

PARCEL #: LOCATION: RP PARCEL #: MILL CODE: ZONE:	TANGIBLE PERSONAL PROPERTY TAX RETURN Confidential § 193.074 F.S. As Required by §§ 193.052 & 193.062 F.S.	STATE OF FLORIDA COUNTY OF MANATEE 2010
Return To Manatee County Property Appraiser By April 1 To Avoid Penalties		

FEI #: _____ MULTI #: _____ BUSINESS NAME (DBA) AND MAILING ADDRESS: _____

MAIL COMPLETED RETURN TO:

**CHARLES E. HACKNEY, CFA
 MANATEE COUNTY PROP APPR
 PO BOX 1358
 BRADENTON FL 34206-1358**

NAICS CODE: _____ DESCRIPTION: _____ If name or address is incorrect, please make necessary corrections.

THIS RETURN IS SUBJECT TO AUDIT WITH ALL RECORDS KEPT BY YOU, INCOMPLETE ENTRIES ARE SUBJECT TO PENALTIES.

1. Contact information for Owner or Person in Charge. Name: _____ Tel. #: _____ Cell#: _____ Fax#: _____ E-mail address: _____ Corp Name/DBA: _____	5a. Although my fiscal year ended prior to December 31 of the past calendar year, this return reflects property additions and deletions through December 31. Yes ___ No ___
2. Actual Physical Location of This Property (On January 1st): _____	6. Describe Type or Nature of Your Business: _____
3. Is Your Business or Farm Located Within the Incorporated Limits of a City? Yes ___ No ___ If Yes, what City? _____	7. Trade Level: (Circle as many as apply) Retail Wholesale Manufacturing Professional Service Agriculture Leasing/Rental Other
4. Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes ___ No ___ If Yes, Please Show Name Exactly as it Appeared on your Most Recent Personal Property Tax Bill or Current Return _____	8. Did You File a Tangible Personal Property Return in This County Last Year? Yes ___ No ___ If Yes, Under what Name and Address? _____
5. Date You Began Business In This County: _____ Fiscal Year: From _____ To _____	9. Former Owner of the Business: _____ 10. If Business Sold, To whom? _____ Date _____ 10a. Were all assets sold? Yes ___ No ___ Sale Price? _____ Attach Bill of Sale

SCHEDULE #1

LEASED, LOANED, AND RENTED EQUIPMENT (PLEASE COMPLETE IF YOU LEASE, HOLD OR USE EQUIPMENT BELONGING TO OTHERS.)

NAME AND ADDRESS OF OWNER OR LESSOR	CONTRACT NUMBER	ASSET DESCRIPTION	YEAR ACQUIRED	LEASE TERM	RENT PER MONTH	RETAIL INSTALLED COST NEW

SCHEDULE #2

EQUIPMENT OWNED BY YOU BUT RENTED, LEASED, OR HELD BY OTHERS

LEASE NO.	NAME/ADDRESS OF LESSEE ACTUAL PHYSICAL LOCATION OF ASSETS	DESCRIPTION	AGE	YEAR PURCHASED	RENT PER MONTH	TERM	TAXPAYER'S ESTIMATE OF CONDITION		RETAIL INSTALLED COST NEW
							FAIR MARKET VALUE	(GOOD) (AVG.) (POOR)	

Under penalties of perjury, I declare that I have read the foregoing tax return and that the facts stated in it are true. If prepared by someone other than the taxpayer, the preparer signing this return certifies that his/her declaration is based on all information of which he/she has any knowledge.

DATE: _____ TITLE: _____

SIGNED: _____
 (TAXPAYER—SIGNATURE REQUIRED)

SIGNED: _____
 (PREPARER)

ADDRESS: _____

PHONE NO: _____ PREPARER'S ID: _____

CONTINUE ON SEPARATE SHEET IF NECESSARY

LESS EXEMPTION: [] WIDOW [] WIDOWER [] BLIND
 [] TOTAL DISABILITY [] OTHER

NOTICE: IF YOU ARE ENTITLED TO A WIDOW'S, WIDOWER'S, OR DISABILITY EXEMPTION ON PERSONAL PROPERTY (NOT ALREADY CLAIMED ON REAL ESTATE), PLEASE CONSULT APPRAISER.

PLEASE SIGN AND DATE YOUR RETURN. SEND THIS ORIGINAL TO THE MANATEE COUNTY APPRAISER'S OFFICE BY APRIL 1st. UNSIGNED RETURNS CANNOT BE ACCEPTED BY THE APPRAISER'S OFFICE. QUESTIONS PLEASE CALL: (941) 742-5660

TAXABLE VALUE	PENALTY
DEPUTY	PENALTY

ALL INFORMATION ON BOTH SIDES MUST BE COMPLETED IN FULL TO BE A VALID RETURN

TAXPAYER MUST SIGN HERE

TANGIBLE PERSONAL PROPERTY TAX RETURN GENERAL INSTRUCTIONS

Complete this Personal Property Tax return in accordance with the instructions provided herein as your declaration of personal property situated in this county. If any schedule has insufficient space, attach a separate sheet. Please print or type except for signature.

WHAT TO REPORT ON THIS RETURN:

- 1.) Tangible Personal Property - Include all goods, chattels, and other articles of value (but not certain vehicles) capable of manual possession and whose chief value is intrinsic to the article itself. More specifically, all furniture, fixtures, equipment and supplies used in your business or rental property.
- 2.) Items of inventory held for lease to customers in the ordinary course of business, rather than for sale, shall be deemed inventory only prior to the initial lease of such items and MUST be reported after their initial lease or rental as equipment and/or furniture or fixtures.
- 3.) **ALL FULLY DEPRECIATED, ADJUSTED, OR EXPENSED ASSETS MUST BE REPORTED AT TOTAL ORIGINAL COST WHETHER WRITTEN OFF OR NOT.**
- 4.) Property personally owned, but used in the business must be reported.

DO NOT INCLUDE:

- 1.) Intangible Personal Property - that is, money, all evidence of debt owed to the taxpayer, all evidence of ownership in a corporation, etc...
- 2.) Household Goods such as wearing apparel, appliances, furniture, and other items ordinarily found in the home and used for the comfort of the owner and his family, and not used for commercial purposes. (EXCEPTION: Hotel, Motel & Apartment Buildings)
- 3.) Automobiles, Trucks, and Other Licensed Vehicles - These are not taxable as personal property. (EXCEPTION: The equipment, on certain vehicles, is taxable as personal property and must be reported. Examples include power cranes, air compressors, and other equipment designed as a tool rather than primarily as a hauling vehicle.)
- 4.) Inventory - Those chattels consisting of items commonly referred to as goods, wares, and merchandise which are held for sale or lease to customers in the ordinary course of business.

VALUATION OF PERSONAL PROPERTY:

All property located in this county as of January 1 must be reported at 100% of the total original cost. **Include transportation, handling, sales tax, freight and installation charges.** Report the total cost of all assets.

ADJUSTMENTS TO VALUES - TAXPAYER'S ESTIMATE OF FAIR MARKET VALUE:

Enter only UNADJUSTED figures in areas calling for Total Original Cost. An adjustment is a variation from purchase price paid. Adjusted figures MUST be explained on the asset schedule. Such schedules are considered part of the return. Florida Statute 195.027(4)(a) 5&6 requires the taxpayer provide an estimate of the condition, including functional and economic depreciation or obsolescence and the taxpayer's estimate of the fair market value of the property.

IMPORTANT – Submit all documentation and/or appraisals in support of your taxpayer's estimate of fair market value prior to May 15th for consideration by this office. Failure to comply with this written request may prevent consideration in future administrative or judicial hearings. Ref: Higgs v Good 813 So. 2d 178(FLA 3D DCA 2002)

LOCATION OF PERSONAL PROPERTY:

A SEPARATE personal property return must be filed for each location in the county. Additional forms will be mailed on request; contact the county property appraiser's office.

Owners of vending machines, LP/Propane tanks and similar property at many locations may submit a single schedule listing all locations in lieu of individual tax returns.

SPECIFIC INSTRUCTIONS

In the appropriate schedule list the Total Original Installed Cost for ALL assets in your business. Assets in each schedule must be grouped by year of acquisition.

The figure you enter as "original cost" must include the total original installed cost of your equipment, before any allowance for depreciation. Include freight-in, handling, sales tax and installation costs. If a trade-in was deducted from the invoice price, enter the total cost before trade in.

Add back investment credits taken for federal income tax purposes if those were deducted from the original cost. **INCLUDE ALL FULLY DEPRECIATED OR EXPENSED ASSETS AT ORIGINAL COST, WHETHER WRITTEN OFF OR NOT.**

If you own equipment that is out on a loan, rental, or lease basis to others, report it on schedule #2.

List each item of tangible personal property separately in the appropriate schedule except for "classes" of personal property. A class is defined as items which are SUBSTANTIALLY similar in function, use and age. Do not use the terms "VARIOUS," "NA," "NOT APPLICABLE" or "SAME AS LAST YEAR." This is inadequate reporting and may subject you to penalties for FAILURE TO FILE.

List all items of furniture and fixtures, machinery and equipment, and supplies. All expensed items must be entered at original cost.

For each item, report your estimate of the current fair market value of the property and your estimate of the condition, including functional and economic depreciation or obsolescence.

Farm, Grove, and Dairy Equipment:

List all types of agricultural equipment you owned as of January 1. Describe property by type, manufacturer, model number, and year acquired. The following is a partial list of the types of equipment which are to be reported: bulldozers, draglines, mowers, balers, tractors, all types of dairy equipment, pumps, hand and power sprayers, heaters, discs, fertilizer distributors, etc...

Hotel, Motel and Apartment Buildings:

List all furniture, appliances and equipment used in Hotels, Motels, and Apartment Buildings.

Leasehold Improvements - i.e. Physical Modifications to Leased Property:

If you have made any improvements (including modifications and additions) to property that you lease, list the original cost and year of acquisition of the improvements. Leasehold improvements may include Walk-in coolers, Vaults, Safes, Tanks, Shelving, Cabinets, Removable walls, Partitions, etc... **IMPORTANT: ATTACH ITEMIZED LIST OR DEPRECIATION SCHEDULE SHOWING INVENTORY OF INDIVIDUAL IMPROVEMENTS.**

Supplies:

Enter the average cost of supplies on hand. Supplies are stocks of goods intended to be consumed during the production process but are not part of the raw materials inventory that is processed into the finished product. Examples of supplies include chemicals, clothing, pallets, paper, shipping materials, fuels, and repair parts. Unlike inventory, supplies are not held for resale.

Leased, Loaned, and Rented Equipment:

If you borrow, rent or lease equipment from others complete schedule #1 by entering the name and address of the owner or lessor and a description of the equipment, year you acquired it, year of manufacture (if known), the rent per month, and the amount it would have originally cost had you purchased the equipment new.

FLORIDA STATUTES RELATING TO FILING TANGIBLE PERSONAL PROPERTY TAX RETURNS

192.011	All property to be assessed
192.032	Situs of property for assessment purposes
192.042	Date of assessment
192.047	Date of filing
193.052	Preparation and serving of returns
193.062	Dates for filing returns
193.063	Extension of date for filing tangible personal property tax returns
193.072	Penalties for improper or late filing of returns and for failure to file returns
193.073	Erroneous returns, estimate of assessment when no return is filed
193.074	Confidentiality of returns
195.027(4)(a)	Rules and regulations prescribed by Department of Revenue
196.183	Exemption for Tangible Personal Property

If you have any questions, please contact our office.

CHARLES E. HACKNEY, CFA
MANATEE COUNTY PROPERTY APPRAISER
TANGIBLE PERSONAL PROPERTY DEPT.
P.O. BOX 1358
BRADENTON, FL 34206
(941) 742-5660 • FAX (941) 742-5666
www.manateepao.com

SAMPLE OF COMPLETED TAX RETURN

GENERAL SECTION, QUESTIONS 1-10a - Please verify printed data from our records. If data has changed, is incorrect or not reflected, please correct on form. **If property has been sold, complete line 10 and 10a, sign form and return to us with a copy of the Bill of Sale.**

SCHEDULE #1 - List any leased, loaned or rented equipment in your possession on January 1st. Attach additional sheets if necessary.

SCHEDULE #2 - List any equipment you may own but was out on loan, rent or lease to others on January 1st. Attach additional sheets if necessary.

SIGNATURE BLOCK - Be sure to date & sign your return. The return is considered incomplete without the taxpayer's signature. **NOTE TO PREPARERS - YOU MUST ATTACH AUTHORIZATION FROM TAXPAYER IN THE EVENT YOU ARE SIGNING ON HIS OR HER BEHALF.**

THIS RETURN IS SUBJECT TO AUDIT WITH ALL RECORDS KEPT BY YOU, INCOMPLETE ENTRIES ARE SUBJECT TO PENALTIES.

