

## LAT 5 - INVENTORY, MERCHANDISE, ETC.

## 20\_\_ PERSONAL PROPERTY TAX FORM

RETURN TO:

NAME/ADDRESS (INDICATE ANY CHANGES)

**CONFIDENTIAL**

RS 47:2327: Forms filed by a taxpayer shall be used by the assessor, the governing authority and Louisiana Tax Commission solely for the purpose of administering this statute.

Legal Citation & Instructions: This report shall be filed with the assessor of the parish indicated by April 1st or within forty-five days after receipt, whichever is later, in accordance with RS 47:2324.

**PROPERTY LOCATION:**  
(E911/PHYSICAL ADDRESS)

**WARD:**

**ASSESSMENT  
NUMBER:**

**NAME OF BUSINESS:**  
**OWNER OR CONTACT:**

**TYPE OF BUSINESS:**  
**PHONE:**

**IMPORTANT!**

- AN ITEMIZED DEPRECIATION SCHEDULE, LISTING ASSETS (INCLUDING FULLY DEPRECIATED ITEMS AND/OR EXPENSED ITEMS) SHALL ACCOMPANY THIS REPORT.
- FIRMS HAVING 10 YEAR EXEMPTIONS SHALL COMPLETE FORM LAT 5A AND ATTACH TO THIS FORM.
- BANKS ONLY: ATTACH TO THIS REPORT A LIST OF SHAREHOLDERS AND A COPY OF YOUR CONSOLIDATED REPORT OF CONDITION AND CONSOLIDATED REPORT OF INCOME AS FURNISHED TO THE OFFICE OF FINANCE INSTITUTIONS OR TO THE COMPTROLLER OF CURRENCY AS OF DECEMBER 31<sup>ST</sup>.

**SHADED AREAS FOR ASSESSOR'S USE ONLY - USE ATTACHMENTS IF NECESSARY**

**SECTION 1 - INVENTORIES AND MERCHANDISE**

METHOD OF REPORTING: ☐ LIFO ☐ FIFO ☐ COST ☐ RETAIL ☐ OTHER (EXPLAIN) \_\_\_\_\_

|                       | MERCHANDISE | RAW MATERIALS | WORK IN PROCESS | FINISHED GOODS      | SUPPLIES AND/<br>OR GOODS USED | TOTAL |
|-----------------------|-------------|---------------|-----------------|---------------------|--------------------------------|-------|
| JANUARY               |             |               |                 |                     |                                |       |
| FEBRUARY              |             |               |                 |                     |                                |       |
| MARCH                 |             |               |                 |                     |                                |       |
| APRIL                 |             |               |                 |                     |                                |       |
| MAY                   |             |               |                 |                     |                                |       |
| JUNE                  |             |               |                 |                     |                                |       |
| JULY                  |             |               |                 |                     |                                |       |
| AUGUST                |             |               |                 |                     |                                |       |
| SEPTEMBER             |             |               |                 |                     |                                |       |
| OCTOBER               |             |               |                 |                     |                                |       |
| NOVEMBER              |             |               |                 |                     |                                |       |
| DECEMBER              |             |               |                 |                     |                                |       |
| <b>ASSESSED VALUE</b> |             |               |                 | <b>GRAND TOTAL:</b> |                                |       |
|                       |             |               |                 | <b>AVERAGE:</b>     |                                |       |

**SECTION 2 - FURNITURE AND FIXTURES**

(GROUP BY YEAR OF ACQUISITION)

| YEAR OF ACQUISITION | ACQUISITION COST | DESCRIPTION | YEAR OF ACQUISITION        | ACQUISITION COST | DESCRIPTION |
|---------------------|------------------|-------------|----------------------------|------------------|-------------|
|                     |                  |             |                            |                  |             |
|                     |                  |             | 15 Years or over.          |                  |             |
|                     |                  |             | <b>TOTAL MARKET VALUE:</b> |                  |             |
|                     |                  |             | <b>ASSESSED VALUE:</b>     |                  |             |

**SECTION 3 - MACHINERY AND EQUIPMENT (EXCLUDE LICENSED MOTOR VEHICLES)**

(GROUP BY YEAR OF ACQUISITION)

| YEAR OF ACQUISITION | ACQUISITION COST | DESCRIPTION | YEAR OF ACQUISITION        | ACQUISITION COST | DESCRIPTION |
|---------------------|------------------|-------------|----------------------------|------------------|-------------|
|                     |                  |             |                            |                  |             |
|                     |                  |             | 25 Years or over.          |                  |             |
|                     |                  |             | <b>TOTAL MARKET VALUE:</b> |                  |             |
|                     |                  |             | <b>ASSESSED VALUE:</b>     |                  |             |

**SECTION 4 - LEASEHOLD IMPROVEMENTS / MISCELLANEOUS PROPERTY**

(GROUP BY YEAR OF ACQUISITION)

| ITEM                            | YEAR OF ACQUISITION | ACQUISITION COST | DESCRIPTION |
|---------------------------------|---------------------|------------------|-------------|
|                                 |                     |                  |             |
|                                 |                     |                  |             |
| <b>TOTAL FAIR MARKET VALUE:</b> |                     |                  |             |
| <b>ASSESSED VALUE:</b>          |                     |                  |             |

**SECTION 5 - CONSIGNED GOODS, LEASED, LOANED OR RENTED EQUIPMENT, FURNITURE, ETC.**

(ATTACH LIST SHOWING NAME, ADDRESS, TYPE AND AGE OF PROPERTY, MONTHLY RENTAL)

|              |  |  |
|--------------|--|--|
| <b>NOTE:</b> | PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WAIVER OF RIGHTS TO APPEAL YOUR ASSESSMENT AND MAY INCLUDE A MONETARY PENALTY (RS 47:1992 & 2330). | <b>NEED ASSISTANCE?</b> AFTER YOU REVIEW THE ENCLOSED TAX FORM AND YOU FEEL YOU NEED ASSISTANCE, PLEASE CALL (985) 809-5534, (985) 809-5539 OR (985) 809-5533. |
|--------------|--|--|

**SIGNATURE AND VERIFICATION**

"I declare under the penalties for filing false reports (R.S. 14:125; up to 500.00 fine or imprisonment for one year or both, plus additional penalties defined in Act 2330B of the 1989 Regular Session) that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return."

Check box to confirm signature of  
Taxpayer:

DATE

Check box to confirm signature of  
Tax Preparer:

DATE

PRINTED/TYPED NAME OF TAXPAYER

PRINTED/TYPED NAME OF TAX PREPARER