

Business Personal Property Rendition of Taxable Property

Form 50-144

CONFIDENTIAL

Tax Year _____

Appraisal District's Name _____

Appraisal District Account Number (if known) _____

GENERAL INFORMATION: This form is to render tangible personal property used for the production of income that you own or manage and control as a fiduciary on Jan. 1 of this year (Tax Code Section 22.01).

FILING INSTRUCTIONS: This document and all supporting documentation must be filed with the appraisal district office in the county in which the property is taxable.
Do not file this document with the Texas Comptroller of Public Accounts.

SECTION 1: Business and Situs Information (Required)

Business Name _____

Business Owner _____

Property Location Address, City, State, ZIP Code _____

Email Address _____

Phone (area code and number) _____

Ownership Type (Optional) ☐ Individual ☐ Corporation ☐ Partnership ☐ Other: _____

SECTION 2: Representation

Please indicate if you are filing out this form as: ☐ Owner, employee, or employee of an affiliated entity of the owner ☐ Authorized Agent ☐ Fiduciary ☐ Secured Party

Name of Owner, Authorized Agent, Fiduciary or Secured Party _____

Mailing Address, City, State, ZIP Code _____

Phone (area code and number) _____

Are you a secured party with a security interest in the property subject to this rendition and with a historical cost new of more than \$50,000 as defined by Tax Code Section 22.01(c-1) and (c-2)? ☐ Yes ☐ No

If Yes, attach a document signed by the property owner indicating consent to file the rendition. Without the authorization, the rendition is not valid and cannot be processed.

SECTION 3: Affirmation of Prior year Rendition (Check only if applicable and your assets were exactly the same as last year's rendition form.)

☐ By checking this box, I affirm that the information contained in the most recent rendition statement filed for the prior tax year (the _____ tax year) continues to be complete and accurate for the current tax year.

SECTION 4: Business Information (Optional)

Please address all that apply:

Business type: ☐ Manufacturing ☐ Wholesale ☐ Retail ☐ Service ☐ New Business

Business Description _____

Square Feet Occupied _____

Business Sold Date _____

Business Start Date at Location _____

Sales Tax Permit Number _____

New Owner _____

Business Moved Date _____

New Location _____

City, State ZIP Code _____

Business Closed Date _____

Did assets remain in place as of Jan. 1? ☐ Yes ☐ No

SECTION 5: Market Value

Check the total market value of your property ☐ Under \$20,000 ☐ \$20,000 or more

If Under \$20,000, complete only Schedule A and if applicable, Schedule F. Otherwise, complete Schedule(s) B, C, D, E and/or F, as applicable.

SECTION 6: Affirmation and Signature

If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.

I, _____, swear or affirm that the information provided in this report is true and accurate to the best of my knowledge and belief; and that I am authorized as required by law to file and sign this report.

Printed Name of Authorized Individual

NOTE: If the person filing and signing this report is not the property owner, an employee of the property owner, an employee of a property owner signing on behalf of an affiliated entity of the property owner or a secured party as defined by Tax Code Section 22.01, the signature below must be notarized.

**sign
here** ▶

Signature of Authorized Individual _____

Date _____

Subscribed and sworn before me this _____ day of _____, 20_____.

Notary Public, State of Texas _____