<p>1. Please Give Contact Information for Owner or Person in Charge. Name: <u>John Q. Public</u> Tel #: <u>(941) 777-1234</u> Cell #: <u>(941) 777-6666</u> Fax #: <u>(941) 777-5678</u> E-mail address: _____ Corp Name/DBA: <u>John Q. Public, Inc.</u></p>	<p>5. Date You Began Business In This County: <u>02/02/00</u> Fiscal Year: From <u>09/01</u> To <u>08/31</u></p>
<p>2. Actual Physical Location of This Property as of January 1st: <u>920 Manatee Ave W - 2000 Cortez Rd W</u></p>	<p>5a. Although my fiscal year ended prior to December 31 of the past calendar year, this return reflects property additions and deletions through December 31. Yes ___ No ___</p>
<p>3. Is Your Business or Farm Located Within the Incorporated Limits of a City? <u>Yes X</u> No ___ If Yes, what City? <u>County</u></p>	<p>6. Describe Type or Nature of Your Business: <u>Accountant</u></p>
<p>4. Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes ___ No ___ If Yes, Please Show Name Exactly as it Appeared on your Most Recent Personal Property Tax Bill or Current Return _____</p>	<p>7. Trade Level: (Circle as many as apply) Retail Wholesale Manufacturing Professional <u>Service</u> Agriculture Leasing/Rental Other</p>
<p>9. Former Owner of the Business: <u>N/A</u></p>	<p>8. Did You File a Tangible Personal Property Return in This County Last Year? Yes ___ No ___ If Yes, Under what Name and Address? <u>Same</u></p>
<p>10a. Were all assets sold? Yes ___ No ___ Sale Price? _____ (Attach Bill of Sale)</p>	

SCHEDULE #1

LEASED, LOANED, AND RENTED EQUIPMENT (PLEASE COMPLETE IF YOU LEASE, HOLD OR USE EQUIPMENT BELONGING TO OTHERS.)

NAME AND ADDRESS OF OWNER OR LESSOR	CONTRACT NUMBER	ASSET DESCRIPTION	YEAR ACQUIRED	LEASE TERM	RENT PER MONTH	RETAIL INSTALLED COST NEW
<u>ABC Leasing Company 100 Main Street Anywhere, USA 55555</u>	<u>000</u>	<u>Computer Eq</u>	<u>06</u>	<u>36</u>	<u>\$125</u>	<u>\$3675</u>

SCHEDULE #2

EQUIPMENT OWNED BY YOU BUT RENTED, LEASED, OR HELD BY OTHERS

LEASE NO.	NAME/ADDRESS OF LESSEE ACTUAL PHYSICAL LOCATION OF ASSETS	DESCRIPTION	AGE	YEAR PURCHASED	RENT PER MONTH	TERM	FAIR MARKET VALUE	TAXPAYER'S ESTIMATE OF CONDITION (GOOD (AVG.) (POOR))	RETAIL INSTALLED COST NEW
<u>123</u>	<u>John Doe 2001 Cortez Rd. W Bradenton, FL</u>	<u>Desk & Chair</u>	<u>5yrs</u>	<u>2004</u>	<u>\$50</u>	<u>18mo</u>	<u>\$900</u>	<u>Avg.</u>	<u>\$400</u>

Under penalties of perjury, I declare that I have read the foregoing tax return and that the facts stated in it are true. If prepared by someone other than the taxpayer, the preparer signing this return certifies that his/her declaration is based on all information of which he/she has any knowledge.

DATE: 4/10/10 TITLE: Owner

SIGNED: John Q. Public
(TAXPAYER—SIGNATURE REQUIRED)

SIGNED: _____
(PREPARER)

ADDRESS: _____

PHONE NO: _____ PREPARER'S ID: _____

CONTINUE ON SEPARATE SHEET IF NECESSARY

LESS EXEMPTION: [] WIDOW [] WIDOWER [] BLIND
[] TOTAL DISABILITY [] OTHER

NOTICE: IF YOU ARE ENTITLED TO A WIDOW'S, WIDOWER'S, OR DISABILITY EXEMPTION ON PERSONAL PROPERTY (NOT ALREADY CLAIMED ON REAL ESTATE), PLEASE CONSULT APPRAISER.

PLEASE SIGN AND DATE YOUR RETURN. SEND THIS ORIGINAL TO THE MANATEE COUNTY APPRAISER'S OFFICE BY APRIL 1st. UNSIGNED RETURNS CANNOT BE ACCEPTED BY THE APPRAISER'S OFFICE. QUESTIONS PLEASE CALL: (941) 742-5660

TAXABLE VALUE _____ DEPUTY _____ PENALTY _____

ALL INFORMATION ON BOTH SIDES MUST BE COMPLETED IN FULL TO BE A VALID RETURN

TURN FORM OVER - ALL INFORMATION ON BOTH SIDES MUST BE COMPLETED IN FULL TO BE A VALID RETURN!

