlgf/7576.htm</a>.
- Taxpayers may request up to a thirty (30) day extension of time to file their return. The written request should be sent to the Assessor before the filing deadline of May 15, 2019, and should include a reason for the request.
   The Assessor may, at their discretion approve or disapprove the request in writing.
- Personal property must be assessed in each taxing district where property has a tax situs.
- Inventory located in the State of Indiana is exempt and is not required to be reported per IC 6-1.1-1-11(b)(3).
- It is the responsibility of the taxpayer to obtain forms from the Assessor and file a timely return. The forms are also available on-line at the department's website, www.in.gov/dlgf.
- If you hold, possess, or control not-owned personal property on the assessment date, you have a liability for the taxes imposed for that year unless you establish that the property is to be assessed to the owner. This is done by completing a Form 103-N, attaching it to the Form 102, and filing it with the Assessor. A taxpayer declaring the exemption on page one of this form may, as deemed necessary by the applicable assessor, need to file Form 103-O or 103-N, as applicable, to verify that he is the appropriate taxpayer to claim the exemption.
  NOTE: Failure to properly disclose lease information may result in a double assessment. (IC 6-1.1-2-4(a))
- Taxpayers who discover an error was made on their original timely filed personal property tax return have the right to
  file an amended return. The amended return must be filed within twelve (12) months of the due date or the extended
  due date (if up to a thirty (30) day extension was granted) of their original return.

## Frequently Asked Questions:

# 1. Will my local Assessor fill this form out for me?

Indiana's personal property tax system is a self-assessment system. An Assessor can offer assistance with the filing; however, an authorized person representing the farming operation must sign the form under penalties of perjury that it is true and correct so the responsibility of filing an accurate return remains with the taxpayer.

2. I would like to report all of my equipment in the township where I reside even though it is actually located in different townships within the county. Can I do this?

No. a personal property return must be filed in each taxing district where the property has tax situs.

3. Why is the grain leg assessed as personal property and the grain bin that it is attached to assessed as real property?

The use of the asset is the key. The grain bin, used for storage, is classified in 50 IAC 4.2-4-10 as real property while the legs and other loading/unloading systems are classified as part of the machinery and equipment which is assessed as personal property. The same theory applies to automated feeding and watering systems in livestock or poultry buildings since their use pertains to the operation and not the structure of the building.

# 4. Why do I have to report my fully depreciated equipment?

Depreciation expenses are claimed for income tax purposes while assets are assessed for property tax purposes until the asset has been retired from use.

5. How can I find contact information for the various county offices (Assessor, Auditor, or Treasurer) throughout the State of Indiana, locate forms or learn more about Indiana's personal property tax system?

Go to the Indiana Department of Local Government Finance's website at <a href="http://www.in.gov/dlgf/2440.htm">www.in.gov/dlgf/2440.htm</a>. Contact information for the Assessor is available at <a href="http://www.in.gov/dlgf/2440.htm">http://www.in.gov/dlgf/2440.htm</a>.



# **BUSINESS TANGIBLE** PERSONAL PROPERTY RETURN

State Form 11274 (R37 / 10-18) Prescribed by the Department of Local Government Finance

# FORM 103 - SHORT

PRIVACY NOTICE This form contains information confidential pursuant to IC 6-1.1-35-9. **JANUARY 1, 2019** 

For Assessor's Use Only

| NOTE: For taxpayers with less than \$20,000 in acquisition costs to report within the county, legislation was passed in 2015 which exempts this property. If you are declaring this exemption, check this box, enter the total acquisition cost of your personal property in the county, and complete only sections I and IV of this form. If you are declaring this exemption through this form, you do not need to file a Form 104.  |
|--|
| □ \$   |
| RETURN THIS FORM TO THE APPLICABLE ASSESSOR BY MAY 15, 2019.   |
| An exemption granted under IC 6-1.1-10 or any other statute supersedes this exemption. In other words, a taxpayer whose personal property is exempt because the taxpayer applied for and was granted an exemption by the county must follow all applicable procedures for the approved exemption, which may include fully completing the personal property return.   |
| INSTRUCTIONS:  1. Please type or print.  2. This form must be <u>filed with the Township Assessor</u> , <u>if any</u> , <u>or the County Assessor of the county in which the property is located</u> not later than May 15, 2019, unless an extension of up to thirty (30) days is granted in writing. Contact information for the Assessor is available at <a href="http://www.in.gov/dlgf/2440.htm">http://www.in.gov/dlgf/2440.htm</a> .  3. A Form 104 must be filed with this return unless the exemption above is claimed. |
| NOTE: You must use Form 103-Long if:   |

- a. You are a manufacturer or processor;
  b. Your business personal property assessment is \$150,000 or more;
  c. You wish to claim any exemptions or deductions (other than the enterprise zone credit); or
- d. You are claiming any special adjustments such as equipment not placed in service, special tooling, permanently retired equipment or abnormal obsolescence.

| SECTION I  |                                       |  |   |              | 4.36                       |  |  |
|--|---------------------------------------|--|---|--------------|----------------------------|--|--|
| Name of taxpayer   | ,                                     |  |   | Federal ide  | entification number **     |  |  |
| Name under which business is conducted   | Name underwhich business is conducted |  |   |              |                            |  |  |
| Traine diasi whish pasiness is seller  |                                       |  |   |              |                            |  |  |
| Address where property is located (number and s  | treet, city, stat                     | e, and ZIP code)   |   | DLGF taxir   | ng district name           |  |  |
| ,  |                                       |  |   | Township     |                            |  |  |
| Nature of business   |                                       |  |   | lownomp      |                            |  |  |
| Name and address to which Assessment and Tax   | Notice are to                         | be mailed (If different than above)                                    | NAICS Code number *   | County       |                            |  |  |
|  |                                       | ·  |   | <u> </u>     |                            |  |  |
| SECTION II   |                                       |  |   |              |                            |  |  |
| Federal income tax year ends     Location  | n of accountin                        | g records  |   | Retail mer   | chant's certificate number |  |  |
| 3. Form of business  Partnership or Joint Venture  | Sole                                  | Proprietorship   | ration  | ust          |                            |  |  |
| Other (describe):  |                                       |  |   |              |                            |  |  |
| 4. Do you have other locations in Indiana?   | 5. Did you c                          | If yes, report it on   | ed, rented or other depreciable personal<br>Page 2 or file the Form 103-N or 10 | 3-O (See 5   | 0 IAC 4.2-8-3 & 4).        |  |  |
| ☐ Yes ☐ No   | ☐ Y                                   | es No Note: Failure to p   | properly disclose lease information m   | ay rèsult in | a double assessment.       |  |  |
| SECTION III  |                                       |  | <b>建筑</b> 外 41。   |              |                            |  |  |
| SUMMARY (Round all numbers to nearest to   | en dollars)                           | REPORTED BY TAXPAYER   | CHANGE BY ASSESSOR  | CHANGE       | BY COUNTY BOARD            |  |  |
| Schedule A - Personal Property   | +                                     | \$   | \$  | \$           |                            |  |  |
| Final Assessed Value   | =                                     | \$   | \$  | \$           |                            |  |  |
| SECTION IV   |                                       | SIGNATURE AND VERIF  | ICATION   |              |                            |  |  |
| Under penalties of perjury, I hereby certif<br>belief, is true, correct, and complete; if an<br>named taxpayer in the stated township of<br>as amended, and regulations promulgate | oplicable, re<br>r taxing dist        | ports all tangible personal prope<br>rict on the assessment date, as r | rty subject to taxation owned, held, b  | ossessea a   | or controlled by the       |  |  |
| Signature of authorized person   |                                       |  |   |              | Date (month, day, year)    |  |  |
| Printed name of authorized person Title  |                                       |  |   |              | Telephone number           |  |  |
| Signature of person preparing return, if different than authorized person  Contact e-mail address  |                                       |  |   |              |                            |  |  |
| Printed name and contact information of person p   | reparing retu                         | m  |   |              |                            |  |  |

