

## SINGLE RETURN -BUSINESS TANGIBLE PERSONAL PROPERTY

State Form 53854 (R17 / 1-25)
Prescribed by the Department of Local Government Finance

## FORM 103 - SR

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

**JANUARY 1, 2025** 

For Assessor's Use Only

INSTRUCTIONS: Complete this form (type or print) and file with the applicable assessor by May 15, 2025, unless an extension has been granted.

NOTE: For taxpayers with less than \$80,000 in acquisition costs to report within the county, legislation was passed in 2021 which exempts this property. If you are declaring this exemption, please file Form 103 – Short or Form 103 – Long.

OFOTION										
SECTION I  Name of Taxpayer										
Name for Assessment and Tax Notice to be Mailed  County										
Address for Ass	essment and Tax Notice to	be Mailed (num	ber and street, cit	y, state, and ZI	P code)		Federal lo	Federal Identification Number **		
Nature of Busin	ess						NAICS C	NAICS Code Number *		
SECTION	I									
	ne Tax Year Ends		2. Name Federal	Return is Filed Under 3. Location of				f Accounting Records		
4. Form of Busin		rtnership or Jo	oint Venture		Proprietorship (describe)	·				
5. Did you own	hold, possess, or control ar		d	Other	, , , , , ,					
	able personal property on J		u, □ Yes	□ No				) IAC 4.2-8-3 and 4). y result in a double assessment.		
LOCATION	assessm	nent. Include t	he complete add	d, possess, or control personal property subject to dress (street address) for each location. Assign a ation. Attach additional sheets if necessary.  Additional Locations  Page of						
LOCATION NUMBER	TOWNSHIP		TAXING T NUMBER	NAME AND SPEC	UNDER WHICH	BUSINESS IS ( ADDRESS (num	CONDUCTED	(if different than above) et, city, state, and ZIP code)		
(Ro	SUMMARY und all numbers to nea	LOCATION NUMBER LO		LOCATION	N NUMBER	LOCATION NUMBER				
SCHEDULE	A – PERSONAL PROPI	\$		\$		\$				
FINAL ASSE	SSED VALUE		=	\$		\$		\$		
(Ro	SUMMAR\ und all numbers to nea	LOCATIO	ON NUMBER	LOCATION	N NUMBER	LOCATION NUMBER				
SCHEDULE	A – PERSONAL PROPI	\$		\$		\$				
FINAL ASSE	SSED VALUE	\$		\$	\$					
* NAICS – North American Industry Classification System – A complete list of codes may be found at: <a href="www.census.gov">www.census.gov</a> . For further information, contact that assessor (contact information is available at: <a href="https://www.in.gov/dlgf/contact-your-local-officials/">https://www.in.gov/dlgf/contact-your-local-officials/</a> ).  ** An individual using his/her Social Security Number as the Federal Identification Number is only required to provide the last four (4) digits of that number. IC 4-1-10-3										
SECTION IV SIGNATURE AND VERIFICATION										
Under penalties of perjury, I hereby certify that this return (including accompanying schedules and statements), to the best of my knowledge and belief, is true, correct, and complete; reports all tangible personal property subject to taxation, owned, held, possessed or controlled by the named taxpayer in the stated township or taxing district on the assessment date of this return, as required by law; and is prepared in accordance with IC 6-1.1 et seq., as amended, and regulations promulgated with respect thereto.										
Signature of Au		Printed Name of Authorized Person			adono promuiga	Date (month, day, year)				
Title of Authoriz	ed Person	Telephone Nu	ımber	Email of Authorized Person						
				( )		1				

Part of State Form 53854 (R17 / 1-25)

## **INSTRUCTIONS:**

- This form must be filed with the county assessor of the county in which the property is located not later than May 15, 2025, unless an extension is granted in writing. Contact information for the assessor is available at: <a href="https://www.in.gov/dlgf/contact-your-local-officials/">https://www.in.gov/dlgf/contact-your-local-officials/</a>.
- This form is for use by taxpayers who have personal property in more than one (1) township in a county.
- If you are claiming any special adjustments, such as equipment not placed in service, special tooling, permanently retired equipment, abnormal obsolescence, economic revitalization, or other deductions, file the Form 103 Long.
- Assign a location number to each separate location within a county.
- If more than one (1) page is necessary, attach additional forms and indicate you have done so on the front of the Form 103 SR.
- A Form 104 SR must be filed with this return.

