ABSTRACT

# HARNETT COUNTY TAX DEPARTMENT 305 W. Cornelius Harnett Blvd., Ste. 101 Lillington, NC 27546 Phone: 910-893-7520



E-RECORD

ACCOUNT

# **BUSINESS PERSONAL PROPERTY LISTING**

CITY

**FIRE** 

TWP

Skip the mail, file online. www.harnett.org/tax Due Date: January 31

\*\*\* SAVE TIME \*\*\*

|                             | (Print Co  | mpany Name ar     | nd Mailing Addres                |                                     | PRINCIPAL BUSINESS<br>  IN THIS COUNTY: |  |  |  |  |
|-----------------------------|--|-------------------|----------------------------------|-------------------------------------|---|--|--|--|--|
|                             | ,  |                   | · ·                              | SIC # OR NAICS CODE:                |   |  |  |  |  |
|                             |  |                   |                                  | DATE BUSINESS BEGAN IN THIS COUNTY: |   |  |  |  |  |
|                             |  |                   |                                  |                                     |   | DATE BUSINESS(FISCAL)YEAR ENDS:                                  |  |  |  |
|                             |  |                   |                                  |                                     |   | FILL IN THE APPLICABLE CIRCLE:                                   |  |  |  |
|                             |  |                   |                                  |                                     |   | O PARTNERSHIP O SOLE O UNINCORPORATED PROPRIETORSHIP ASSOCIATION |  |  |  |
| THER NO CO                  | OUNTIES WHERE PERS   | CONAL PROPERTY IS | NI OCATED :                      |                                     |   | O CORPORATION O OTHER (SPECIFY): OTHER                           |  |  |  |
| THER NO CO                  | JUNITES WHERE PERS   | SONAL PROPERTY IS | S LOCATED :                      |                                     |   | FILL IN THE APPLICABLE CIRCLE: BUSINESS CATEGORY:                |  |  |  |
|                             |  |                   |                                  |                                     |   | O RETAIL O WHOLESALE O MANUFACTURING                             |  |  |  |
| CONTACT PE                  | RSON FOR AUDIT :   |                   |                                  |                                     |   | O SERVICE O LEASING/RENTAL O FARMING O OTHER (SPECIFY):          |  |  |  |
|                             | _  |                   |                                  |                                     |   | IF OUT OF BUSINESS COMPLETE THIS SECTION:                        |  |  |  |
| DDRESS & PI                 | HONE :   |                   |                                  |                                     |   | DATE CEASED:   |  |  |  |
|                             |  |                   |                                  |                                     |   | FILL IN THE APPLICABLE CIRCLE:                                   |  |  |  |
| PHYSICAL AD                 | DDRESS :   |                   |                                  |                                     |   | O SOLD O CLOSED O BANKRUPT O OTHER                               |  |  |  |
|                             |  |                   |                                  |                                     |   | SOLD EQUIPMENT, FIXTURES, SUPPLIES TO:                           |  |  |  |
| REAL ESTATE                 | E OWNED BY:  |                   |                                  |                                     |   | BUYER'S ADDRESS & PHONE:   |  |  |  |
| NAME IN WHI                 | ICH BUSINESS WAS LI  | STED LAST YEAR:   |                                  |                                     |   |  |  |  |  |
| SCHEDULE A PERSONAL PROPERT |  |                   |                                  | PROPER                              | TY - SEI                                | EINSTRUCTIONS  |  |  |  |
| YEAR                        | GROUP  | (1) MACHIN        | ERY & EQUII                      | PMENT                               | YEAR                                    | GROUP (3) OFFICE FURNITURE & FIXTURES                            |  |  |  |
| ACQUIRED                    | PRIOR YR. COST   | ADDITIONS         | DELETIONS                        | CURR. YR. COST                      | ACQUIRED                                | PRIOR YR. COST ADDITIONS DELETIONS CURR. YR. COST                |  |  |  |
| 2022                        |  |                   |                                  |                                     | 2022                                    |  |  |  |  |
| 2021                        |  |                   |                                  |                                     | 2021                                    |  |  |  |  |
| 2020                        |  |                   |                                  |                                     | 2020                                    |  |  |  |  |
| 2019                        |  |                   |                                  |                                     | 2019                                    |  |  |  |  |
| 2018                        |  |                   |                                  |                                     | 2018                                    |  |  |  |  |
| 2017                        |  |                   |                                  |                                     | 2017                                    |  |  |  |  |
| 2016                        |  |                   |                                  |                                     | 2016                                    |  |  |  |  |
| 2015                        |  |                   |                                  |                                     | PRIOR                                   |  |  |  |  |
| 2014                        |  |                   |                                  |                                     | TOTAL                                   |  |  |  |  |
| 2013                        |  |                   |                                  |                                     | YEAR                                    | GROUP (4) COMPUTER EQUIPMENT                                     |  |  |  |
| 2012                        |  |                   |                                  |                                     | ACQUIRED                                | PRIOR YR. COST ADDITIONS DELETIONS CURR YR.COST                  |  |  |  |
| 2011                        |  |                   |                                  |                                     | 2022                                    |  |  |  |  |
| 2010                        |  |                   |                                  |                                     | 2021                                    |  |  |  |  |
| 2009                        |  |                   |                                  |                                     | 2020                                    |  |  |  |  |
| 2008                        |  |                   |                                  |                                     | 2019                                    |  |  |  |  |
| 2007                        |  |                   |                                  |                                     | PRIOR                                   |  |  |  |  |
| PRIOR                       |  |                   |                                  |                                     | TOTAL                                   |  |  |  |  |
| TOTAL                       |  |                   |                                  |                                     | ,                                       |  |  |  |  |
| (                           | GROUP (2) CO   | ONSTRUCTIO        | N IN PROGR                       | ESS                                 |   |  |  |  |  |
|                             | OF ALL PERSONAU OF ALL PERSONA |                   |                                  |                                     |   |  |  |  |  |
| PRIOR YEA                   |  |                   | ETTEMIZE IN SCR<br>ENT YEAR CIP: | ILDULE G                            |   |  |  |  |  |
|                             |  |                   |                                  |                                     |   |  |  |  |  |