NOTE: The NAICS Code Number appears on your federal income tax return.

<sup>\*</sup> NAICS - North American Industry Classification System - complete list of codes may be found at www.census.gov.

<sup>\*\*</sup> An individual using his Social Security number as the Federal Identification number is only required to provide the last four (4) digits of that number per IC 4-1-10-3.

|      | FORM 103-SHORT FORM<br>See 50 IAC 4.2-4 |                          | CONFIDENTIAL             |            |         | SCHEDULE A<br>JANUARY 1, 2019 |
|------|---|--------------------------|--------------------------|------------|---------|-------------------------------|
|      |   |                          |                          | COLUMN A   |         | COLUMN B                      |
| LINE | YEAR OF ACQUISITION                     | DEPRECIABLE PER          | SONAL PROPERTY           | TOTAL COST | T.T.V.% | TRUE TAX VALUE                |
| 1    | 1-2-18 To 1-1-19                        |                          |                          |            | 40      |                               |
| 2    | 1-2-17 To 1-1-18                        |                          |                          |            | 60      |                               |
| 3    | 1-2-16 To 1-1-17                        |                          |                          |            | 55      |                               |
| 4    | 3-2-15 To 1-1-16                        |                          |                          |            | 45      |                               |
| 5    | 3-2-14 To 3-1-15                        |                          |                          |            | 37      |                               |
| 6    | 3-2-13 To 3-1-14                        |                          |                          |            | 30      |                               |
| 7    | 3-2-12 To 3-1-13                        |                          |                          |            | 25      |                               |
| 8    | 3-2-11 To 3-1-12                        |                          |                          |            | 20      |                               |
| 9    | 3-2-10 To 3-1-11                        |                          |                          |            | 16      |                               |
| 10   | 3-2-09 To 3-1-10                        |                          |                          |            | 12      |                               |
| 11   | Prior To 3-2-09                         |                          |                          |            | 10      |                               |
| 12   | TOTALS                                  |                          |                          | \$         |         | \$                            |
| 13   | 30% of line 12, Column A                |                          | \$                       |            |         |                               |
|      | Line 14 must be the greater of Lin      | ne 12, Column B or Line  | 13 (See 50 IAC 4.2- 4-9) |            |         |                               |
| 14   | Total True Tax Value of Depreciab       | le Personal Property (To | Summary on reverse si    | ide)       |         | \$                            |

Fully depreciated assets must be included in the total cost to be reported in Schedule A above.

#### Filing Basics:

- Effective July 1, 2015, IC 6-1.1-3-7.2 was amended to allow an exemption for taxpayers with less than \$20,000 in acquisition costs to be reported within a county. Failure to timely file a personal property tax return with the applicable assessor declaring the exemption will result in a \$25 penalty. (IC 6-1.1-37-7) For more information, refer to this link: <a href="http://www.in.gov/dlgf/7576.htm">http://www.in.gov/dlgf/7576.htm</a>.
- To locate contact information for the various county offices (Assessor, Auditor, and Treasurer), locate forms, and learn more about Indiana's personal property tax system, go to <a href="www.in.gov/dlqf/2440.htm">www.in.gov/dlqf/2440.htm</a>. Contact information for the Assessor is available at <a href="http://www.in.gov/dlqf/2440.htm">http://www.in.gov/dlqf/2440.htm</a>.
- Taxpayers may request up to a thirty (30) day extension of time to file their return. The written request should be sent to the Assessor before
  the filing deadline of May 15, 2019, and should include a reason for the request. The Assessor may, at their discretion, approve or disapprove
  the request in writing.
- Personal property must be assessed in each taxing district where property has a tax situs.
- Inventory located in the State of Indiana is exempt and is not required to be reported per IC 6-1.1-1-11(b)(3).
- It is the responsibility of the taxpayer to obtain forms from the Assessor and file a timely return. The forms are also available on-line at the
  department's website, <a href="www.in.gov/dlgf">www.in.gov/dlgf</a>.
- Taxpayers may consider the ease of filing this short form versus the possible tax savings by filing Form 103-Long before choosing the form they
  wish to file.
- If you hold, possess, or control not-owned personal property on the assessment date, you have a liability for the taxes imposed for that year unless you establish that the property is to be assessed to the owner. This is done by completing a Form 103-N, attaching it to the Form 103-Short, and filing it with the Assessor. A taxpayer declaring the exemption on page one of this form may, as deemed necessary by the applicable assessor, need to file Form 103-O or 103-N, as applicable, to verify that he is the appropriate taxpayer to claim the exemption.

  NOTE: Failure to properly disclose lease information may result in a double assessment. (IC 6-1.1-2-4(a))
- Taxpayers who discover an error was made on their original timely filed personal property tax return have the right to file an amended return. The amended return must be filed within twelve (12) months of the due date or the extended due date (if up to a thirty (30) day extension was granted) of their original return.

