

FORM
901-EZ

**Business Personal Property Rendition
Oklahoma Form 901-EZ**

**Filing Date Jan. 1
Delinquent
Penalties
After March 15**

TAX
YEAR

IMPORTANT READ INSTRUCTIONS ON BACK BEFORE COMPLETING

REAL EST.#

PERS. PROP.#

OWNERS
NAME/BDA

MAILING
ADDRESS

PART I START HERE

(please print or type)

FED/STATE EMPLOYER ID# _____
TYPE OF BUSINESS _____

STANDARD INDUSTRIAL CLASSIFICATION CODE
USABLE SQUARE FOOTAGE _____ NOS. OF UNITS _____
LOCAL TELEPHONE NO. (____) _____
LOCATION OF PROPERTY (IF OTHER THAN MAILING ADDRESS) _____

OTHER BUSINESS INCLUDED IN THIS RENDITION Y N
IF YES LIST: _____

NAME, AND PHONE NO. OF PERSON TO CONTACT FOR AUDIT. _____

Are you renting/leasing this business location? Y N
If yes, do you own any real estate improvements at this location? Y N
When did you start business at this location? DATE ____/____/____

ARE YOU STILL IN BUSINESS AT THIS LOCATION? Y N
IF NO, DO YOU STILL OWN THE BUSINESS PERS. PROPERTY? Y N
DATE DISPOSED/SOLD ____/____/____ TO WHO? _____

IF DISPOSED OR SOLD, STOP HERE. SIGN AND RETURN.

PART II OKLAHOMA TAXABLE FIXED ASSETS

ARE ANY ORIGINAL COSTS ESTIMATED? Y N

DESCRIPTION	BEGINNING ORIGINAL COST TOTAL VALUE	ADDITIONS ORIGINAL COST TOTAL PART IV	DELETIONS ORIGINAL COST TOTAL PART V	ENDING ORIGINAL COST TOTAL VALUE	ASSESSOR USE ONLY	
					RCNLD	ASS'D VALUE
LEASE HOLD IMPROVEMENT: ORIGINAL COST					CL 50	
FURNITURE & FIXTURES: ORIGINAL COST					CL 3	
MACHINERY & EQUIPMENT: ORIGINAL COST						
★ LEASED FROM OTHERS: ORIGINAL COST						
★ LEASED TO OTHERS: ORIGINAL COST						
★ SEE INSTRUCTIONS	TOTAL FIXED ASSETS →				TOTAL	TOTAL

PART III OKLAHOMA TAXABLE INVENTORY

TOTAL INVENTORIES: INCLUDING RAW MATERIAL, WORK-IN-PROGRESS, FINISHED GOODS, PACKAGING, SUPPLIES, ETC.	BEGINNING INVENTORY	ENDING INVENTORY	AVERAGE INVENTORY	NET INVENTORY	INV
				TOTAL ASS'D	
	LESS FREEPORT EXEMPTION (MUST FILE FORM 901-F) < >			PENALTY	
	CONSIGNMENT AND/OR FLOORPLAN INV.			TOTAL NET	
NET TAXABLE INVENTORY →			DATE FILED ____/____/____		

SIGNATURE AFFIDAVIT

STATE OF OKLAHOMA - COUNTY OF _____

I, _____ being first duly sworn, upon oath, under penalties of perjury, do hereby depose and say that I am _____ of _____ Company; that as such I am acquainted with the books, accounts, and affairs of said Company and know the accompanying statement to be true correct and complete, and that all information requested herein has been fully and correctly given. (68 O.S. 1991 Section 2945 provides penalties for false oaths.)

**SIGN
HERE**

Signature of preparer if other than taxpayer (DATE)

Preparer's Address

Taxpayer's Signature (DATE)

Preparer's I.D. No.

Preparer's Phone No.

ASSM'T %

SCHOOL DIST.

INSTRUCTIONS FOR FILING

WHO MUST FILE: ALL BUSINESS CONCERNS, CORPORATIONS, PARTNERSHIPS AND PROFESSIONALS ARE REQUIRED BY OKLAHOMA STATUTES TO FILE EACH YEAR A STATEMENT OF TAXABLE ASSETS AS OF JANUARY 1 WHICH ARE LOCATED WITHIN THIS COUNTY. THIS RENDITION MUST BE SIGNED BY AN OWNER, PARTNER, OFFICER OF THE CORPORATION, OR BONAFIDE AGENT.

PENALTIES: FAILURE TO FILE BY MARCH 15TH WILL SUBJECT THE TAXPAYER TO MANDATORY PENALTY OF 10%, OR A 20% PENALTY IF NOT FILED BY APRIL 15TH, (68 O.S., SECTION 2836C.). IF RECEIVED THROUGH THE MAIL BY THIS OFFICE, IT MUST BE POSTMARKED NOT LATER THAN MARCH 15TH, POSTAGE METERED MAIL OVERSTAMPED BY THE POST OFFICE AFTER MARCH 15TH WILL CARRY THE MANDATORY PENALTY.

TAXPAYERS FILING FORM 901 IN THIS COUNTY FOR THE FIRST TIME: SHOULD ATTACH A COMPLETE DETAILED LISTING OF ALL DEPRECIABLE ASSETS USED IN THE BUSINESS, GROUPED BY DESCRIPTION, YEAR ACQUIRED, ORIGINAL COST, AND INCLUDING ITEMS THAT HAVE ZERO BOOK VALUE. USE REPORTING SCHEDULE 3 OR 3A, AVAILABLE FROM THE COUNTY ASSESSOR.

SIC CODE: STANDARD INDUSTRIAL CLASSIFICATION CODE. FOUR DIGIT FEDERAL BUSINESS ACTIVITY CODE.