| ABSTRACT NUMBER: | ACCOUNT NUMBER: | PAGE 2 |
|------------------|-----------------|--------|
|                  |                 |        |

| ADSTRA        | CI NOWIDEN   | •                     |                       | ACC                    | JUNI     | NOI    | NIDE   | N.              |   |                 | FAG         | L 2              |
|---------------|--|-----------------------|-----------------------|------------------------|----------|--------|--|-----------------|---|-----------------|-------------|------------------|
| SCHEDU        | JLE A (Contin  | ued)                  | PERS                  | ONAL PROP              | ERTY     | ′ - SI | EE IN  | ISTRUC          | TIONS   |                 |             |                  |
| YEAR          | GROUP (5) II   | MPROVEMENT            | TS TO LEASED          | PROPERTY               | YEA      | R      | GROUP (6) EXPENSED ITEMS Capitalization Threshold: |                 |   |                 | on          |                  |
| ACQUIRED      | PRIOR YR. COST   | ADDITIONS             | DELETIONS             | CURR. YR. COST         | ACQUI    |        |  | R YR. COST      | ADDITIONS   | DELETIONS       | CUF         | RR. YR. COST     |
| 2022          |  |                       |                       |                        | 202      | 22     |  |                 |   |                 |             |                  |
| 2021          |  |                       |                       |                        | 202      | 21     |  |                 |   |                 |             |                  |
| 2020          |  |                       |                       |                        | 202      | 20     |  |                 |   |                 |             |                  |
| 2019          |  |                       |                       |                        | 201      | 19     |  |                 |   |                 |             |                  |
| 2018          |  |                       |                       |                        | 201      | 18     |  |                 |   |                 |             |                  |
| 2017          |  |                       |                       |                        | 201      | _      |  |                 |   |                 |             |                  |
| 2016          |  |                       |                       |                        | 201      | _      |  |                 |   |                 |             |                  |
| 2015          |  |                       |                       |                        | 201      | -      |  |                 |   |                 |             |                  |
| 2014          |  |                       |                       |                        | PRIC     | _      |  |                 |   |                 |             |                  |
| 2013          |  |                       |                       |                        | TOT      |        | 01157  |                 | DODEDTY   |                 |             |                  |
| 2012          |  |                       |                       |                        |          |        |  |                 | PROPERTY  |                 |             | ( <del>-</del> ) |
| 2011          |  |                       |                       |                        |          |        |  |                 | n costs to report that do<br>se Schedule A-1 or A-2 |                 |             | even (/)         |
| 2010          |  |                       |                       |                        |          |        |  |                 |   |                 |             |                  |
| PRIOR         |  |                       |                       |                        | _        |        |  |                 |   |                 |             |                  |
| TOTAL         |  |                       |                       |                        | Do you   | u have | any of   | ther Schedul    | e A property?                                       | YES O           | NO          |                  |
|               |  |                       |                       |                        |          |        |  | ŀ               | f yes attach schedu                                 | ule IIII        | → A-1       | or A-2           |
| GROUP (       | 7) SUPPLIES  | LIST COST ON HA       | AND AS OF JANUA       | RY 1                   |          |        |  |                 |   |                 |             |                  |
|               |  |                       |                       | COST                   |          |        |  |                 |   |                 |             | COST             |
| 1. OFFICE, I  | MAINTENANCE, JANIT<br>SUPPLIES   | TORIAL, MEDICAL, DI   | ENTAL, BARBER AND     |                        |          |        |  | OT SOLD IN      | THE NORMAL COURSE O                                 | OF BUSINESS     | AND         |                  |