#### SECTION VI Information of Not-Owned Personal Property which is to be assessed to the Owner NOTE: This form is for the reporting of two or less Operating Leases. For all other leases, the Form 103-N (for the lessee) and the Form 103-O (for the lessor) should be utilized. For more information on the reporting of leased equipment, refer to 50 IAC 4.2-8. Failure to properly disclose lease information may résult in a double assessment. Name and Address Location of Date of Lease Model Number Cost, Quantity of Owner (month, day, year) and Description Property if Known

# BUSINESS TANGIBLE PERSONAL PROPERTY ASSESSMENT RETURN

State Form 11405 (R41 / 10-18)

Prescribed by the Department of Local Government Finance

# FORM 103 - LONG

PRIVACY NOTICE

This form contains information confidential pursuant to IC 6-1.1-35-9.

**JANUARY 1, 2019** 

For Assessor's Use Only

| NOTE: For taxpayers with less than \$20,000 in acquisiti you are declaring this exemption, check this box, enter to f this form. If you are declaring this exemption through  | he total acquisition co  | st of your p  | personal property in the county,   | 15 which exempts this property. If and complete only sections I and IV  |  |
|---|--|---|--|---|--|
| \$  |  |   |  |   |  |
| RETURN THIS FORM TO THE APPLICABLE ASSESSO  |  |   | la allega considerations and a second consideration of the |   |  |
| An exemption granted under IC 6-1.1-10 or any other st-<br>because the taxpayer applied for and was granted an ex-<br>may include fully completing the personal property return   | cemption by the county   | exemption.  / must follo  | . In other words, a taxpayer who<br>ow all applicable procedures for   | se personal property is exempt<br>the approved exemption, which   |  |
| INSTRUCTIONS:<br>1. Please type or print.<br>2. This form must be <u>filed with the Township Assessor, if a</u><br>unless an extension of up to thirty (30) days is granted i<br>3. A Form 104 must be filed with this return unless the ex   | in writing. Contact info   | rmation for   | county in which the property is let the Assessor is available at http:   | <u>ocated</u> not later than May 15, 2019,<br>://www.in.gov/dlgf/2440.htm.  |  |
| SECTION I   |  |   | CALL TO SERVICE STREET   |   |  |
| Name of taxpayer  |  |   |  | Federal identification number **  |  |
| Name under which business is conducted  |  |   | <del></del>  | DLGF taxing district number   |  |
| Address where property is located (number and street, city, state   | , and ZIP code)  | P. C.                                     | ······································   | DLGF taxing district name   |  |
| Nature of business  |  | N   | NAICS Code number *  | Township  |  |
| Name and address to which Assessment and Tax Notice are to b  | e mailed (If different than  | above)  |  | County  |  |
|   |  |   |  | Retail merchant's certification number  |  |
| SECTION II  |  |   |  |   |  |
| Federal income tax year ends  | 35 35 35 35 35 35 35 35 35 35 35 35 35 3   | e filed unde  |  |   |  |
| Location of accounting records  |  |   |  |   |  |
| 3. Form of business ☐ Partnership or Joint Ven ☐ Other, describe:   | ture Sole  | Proprietors   | ship Corporation   | Estate or Trust   |  |
| 4. Do you have other locations in Indiana?  | □No  |   |  |   |  |
| 5. Did you own, hold, possess or control any leased,  | rented or other depred   | ciable pers   | onal property on January 1?  | Yes No (See 50 IAC 4.2-8)   |  |
| 6. Did you own, hold, possess or control any Special  | Tools on January 1?  |   | Yes No (See 5  | 0 IAC 4.2-6-2)  |  |
| 7. Did you own, hold, possess or control any returnal   | ole containers on Janu   | ary 1?  | Yes No (See 5  | 0 IAC 4.2-6-4)  |  |
| If taxpayer answers "yes" to question 5, the owner must file Fodouble assessment. (See 50 IAC 4.2-2 and 50 IAC 4.2-8).  Failure to file a return on or before the due date as required by   | •  |   |  | •   |  |
| Failure to file a return on or before the due date as required by thirty (30) days after such return is due, a penalty equal to twe reported will be imposed. A personal property return is not due 6-1.1-3-7(b). If the total assessed value that a person reports and if the amount of the undervaluation exceeds five percent (twenty percent (20%) of the additional taxes finally determined | nty percent (20%) of the te until the expiration of an on a personal property re 5%) of the value that sho                   | axes finally<br>by extension<br>durn is less t<br>uld have bed<br>he underval | determined to be due with respect to<br>period granted by the Township Ass<br>than the total assessed value that the<br>en reported on the return, then the C  | o the property which should have been<br>essor or County Assessor under IC<br>e person is required by law to report<br>ounty Auditor shall add a penalty of |  |
| In completing a personal property return for a year, a taxpayer owned, held, possessed or controlled on the assessment date information, answers to all questions on the face of the return, contacted and directed to provide that information. In addition,   | must make a complete d . (IC 6-1.1-3-9(a)). This is and entries on all of the  | isclosure of<br>nformation wappropriate I                                     | all information relating to the value, i<br>vould include, but not be limited to, c<br>ines of Schedule A. If such informat  | nature, or location of personal property<br>ompletion of the heading and related<br>ion is not provided, the taxpayer will be                               |  |
| * NAICS - North American Industry Classification System - A c (IAC) may be found on-line at the DLGF website - <a href="www.in.gov">www.in.gov</a> .  | omplete list of codes may<br><u>/dlgf</u> .  For further questior  | be found at   | www.census.gov. The Indiana Code   | e (IC) and Indiana Administrative Code  |  |
| NOTE: The NAICS Code Number appears on your federal inc ** An individual using his Social Security Number as the Fede   |  | is only requi   | ired to provide the last four digits of t  | hat number. IC 4-1-10-3.  |  |
| SECTION III   | I ·  |   |  |   |  |
| SUMMARY (Round all numbers to nearest ten dollars)  | REPORTED BY TAXPA  |   | CHANGE BY ASSESSOR   | CHANGE BY THE COUNTY BOARD  |  |
| Schedule A - Personal Property +  | \$   | \$  |  | \$  |  |
| Deduction per Form 103 ERA or Form 103-CTP -  | \$   | \$  |  | \$  |  |
| Final Assessed Valuation =  | \$   | \$  |  | \$  |  |
| SECTION IV  | SIGNATURE AND  |   |  |   |  |
| Under penalties of perjury, I hereby certify that this return knowledge and belief, is true, correct, and complete; if controlled by the named taxpayer in the stated townshi with IC 6-1.1 et seq., as amended, and regulations pro  | applicable, reports all<br>ip or taxing district on t  | tangible pe<br>the assess   | ersonal property subject to taxat  | ion owned, held, possessed or   |  |
| Signature of authorized person  |  | Telephone   | number   | Date (month, day, year)   |  |
| Name and title of authorized person (please type or print)  |  | E-mail cont   | act  |   |  |
| Signature of person preparing return, if different than authorized p  | erson preparing return, if different than authorized person  Name and contact information of preparer (please type or print) |   |  |   |  |

