

DECLARATION OF COSTS AND OTHER RELATED PROPERTY INFORMATION AS OF 12:01 A.M., JANUARY 1, 2020
RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED.

LOCATION OF THE BUSINESS PROPERTY - STREET, CITY
NAME AND MAILING ADDRESS
ASSESSOR'S USE ONLY
ASSESSOR'S PARCEL NUMBER
BOOK PAGE PCL PAR SEQ
COMPANY NUMBER ACCOUNT NUMBER E-FILE DIR BIL
DIST USE RESPON LYA NAY
PRIOR PN FIXTURES PERSONAL PROPERTY

Part I GENERAL INFORMATION
COMPLETE (a) THRU (g)
a. Enter type of business:
b. Enter local telephone no. () Fax No. ()
E-mail address
c. Do you own the land at this business location? YES NO
If "Yes," is the name on your deed recorded as shown on this statement? YES NO
d. When did you start business at this location? DATE:
If your business name or location has changed from last year, enter the former name and/or location
e. Enter location of general ledger and all related accounting records (include ZIP).
f. Enter name and telephone no. of authorized person to contact at location of accounting records.

g. During the period of JANUARY 1, 2019 through DECEMBER 31, 2019
(1) Did any individual or legal entity (corporation, partnership, limited liability company, etc.) acquire a "controlling interest" (see instructions for definition) in this business entity? YES NO
(2) If YES, did this business entity also own "real property" (see instructions for definition) in California at the time of the acquisition? YES NO
(3) If YES to both questions (1) and (2), filer must submit form BOE-100-B, Statement of Change in Control and Ownership of Legal Entities, to the State Board of Equalization. See instructions for filing requirements.

Part II DECLARATION OF PROPERTY BELONGING TO YOU
(Attach Schedule For Any Adjustment to Cost)
COST (Omit Cents) FULL CASH VALUE ENROLLED VALUE
1. Supplies
2. Equipment (From Line 35)
3. Equipment Out on Lease, Rent, or Conditional Sale to Others Attach Schedule
4. Bldgs., Bldg. Impr., and/or Leasehold Impr., Land Impr., Land (From Line 71)
5. Construction in Progress (Attach Schedule)
6. Alternate Schedule A See Instructions
7.
8.
TOTAL F.C.V.

Part III DECLARATION OF PROPERTY BELONGING TO OTHERS - IF NONE WRITE "NONE"
REPORT CONDITIONAL SALES CONTRACTS THAT ARE NOT LEASES ON SCHEDULE A (SPECIFY TYPE BY CODE NUMBER)
1. Leased Equipment 4. Vending Equipment
2. Lease-Purchase Option Equipment 5. Other Businesses
3. Capitalized Lease Equipment 6. Government-Owned Property
Tax Obligation: A. Lessor B. Lessee
9. Lessor's Name Mailing Address
10. Lessor's Name Mailing Address

OWNERSHIP TYPE (✓)
Proprietorship
Partnership
Corporation
Other
BUSINESS DESCRIPTION (✓)
Retail
Wholesale
Manufacturer
Service-Professional
DECLARATION BY ASSESSEE
Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.
I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 2020.
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE DATE
NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID #
PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NO.
ASSESSOR'S USE ONLY
APPLY AE LATE FILING
10%PY
APPRAISER #
Date
Approval
COPIES:
Assessee's

SCHEDULE A – COST DETAIL: EQUIPMENT *(Do not include property reported in Part III.)*

Include expensed equipment and fully depreciated items. Include sales or use tax (see instructions for important use tax information), freight and installation costs. Attach schedules as needed. Lines 18, 32, 33, and 45 "Prior" – Report detail by year(s) of acquisition on a separate schedule.

LINE NO	Calendar Year of Acq.	1. MACHINERY AND EQUIPMENT FOR INDUSTRY, PROFESSION, OR TRADE <i>(do not include licensed vehicles)</i>		2. OFFICE FURNITURE AND EQUIPMENT		3. OTHER EQUIPMENT <i>(describe)</i>		Calendar Year of Acq.	4. TOOLS, MOLDS, DIES, JIGS		
		COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY		COST	ASSESSOR'S USE ONLY	
11	2019							2019			
12	2018							2018			
13	2017							2017			
14	2016							2016			
15	2015							2015			
16	2014							2014			
17	2013							2013			
18	2012							Prior			
19	2011							Total			
20	2010							Calendar Year of Acq.	5a. PERSONAL COMPUTERS		
21	2009										
22	2008								COST	ASSESSOR'S USE ONLY	
23	2007							2019			
24	2006							2018			
25	2005							2017			
26	2004							2016			
27	2003							2015			
28	2002							2014			
29	2001							2013			
30	2000							2012			
31	1999							2011			
32	1998							Prior			
33	Prior							Total			
34	Total								5b. LOCAL AREA NETWORK (LAN) EQUIPMENT AND MAINFRAMES		
35	Add TOTALS for lines 19, 33, 34, 46 and any additional schedules. ENTER HERE AND ON PART II, LINE 2								Calendar Year of Acq.		
Remarks										COST	ASSESSOR'S USE ONLY
36									2019		
37									2018		
38									2017		
39									2016		
40									2015		
41									2014		
42									2013		
43									2012		
44									2011		
45									Prior		
46									Total		

**SCHEDULE B — COST DETAIL: BUILDINGS, BUILDING IMPROVEMENTS, AND/OR LEASEHOLD IMPROVEMENTS,
LAND IMPROVEMENTS, LAND AND LAND DEVELOPMENT**

Attach schedules as needed. Line 69 "Prior" — Report detail by year(s) of acquisition on a separate schedule.

LINE NO	Calendar Yr. of Acq.	BUILDINGS, BUILDING IMPROVEMENTS, AND/OR LEASEHOLD IMPROVEMENTS				3. LAND IMPROVEMENTS <i>(e.g., blacktop, curbs, fences)</i>	4. LAND AND LAND DEVELOPMENT <i>(e.g., fill, grading)</i>	
		1. STRUCTURE ITEMS ONLY <i>(see instructions)</i>		2. FIXTURES ONLY <i>(see instructions)</i>				
		COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY			COST
47	2019							
48	2018							
49	2017							
50	2016							
51	2015							
52	2014							
53	2013							
54	2012							
55	2011							
56	2010							
57	2009							
58	2008							
59	2007							
60	2006							
61	2005							
62	2004							
63	2003							
64	2002							
65	2001							
66	2000							
67	1999							
68	1998							
69	PRIOR							
70	TOTAL							
71	Add Totals on Line 70 and any additional schedules					ENTER HERE AND ON PART II, LINE 4		
72	Have you received allowances for tenant improvements for the current reporting period that are not reported above?						<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes indicate amount \$ _____.							

REMARKS: _____

