W.C. Bill Sherman, CFA Okeechobee County Property Appraiser 307 NW 5th Ave. Suite A Okeechobee, FL 34972-4196

Tangible Personal Property Tax Return Confidential §§193.074 F.S. As Required by §§193.052 & 193.062 F.S. Return to County Property Appraiser By April 1 to Avoid Penalties

State of Florida, County of Okeechobee

Business Name (DBA - Doing Business As) and Mailing Address

		Endoral [	Employer Iden. No		
			Tiployer iden. No		
		Socia	I Security Number		
		NAICS/S	IC TITLE		
If name and address is incorrect make necessary corrections					
This return subject to audit with all records kept by you.	5. Date you began business in this co	ounty: Fisca	l year:		
Incomplete entries are subject to penalties.	5a. Although my fiscal year ended prior	or to December 31 of the past calendar	year, this return reflects property		
	additions and deletions through De	ecember 31. Yes No			
Please give name and telephone number of Owner or Person in charge of this Business.	6. Describe Type or Nature of Your B	lusiness:			
Name Telephone	-				
Corporate Name	7. Trade Level (Check as many as ap	pply) Retail 🗆 Wholesale 🗅 N	Manufacturing □		
2. Actual Physical Location of Property for Which this Return is Filed (Street Address - Not P.O. Box)	Professional   Service   Ag	griculture  Leasing/Rental Other	: 🗆		
-		roperty Return in this county last Year?			
3. Is your business or farm located within the incorporated limits of a City? Yes No	If so, under what name and where	9?			
What City?					
4. Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes No	9. Former owner of the Business: _				
Please Show name Exactly as it Appeared on Your most recent Personal Property Tax Bill or	9a. If Business sold, to whom?				
Other Current Tax Return.	Date Sold				
PERSONAL PROPERTY SUMMARY	TAXPAYER'S ESTIMATE	ORIGINAL	APPRAISER'S		
THIS IS A <u>SUMMARY SCHEDULE ONLY</u> . The Schedules on the <u>REVERSE SIDE</u> must be completed in detail and <u>TOTALS</u> entered below. <u>ATTACH ITEMIZED LIST</u> or	OF FAIR MARKET	INSTALLED	USE ONLY		
DEPRECIATION SCHEDULE showing Original Cost & Date of Acquisition.	VALUE	COST			
10. Office Furniture & Office Machines & Library					
11. EDP Equipment, Computers, Word Processors					
12. Store, Bar & Lounge, and Restaurant Furniture & Equipment, Etc.					
13. Machinery and Manufacturing Equipment					
14. Farm, Grove, and Dairy Equipment					
15. Professional, Medical, Dental & Laboratory Equipment					
16. Hotel, Motel, & Apartment Complex					
16a.Rental Units - Stove, Refrig., Furniture, Drapes & Appliances					
17. Mobile Home Attachments (Carport, Utility Bldg., Cabana, Porch, Etc.)					
18. Service Station & Bulk Plant Equipment - Underground Tanks, Lifts, Tools					
19. Signs - Billboard, Pole, Wall, Portable, Directional, Etc.					
20. Leasehold improvements must be grouped by type, year of installation and description					
21. Pollution Control Equipment					
22. Equipment owned by you but rented, leased or held by others					
23. Supplies - Not Held for Resale					
24. Other - Please Specify					
TOTAL PERSONAL PROPERTY	0	0			
Under penalties of perjury, I declare that I have read the foregoing tax return and the accompanying schedules and statements and that the facts stated in them are true. If	LESS EXEMPTION: ( ) WIDOW ( ( ) TOTAL DISABILITY ( ) OTHER				
prepared by someone other than the taxpayer, the preparer signing this return certifies that	ıt P				
this declaration is based on all information of which he/she has any knowledge.	TAXABLE VALUE				
DATE TITLE	DEPUTY PENALTY				
SIGNED	PLEASE SIGN AND DATE YOUR RETURN, SEND THE ORIGINAL TO				
(TAXPAYER)	THE COUNTY APPRAISER'S OFFICE BY APRIL 1, UNSIGNED RETURNS CANNOT BE ACCEPTED BY THE APPRAISER'S OFFICE.				
SIGNED (PREPARER)					
ADDRESS	NOTICE: IF YOU ARE EN				
PHONE NO PREPARER'S I.D. #	DISABILITY EXEMPTION CLAIMED ON REAL ESTA				

