

State of Oklahoma
INTANGIBLE PERSONAL PROPERTY EXEMPTION



_____ County

RE# PP# Phone Number Email Address Owner/DBA Mailing Address	FEIN: _____ Type of Business: _____ North American Industry Classification System <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are other businesses included in this rendition? <input type="checkbox"/> Yes <input type="checkbox"/> No 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: _____
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REPORTING AND DOCUMENTATION
LOCALLY ASSESSED PERSONAL PROPERTY

Beginning January 1, 2013, the Oklahoma Constitution, Section 6A of Article 10, exempts any intangible personal property from ad valorem tax. The taxpayer must identify any intangible personal property which the taxpayer claims has been valued and assessed. If the intangible personal property has not been valued and assessed by the county assessor there is not a valid claim for exemption. Documentation must be submitted with this form establishing the existence, value and prior assessment of any intangible personal property claimed to be exempt.

Return to County Assessor by March 15th.

INTANGIBLE PERSONAL PROPERTY LISTING			
Asset Description	Original Cost	Net Book	Taxpayer's Estimate of Fair Market Value
Totals			

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 that the accompanying statement to be true, correct, and complete, and that all information requested herein has been fully and correctly given. (68 O.S. Section 2945 provides penalties for false oaths)

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