| SECTION           | V   | H. W.                      |                         |  |  |  |  |
|-------------------|---|----------------------------|-------------------------|--|--|--|--|
| FORM<br>See 5     | 103 - LONG TANGIBLE PERS<br>50 IAC 4.2-4 CONFI  | ONAL PROPERTY<br>DENTIAL   |                         | SCHEDULE A JANUARY 1, 2019 Federal Identification Number |  |  |  |
| Line              | Line Report all personal property assessable to this taxpayer below. (Round all figures below to nearest dollar)                          |                            |                         |  |  |  |  |
| 1                 | Total cost of tangible depreciable personal property. (50 IAC 4.2   | 2-4-2)                     |                         | \$   |  |  |  |
| 2                 | Adjustment to federal tax basis per Form 106. (50 IAC 4.2-4-4)  |                            |                         |  |  |  |  |
| 3                 | Total cost and base year value of tangible depreciable personal   | property. (Line 1 plus 2)  |                         | \$   |  |  |  |
|                   | Deduct Exempt Property (See 50 IAC 4.2-11.1)  |                            | COST                    |  |  |  |  |
| 4                 | Stationary industrial air purification systems. (Attach Form 103-   | P) \$                      |                         |  |  |  |  |
| 5                 | Industrial waste control facilities. (Attach Form 103-P)  |                            |                         | (  |  |  |  |
| 6                 | Enterprise information technology equipment. (Attach Form 103   | B-IT)                      |                         |  |  |  |  |
| 7                 | Vehicles / airplanes subject to excise tax.   | \$                         |                         |  |  |  |  |
| -                 | Total cost of exempt property (Deduct from Line 3 and o   | enter on Line 8)           |                         |  |  |  |  |
| 8                 | Subtotal  |                            |                         | \$   |  |  |  |
|                   | Additions: See 50 IAC 4.2-1-1.1 and 50 IAC 4.2-4-3(b) an  | d 4                        |                         |  |  |  |  |
| 9                 | Cost of all depreciable personal property still in use but written of   | \$                         |                         |  |  |  |  |
| 10                | Cost of installation and foundations applicable to depreciable pe   |                            |                         |  |  |  |  |
| 11                | Cost of interest incurred during construction and installation app (50 IAC 4.2-4-3(j))  |                            |                         |  |  |  |  |
| 12                | <b>Total</b> cost and base year value of assessable depreciable perso (add Lines 8, 9, 10 and 11. Line 12 must agree with Line 52 Col     | nal property.<br>umn A)    |                         | \$   |  |  |  |
| POO<br>(From Sche |   | STMENTS AC<br>LUMN B       | JUSTED COST<br>COLUMN C | TRUE TAX VALUE<br>COLUMN D                               |  |  |  |
| 52                | Total All Pools \$  | \$                         |                         | \$   |  |  |  |
| 53                | 30% of Adjusted Cost (Line 52, Column C) (enter zero (0) if filing and entity is a qualified steel mill or oil refinery per IC 6-1.1-3-23 | g 103-P5<br>).             |                         | \$   |  |  |  |
| 54                | Greater of Lines 52D or 53.   |                            |                         | \$   |  |  |  |
|                   | Adjustments to True Tax Value   |                            |                         |  |  |  |  |
| 55                | Equipment not placed in service and/or critical spare parts (50 IAC 4.2-6-1 & 6) per Form 106.  | V                          | X 10%                   | \$   |  |  |  |
| 56                | Tools, dies, jigs, fixtures, etc., per Form 103-T. (50 IAC 4.2-6-2)   | Cost<br>\$                 |                         | \$   |  |  |  |
| 57                | Permanently retired equipment (50 IAC 4.2-4-3) and/or returnal containers (50 IAC 4.2-6-4) per Form 106.                                  | \$                         |                         |  |  |  |  |
| 58                | Commercial aircraft and commercial bus line fleet, not subject to Form 103-I. (50 IAC 4.2-10)   |                            | \$                      |  |  |  |  |
| 59                | Total additions to True Tax Value. (Lines 55, 56, 57 and 58)  | ,                          |                         | \$   |  |  |  |
| 60                | Total True Tax Value before adjustments for "Abnormal Obsoles   | cence." (Line 54 plus Line | 59)                     | \$   |  |  |  |
| 61                | Abnormal Obsolescence Adjustment per Form 106. (50 IAC 4.2  | 4-8)                       |                         | \$   |  |  |  |
| 62                | Total True Tax Value of personal property. (To page 1, Form 10  | 3 Summary)                 |                         | \$   |  |  |  |

\*\* The total cost of special tools, dies, jigs, fixtures, etc., permanently retired equipment; commercial aircraft, and commercial bus line fleet, not subject to excise tax is to be deducted in full in Column B below. The true tax value of such property is to be computed on the proper Form(s) (103-T, 106 AND 103-I, respectively) and recorded on Line(s) 56, 57 and 58.

|     |   | ROUND ALL FIGUR                  | RES BELOW TO THE N              | EAREST DOLLAR. |                          |                |
|-----|---|----------------------------------|---------------------------------|----------------|--------------------------|----------------|
|     | YEAR OF ACQUISITION   | COLUMN A                         | COLUMN B                        | COLUMN C       |                          | COLUMN D       |
|     | POOL NUMBER 1:<br>(1 TO 4 YEAR LIFE)  | TOTAL COST OR<br>BASE YEAR VALUE | ADJUSTMENTS ** (See Note Above) | ADJUSTED COST  | T.T.V.%                  | TRUE TAX VALUE |
| 13  | 1-2-18 To 1-1-19  |                                  |                                 | 1              | 65                       |                |
| 14  | 1-2-17 To 1-1-18  |                                  |                                 |                | 50                       |                |
| 15  | 1-2-16 To 1-1-17  |                                  |                                 |                | 35                       |                |
| 16  | Prior To 1-2-16   | \$                               | \$                              | \$             | 20                       | \$             |
| 17  | TOTAL POOL NUMBER 1   |                                  |                                 |                |                          |                |
|     | A Commence of the Commence of | POOL N                           | UMBER 2: (5 TO 8 YE             | AR LIFE)       |                          |                |
| 18  | 1-2-18 To 1-1-19  |                                  |                                 |                | 40                       |                |
| 19  | 1-2-17 To 1-1-18  |                                  |                                 |                | 56                       |                |
| 20  | 1-2-16 To 1-1-17  |                                  |                                 |                | 42                       |                |
| 21  | 3-2-15 To 1-1-16  |                                  |                                 |                | 32                       |                |
| 22  | 3-2-14 To 3-1-15  |                                  |                                 |                | 24                       |                |
| 23  | 3-2-13 To 3-1-14  |                                  |                                 |                | 18                       |                |
| 24  | Prior To 3-2-13   | \$                               | \$                              | \$             | 15                       | \$             |
| 25  | TOTAL POOL NUMBER 2   |                                  |                                 |                | - 1 No. 1 - 1 March 1971 |                |
| i v |   | POOL N                           | JMBER 3: (9 TO 12 YE            | AR LIFE)       | 40                       | I              |
| 26  | 1-2-18 To 1-1-19  |                                  |                                 |                | 40                       |                |
| 27  | 1-2-17 To 1-1-18  |                                  |                                 |                | 60                       |                |
| 28  | 1-2-16 To 1-1-17  |                                  |                                 |                | 55                       |                |
| 29  | 3-2-15 To 1-1-16  |                                  |                                 |                | 45                       |                |
| 30  | 3-2-14 To 3-1-15  |                                  |                                 |                | 37                       |                |
| 31  | 3-2-13 To 3-1-14  |                                  |                                 |                | 25                       |                |
| 32  | 3-2-12 To 3-1-13  |                                  |                                 |                | 20                       |                |
| 33  | 3-2-11 To 3-1-12  |                                  |                                 |                | 16                       |                |
| 34  | 3-2-10 To 3-1-11  |                                  |                                 |                | 12                       |                |
| 35  | 3-2-09 To 3-1-10  |                                  |                                 |                | 10                       | ¢              |
| 36  | Prior To 3-2-09   | \$                               | \$                              | \$             |                          | \$             |
| 37  | TOTAL POOL NUMBER 3   | PAGE NUMB                        | <br>ER 4: (13 YEAR AND L        | ONCER LIEE/    | 552 ALS - 135            |                |
| 0.0 | 10.10 T. 1.1.10   | POOL NUMB                        | ER 4: (13 YEAR AND L            | ONGER LIFE)    | 40                       |                |
| 38  | 1-2-18 To 1-1-19  |                                  |                                 |                | 60                       |                |
| 39  | 1-2-17 To 1-1-18  |                                  |                                 |                | 63                       |                |
| 40  | 1-2-16 To 1-1-17<br>3-2-15 To 1-1-16  |                                  |                                 |                | 54                       |                |
| 41  |   |                                  |                                 |                | 46                       |                |
| 42  | 3-2-14 To 3-1-15  |                                  |                                 |                | 40                       |                |
|     | 3-2-13 To 3-1-14  |                                  |                                 |                | 34                       |                |
| 44  | 3-2-12 To 3-1-13<br>3-2-11 To 3-1-12  |                                  |                                 |                | 29                       |                |
| 46  | 3-2-11 10 3-1-12<br>3-2-10 To 3-1-11  |                                  |                                 |                | 25                       |                |
| 46  | 3-2-09 To 3-1-10  |                                  | <b> </b>                        |                | 21                       |                |
| 48  | 3-2-09 To 3-1-10  |                                  |                                 |                | 15                       |                |
| 49  | 3-2-06 10 3-1-09<br>3-2-07 To 3-1-08  | <del> </del>                     |                                 |                | 10                       |                |
| 50  | Prior To 3-2-07   | \$                               | \$                              | \$             | 5                        | \$             |
| 51  | TOTAL POOL NUMBER 4   | Ψ                                |                                 | <del>*</del>   | <b>†</b>                 |                |
| 52  | ***   |                                  |                                 |                | <b>†</b>                 |                |
| J2  | TOTAL ALL POOLS   |                                  |                                 |                |                          |                |

NOTE: All Column B adjustments above must be supported on Form 106, Form 103-T, or Form 103-I.

## Filing Basics:

- Effective July 1, 2015, IC 6-1.1-3-7.2 was amended to allow an exemption for taxpayers with less than \$20,000 in acquisition costs to be reported within a county. Failure to timely file a personal property tax return with the applicable assessor declaring the exemption will result in a \$25 penalty. (IC 6-1.1-37-7) For more information, refer to this link: <a href="http://www.in.gov/dlgf/7576.htm">http://www.in.gov/dlgf/7576.htm</a>.
- Taxpayers may request up to a thirty (30) day extension of time to file their return. The written request should be sent to the Assessor before the filing deadline of May 15, 2019, and should include a reason for the request. The Assessor may, at their discretion, approve or deny the request in writing.
- Personal property must be assessed in each taxing district where property has a tax situs.
- Inventory located in the State of Indiana is exempt and is not required to be reported per IC 6-1.1-1-11(b)(3).
- It is the responsibility of the taxpayer to obtain forms from the Assessor and file a timely return. The forms are also available on-line at the Indiana Department of Local Government Finance's website at <a href="https://www.in.gov/dlgf">www.in.gov/dlgf</a>.
- If you hold, possess, or control not-owned personal property on the assessment date, you have a liability for the taxes imposed for that year unless you establish that the property is to be assessed to the owner. This is done by completing a Form 103-N, attaching it to the Form 103-Long, and filing it with the Assessor. A taxpayer declaring the exemption on page one of this form may, as deemed necessary by the applicable assessor, need to file Form 103-O or 103-N, as applicable, to verify that he is the appropriate taxpayer to claim the exemption.

NOTE: Failure to properly disclose lease information may result in a double assessment. (IC 6-1.1-2-4(a))

• Taxpayers who discover an error was made on their original timely filed personal property tax return have the right to file an amended return. The amended return must be filed within twelve (12) months of the due date or the extended due date (if up to a thirty (30) day extension was granted) of their original return.

**Frequently Asked Questions:** 

A. How do I find out my Taxing District Name and Number?

You will need to contact your County Assessor for assistance since heavily populated areas can have several taxing districts within a single township.

B. How do I find out my NAICS number?

This six-digit code number appears on the federal returns filed for businesses. For a complete list of the codes, go to www.census.gov.

C. Will my local Assessor fill this form out for me?

Indiana's personal property tax system is a self-assessment system. An Assessor can offer assistance with the filing; however, an authorized person representing the business must sign the form under penalties of perjury that it is true and correct so the responsibility of filing an accurate return remains with the taxpayer.

D. How can I find contact information for the various county offices (Assessor, Auditor, or Treasurer) throughout the State of Indiana, locate forms or learn more about Indiana's personal property tax system? Go to the Indiana Department of Local Government Finance's website at <a href="https://www.in.gov/dlgf">www.in.gov/dlgf</a>. Contact information for the Assessor is available at <a href="https://www.in.gov/dlgf/2440.htm">https://www.in.gov/dlgf</a>/2440.htm.