PAGE 2 TANGIBLE PERSONAL PROPERTY TAX SCHEDULES (ENTER TOTALS ON PAGE 1)														
ASSETS PHYSICALLY REMOVED DURING LAST YEAR	1								RETI	RED,	SOLD,	TRADI	ED, E	TC.
Property fully depreciated but continuing in service must be		YEAR	TAXPAYER'S E	ST OF										
DESCRIPTION	AGE	ACQ.	FAIR MKT V	ALUE		ORIGINAL I	NSTALLED C	OST						
					+									
					_									
					+									
					_									
													LEAS	SE.
LEASED, LOANED, AND RENTED EQUIPMENT - Pleas	e complete if you h	old equipment be	longing to others.		,	YEAR	YEAR OF	REN <sup>*</sup> PER	Γ	RETA	AL INSTAL	LED	<b>PURCH</b>	ASE
NAME AND ADDRESS OF OWNER OR	LESSOR		DESCRIPTION	١	AC	QUIRED	MFG.	MONT	Н	C	OST NEV		OPTI YES	NO NO
												_	_	
					L									
LINE <u>23a</u> Enter Applicable Line Numbe	Enter Applicable Line Number (10-24) From Page 1  TAXPAYER'S ESTIMATE OF				APPRAISER'S USE ONLY									
		YEAR	ESTIMATE OF FAIR MARKET	Cond Avg Avg			ORIGINA INSTALLE	L D						
DESCRIPTION OF ITEM	AGE	PURCHASED	VALUE	_ ʊ ́ ́ ́	T	ı	COST		Condi	ition				
				++	+				+	-				
				+	+	1			+					
				++	+	-			+					
				++	+	<b> </b>			+					
				++	+	1			+					
				++	╁	<u> </u>			+	-				
				++	╁	<u> </u>			+	_				
	_			+	+	<u> </u>			+	-				
				++	+	<u> </u>			+	-				
				++	+				+					
				++	+	<u> </u>			+					
				+	+	<u> </u>			+					
				$\vdash$	丿	1			_	$\neg$				
Enter TOTALS on Front - Continue on Separate Sheet					<u></u>				0					
LINE 23a Enter Applicable Line Number		ge 1												
DESCRIPTION OF ITEM	AGE		Ī	1 1	<del>-</del>	T			_					
	_			++	+	<u> </u>			+-	-				
				++	+	<u> </u>			+					
	_			+	+	1			+					
				++	+	<u> </u>			+	_				
					+	1			+					
				++	+	<u> </u>			+	-				
Forter TOTALS on Forms Complete	if Nana			+	丿	<del>                                     </del>			0	$\rightarrow$				
Enter TOTALS on Front - Continue on Separate Sheet  LINE 23a Enter Applicable Line Number	-	ne 1	0		<u> </u>				<u> </u>	$\overline{}$				
	AGE	- ·												
DESCRIPTION OF ITEM	AGL				Т									
				++	+				+					
				++	+	<b>†</b>			+					
				++	+	<del>                                     </del>			+					
				++	+				+					
				+	+				+					
				++	+									
Enter TOTALS on Front - Continue on Separate Sheet	if Necessary			+	<del>/</del>	1				$\geq$				
TAYPAYER'S														
	LINE 22 EQUIPMENT OWNED BY YOU BUT RENTED, LEASED, OR HELD BY OTHERS  RENT SESTIMATE OF Condition													
LEASE NO. ACTUAL PHYSIC	CAL LOCATION	DESC	CRIPTION	AGE	PUF	YEAR RCHASED	PER MONTH		ALUE	Good	Avg Poor	CO	ST NEV	N
										$oldsymbol{ol}}}}}}}}}}}}}}}}$	$\Box$			
										$oldsymbol{ol}}}}}}}}}}}}}}}}$				
											$\Box \Box$			
									(	$^{\circ}$	$\leq $			0

