Annual Return to Providence, R.I. Tax Assessor

The Law is Mandatory - A Return Must Be Filed (RI Law Section 44-5-15, as amended)
And Mail To: Tax Assessor, City Hall Room 208, Providence, RI 02903
401-421-5900
Statement of Valuation as of 12/31/2012

This Name and Mailing Address Will Be Used For Tax Bill. Please Change If Incorrect

For your convenience, we have supplied you with this form for the declaration of taxable property located in Rhode Island. According to The General Laws Of Rhode Island, taxable property must be declared to the Assessor between **DECEMBER 31, 2012 and JANUARY 31, 2013**. If a taxpayer is unable to make such a declaration within the prescribed time, they may submit written notice, prior to **JANUARY 31**, of intention to submit declaration by **MARCH 15**. Failure to file a true and full account, within the prescribed time, eliminates the right to appeal. No amended returns will be accepted after **MARCH 15th**.

Thank you for your cooperation. If we can be of assistance in preparing your report, feel free to come to our office at City Hall.

STATE LAW REQUIRES THE FILING OF THIS DECLARATION. FAILURE TO DO SO MAY RESULT IN AN INCREASED ASSESSMENT. THIS FORM IS NOT SUBJECT TO PUBLIC INSPECTION.

I ______________________________ (Name)

______________________________ (Title) am responsible for the information contained within this form

My Residence Address is: ______________________________

____

My Daytime Phone No. is ______________________________

Give a Full, General Description of Your Business Operation: NAICS# ______________

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❑ Mfg. ❑ Wholesale ❑ Retail ❑ Other:

Number of employees as of December 31, 2012 ________ Square Feet Occupied ________

Do you own or lease the space occupied? ________ Monthly Rent: ________

Ownership: ❑ Corporation ❑ Co-Partnership ❑ Individual

NAME(S): ______________________________

Business Name/ DBA: ______________________________

Business Address: ______________________________

Mailing Address: ______________________________

SECTION 1 REAL ESTATE OWNED

If You Need Additional Space Attach Addendum

LOCATION AND DESCRIPTION	Assessor's Plat (s)	Assessor's Lot(s)	Claimed Full Value Land	Claimed Full Value Improvements

SECTION 2 SHORT LIFE - COMPUTER EQUIPMENT *ONLY*

Please list all short life (PC computer equipment) separately in this section. **Manufacturers** include all equipment **NOT** used directly in the actual manufacturing process. Attach a separate sheet if necessary. *LIST ALL LEASED/RENTED EQUIPMENT IN SECTION 8.*

Calendar Year Purchased	Acquired New or Used?	Acquisition Cost	Depreciation Rate	Claimed Full Value	Assessor's Use Only
2012			5%		
2011			20%		
2010			40%		
2009			70%		
2008 and Prior			80%		

SECTION 3 TANGIBLE PERSONAL PROPERTY

List by year the total acquisition cost for all furniture, fixtures, equipment, signs and **unregistered vehicles** owned by you that are used in conducting the operations of any retail, wholesale, service, contracting, professional or other type of business that have an economic life of up to 12 years. **(see back page to list disposed items).**

Manufacturers should only report all furniture, fixtures and equipment that are NOT used directly in the actual manufacturing process.

IMPORTANT - Be sure to declare all acquisitions still in use, even though fully depreciated on your books.

List all leased/rented eqiupment in Section 8. Be sure to list all computer equipment separately in Section 2.

Calendar Year Purchased	Acquired New or Used?	Acquisition Cost	Depreciation Rate	Claimed Full Value	Assessor's Use Only
2012			5%		
2011			10%		
2010			20%		
2009			30%		
2008			40%		
2007			50%		
2006			60%		
2005 & Prior			70%		

SECTION 4 LONG LIFE ASSETS

List by year the total acquisition cost for assets that have an economic life of 13 years or more. Manufacturers should only report assets that are NOT used directly in the actual manufacturing process. **IMPORTANT** - Be sure to declare all acquisitions still in use, even though fully depreciated on your books. *LIST ALL LEASED/RENTED EQUIPMENT IN SECTION 8. DO NOT duplicate assets reported in Sections 2 and 3.*

Calendar Year Purchased	Acquired New or Used?	Acquisition Cost	Depreciation Rate	Claimed Full Value	Assessor's Use Only
2012			5%		
2011			10%		
2010			15%		
2009			20%		
2008			25%		
2007			30%		
2006			35%		
2005			40%		
2004			45%		
2003			50%		
2002			55%		
2001			60%		
2000			65%		
1999 & Prior			70%		
TOTALS					

SECTION 5 BUILDINGS & IMPROVEMENTS ON LEASED LAND

Property Address: ______________________________ Plat _______ Lot _______

Property Used For: ______________________________ CLAIMED FULL VALUE

Name of Landowner: ______________________________ $ ____________________

Is Lease Recorded? Yes_____ No_____ Dates Of Lease From ______________ To ______________

SECTION 6 INVENTORY/STOCK IN TRADE/SUPPLIES WHICH YOU CLAIM EXEMPT (RI LAW 44-3-29.1)

This Section to be used by ALL BUSINESSES, INCLUDING MANUFACTURERS

Also include any **consigned** inventories.

Your Average Monthly Stock In Trade / Supplies Inventory at Cost ____________________ (FIFO Method)

Your Average Monthly Retail / Wholesale Inventory at Cost ____________________ (FIFO Method)

Below, list the value of your Retail / Wholesale Inventory by MONTH.

Jan__________________ Feb__________________ Mar ________________ Apr ________________

May__________________ June ________________ July ________________ Aug ________________

Sept__________________ Oct ________________ Nov ________________ Dec ________________

Planned floor goods must be included.

SECTION 7 MANUFACTURER INVENTORIES WHICH YOU CLAIM EXEMPT

(RI LAW 44-5-38, as amended)

Type of Inventory	City and State of Manufacture	Claimed Full Value 100%
Raw Materials		
Goods In Progress		
Finished Goods		
	TOTAL	$

SECTION 8 LEASED / RENTED / CONSIGNED TANGIBLE PERSONAL PROPERTY

This Section to be Used by All Businesses INCLUDING MANUFACTURERS

Owner/Address	Item Description	Cost New	Lease Term	Monthly Rent	Lease #

SECTION 9 TANGIBLE PROPERTY LEASED OR RENTED TO OTHERS

On December 31, 2012, if you owned any items of tangible personal property (except registered motor vehicles), which you leased or rented to others, **attach a separate schedule to this form and report all of the following information for each item inclusive of disposals:**

Lessee's name and location of property, description of property, your acquisition cost, date of acquisition or installation, date of manufacture, monthly rental or lease income, dates of lease, and date and method of disposal (returned-lease purchase.)

SECTION 10 LEASEHOLD IMPROVEMENTS

Fixtures, etc. owned by you and attached to or used in real estate owned by others and not reported elsewhere. Leasehold improvements include, but are not limited to, wall paneling, carpeting, tile on wall and floors, ceilings, electrical and plumbing fixtures, partitions, building additions and the like.

Calendar Year Purchased	Description of Improvement	Improvement Cost	Depreciation Rate	Claimed Full Value	Assessor's Use Only
2012			5%		
2011			10%		
2010			20%		
2009			30%		
2008			40%		
2007			50%		
2006			60%		
2005 and Prior			70%		
TOTALS					

SECTION 11 SIGN YOUR RETURN AND NOTARIZE

I do hereby certify and declare that, to the best of my knowledge and belief, the foregoing is a true and complete list of all real estate and personal property owned by said Corporation, Co-Partnership or Individual in or ratable in said Town/City on the said thirty-first day of December, 2012 at 12 o'clock midnight, Eastern Standard time; that the value placed against each item thereof is the full and fair-cash value thereof at said time.

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

_______________________________ _______________________________

Signature Date Title

On ____________________________, ___________________________ personally appeared before me and made oath that the foregoing account, by him/her signed and exhibited, contains to the best of his/her knowledge and belief, a true and full account and valuation of all the ratable estate owned or possessed by said corporation, co-partnership, or individual.

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Signature of Notary Public and Date

My Commission Expires: ________________________________

List disposed items below. Please include date of disposal and method of disposal.