

STATEMENT OF PERSONAL PROPERTY

SUBJECT TO ASSESSMENT IN THE CITY OF MADISON, JANUARY 1, 2023
PROPER SCHEDULES MUST BE FILLED IN COMPLETELY BEFORE THIS STATEMENT WILL BE ACCEPTED.
(If the spaces provided are not adequate to disclose all details, submit the details in separate schedules.)

<div>RETURN BY MARCH 1, 2023 TO THE ASSESSOR personalproperty@cityofmadison.com</div>	<div>OFFICE OF THE CITY ASSESSOR 210 Martin Luther King Jr. Blvd # 101 Madison, WI 53703-3342 OFFICE #: (608) 266-4527 FAX #: (608) 266-4257</div>
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<div>PERSONAL PROPERTY BELONGING TO: <div></div></div>	<div>OWNERSHIP INFORMATION</div> <div>NAME OF BUSINESS IF DIFFERENT THAN LABEL: <div></div></div> <div>DBA (Doing Business as) NAME: <div></div></div> <div>OWNERSHIP TYPE: <input type="checkbox"/> Sole Owner <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other: _____</div> <div>NAME(S) OF SOLE OWNER OR PARTNERS: BUSINESS PHONE: <div></div></div> <div>BUSINESS DESCRIPTION: NAICS CODE: <div></div></div>
<div>ADDRESS WHERE PERSONAL PROPERTY IS LOCATED: (When property is at more than one location, please submit separate statements.) <div></div></div>	
<div>OWNERSHIP CHANGE: (If you no longer own this property, please write the new owner's name and address and the date the change of ownership was effective in the space provided below and return it to the Office of the City Assessor.) / / Date Effective Name of New Owner Mailing Address (Street, City, State, Zip Code) of New Owner</div>	

IF YOU OWN THE REAL ESTATE THAT YOU OCCUPY, DO NOT COMPLETE ITEMS 1 THROUGH 6 BELOW.

1) Square Foot Area of Leased Space?	2) Term: From _____ To _____	3) Base Rental: \$ _____ per/mo. or per/yr.	4) Is there a percentage rent clause? (% sales) <input type="checkbox"/> Yes <input type="checkbox"/> No
5) Option to Renew: Date _____	6) Tenant Pays: <input type="checkbox"/> Electric <input type="checkbox"/> Heat <input type="checkbox"/> Real Estate Taxes <input type="checkbox"/> Other _____		

SCHEDULE A - Leased or Loaned Property in Your Possession (Attach additional sheets if necessary.)

OWNER'S NAME & ADDRESS	DESCRIPTION OF ITEMS	LEASE TERM		ESTIMATED MARKET VALUE
		From:	To:	
		From:	To:	
		From:	To:	
		From:	To:	

SCHEDULE B - Leasehold Improvements (Round to Dollars.)

YEAR ACQUIRED	SIGNS ONLY	ORIGINAL INSTALLED COST	10	FOR ASSESSOR'S USE ONLY	
2022			2022	.925	
2021			2021	.849	
2020			2020	.735	
2019			2019	.636	
2018			2018	.560	
2017			2017	.480	
2016			2016	.412	
2015			2015	.350	
2014			2014	.302	
2013			2013	.259	
All PRIOR Years			PRIOR	.155	
TOTAL			TOTAL		

SCHEDULE G - Supplies

TOTAL SUPPLIES PURCHASED LAST YEAR\$	SUPPLIES
JANUARY 1, 2023 SUPPLIES.....\$	ALL OTHER

SCHEDULE E - Furniture, Fixtures & Equipment (Do not include licensed motor vehicles - they are exempt.)

	Column 1	Column 2	Column 3			
YEAR ACQUIRED	ORIGINAL INSTALLED COST	DISPOSALS & TRANSFERS AT COST Jan. 1, 2022 to Jan. 1, 2023	FULL ORIGINAL COST at Jan. 1, 2023 (Total Column 1 & Column 2)	10	FOR ASSESSOR'S USE ONLY	
2022				2022	.925	
2021				2021	.849	
2020				2020	.735	
2019				2019	.636	
2018				2018	.560	
2017				2017	.480	
2016				2016	.412	
2015				2015	.350	
2014				2014	.302	
2013				2013	.259	
All PRIOR Years				PRIOR	.155	
TOTAL				TOTAL		

SCHEDULE F2 – Multi-Function Fax Machines, Copiers, Telephone Systems and Equipment with embedded computerized components.

	Column 1	Column 2	Column 3			
YEAR ACQUIRED	ORIGINAL INSTALLED COST	DISPOSALS & TRANSFERS AT COST Jan. 1, 2022 to Jan. 1, 2023	FULL ORIGINAL COST at Jan. 1, 2023 (Total Column 1 & Column 2)	6	FOR ASSESSOR'S USE ONLY	
2022				2022	.875	
2021				2021	.708	
2020				2020	.541	
2019				2019	.413	
2018				2018	.321	
2017				2017	.243	
All PRIOR Years				PRIOR	.133	
TOTAL				TOTAL		

DATE	I, the undersigned, declare under penalties of law that I have personally examined this statement and to the best of my knowledge and belief, it is true, correct and complete.		Reviewed by:	Date:
PREPARER (Please Print)	Company	SIGNATURE	PHONE (with extension)	
Email:				
OWNER/OFFICER (Please Print)	Title	SIGNATURE	PHONE (with extension)	
Email:				

Personal Property Account Number: