

BUSINESS PERSONAL PROPERTY RENDITION

FORM

901

(R-95)

Filing Date Jan. 1
Delinquent
Penalties
After March 15

TAX YEAR

IMPORTANT READ INSTRUCTIONS ON BACK BEFORE COMPLETING

Please print or type

REAL EST. # _____

PERS. PROP. # _____

OWNERS
NAME/DBA _____

MAILING
ADDRESS _____

START HERE

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) _____

PART I

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

ARE YOU STILL IN BUSINESS AT THIS LOCATION? Y N

If yes, do you own any real estate improvements at this location? Y N

IF NO, DO YOU STILL OWN THE BUSINESS PERS. PROPERTY? Y N

When did you start business at this location? DATE _____ / _____

DATE DISPOSED/SOLD _____ / _____

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

PART II OKLAHOMA TAXABLE FIXED ASSETS

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
LEASEHOLD IMPROVEMENT: ORIGINAL COST					CL 50	
FURNITURE & FIXTURES: ORIGINAL COST						
ELECTRONIC EQUIPMENT ORIGINAL COST					CL 30	
COMPUTER EQUIPMENT ORIGINAL COST					CL 31	
MACHINERY & EQUIPMENT ORIGINAL COST						
FORKLIFTS & CONSTR. ORIGINAL COST					CL 9	
TOOLING, DIES, MOLDS ORIGINAL COST					CL 33 5	
OTHER ASSETS/TRADE TOOLS 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 ____ / ____ / ____	

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).

ASSM'T %	SCHOOL DIST.
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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.

ASSESSORS USE ONLY

ITEM NO.	FORK LIFTS & CONST. EQUIP. ④	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	% GOOD	FACTOR	RCLND	
		NEW	USED							
TOTAL						TOTAL				
ITEM NO.	TOOLS, DIES, MOLDS ⑦	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	% GOOD	FACTOR	RCLND	
		NEW	USED							
TOTAL						TOTAL				
ITEM NO.	TRADE TOOLS & EQUIP. ④	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	% GOOD	FACTOR	RCLND	
		NEW	USED							
TOTAL						TOTAL				
ITEM NO.	LEASED FROM OTHERS ⑩	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	% GOOD	FACTOR	RCLND	
		NEW	USED							
TOTAL						TOTAL				
ITEM NO.	LEASED FROM OTHERS ⑩	YEAR ACQUIRED		ORIGINAL COST	CLASS	LIFE YEARS	% GOOD	FACTOR	RCLND	
		NEW	USED							
TOTAL						TOTAL				
TOTAL						TOTAL				