



Ann H. Thomas, Commissioner of the Revenue

County of York, Virginia
P. O. Box 189
Yorktown, VA 23690-0189
Tel: (757) 890-3383

FINAL FILING DATE-
March 1st annually

(Penalty for Late or Not Filing is 10%, \$10.00
Minimum, not to exceed amount of tax)

THIS IS NOT A BILL

Form may be mailed or submitted through the document portal (see page 4)

TAX RETURN OF BUSINESS TANGIBLE PERSONAL PROPERTY AND MACHINERY AND TOOLS

Table with 4 columns: Taxpayer Name, Account #, FEIN / SSN #, Business Location, Mailing Address, City / State, Business Type, Telephone Number.

Important Notice- Every proprietor, firm or corporation owning or leasing tangible business property, machinery and tools, located in York County as of January 1st of the year in which you are filing must report the same on this form and return it by March 1st annually. Failure to file will result in a statutory assessment, which will be the basis of your tax bill, and may also result in legal action.

Virginia Code §58.1-3519 authorizes the Commissioner of the Revenue to assess property based on the best information available in any case where a taxpayer neglects or refuses to file a complete return. All filings are subject to audit by the Commissioner of the Revenue at any time.

Did you own or operate this business in York County on January 1st of the year in which you are filing? Yes No
If No, business closed on or business was moved to on and tangible property was sold disposed converted to personal use or moved from York County.

ATTACH a complete CUMULATIVE LISTING of ALL property used as of January 1st of the year in which you are filing. Reporting "SAME AS LAST YEAR" or returning this form "blank" is not considered filing. Notation of items acquired/disposed must be provided. If you do not use any tangible property in your trade or business, please complete ITEM I and ITEM II with "\$0", AND provide a written explanation as to how business is conducted without equipment and/or computer equipment.

Examples of tangible property may include, but are not limited to the following:

- All furniture, fixtures, furnishings, operating equipment, hand tools, power tools, books, machinery, signage, computers & peripherals (excluding software) and all other such tangible property owned, leased or made available to you in the conduct of your business. This includes all items which are "home-made" or predominately "personal use".
All tangible property received as a "GIFT", rebate, donation, or other items received at no cost to you. (If original cost is unknown, to the best of your ability, indicate the fair market value at time of receipt of property).
All items fully depreciated, but still in use.

In accordance with the Code of Virginia §58.1-3507, does your property qualify as Machinery and Tools used in a Manufacturing, Mining, Processing and reprocessing, Radio or TV Broadcasting, Dairy, Dry Cleaning or Laundry Business? Yes

ITEM I

Table for ITEM I: FURNITURE, FIXTURES, TOOLS AND EQUIPMENT. Columns for description and value.

ITEM II

Table for ITEM II: COMPUTER EQUIPMENT (EXCLUDING SOFTWARE). Columns for description and value.

FOR YOUR CONVENIENCE - A separate sheet to list your purchases and disposals is following.

**TAX RETURN OF BUSINESS TANGIBLE PERSONAL PROPERTY AND MACHINERY AND TOOLS  
(Continued)**

**ITEM III\* Business Use Vehicles/Mobile Homes/Mobile Office Trailers/Boats**

(List all vehicles owned or leased by this business **AND** list all other vehicles used more than **50%** for business purposes.)

Registered Owner or Lessor	Year-Make-Model	Identification Number/VA#	Date Acquired	Cost to You	Office Use Only
				\$	
				\$	
				\$	

**\*IF ADDITIONAL SPACE IS NEEDED, ATTACH A SEPARATE SHEET AND REFER TO ITEM#**

**ITEM IV\* Property Leased, Rented, Borrowed or Otherwise Provided BY others as of January 1<sup>st</sup> of the year in which you are filing - (except vehicles)**

Identify Owner/Lessor	Mailing Address City/State/Zip	Description of Property	Date of Lease	Quoted Purchase Price
				\$
				\$
				\$

**\*IF ADDITIONAL SPACE IS NEEDED, ATTACH A SEPARATE SHEET AND REFER TO ITEM#**

**ITEM V\* Property, Leased Rented, Borrowed or Otherwise Provided TO others as of January 1<sup>st</sup> of the year in which you are filing - (except vehicles)**

Identify Lessee/Borrower Mailing Address	Physical Location of Property	Description of Property	Date of Lease	Quoted Purchase Price
				\$
				\$
				\$

**\*IF ADDITIONAL SPACE IS NEEDED, ATTACH A SEPARATE SHEET AND REFER TO ITEM#**

*I declare that the information and figures provided above are true, full and correct to the best of my knowledge and belief. If submitting by the DOCUMENT PORTAL, you must initial below, which will be the equivalent of your signature. If submitting by MAIL, this form must be signed. **This form cannot be accepted unless you initial or sign below.***

Taxpayer Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Taxpayer Signature: \_\_\_\_\_ Email Address: \_\_\_\_\_

If you would like this office to be able to discuss this return with anyone other than the owner or corporate officer of the business, please check the box below.

- I authorize the Commissioner of the Revenue's office to discuss this return with \_\_\_\_\_.

**NOTE: It is a Class 1 misdemeanor for any person to willfully subscribe a return which he/she does not believe to be true and correct as to every material matter (Code of Virginia §58.1-11).**

**SUBMIT A COPY OF THE MOST RECENT DEPRECIATION SCHEDULE  
(Depreciation Schedule may be mailed or submitted through the document portal)**