NOTE: The location number shown below must correspond with the locations and location numbers shown on the front of this form (Form 103 – SR) and on the reverse side of Form 104 – SR.

The county assessor may refuse to accept a single personal property tax return that does not have attached to it a schedule listing, by township, all the personal property of the taxpayer and the assessed value of the property for each taxing district as required. [IC 6-1.1-3-7(e)]

DEPRECIABLE PERSONAL PROPERTY									
LOCATION NUMBER ▶			#		#		#		
TAXING DISTRICT NUMBER ▶			#		#		#		
LINE	YEAR OF ACQUISITION	TTV%	COLUMN A TOTAL COST	COLUMN B TTV	COLUMN A TOTAL COST	COLUMN A TOTAL COST	COLUMN A TOTAL COST	COLUMN B TTV	
1	1-2-24 To 1-1-25	40%	\$	\$	\$	\$	\$	\$	
2	1-2-23 To 1-1-24	60%	\$	\$	\$	\$	\$	\$	
3	1-2-22 To 1-1-23	55%	\$	\$	\$	\$	\$	\$	
4	1-2-21 To 1-1-22	45%	\$	\$	\$	\$	\$	\$	
5	1-2-20 To 1-1-21	37%	\$	\$	\$	\$	\$	\$	
6	1-2-19 To 1-1-20	30%	\$	\$	\$	\$	\$	\$	
7	1-2-18 To 1-1-19	25%	\$	\$	\$	\$	\$	\$	
8	1-2-17 To 1-1-18	20%	\$	\$	\$	\$	\$	\$	
9	1-2-16 To 1-1-17	16%	\$	\$	\$	\$	\$	\$	
10	3-2-15 To 1-1-16	12%	\$	\$	\$	\$	\$	\$	
11	Prior To 3-2-15	10%	\$	\$	\$	\$	\$	\$	
12	TOTALS		\$	\$	\$	\$	\$	\$	
13	30% of Line 12, Column A		\$		\$		\$		
Line 14 must be the greater of Line 12, Column B or Line 13 [see 50 IAC 4.2-4-9]									
14	Total True Tax Value (TT Depreciable Personal Pr (to Summary on Form 16		\$		\$		\$		

DEPRECIABLE PERSONAL PROPERTY										
	LOCATION NUM	BER ▶	#		#		#			
TAXING DISTRICT NUMBER ▶			#		#		#			
LINE	YEAR OF ACQUISITION	TTV%	COLUMN A TOTAL COST	COLUMN B TTV	COLUMN A TOTAL COST	COLUMN A TOTAL COST	COLUMN A TOTAL COST	COLUMN B TTV		
1	1-2-24 To 1-1-25	40%	\$	\$	\$	\$	\$	\$		
2	1-2-23 To 1-1-24	60%	\$	\$	\$	\$	\$	\$		
3	1-2-22 To 1-1-23	55%	\$	\$	\$	\$	\$	\$		
4	1-2-21 To 1-1-22	45%	\$	\$	\$	\$	\$	\$		
5	1-2-20 To 1-1-21	37%	\$	\$	\$	\$	\$	\$		
6	1-2-19 To 1-1-20	30%	\$	\$	\$	\$	\$	\$		
7	1-2-18 To 1-1-19	25%	\$	\$	\$	\$	\$	\$		
8	1-2-17 To 1-1-18	20%	\$	\$	\$	\$	\$	\$		
9	1-2-16 To 1-1-17	16%	\$	\$	\$	\$	\$	\$		
10	3-2-15 To 1-1-16	12%	\$	\$	\$	\$	\$	\$		
11	Prior To 3-2-15	10%	\$	\$	\$	\$	\$	\$		
12	TOTALS		\$	\$	\$	\$	\$	\$		
13	30% of Line 12, Column A		\$		\$		\$			
	Line 14 must be the greater of Line 12, Column B or Line 13 [see 50 IAC 4.2-4-9]									
14	Total True Tax Value (TTV) of Depreciable Personal Property (to Summary on Form 103 – SR)			\$		\$		\$		