#### **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.
- 2. Items of inventory held for <u>lease</u> 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 ITEMS MUST BE REPORTED AT ORIGINAL COST WHETHER WRITTEN OFF OR NOT.
- Property personally owned, but used in the business must be reported.

#### DO NOT INCLUDE:

- 1. Intangible Personal Property that is, money, all evidences 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.
- 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. Example-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 original total cost. Include <u>sales tax</u>, transportation, handling, and installation charges if incurred. 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 Original Cost. However, Florida law provides that the taxpayer shall also provide an estimate of the current fair market value of the property. An adjustment is a variation from purchase price paid. Adjusted figures MUST be explained on an attached supplemental schedule. Such schedules are considered part of the return.

# **LOCATION OF PERSONAL PROPERTY:**

With the exception noted in the following paragraph, a SEPARATE personal property return must be filed for each location in the county. Additional forms will be mailed on request; contact your county property appraiser's office.

Owners of vending machines, LP/Propane tanks and similar free standing property at many locations may submit a single schedule in lieu of individual property statements, but may be required by the Property Appraiser to provide a list of site addresses. Owners that previously reported on a DR-405E or other owners of a similarly integrated property may submit a single schedule.

#### SPECIFIC INSTRUCTIONS

In the appropriate schedule list the <u>original installed cost</u> for assets of 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 sales tax, freight-in, handling, and installation costs. If a trade-in was deducted from the invoice price, enter the invoice price.

Add back investment credits taken for federal income tax purposes if those were deducted from the original cost. INCLUDE ALL FULLY DEPRECIATED ITEMS 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 the appropriate schedule and enter the totals on Line 22.

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" or "SAME AS LAST YEAR". This is inadequate reporting and may subject you to penalties for <u>FAILURE TO FILE</u>.

List all items of furniture and fixtures, all machinery and equipment, supplies, and certain types of equipment attached to mobile homes. 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 of that item (Good, Average, Poor). All expensed items must be entered at original installed cost.

# Line 14 - 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, irrigation pipe - show feet of main line and sprinklers, hand and power sprayers, heaters, discs, fertilizer distributors, etc.

Line 16, 16a - Hotel, Motel, Apartment & Rental Units (Household Goods):

List all household goods, i.e. furniture, appliances and equipment used in rental or other commercial property. Both residents and non-residents must report if house, condo, apartment, etc. is rented at any time during the year.

#### Line 17 - Mobile Home Attachments:

For each of the following types of mobile home attachments, enter the number of items of that type which you owned as of January 1, the year of purchase, the size (length X width), and the original installed cost: Awning, Carport, Patio Roof, Trailer Cover, Screened Porch or Room, Cabana, Open Porch, Utility Room, etc.

<u>Line 20 - Leasehold Improvements - i.e., Physical Modifications to Leased Property:</u>

If you have made any improvements (including modifications and additions) to property which you lease, list the original cost of the improvements. Improvement must be grouped by type and year of installation. Leasehold improvement - Carpeting, Paneling, Shelving, Cabinets, etc.

IMPORTANT: ATTACH ITEMIZED LIST OR DEPRECIATION SCHEDULE SHOWING INVENTORY OF INDIVIDUAL IMPROVEMENTS.

#### Line 23 - Supplies:

Enter the average cost of supplies that are on hand, including expensed supplies, such as stationery and janitorial supplies, linens, silverware, etc. which may not have been recorded separately on your books. Include items which you carry in your inventory account but which do NOT come within the definition of "inventory" subject to exemption. Leased, Loaned, and Rented Equipment:

If you borrow, rent or lease equipment from others complete the schedule 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.