|               | ELD FOR CONSUMPT   | ION                   |                       |                        | _        |        |  |                 | SUPPLIES NOT LISTED                                 | ABOVE           |             |                  |
|               | MENT PARTS AND SE  |                       |                       |                        | TOTAL    |        |  |                 |   |                 |             |                  |
|               | ANT AND HOTEL ITE  |                       |                       |                        |          |        |  |                 |   |                 |             |                  |
| SCHEDU        |  |                       |                       | QUIPMENT 8             | & MOI    | BILE   | НО   | MES OR          | MOBILE OFFIC  | CES             |             |                  |
| If you answe  | r ves to any of ques   |                       |                       |                        |          |        |  |                 | ment type listed below.                             |                 | er ves to a | ny of            |
| questions 1,2 |  | edule B-1, attach Sc  | hedule B-2 for water  |                        |          |        |  |                 | le offices, and attach S                            |                 |             |                  |
| 1. Does yo    | our business own an  | y unregistered moto   | or vehicles?          |                        | 0        | YES    | 0  | NO              |   |                 |             |                  |
| 2. Does yo    | our business own an  | y multi-year or pern  | nanently registered t | railers?               | 0        | YES    | 0  | NO              | If yes attach so                                    | chedule         |             | B-1              |
|               | our business own an  |                       |                       |                        | 0        | YES    | 0  | NO              | ii yes unaon se                                     | modulo          |             |                  |
|               |  |                       | Registration Plan) p  | lated vehicles?        | 0        | YES    | 0  | NO              |   |                 |             |                  |
| 5. Does yo    | our business own a f   | ood truck or trailer? | ,                     |                        | 0        | YES    | 0  | NO              |   |                 |             |                  |
|               |  |                       |                       | ed to be listed with t | he local | county | tax of   | fice as part of | of the business persona                             | al property lis | stina       |                  |
|               |  |                       | reported as part of y |                        |          |        |  |                 |   |                 |             |                  |
| 5. Does yo    | our business own an  | y watercraft or engi  | nes for watercraft?   |                        | 0        | YES    | 0  | NO              | If yes attach so                                    | hedule          | <b>III</b>  | B-2              |
| 6. Does yo    | our business own an  | y mobile homes or     | mobile offices?       |                        | 0        | YES    | 0  | NO              | If yes attach so                                    | hedule          |             | B-3              |
| 7. Does yo    | our business own an  | y aircraft?           |                       |                        | 0        | YES    | 0  | NO              | If yes attach so                                    | hedule          | -           | B-4              |
| 8. Does yo    | our business own an  | y vechicles held for  | short-term rental?    |                        | 0        | YES    | 0  | NO              | Number  | <b>→</b> [      |             |                  |
| SCHEDU        | JLE C LE   | ASED PROP             | ERTY OR OT            | HER PROPE              | RTY II   | N YC   | UR   | POSSES          | SSION THAT IS                                       | OWNED           | ву от       | HERS             |
| furnish a sep |  | name, address and     | description of this p |                        |          |        |  |                 | ntrusted to him by anothee questions or are other   |                 |             |                  |
| 1 Does y      | our business hold a  | ny leased property,   | owned by another p    | arty (are you a less   | ee)?     |        |  |                 | o YES o   | NO              |             |                  |
| 2. Do you     | 2. Do you have any property used by your business, or in your possession, that is owned by others? |                       |                       |                        |          |        |  |                 |   |                 |             |                  |