#### SECTION VI

INFORMATION OF NOT-OWNED PERSONAL PROPERTY WHICH IS TO BE ASSESSED TO THE OWNER

NOTE: This form is for the reporting of two or less Operating Leases. For all other leases, the Form 103-N (for the lessee) and the Form 103-O (for the lessor) should be utilized. For more information on the reporting of leased equipment, refer to 50 IAC 4.2-8. Failure to properly disclose lease information may result in a double assessment.

| Name and<br>Address of the Owner | Location of<br>Property | Date of Lease<br>(month, day, year) | Model Number and Description | Quantity | Cost,<br>if Known |
|----------------------------------|-------------------------|-------------------------------------|------------------------------|----------|-------------------|
|                                  |                         | ,                                   |                              |          |                   |
|                                  |                         |                                     |                              |          |                   |
|                                  |                         |                                     |                              |          |                   |



# **FORM 103-N SCHEDULE 1**

### PRIVACY NOTICE

This form contains information confidential pursuant to IC 6-1.1-35-9.

| JΑ | NUA | RY | 1, | 20 |  |
|----|-----|----|----|----|--|
|    |     |    |    |    |  |

For Assessor's use only

|        | COTIONIO |
|--------|----------|
| INSTRU | JCTIONS: |

The form may be used in order to comply with IC 6-1.1-2-4(a) and 50 IAC 4.2-2-4.

| Name of person in possession of property (please type or print) | County                      |
|---|-----------------------------|
| Address (number and street, city, state, and ZIP code)          | DLGF taxing district number |

| Report all personal property held, poss   | sessed or controlled on Januar                                    | y i of the current                       | assessment year, in oc                             |                                 |                    |
|---|---|--|--|---------------------------------|--------------------|
|   | HEDULE I - ASSESSED TO O  |  |  |                                 |                    |
| Information return of all personal property whassessment year by the OWNER. (If Special | nich was held, possessed or co<br>I Tools, report on Form 103-T.) | ontrolled by this to<br>(See 50 IAC 4.2- | expayer but owned as of<br>2-4 and 5; and 50 IAC 4 | January 1 of the .2-8-3 and 4.) | e current          |
| NAME AND ADDRESS<br>OF OWNER  | LOCATION OF<br>PROPERTY   | DATE OF<br>LEASE                         | MODEL NUMBER AND DESCRIPTION                       | QUANTITY                        | COST<br>(If Known) |
|   |   | -  |  |                                 |                    |
|   |   |  |  |                                 |                    |
|   |   |  |  |                                 |                    |
|   |   |  |  |                                 |                    |
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| ,   |   |  |  |                                 |                    |
|   |   |  |  |                                 |                    |
|   |   |  |  |                                 |                    |
| <u> </u>  |   |  |  |                                 | V. P. S            |
|   |   |  |  | TOTAL                           |                    |

IC 6-1.1-2-4 Liability for tax

Sec. 4.(a) A person holding, possessing, controlling, or occupying any personal property on the assessment date of a year is liable for the taxes imposed for that year on the property unless: (1) the person establishes that the property is being assessed and taxed in the name of the owner; or (2) the owner is liable for the taxes under a contract with that person.

50 IAC 4.2-2-4 Liability

Sec. 4.(a) The owner of any personal property on the assessment date of a year is liable for the taxes imposed for that year on the property. (b) Possessory interests. A person holding, possessing, or controlling any personal property on the assessment date of a year is liable for the taxes imposed for that year on the property unless they establish that the property is being assessed and taxed in the name of the owner, or the owner is liable for the taxes under a contract with that person and that person files a correct Form 103-N supplemental information return on or before the due date.

# Schedule I includes, but is not limited to, the reporting of:

Returnable Containers; Operating Leases; and all other property held, possessed or controlled by this taxpayer but owned by another person.

#### Excluded from Schedule I is:

Personal property subject to Capital Lease - See Schedule II. Special Tools - See Form 103-T

| FORM 103-N                                     | SCHEDULE II         | JANUARY 1, 20               |
|--|---------------------|-----------------------------|
| Name of person in possession of property (ple  | ease type or print) | County                      |
| Address (number and street, city, state, and Z | IP code)            | DLGF taxing district number |

Report all personal property held, possessed or controlled on January 1 of the current assessment year, in Schedule I or Schedule II.

# TO BE ASSESSED AS A CAPITAL LEASE to person holding, possessing or controlling property.

Information return of all personal property which was held, possessed or controlled as of January 1 of the current assessment year by this taxpayer but owned by another person. (If Special Tools, report on Form 103-T.) (See 50 IAC 4.2-2-4 and 5; and 50 IAC 4.2-8-3 and 4.)

| NAME AND ADDRESS                         | LOCATION OF | DATE OF      | MODEL NUMBER    | LINE NO. REPORTED<br>ON FORM 102 / 103 | COST       |
|--|-------------|--------------|-----------------|--|------------|
| OF OWNER                                 | PROPERTY    | LEASE        | AND DESCRIPTION | IF APPLICABLE                          | PER 50 IAC |
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| le II includes personal property subject |             | 1            |                 | TOTAL                                  |            |



Prescribed by the Department of Local Government Finance

#### FORM 103-0

PRIVACY NOTICE This form contains information confidential pursuant to IC 6-1.1-35-9.

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For assessor's use only

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The form may be used in order to comply with IC 6-1.1-2-4(a) and 50 IAC 4.2-2-4.

| Name of owner (please print or type)                            | / | County                      |
|---|---|-----------------------------|
| Address of owner (number and street, city, state, and ZIP code) |   | DLGF taxing district number |

Report all personal property owned by this taxpayer but held, possessed or controlled by another person on January 1 of the current assessment year, in Schedule I or Schedule II. (If Special Tools, report on Form 103-T.) (See 50 IAC 4.2-2-4 and 5; and 50 IAC 4.2-8-3 and 4.)

|   | SCHEDULE I - ASSESS      |                  |                                    |   |                   |                        |
|---|--------------------------|------------------|------------------------------------|---|-------------------|------------------------|
| Information return of all personal property ow    | vned (including operatin | g leases) as o   | of January 1 of the                | current assessment ye                                   | ar by this taxpay | er but which           |
| was held, possessed or controlled by anothe       | er person.               |                  |                                    |   |                   |                        |
| NAME AND ADDRESS OF<br>PERSON POSSESSING PROPERTY | LOCATION OF PROPERTY     | DATE OF<br>LEASE | MODEL NUMBER<br>AND<br>DESCRIPTION | LINE NO. REPORTED<br>ON FORM 102 / 103<br>IF APPLICABLE | QUANTITY          | COST PER<br>50 IAC 4.2 |
|   |                          |                  |                                    | '   |                   |                        |
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| ·   |                          |                  |                                    |   | TOTAL             |                        |
|   |                          |                  |                                    |   | TOTAL             |                        |

#### IC 6-1.1-2-4 Liability for tax

Sec. 4.(a) A person holding, possessing, controlling, or occupying any personal property on the assessment date of a year is liable for the taxes imposed for that year on the property unless: (1) the person establishes that the property is being assessed and taxed in the name of the owner; or (2) the owner is liable for the taxes under a contract with that person.