# INFORMATION REGARDING THE TAX LAWS OF FLORIDA

§192.042, Florida Statutes - DATE OF ASSESSMENT - Tangible Personal Property on January 1.

§193.062, Florida Statutes - DATES FOR FILING RETURNS - Tangible Personal Property Jan. 1 - Apr. 1.

§193.072, Florida Statutes - PENALTIES - For failure to file a return, 25% of the total tax levied against the property for each year that no return is filed; for filing after the due date, 5% of the total tax levied against the property covered by that return for each year, for each month, or portion thereof, that a return is filed after the due date, but not to exceed 25% of the total tax; for unlisted property, 15% of the tax attributable to the omitted property.

§196.021, Florida Statutes - TAX RETURNS TO SHOW ALL EXEMPTIONS AND CLAIMS - It is the duty of the taxpayer to set forth any legal exemption from taxation to which he may be entitled. The failure to do so shall result in any such exemption being disallowed for that tax year.

§837.06, Florida Statutes - Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in §775.082, §775.083, or §775.084.

DR-405(I)

R. 12/00

Property Appraiser 1234 Main Street Anywhere, Florida 11111-2222

# Tangible Personal Property Tax Return

PAGE 2

555 Copier mod 19

ASSETS PHYSICALLY REMOVED DURING LAST YEAR

DESCRIPTION

roperty fully depreciated but continuing in service must be reported on the schedules below.

Confidential §§193.074 F.S.
As Required by §§193.052 & 193.062 F.S. Return to
County Property Appraiser By April 1 to Avoid Penalties

State of Florida, County of

Business Name (DBA - Doing Business As) and Mailing Address

	Account Num Any Business 5678 Main St Allover, FL 5	5 9 —[ t Soc 55555-9890	Il Employer Iden. No  0 0 0 0 0 0 0 0 0  cial Security Number			
name and address is incorrect make necessary corrections		NAICS	/sic 0000000			
This return subject to audit with all records kept by you.	5. Date you began business in this c	ounty: <u>1976</u> Fis	scal year: Oct. 1 to Sept. 30			
Incomplete entries are subject to penalties.	5a. Although my fiscal year ended prin	or to December 31 of the past calend	dar year, this return reflects property			
	additions and deletions through D					
<ol> <li>Please give name and telephone number of Owner or Person in charge of this Business. Name Person in charge Telephone BR549</li> </ol>	Describe Type or Nature of Your E	Business: <u>Sales</u>				
Corporate Name Corporation USA	7. Trade Level (Check as many as a	pply) Retail 🗖 Wholesale 🗓	Manufacturing			
<ol> <li>Actual Physical Location of Property for Which this Return is Filed (Street Address - Not. P.O. B 123 Main St., FL, USA 07891</li> </ol>		Professional □ Service □ Agriculture □ Leasing/Rental □ Other □  8. Did you file a Tangible Personal Property Return in this county last Year? Yes X No				
Is your business or farm located within the incorporated limits of a City? YesNoX	If so, under what name and where					
What City?						
Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes NoX	Former owner of the Business: _	If appliable				
Please Show name Exactly as it Appeared on Your most recent Personal Property Tax Bill or	9a. If Business sold, to whom?					
Other Current Tax Return.	Date Sold					
PERSONAL PROPERTY SUMMARY	TAXPAYER'S ESTIMATE	ORIGINAL	APPRAISER'S			
THIS IS A <u>SUMMARY SCHEDULE ONLY</u> . The Schedules on the <u>REVERSE SIDE</u> must be completed in detail and <u>TOTALS</u> entered below. <u>ATTACH ITEMIZED LIST</u> or <u>DEPRECIATION SCHEDULE</u> showing Original Cost & Date of Acquisition.	OF FAIR MARKET  VALUE	INSTALLED COST	USE ONLY			
Office Furniture & Office Machines & Library	840.00	1233.00				
11. EDP Equipment, Computers, Word Processors	2000.00	4043.00				
12. Store, Bar & Lounge, and Restaurant Furniture & Equipment, Etc.	800.00	1754.00				
13. Machinery and Manufacturing Equipment						
14. Farm, Grove, and Dairy Equipment						
15. Professional, Medical, Dental & Laboratory Equipment						
16. Hotel, Motel, & Apartment Complex						
16a.Rental Units - Stove, Refrig., Furniture, Drapes & Appliances						
17. Mobile Home Attachments (Carport, Utility Bldg., Cabana, Porch, Etc.)						
<ol> <li>Service Station &amp; Bulk Plant Equipment - Underground Tanks, Lifts, Tools</li> </ol>						
<ol> <li>Signs - Billboard, Pole, Wall, Portable, Directional, Etc.</li> </ol>						
20. Leasehold improvements must be grouped by type, year of installation and description						
21. Pollution Control Equipment	5000.00					
22. Equipment owned by you but rented, leased or held by others	5000.00	8000.00				
23. Supplies - Not Held for Resale		5000.00				
24. Other - Please Specify	2040.00	00000.00				
TOTAL PERSONAL PROPERTY	8640.00 LESS EXEMPTION: ( ) WIDOW (	20030.00				
Under penalties of perjury, I declare that I have read the foregoing tax return and the accompanying schedules and statements and that the facts stated in them are true. If prepared by someone other than the taxpayer, the preparer signing this return certifies that	( ) TOTAL DISABILITY ( ) OTHE	R   BEIND				
this declaration is based on all information of which he/she has any knowledge.	TAXABLE VALUE DEPUTY PENALTY					
DATE TITLE	-		I LIVALI I			
SIGNED(TAXPAYER)	- PLEASE SIGN AND DATE					
SIGNED	THE COUNTY APPRAISE RETURNS CANNOT BE A					
(PREPARER)	TILIUNING CANNOT DE A	NOOL: IED DI INE AFF	HAIGER & OFFICE.			
ADDRESS	NOTICE: IF YOU ARE EN	TITLED TO				
PHONE NO PREPARER'S I.D. #	_ [					