3. Do you operate a mobile home park, campground, marina, aircraft storage facility or similar business?

O YES O NO

| BSTF        | RACT NUMBER:   |                                    | ACCOUN                | T NUMBER:  |                    |   | PAGE 3                   |  |  |
|-------------|--|------------------------------------|-----------------------|--|--------------------|---|--------------------------|--|--|
| SCHE        | DULE D   | SEPAR                              | RATELY SCH            | EDULED PROPERTY  |                    |   |                          |  |  |
| for insur   | ur business own any artwork, displa<br>ance purposes?  | •                                  |                       | separately scheduled   |                    | O YES                                     | ○ №                      |  |  |
| Please C    | describe the items and estimated val   | ue or items, ir applicable.        |                       |  |                    |   |                          |  |  |
|             | SCHEDULE E   |                                    | FARM EQ               | UIPMENT  |                    |   |                          |  |  |
|             | Does your business own any trac  | ctors, implements, bulk ba         | arns, and/or other fa | rm equipment?  | O YES              | NO Cost                                   | on Schedule A            |  |  |
|             | If so, list and attach separate Sch  | nedule E-1. If listed by co        | st on Schedule A, in  | dicate above, but still include info                           | ormation on sepa   | rate Schedule E-1.                        |                          |  |  |
|             | SCHEDULE F   | INT                                | ANGIBLE PE            | RSONAL PROPERTY  |                    |   |                          |  |  |
|             | Session Law 2018-98 repealed the taxation of a leasehold interest in exempt real property, effective July 1, 2019. Schedule F is no longer applicable and will be reserved for future use. |                                    |                       |  |                    |   |                          |  |  |
| SCHE        | DULE G   | ACQI                               | JISITIONS AN          | ID DISPOSALS DETAI   | IL                 |   |                          |  |  |
|             | ons and disposals detail of machinery,   | equipment, furniture and fix       | tures, computer equi  | oment, and improvements to leased                              | property in the pr | ior year. If there is no                  | t enough room below,     |  |  |
|             | ACQUISITIONS-ITEMIZE IN DETA   | JI 100%                            | 6 ORIGINAL COST       | DISPOSALS-ITEMIZE IN I   | DETAII             | YEAR ACQUIRED                             | 100% ORIGINAL COST       |  |  |
|             | AOQUINTONO-ITEIVIIZE IN DETA   | 100 //                             | ONIONAL COOT          | DIOI GOALG-ITEMIZE IN I  | DETAIL             | TEAR AGGOINED                             | 100% CITIGHTAL COST      |  |  |
|             |  |                                    |                       |  |                    |   |                          |  |  |
|             |  |                                    |                       |  |                    |   |                          |  |  |
| SCHE        | DULE H   | R                                  | EAL ESTATE            | IMPROVEMENTS   |                    |   |                          |  |  |
| •           | e past calendar year, did your business<br>ach separate Schedule H-1 with inform   | ·                                  |                       | eal property owned by your business                            | s?                 | O YES                                     | O NO                     |  |  |
| SCHE        | DULE I   | BILLBOARDS                         | - OUTDOOR             | ADVERTISING STRU   | CTURES             |   |                          |  |  |
| Does you    | ur business own any billboards - outdoo  | or advertising structures?         |                       |  |                    |   |                          |  |  |
| If yes, at  | tach separate Schedule I-1 with reque  | sted information.                  |                       |  |                    | O YES                                     | O NO                     |  |  |