TANGIBLE PERSONAL PROPERTY ASSET SCHEDULE #3													
PI # <u>9000-000000-0-2</u>													
SUM LINE TYPE	ASSET ID	DESCRIPTION	YEAR PURCHASED	UNITS	PER UNIT TOTAL ORIGINAL INSTALLED COST	APPR USE ONLY	SAME (S)	CHANGED (C)	REMOVED (R)	ADJUSTED ORIGINAL INSTALLED COST	EXPLANATION OF ADJUSTED ORIGINAL INSTALLED COST, SALE, OR REMOVAL	TAXPAYER'S ESTIMATE OF CONDITION (GOOD) (AVG.) (POOR)	TAXPAYER'S ESTIMATE OF FAIR MARKET VALUE
	10 000001	Telephone	00	1	50		S					A	10
	10 000002	Desk	00	1	125		S					A	50
	10 000003	Fax Machine	00	1	249		S					A	75
	10 000004	<u>12 Chairs</u>	01	1	<u>50 25</u>			C		<u>25</u>	<u>Disposed of chair</u>	A	10
	10 000005	<u>12 Stools</u>	01	1	<u>75 50</u>			C		<u>50</u>	<u>Sold stool</u>	A	10
	11 000006	Computer	04	1	849		S					G	500
	11 000007	Printer	04	1	189				R		<u>New leasing-sold</u>	G	75
	11 000008	Modem	04	1	80		S					G	6
	10 000009	Printer Table	00	1	120		S					G	100
	23 000010	Supplies			<u>800 500</u>			C		<u>500</u>	<u>Supply correction</u>		500
		<u>Desk</u>	<u>09</u>	<u>1</u>	<u>400</u>						<u>New</u>	G	400
		<u>Chair</u>	<u>09</u>	<u>1</u>	<u>10</u>						<u>New</u>	G	110
		<u>Bookcase</u>	<u>00</u>	<u>1</u>	<u>212</u>						<u>Not reflected on schedule A</u>	A	100
		<u>Lamps (2)</u>	<u>01</u>	<u>1</u>	<u>75</u>						<u>"</u>	P	25
					TOTAL ORIGINAL INSTALLED COST	<u>2587</u>	<u>3034</u>						

CONTINUE ON SEPARATE SHEET IF NECESSARY

SCHEDULE #3 - IF YOU FILED A PERSONAL PROPERTY TAX RETURN LAST YEAR, SCHEDULE #3 WILL DISPLAY THE "DESCRIPTION," "YEAR PURCHASED," AND "ORIGINAL INSTALLED COST" OF EACH ITEM ON OUR RECORDS. PLEASE VERIFY EACH ASSET IN THE FOLLOWING MANNER:

- ◆ If you still have the asset listed, place an "S" in the column marked "Same (S)."
- ◆ Place a "C" in the column marked "Changed (C)" if the original installed cost of the asset or group of assets has changed. For example, if a group of assets were reported at one cost and a portion of the assets were sold or disposed of during the year, place a "C" in the appropriate column and record the adjusted original installed cost in the column marked "Adjusted Original Installed Cost."
- ◆ Place an "R" in the column marked "Removed (R)" if the asset or group of assets were physically disposed of prior to January 1st.
- ◆ Place an "S" in the column marked "Sold" and provide explanation.
- ◆ Please explain any "C" or "R" entry in the explanation column. Attach additional sheets if necessary.
- ◆ Enter taxpayer's estimate of condition and fair market value. **IMPORTANT - Submit any additional documentation and/or appraisals in support of your taxpayer's estimate of fair market value on or before May 15th for consideration by this office.**
- ◆ List description, year purchased and original cost on any assets not reflected on the asset schedule.
- ◆ List description, year purchased and original cost on any assets purchased or acquired since your last return was filed. (Property Appraiser will enter sum line type and asset ID#)

FINAL INSTRUCTIONS

- ◆ Please verify all pre-printed information on lines 1-10a.
- ◆ Please verify location and mailing addresses.
- ◆ Attach any additional schedules or supplemental information to return.
- ◆ Be sure to sign the front of return.
- ◆ Return to Property Appraiser's Office in the enclosed envelope.
- ◆ All returns must be postmarked by April 1st to avoid penalties.