USABLE SQ. FT./UNIT#: HOTELS, MOTELS APARTMENTS LIST NUMBER OF ROOMS OR APARTMENTS. ALL OTHERS LIST USABLE BUSINESS FLOOR SPACE.

LOCATION OF PROPERTY: MUST FILE A SEPARATE RENDITION FOR EACH LOCATION FOR VALUE ALLOCATION TO EACH SCHOOL DISTRICT.

ORIGINAL COST VALUES: REPORT THE TOTAL NEW OR USED ACQUISITION COST INCLUDING FREIGHT-IN AND INSTALLATION COSTS. DO NOT DEDUCT INVESTMENT CREDIT, TRADE-IN ALLOWANCES OR DEPRECIATION. IF UNKNOWN ESTIMATE ALLOCATED ORIGINAL COST. ESTIMATED COSTS WILL NOT BE DEPRECIATED WITHOUT SUPPORTING DOCUMENTS.

YEAR ACQUIRED: PURCHASE DATE. DEPRECIATION CAN NOT BE CALCULATED UNLESS THE YEAR ACQUIRED IS REPORTED.

LEASEHOLD IMPROVEMENTS: REPORT COST AND DETAILED DESCRIPTION OF IMPROVEMENTS TO PROPERTY OWNED BY OTHERS. DO NOT REPORT BUILDING EXPANSIONS OR REPAIRS, ROUGH PLUMBING OR ELECTRICAL SERVICE, WHICH ARE INCLUDED IN REAL ESTATE VALUES. REPORT ALL OTHER ITEMS SUCH AS PARTITIONS, NEW STORE FRONTS, ETC.

FURNITURE & FIXTURES: ITEMS INCLUDED: OFFICE DESKS, CHAIRS, CREDENZAS, FILE CABINETS, TABLE, BOOTHS, SHELVING DISPLAY CASES, RACKS, GONDOLAS, RETAIL FIXTURES, HOTEL & MOTEL FURNISHINGS, ETC.

MACHINERY & EQUIPMENT: ITEMS INCLUDED: AUTO REPAIR, AGRICULTURE, BAKERIES, BARBER & BEAUTY SHOPS, CLEANING & LAUNDRY, FUEL STORAGE TANKS, GAS PUMPS, MEDICAL, RESTAURANTS, SIGNS, THEATERS, ETC. ALL MANUFACTURING EQUIPMENT & MACHINERY (FORKLIFTS, MOBILE YARD CRANES, TOOLING, DIES & MOLDS SEE OTHER LISTINGS). EQUIPMENT INSTALLED ON TRUCKS OR TRAILERS AFTER PURCHASE MUST BE REPORTED. DO NOT USE LICENSED VEHICLES SUCH AS AUTOS, TRUCKS, SEMI-TRAILERS, BOATS OVER 10 H.P. ETC.

LEASED FROM OR TO OTHERS: LIST EQUIPMENT BY DESCRIPTION, DATE OF ACQUISITION AND ORIGINAL COST. IF UNKNOWN, GIVE LENGTH OF LEASE AND MONTHLY PAYMENTS. TO AVOID DUPLICATE ASSESSMENT, ADVISE IF CAPITALIZED AND INCLUDED IN OTHER ASSETS. FURNISH NAME AND ADDRESS OF PERSON OR FIRM WHO IS RESPONSIBLE FOR PAYMENT OF PERSONAL PROPERTY TAXES. ADDITIONAL ITEMIZED SHEETS MAY BE ATTACHED, IF NECESSARY.

INVENTORIES: LIST BEGINNING PLUS ENDING INVENTORY, DIVIDED BY TWO (2) EQUALS AVERAGE INVENTORY. IF PREFERRED, A SCHEDULE OF MONTHLY ENDING INVENTORIES MAY BE SUBMITTED. CONSIGNED OR FLOOR-PLANNED INVENTORIES MUST BE REPORTED SEPARATELY. INVENTORY CLAIMED EXEMPT MUST BE ACCOMPANIED BY FREEPORT EXEMPTION FORM FURNISHED BY THIS OFFICE (FORM 901-F).

IF THE BUSINESS IS SOLD, CLOSED OR NAME CHANGED: TO AVOID POSSIBLE INCORRECT OR DUPLICATE ASSESSMENT TAXPAYER SHOULD PROVIDE INFORMATION AS FOLLOWS: BUSINESS SOLD - DATE OF SALE, NAME AND ADDRESS OF NEW OWNER. BUSINESS CLOSED - DATE OF CLOSING OR DATE ALL PERSONAL PROPERTY WAS DISPOSED, REPORT LOCATION AND VALUE OF ANY REMAINING PROPERTY STILL OWNED ON ASSESSING DATE, EVEN IF IN STORAGE. BUSINESS NAME CHANGE - DATE OF CHANGE AND NEW NAME.

PART IV					ADDITIONS DURING THE REPORTING YEAR				ASSESSORS USE ONLY			
ITEM NO.	DESCRIPTION FURNITURE, FIXTURES, SIGNS, MACHINERY, ETC.	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	DEP. FACTOR	RCLND				
		NEW	USED									
If additional detail is needed request Form 904 Schedule 3 TOTAL ➡									TOTAL			

PART V					DELETIONS DURING THE REPORTING YEAR				ASSESSORS USE ONLY			
ITEM NO.	DESCRIPTION FURNITURE, FIXTURES, SIGNS, MACHINERY, ETC.	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	DEP. FACTOR	RCLND				
		NEW	USED									
If additional detail is needed request Form 904 Schedule 3 TOTAL ➡									TOTAL			