#### 50 IAC 4.2-2-4 Liability

Sec. 4.(a) The owner of any personal property on the assessment date of a year is liable for the taxes imposed for that year on the property. (b) Possessory interests. A person holding, possessing, or controlling any personal property on the assessment date of a year is liable for the taxes imposed for that year on the property unless they establish that the property is being assessed and taxed in the name of the owner, or the owner is liable for the taxes under a contract with that person and that person files a correct Form 103-N supplemental information return on or before the due date.

#### Schedule I includes, but is not limited to, the reporting of:

Returnable Containers; Operating Leases; and all other property held, possessed or controlled by this taxpayer but owned by another person.

#### Excluded from Schedule I is:

Personal property subject to Capital Lease - See Schedule II. Special Tools - See Form 103-T

| FORM 103 - 0   | SCF   |                   | JANUARY 1, 20                          |                    |  |
|--|---|-------------------|--|--------------------|--|
| Name of owner (please type or print)   |   |                   |  | County             |  |
| address of owner (number and street, city, state, and  | ZIP code)   |                   |  | DLGF taxing distri | ct number  |
| Report all personal property owned by the assessment year, in Schedule I or Schedule I | lule II. (If Special Tools, report o                          | n Form 103-T.) (  | See 50 IAC 4.2-2-4 and 5;              | and 50 IAC 4.2-8   | 3-3 and 4.)  |
| Information return of all personal property ov   | SSED AS A CAPITAL LEASE T<br>wned by this taxpayer which is c | lassified as a ca | pital lease per 50 IAC 4.2-            |                    | 1 of the current   |
| assessment year by the person holding, pos<br>NAME AND ADDRESS OF<br>PERSON POSSESSING PROPERTY  | LOCATION OF PROPERTY  | DATE OF<br>LEASE  | MODEL NUMBER AND DESCRIPTION           | QUANTITY           | COST PER<br>50 IAC 4.2   |
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| chedule II includes personal property subj   |   |                   | <u>L</u>                               | TOTAL              |  |

# BUSINESS TANGIBLE PERSONAL PROPERTY RETURN

FORM 104

JANUARY 1, 20\_

For Assessor's Use Only

State Form 10068 (R23 / 1-17)
Prescribed by the Department of Local Government Finance

NOTE: If you are declaring on Form 102, Form 103-Short, or 103-Long the exemption for personal property with an acquisition cost of less than \$20,000, you do not need to complete and submit this form.

This form is filed with either the Form 102 or Form 103. Signatures on both forms (Form 104 and Form 102 or Form 103) are required per 50 IAC 4.2-2-9(e).

INSTRUCTIONS:

This form must be <u>filed with the Township Assessor</u>, <u>if any</u>, <u>or the County Assessor of the county in which the property is located</u> not later than May 15, unless an extension of up to thirty (30) days is granted in writing. Contact information for the Assessor is available at <a href="http://www.in.gov/dlgf/2440.htm">http://www.in.gov/dlgf/2440.htm</a>.

| Name of taxpayer (Please type or print)  |                               |                             | DLGF taxing district | numbei                     |
|--|-------------------------------|-----------------------------|----------------------|----------------------------|
| Name under which business is conducted   |                               |                             | Township             |                            |
| Address where property is located (number and street, city, and state)   |                               | County                      |                      | ZIP code                   |
| Nature of business   |                               |                             |                      |                            |
| Name to which assessment and tax notice are to be mailed (if different than  | n above)                      |                             |                      |                            |
| Mailing address (number and street, city, and state) (if different than above,   |                               | County                      |                      | ZIP code                   |
|  |                               |                             |                      |                            |
| TOTAL TANGIBLE PERSONAL PROPERTY (Please check one   | e)                            | Form 103                    |                      |                            |
| Summary (round all numbers to nearest ten dollars)   | REPORTED BY TAXPAYER          | CHANGE BY                   | ASSESSOR             | CHANGE BY COUNTY BOARD     |
| Schedule A - Personal Property +   | \$                            | \$                          |                      | \$                         |
| Deduction per Form 103 ERA or Form 103-CTP -   | \$ .                          | \$                          |                      | \$                         |
| Final Assessed Value =   | \$                            | \$                          |                      | \$                         |
| All vehicles used in farm or business and not subject to Excise Forms 102 or 103.  | Tax must be reported as de    | epreciable persona          | al property in the p | ools on Schedule A of      |
|  |                               |                             |                      |                            |
| SIG  | NATURE AND VERIFICAT          | ION                         |                      |                            |
| Under penalties of perjury, I hereby certify that this return (inc is true, correct, and complete; reports all tangible personal pr the stated township or taxing district on the assessment date, regulations promulgated with respect thereto. | operty subject to taxation of | wned, held, posse           | essed or controlle   | d by the named taxpayer in |
| Signature of authorized person   | Date sig                      | ned <i>(month, day, yea</i> | ar)                  |                            |
| Printed name of authorized person  | Title                         |                             |                      |                            |
| Signature of person preparing return, if different than authorized person  | Printed r                     | name of preparer            |                      |                            |
| Address of preparer (number and street, city, and state)   | <del></del>                   |                             |                      | ZIP code                   |

| FILING REQUIREMENTS   |  |
|---|--|
| <b>Property in more than one Taxing District -</b> Due to varying tax rates, a taxpayer who has property in two or more taxing districts within the same township must have separate assessments for each district covering only property located in that district. (IC 6-1.1-3-10)   |  |
| Were expenditures made since the last assessment date for improvements on any real property owned, held, possessed, controlled or occupied by the taxpayer in the township wherein this return is filed?  |  |
| If Yes, attach a statement setting forth the name of owner, location of the real property, an explanation of the nature, cost, date on which construction of improvements was begun, and date on which construction was completed. If not completed as of January 1, state the percentage completed at that time. (IC 6-1.1-5-13) |  |

#### PENALTIES FOR FAILURE TO FILE COMPLETE AND ACCURATE FORMS

Failure to file a return on or before the due date as required by law will result in the imposition of a twenty-five dollar (\$25.00) penalty. In addition, if a return is not filed within thirty (30) days after such return is due, a penalty equal to twenty percent (20%) of the taxes finally determined to be due with respect to the property which should have been reported will be imposed. A personal property return is not due until the expiration of any extension period granted by the Township Assessor or County Assessor under IC 6-1.1-3-7(b).