LEASE & LEASED, LOANED, AND RENTED EQUIPMENT - Please complete if you hold equipment belonging to others. YEAR RENT PURCHASE OPTION OF MFG. PER MONTH RETAIL INSTALLED COST NEW YEAR ACQUIRED NAME AND ADDRESS OF OWNER OR LESSOR TAXPAYER'S ESTIMATE OF Enter Applicable Line Number (10-24) From Page 1 TAXPAYER'S ESTIMATE OF FAIR MARKET APPRAISER'S USE ONLY ORIGINAL INSTALLED COST YEAR PURCHASED Avg AGE VALUE DESCRIPTION OF ITEM Enter TOTALS on Front - Continue on Separate Sheet if Necessary Enter Applicable Line Number (10-24) From Page 1 DESCRIPTION OF ITEM Enter TOTALS on Front - Continue on Separate Sheet if Necessary Enter Applicable Line Number (10-24) From Page 1 DESCRIPTION OF ITEM Enter TOTALS on Front - Continue on Separate Sheet if Necessary TAXPAYER'S ESTIMATE OF LINE 22 TAXPAYER'S ESTIMATE OF FAIR MARKET RENT PER MONTH NAME/ADDRESS OF LESSEE ACTUAL PHYSICAL LOCATION RETAIL INSTALLED COST NEW YEAR AGE PURCHASED LEASE NO. DESCRIPTION

TANGIBLE PERSONAL PROPERTY TAX SCHEDULES (ENTER TOTALS ON PAGE 1)

92

3

TAXPAYER'S EST OF FAIR MKT VALUE

10,100

ORIGINAL INSTALLED COST

15,000

RETIRED, SOLD, TRADED, ETC.

Sold to ABC School

SAMPLE 4 PAGE