| SCHE        | DULE J   |                                    | LEASED E              | QUIPMENT   |                    |   |                          |  |  |
| ,           | ur business lease equipment to others?   |                                    |                       |  |                    | 0.450                                     | 0.40                     |  |  |
| f yes, atta | ach separate Schedule J-1 with reques  | ted information.                   |                       |  |                    | O YES                                     | ○ NO                     |  |  |
|             |  |                                    | AFFIRM                | IATION   |                    |   |                          |  |  |
| ı           | LISTING MUST BE SIGNED BY  | A LEGALLY AUTHO                    | ORIZED PERSON         | I - Please check the capaci                                    | ty in which yo     | ou are signing th                         | e affirmation            |  |  |
|             | For Individual Taxpayers:  | Taxpayer C                         | Guardian Autl         |  |                    | vledge of and char<br>operty of the taxpa |                          |  |  |
|             | For Corp   | oorations, Partnershi              | ips, Limited Liab     | ility Companies, Unincorpo                                     | orated Associ      | ations:                                   |                          |  |  |
|             | rincipal Officer of the Taxpayer itle:   |                                    |                       | yee of the taxpayer who has bee d sign the affirmation. Title: | n officially empo  | wered by a principa                       | officer to list          |  |  |
| Au          | uthorized agent. If this capacity is se  | —<br>lected, I certify that I have | e NCDOR Form AV       | 59 on file for this taxpayer:                                  | Y                  | es No                                     |                          |  |  |
|             | r penalties prescribed by law, I affirm<br>tion is true and complete. If this is si<br>property subject to taxation  | gned by an individual oth          | er than the taxpaye   |  | amiliar with the e | xtent and true value                      | of all of the taxpayer's |  |  |
| Signatur    | re   | Date                               |                       | Print Name   |                    |   |                          |  |  |
| Telepho     | ne Number  | Title                              |                       | Email Address  |                    |   |                          |  |  |

Any individual who willfully makes and subscribes an abstract listing required by the Subchapter II of Chapter 105 of the North Carolina General Statutes which the taxpayer does not believe to be true and correct as to every material matter shall be guilty of a Class 2 misdemeanor. (Punishable by imprisonment up to 60 days).

Email Address

#### **Commonly Asked Questions**

### Who must file a listing, and what do I list?

Any individual(s) or business(es) owning or possessing personal property used or connected with a business or other income producing purpose on January 1. Temporary absence of personal property from the place at which it is normally taxable shall not affect this rule. For example, a lawn tractor used for personal use, to mow the lawn at your home is not listed. However, a lawn tractor used as part of a landscaping business in this county must be listed if the lawn tractor is normally in this county, even if it happens to be in another state or county on January 1.

NCGS §105-308 reads that .. "any person whose duty it is to list any property who willfully fails or refuses to list the same within the time prescribed by law shall be guilty of a Class 2 misdemeanor. The failure to list shall be prima facie evidence that the failure was willful." A class 2 misdemeanor is punishable by imprisonment of up to 60 days.

#### When and where to list?

Listings are due on or before January 31. They must be filed with the County Tax Department. DO NOT FILE THIS FORM WITH THE NORTH CAROLINA DEPARTMENT OF REVENUE. This form will not be accepted by the NC Department of Revenue.

