



RE#	PP#	REPORT ONLY TANGIBLE ASSETS					
Phone Number	FEIN: _____						
Email Address	Type of Business: _____						
Owner/DBA	North American Industry Classification System <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Mailing Address	Are other businesses included in this rendition? <input type="checkbox"/> Yes <input type="checkbox"/> No						
City, State, ZIP	If yes, please list: _____						
Physical location if different from mailing address: _____							
Please provide the name and phone number of person to contact for audit purposes: _____							

Are you still in business at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, current location: _____						
If No, do you still own the business personal property? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, date disposed/sold: _____ / _____ / _____						
If sold, buyer name: _____			Buyer address: _____			
If disposed or sold, stop here. Sign and return.						

PART TWO: OKLAHOMA TAXABLE FIXED ASSETS, FROM FORM 904 SCHEDULE 904-3-P

Description	Beginning Total <u>Original Cost</u> <u>Not Book Value</u>	Additions to Total <u>Original Cost</u> <u>Not Book Value</u>	Deletions to Total <u>Original Cost</u> <u>Not Book Value</u>	Ending Total <u>Original Cost</u> <u>Not Book Value</u>	Assessor Use	
	Reconciled	Assessed Value				
Leasehold Improvements						
Furniture and Fixtures						
Electronic Equipment						
Computer Equipment						
Tools, Machinery and/or Equipment						
Processing Plants						
Pipelines						
Meters						
Booster/Compressor Station Equipment						
Valve Station Equipment						
Other						
Leased to Others (★ See Instructions)						
→ Column Totals →					Total	Total
Leased from Others (★ See Instructions)		→ A) Total Fixed Assets →				

PART THREE: OKLAHOMA TAXABLE INVENTORY

Inventories: Total supplies, parts, equipment, etc. stored and/or not currently in use including petroleum products in storage. Total monthly inventories from Part 6 on page 2.

Average Inventory (From Part 6)	<input type="text"/>	Total Value	<input type="text"/>
Less Freeport Exemption (Form 901-F) -	<input type="text"/>	Total Assessed	<input type="text"/>
Consignment and/or Floorplan Inventory -	<input type="text"/>	Penalty	<input type="text"/>
B) Net Taxable Inventory =	<input type="text"/>	Total Net Assessed	<input type="text"/>
C) Grand Total (add A + B) =	<input type="text"/>	Date Filed	<input type="text"/> / <input type="text"/> / <input type="text"/>
For Taxpayer (*See instructions) Fair Cash Value (Market): \$	<input type="text"/>	Assessment %	<input type="text"/> School District

State of Oklahoma
County of _____

I, _____ 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 to the best of my knowledge. (68 OS Sec. 2945 provides penalties for false oaths)

**Don't Forget
to Sign** 

Signature of preparer if other than taxpayer	Date	Preparer's address
Signature of taxpayer	Date	Preparer's identification number
		Preparer's phone number