If the total assessed value that a person reports on a personal property return is less than the total assessed value that the person is required by law to report and if the amount of the undervaluation exceeds five percent (5%) of the value that should have been reported on the return, then the County Auditor shall add a penalty of twenty percent (20%) of the additional taxes finally determined to be due as a result of the undervaluation.

In completing a personal property return for a year, a taxpayer must make a complete disclosure of all information relating to the value, nature, or location of personal property owned, held, possessed or controlled on the assessment date [IC 6-1.1-3-9(a)], and information relating to improvements made since the preceding assessment date to real property owned, held, possessed or occupied. (IC 6-1.1-5-13) This information would include, but not be limited to, completion of the heading and related information, and answers to all questions and entries on all of the appropriate lines on the face of the return. If such information is not provided, the taxpayer will be contacted and directed to provide that information. In addition, a penalty of twenty-five dollars (\$25.00) shall be imposed. [IC 6-1.1-37-7(d)]

The above penalties are due on the property tax installment next due for the return, whether or not an appeal is filed pursuant to IC 6-1.1-15-5 with respect to the tax due on that installment. [IC 6-1.1-37-7(f)]

# FILING BASICS

- Every person owning, holding, possessing, or controlling personal property in Indiana on January 1 is required to file a form by May 15.
- Taxpayers may request up to a thirty (30) day extension of time to file their return. The written request should be sent to the Assessor before the
  filing deadline of May 15 and should include a reason for the request. The Assessor may, at his or her discretion, approve or disapprove the
  request in writing.
- Personal property must be assessed in each taxing district where property has a tax situs.
- Inventory located in the State of Indiana is exempt and is not required to be reported per IC 6-1.1-1-11(b)(3).
- It is the responsibility of the taxpayer to obtain forms from the Assessor and file a timely return. The forms are also available on-line at the department's website, <a href="www.in.gov/dlgf">www.in.gov/dlgf</a>.
- If you hold, possess, or control not-owned personal property on the assessment date, you have a liability for the taxes imposed for that year unless you establish that the property is to be assessed to the owner. This is done by completing a Form 103-N, attaching it to the appropriate personal property form, and filing it with the Assessor.
  - NOTE: Failure to properly disclose lease information may result in a double assessment.
- Taxpayers who discover an error was made on their original, timely-filed personal property tax return have the right to file an amended return. The amended return must be filed within twelve (12) months of the due date or the extended due date (if up to a thirty (30) day extension was granted) of their original return.



Prescribed by Department of Local Government Finance

# FORM 106

PRIVACY NOTICE
This form contains information confidential pursuant to IC 6-1.1-35-9.

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For Assessor's use only

| INSTRUCTIONS: Please | file with Form 102 or 103. |
|----------------------|----------------------------|
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| lame of taxpayer (please type or print)   |   |   | DLGF taxing o                            | listrict number                                  |
|---|---|---|--|--|
| ame under which business is conducted   |   |   |  |  |
| ddress where property is located (number and street, city, and state)   |   | Township  |  | ZIP code   |
| F A TAXPAYER CLAIMS ANY ADJUSTMENT ON THE VALUE OF<br>FOR THE ADJUSTMENT, DESCRIBING THE ITEM OR ITEMS<br>NO ADJUSTMENT WILL BE ALLOWED WITHOUT A VALID<br>DN THE FORM MAY RESULT IN A DENIAL OF THE ADJU<br>SEPARATE SHEET OR SHEETS.  | S AFFECTED, AND THE<br>BASIS. FAILURE OF TH               | BASIS OR METHOD USE<br>IE TAXPAYER TO GIVE T            | ED IN ARRIVING AT T<br>THE DETAILED EXP  | THE AMOUNT CLAIMED.<br>LANATION REQUESTEI        |
|   | DEPRECIABLE AND   | OTHER   |  |  |
| (1) Adjust cost to federal tax basis - 50 IAC 4.2-4-4 (2) Permanently retired equipment ( <i>Deduct total cost and rep</i> (3) Deduct abnormal depreciable asset obsolescence, only if  Any overall obsolescence  Calculations mus (4) Critical spare parts - 50 IAC 4.2-6-6 (5) Returnable containers - 50 IAC 4.2-6-4 | f qualified - 50 IAC 4.2-4<br>ce claimed must also b      | -8 and 50 IAC 4.2-9                                     | ent claimed.                             | and (d)  |
|   | T (50 IAC 4 2 6 2)  |   |  |  |
| SPECIAL TOOLING MUST BE COMPUTED ON FORM 103-<br>COMMERCIAL AIRCRAFT AND COMMERCIAL BUSES MU  |   | FORM 103-I. (50 IAC 4.                                  | 2-10)                                    |  |
| Sho   | w and Explain All Calc                                    | ulations Below.   |  |  |
| I hereby certify to the best of my knowledge and belief that the  | SIGNATURE AND VER   | for the adjustments claim                               | ned are true and com                     | plete and that the                               |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax signature of authorized person   | he facts stated as bases<br>x value of the property at    | for the adjustments claim                               | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
|   | he facts stated as bases<br>x value of the property at    | for the adjustments claim                               | ned are true and com<br>AC 4.2-1-1.1(t). |  |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax signature of authorized person signature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim<br>fected as defined by 50 IA | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax signature of authorized person signature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax gnature of authorized person.  Ignature of person preparing return, if different than authorized person.   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax gnature of authorized person.  Ignature of person preparing return, if different than authorized person.   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax ignature of authorized person ignature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax signature of authorized person.  Signature of person preparing return, if different than authorized person (If more space).  | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | ned are true and com<br>AC 4.2-1-1.1(t). | Date (month, day, year)                          |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax signature of authorized person signature of person preparing return, if different than authorized person   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | AC 4.2-1-1.1(t).                         | Date (month, day, year)  Date (month, day, year) |
| I hereby certify to the best of my knowledge and belief that the adjustments claimed hereon are required to produce true tax signature of authorized person.  Signature of person preparing return, if different than authorized person (If more space)   | he facts stated as bases x value of the property at Title | for the adjustments claim fected as defined by 50 IA    | AC 4.2-1-1.1(t).                         | Date (month, day, year)                          |