A list of county tax office addresses can be found at the NC Department of Revenue's Website.

As required by state law, late listings may result in a discovery with a penalty. An extension of time to list may be obtained by sending a written request showing "good cause" to the County Assessor by January

### How do I list? -- Three important rules:

- (1) Read these INSTRUCTIONS for each schedule or group. Contact your county tax office if you need
- (2) If a Schedule or Group does not apply to you, indicate so on the listing form, <u>DO NOT</u> LEAVE A SECTION BLANK, <u>DO NOT</u> WRITE "SAME AS LAST YEAR". A listing form may be rejected for these
- reasons and could result in late listing penalties.
  (3) Listings must be filed based on the tax district where the property is physically located. If you have received multiple listing forms, each form must be completed separately.

#### INFORMATION SECTION

Complete all sections at the top of the form, whether or not they are specifically addressed in these INSTRUCTIONS. Attach additional sheets if necessary.

- (1) Other N.C. Counties where personal property is located: If your business has property normally located in other counties, list those counties here.
  (2) Contact person for audit: In case the county tax office needs additional information, or to verify the
- information listed, list the person to be contacted here.

  (3) Physical address: Please note here the location of the property. The actual physical location may be
- different from the mailing address. Post Office Boxes are not acceptable.

  (4) Principal Business in this County: What does the listed business do? For example: Tobacco Farmer,
- Manufacture electrical appliances, Laundromat, Restaurant. The SIC or NAICS code may help describe this information, if you do not know the SIC or NAICS code, please write "unknown".

  (5) Complete other requested business information. Make any address changes.
- (6) If out of business: If the business we have sent this form to has closed, complete this section and attach any additional information regarding the sale of the property.

The year acquired column: The rows which begin "2022" are the rows in which you report property acquired during the calendar year 2022. Other years follow the same format.

Schedule A is divided into seven (7) groups. Each is addressed below. Some counties may have the column "Prior Years Cost" pre-printed. This column should contain the cost information from last year's listing. If it does not, please complete this column, referring back to your last year's listing. List under "Current Year's Cost" the 100% cost of all depreciable personal property in your possession on January \*Current Years Cost: the 100% cost of all depreciable personal property in your possession on January

1. Include all fully depreciated assets as well. Round amounts to the nearest dollar. Use the "Additions" and "Deletions" column to explain changes from "Prior Yr. Cost" to "Current Yr. Cost". The "Prior Year's Cost" plus "Additions" minus "Deletions" should equal "Current Years Cost" if there are any additions and/or deletions, please note those under schedule G, Acquisitions and Disposals Detail. If the deletion is a transferred or paid out lease, please note this, and to whom the property was transferred.

NOTE: If you purchased an existing business and its assets since January 1, 2022, do not omplete this listing form without first contacting the county tax office for further instructions.

<u>COST</u> - Note that the cost information you provide <u>must</u> include <u>all</u> costs associated with the acquisition as well as the costs associated with bringing that property into operation. These costs may include, but are not limited to invoice cost, trade-in allowances, freight, installation costs, sales tax, expensed costs, and construction period interest.

The cost figures reported should be historical cost, that is the original cost of an item when first purchased, even if it was first purchased by someone other than the current owner. For example, you, the current owner, may have purchased equipment in 2020 for \$100, but the individual you purchased the equipment from acquired the equipment in 2015 for \$1000. You, the current owner, should report the property as acquired in 2015 for \$1000.

Property should be reported at its actual historical installed cost IF at the retail level of trade. For example, a manufacturer of computers can make a certain model for \$1000 total cost. It is typically available to any retail customer for \$2000. If the manufacturer uses the model for business purposes, he should report the computer at it's cost at the retail level of trade, which is \$2000, not the \$1000 it actually cost the manufacturer. Leasing companies must list property they lease at the retail trade level, even if their actual cost is at the manufacturer or wholesaler level of trade

# Group (1) MACHINERY & EQUIPMENT

This is the group used for reporting the cost of all machinery and equipment. This includes all store equipment, manufacturing equipment, production lines (hi-tech or low-tech), as well as warehouse and packaging equipment. List the total cost by year of acquisition, including fully depreciated assets that are still connected with the business.

