County:	
Mailing Address:	Tax Year
County Phone Number:	
usings Parsonal Proporty Roturn	

Business Personal Property Return

File this tax return between October 1 and December 31 with the above county tax office

Title 40, Chapter 7, Code of Alabama 1975, requires that, each year every person report to the county taxing official, a complete list of all tangible personal property owned by the taxpayer on October 1 of the tax year. Instructions for completing this form can be found at www.revenue.alabama.gov/forms - search ADV-40 Single Proprietor Partnership Alabama Corporation Out of State Corporation LLP Owner's Name: This form may be filed online at Mailing Address: _____ myalabamataxes.alabama.gov Log into your MAT account and select **Personal Property Return** Owner's Phone: If you do not have a MAT account, please register for one and then use the below information to access your data and file a return. Owner's Email: **OPPAL Account Number:** Doing Business As: _____ (for business property) Physical Address: Online Access Code (where property is located) For help with MAT registration use the "Help" link on the webpage. Landowner's Name: (for business property) For help with filing the personal property return call 855-277-3232. Business Type: ___ (if applicable) FOR OFFICE USE ONLY Date Established: Parcel No. (Make necessary corrections above.) PPIN Is this a new business? | Yes | No Did you close your business or sell your property prior to October 1 of the current year? Yes, Date:_____ No If sold, provide name and address of new owner: Optional: If there is information regarding the personal property listed on this form (such as exemption status, or other communication that the appraiser may use in assessing this property) please note it here: ** Please attach a listing (disposal list) of property that is no longer owned by the business. The disposal list should include asset description, original cost, acquisition date, and disposal date. Additionally, documentation related to the sale or closure of a business can be attached to this return. Person to contact if additional information is required: Name: Daytime Phone No.:() Email Address: NOTICE: All Business Personal Property Returns are subject to audit and appropriate penalties as found in Title 40, Chapter 7, Code of Alabama 1975. I hereby affirm that, to the best of my knowledge and belief, this listing, including any accompanying statements, schedules, and other information, is true and complete. All forms not completely filled out and signed will be returned. Signed _____ State law requires that this form be signed by the taxpayer or official agent.

PART A Itemized Statement of Personal Property

			ITEM		DA	TE ACQUIRED MM/DD/YY	cos	Τ
UPPLIE	S (such as o	office supplie	s, spare parts	s, consumable items, etc.)				
			es having "ac	PART B Vehicles with "Add-On" a Id-on" or "specialized" equipment	and speci ent (i.e., dur	np bodies, box type bo		ns, etc.) affix
them?	Yes	No If Yes ,	complete P	art B. If additional space is ne	eded, a sep	parate list may be atta	ched.	
MODEL YEAR	MAKE	MODEL	TAG NUMBER	COMPLETE VEHICLE ID NUMI (VIN)	BER	VEHICLE DESCRIPTION	DATE ACQUIRED MM/DD/YY	PURCHASE PRICE
								-

PART B-1

Truck Trailers, Tractor Trailers and Semi-Trailers for which the Owner Has Obtained a Permanent License Plate and

MODEL	mai space is	needed, a se	eparate list may b	e attached.							
MODEL MAKE MODEL		TAG	TAG SEDIAI NIIMPEDA/IN			HICLE	DATE ACQUIRED	LENGTH OF			
YEAR			NUMBER				DESCRIP	IION	MM/DD/YYYY	TRAILER	
Pursuan	t to 832-11-2	Code of Ala	•				nd and a	y d bessess	the Departmen	ot of Revenu	
effective	October 1	, 2022. An		d be reported or							
revenue.	.alabama.gov	/forms.		PA	RT D						
				Construction	on in Pr	_					
Do you l	have construc	tion in progr	ess or holding ac	count? Yes Yes	No If	f Yes, complete	Part D.				
	ITEM		COST AS O	F OCTOBER 1	ANT	TICIPATED TOTAL	COST	AN	ANTICIPATED IN SERVICE DATE – MM/DD/YY		
Compu	uters										
Equipn	nent/Machin	ery									
Furnitu	ıre/Fixtures										
Other_											
-			personal property	eased or Rented from someone such E. If additional space	h as mac	chinery, equipmer				rcraft, or mo	
	NAME OF LESSOR		ADI	ADDRESS OF LESSOR		TYPE OF EQUIPMENT		DATE OF LEA MM/DD/YY	SE TERM OF LEASE	ANNUAL RENT	
					1						
-		—	your possession	ersonal Property or located on your	premises	s that is owned b	y some				
-	ent listed in Pa	art E? Ye	your possession	ersonal Property or located on your s, complete Part F	Locate premises If additi	s that is owned be tional space is ne	y some eded, a		t may be attac	hed.	
-	ent listed in Pa	—	your possession	ersonal Property or located on your s, complete Part F	Locate premises	s that is owned be tional space is ne	y some eded, a	separate lis		hed.	
-	ent listed in Pa	art E? Ye	your possession	ersonal Property or located on your s, complete Part F	Locate premises If additi	s that is owned be tional space is ne	y some eded, a	separate lis	t may be attac	hed.	
-	ent listed in Pa	art E? Ye	your possession	ersonal Property or located on your s, complete Part F	Locate premises If additi	s that is owned be tional space is ne	y some eded, a	separate lis	t may be attac	hed.	