For example, a manufacturer of dish washers purchased a metal folding machine in October 2022 for \$10,000. The sales tax was \$200, shipping charges were \$200, and installation costs were \$200. The total cost that the manufacturer should report is \$10,600, if there were no other costs incurred. The \$10,600 should be added in group (1) to the 2022 current year's cost column as an addition

#### Group (2) Construction in Progress (CIP)

CIP is business personal property which is under construction on January 1. The accountant will typically not capitalize the assets under construction until all of the costs associated with the asset are known. In the interim period, the accountant will typically maintain the costs of the asset in a CIP account. The total of this account represents investment in personal property, and is to be listed with the other capital assets of the business during the listing period. List in detail. If you have no CIP, write

#### Group (3) Office Furniture & Fixtures

This group is for reporting the costs of all furniture & fixtures and small office machines used in the business operation. This includes, but is not limited to, file cabinets, desks, chairs, adding machines, curtains, blinds, ceiling fans, window air conditioners, telephones, intercom systems, burglar alarm systems, stoves, refrigerators, washers, dryers, dishwashers, and microwaves.

#### Group (4) Computer Equipment

This group is for reporting the costs of non-production computers & peripherals. This includes, but is not limited to, personal computers, midrange, or mainframes, as well as the monitors, printers, scanners, magnetic storage devices, cables, & other peripherals associated with those computers. This category also includes software that is capitalized and purchased from an unrelated business entity. **Note: The development cost of software or any modification cost to software, whether done internally by** the taxpayer or externally by a third party to meet the customer's specified needs is excluded and should not be reported. This does not include high tech equipment such as proprietary computerized point of sale equipment or high tech medical equipment, or computer controlled equipment, or the high-tech computer components that control the equipment. This type of equipment would be included in Group (1) or "other".

#### Group (5) Improvements to Leased Property

This group includes improvements made by or for the business to real property leased or used by the business. The improvements may or may not be intended to remain in place at the end of the lease, but they must still be listed by the business unless it has been determined that the improvements will be appraised as real property by the county for this tax year. Contact the appropriate county to determine if you question whether these improvements will be appraised as real property for this tax year. If you have made no improvements to leased property write "none". Do not include in this group any Store Equipment - Group (1) or Office Furniture and Fixtures - Group (3).

#### Group (6) Expensed Items

This group is for reporting any assets which would typically be capitalized, but due to the business' capitalization threshold, they have been expensed. (If you are able to provide the county tax office with a detailed list of costs and a description of the assets in the Expensed Items category, please do so.) Section 179 expensed items should be included in the appropriate group (1) through (4). Fill in the blank which asks for your business' "Capitalization Threshold." If you have no expensed items write

### Group (7) Supplies

Almost all businesses have supplies. These include normal business operating supplies. List the cost on hand as of January 1. Remember, the temporary absence of property on January 1 does not mean it should not be listed if that property is normally present. Supplies that are immediately consumed in the manufacturing process or that become a part of the property being sold, such as packaging materials, or raw materials, for a manufacturer, do not have to be listed. Even though inventory is exempt, supplies are not. Even if a business carries supplies in an inventory account, they remain taxable.

# Other Schedule A Property

This category should only be used if instructed by authorized county personnel.

# SCHEDULE B VEHICULAR EQUIPMENT - ATTACH ADDITIONAL SCHEDULES IF NECESSARY

Motor Vehicles registered with the North Carolina Division of Motor Vehicles as of January 1st. do not have to be listed, with the exception of Multi-Year or Permanently Registered Trailers Special Bodies on Vehicles, Food Trucks and Trailers, and International Registration Plan (IRP) Plated Vehicles. Please answer the questions on the form to determine if you should complete and attach separate schedules B-1 for certain other vehicles, B-2 for Watercraft or Watercraft engines, B-3 for Mobile Homes or Mobile Offices, or B-4 for Aircraft.

# SCHEDULE C PROPERTY IN YOUR POSSESSION, BUT OWNED BY OTHERS

If on January 1, you have in your possession any business machines, machinery, furniture, vending equipment, game machines, postage meters, or any other equipment which is loaned, leased, or otherwise held and not owned by you, a complete description and ownership of the property should be reported in this section. This information is for office use only. Assessments will be made to the owner/lessor. If you have already filed the January 15th report required by §105-315, so indicate. If you have none, write "none" in this section. If property is held by a lessee under a "capital lease" where there is a conditional sales contract, or if title to the property will transfer at the end of the lease due to a nominal "purchase upon termination" fee, then the lessee is responsible for listing under the appropriate

SCHEDULE D, E, F, G, AND H, please answer the questions provided on the form to determine if you need to complete and attach separate schedules E-1, G-1, or H-1 or the main business personal property listing form.

# AFFIRMATION

If the form is not signed by an authorized person, it will be rejected and could be subject to penalties. This section describes who may sign the listing form.

Listings submitted by mail shall be deemed to be filed as of the date shown on the postmark affixed by the U.S. Postal Service. Any other indication of the date mailed (such as your own postage meter) is not considered and the listing shall be deemed to be filed when received in the office of the tax assessor.

Any person who willfully attempts, or who willfully aids or abets any person to attempt, in any manner to evade or defeat the taxes imposed under this Subchapter (of the Revenue Laws), whether by removal or concealment of property or otherwise, shall be guilty of a Class 2 misdemeanor. (Punishable by imprisonment up to 60 days)

Return entire form to Harnett County Tax Department 305 W Cornelius Harnett Blvd Ste 101 Lillington, NC 27546 no later than January 31 to avoid a 10% late listing penalty.

Taxpayer Name: Account # Abstract # Year: 2023

| SCHEDULI | UNREGISTERED MOTOR VEHICLES, TRAILER AND SPECIAL BODY INFORMATION |       |           |         |                         |                 |                |  |
|----------|---|-------|-----------|---------|-------------------------|-----------------|----------------|--|
| YEAR     | MAKE  | MODEL | BODY/SIZE | TITLE # | VEHICLE ID. NUMBER(VIN) | SPEC. BODY COST | FOR OFFICE USE |  |
|          |   |       |           |         |                         |                 |                |  |
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Taxpayer Name: Abstract # Year: 2023

| SCHEDU | WATERCRAFT AND ENGINES FOR WATERCRAFT |             |         |          |                |                  |               |  |  |
|--------|---------------------------------------|-------------|---------|----------|----------------|------------------|---------------|--|--|
| TYPE   | YEAR/MAKE/MODEL                       | LENGTH/SIZE | REGIS.# | LOCATION | ENGINE<br>TYPE | YEAR<br>ACQUIRED | ORIGINAL COST |  |  |
|        |                                       |             |         |          |                |                  |               |  |  |
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Taxpayer Name: Abstract # Year: 2023

| SCHEDU | ILE B-3 | MOBILE HOMES AND MOBILE OFFICES |                        |                  |               |  |  |  |  |
|--------|---------|---------------------------------|------------------------|------------------|---------------|--|--|--|--|
| YEAR   | MAKE    | WIDTH/LENGTH                    | VEHICLE ID NUMBER(VIN) | PHYSICAL ADDRESS | ORIGINAL COST |  |  |  |  |
|        |         |                                 |                        |                  |               |  |  |  |  |
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Taxpayer Name: Abstract # Year: 2023

| SCHEDU | ILE B-4 |       | AIRO                 | CRAFT    |                  |               |
|--------|---------|-------|----------------------|----------|------------------|---------------|
| YEAR   | MAKE    | MODEL | N NUMBER/TAIL NUMBER | LOCATION | YEAR<br>ACQUIRED | ORIGINAL COST |
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