

**INSTRUCTIONS FOR COMPLETING THE PERSONAL PROPERTY  
DECLARATION SCHEDULE DS 056S**

PLEASE VISIT [HTTP://COLORADO.GOV/DOLA/PROPERTY-TAXATION](http://colorado.gov/dola/property-taxation) FOR GENERAL INFORMATION ON ALL DECLARATION SCHEDULES.

**A. NAME AND MAILING ADDRESS:** Write any corrections to the preprinted name/address information. If you are not the current business owner, please list the name and address of the new owner in the appropriate box. Also, list the date that the property was sold to the new owner.

**BUSINESS NAME AND PHYSICAL LOCATION:** If not preprinted, provide the: ■ Business Name ■ Actual Physical Location of the Personal Property ■ Change in Physical Location, If Applicable ■ Additional Property Location Changes, If Applicable ■ List of Locations Where Other Personal Property Is Owned.

**B. BUSINESS:** Provide your business start-up date, the square footage your business occupies and the primary product or service that you provide.

**C. BUSINESS STATUS:** Check the appropriate boxes for your business status and indicate the date of any change in the property's location from the prior year. **The assessor may select your business for an audit whether or not you file a declaration schedule.**

**D. ITEMIZED LISTING OF PERSONAL PROPERTY:**

“Personal property” means everything that is the subject of ownership and that is not included within the term ‘real property’. ‘Personal property’ includes machinery, equipment, and other articles related to a commercial or industrial operation that are either affixed or not affixed to the real property for proper utilization of such articles. . . .” § 39-1-102(11), C.R.S. Regardless of whether property is affixed to a building, it is personal property if it is used for the purpose of a commercial or industrial operation and not for the enhancement of the real property. Do not report licensed vehicles in this section.

**PERSONAL PROPERTY INCLUDES:**

- All Residential Household Furnishings Producing Income
- Equipment, Furniture, and Machinery Used by These Businesses: Commercial, Industrial, and Natural Resource
- Taxable Personal Property Used As Part of an Agribusiness, that does not qualify as agricultural, pursuant to, § 39-1-102 (1.6)(a), C.R.S.
- Expensed Assets With a Life of Greater Than One Year
- Fully Depreciated Assets Still In Use
- Assets in Storage that are Subject to IRS Depreciation
- Leasehold Improvements

**“CONSUMABLE” PERSONAL PROPERTY EXEMPT FROM TAXATION:**

Pursuant to § 39-3-119, C.R.S., personal property classified as “consumable” as defined in ARL Volume 5, Chapter 7, is exempt from taxation and should **NOT** be listed on this declaration. “Consumable” personal property is defined as any asset having a life of one (1) year or less regardless of cost, and any asset with a life longer than one year that has a reasonable original installed cost or market value in use of \$350 or less at the time of acquisition. The \$350 limitation applies to personal property that is completely assembled and ready to perform the end user’s intended purpose(s) and it includes all acquisition costs, installation costs, sales/use taxes and freight expenses.

**IMPORTANT: YOU MUST SUBMIT A COMPLETE PROPERTY LISTING IF YOU HAVE NOT PROVIDED ONE FOR THIS LOCATION.** Do not list merchandise inventory, materials, or supplies. Do list all other personal property acquired by you prior to January 1. This includes all personal property with an original installed cost greater than **\$350**. If you have given the assessor such a list, you may simply submit additions and deletions each year.

1. Provide a list of **all** taxable personal property acquired by you prior to January 1, providing: ■ Item ID Number ■ Quantity ■ Complete Property Description Including Model Number or Capacity ■ Year Acquired ■ If the Item is New or Used ■ Original Installed Cost to You (Current Owner) ■ The Month and Year Each Item was First Placed into Service or is Scheduled to be Placed into Service. You should separately submit any available market value, rent, or lease information. The Original Installed Cost to You is defined as the amount that was paid for the personal property when new inclusive of ■ Sales/Use Tax ■ Freight and ■ Installation Charges. If the item was purchased used, include its Cost to You along with Sales/Use Tax, Freight, and Installation Charges.

2. Provide a list of **all** taxable personal property sold, traded, or scrapped prior to January 1 of the current year. For all items deleted, provide: ■ Item ID Number ■ Quantity ■ Property Description Including Model Number or Capacity ■ Year Acquired ■ If the Item is New or Used ■ Original Installed Cost to You (Current Owner).

3. If you had any leased, loaned, or rented personal property (machinery, equipment, furniture, signs, vending machines, etc.), at this location on January 1, check the box and attach a detailed listing including the property owner/lessor’s name, address, and telephone number. All personal property leased, loaned, or rented to you must be listed. Property rented 30 days at a time or less, returned at the renter’s option, and for which sales/use tax is collected before it is finally sold is considered exempt and should **NOT** be reported. You must identify each item of leased, loaned, or rented personal property as follows: ■ Owner’s/Lessor’s Name, Address, and Telephone Number ■ Property Description Including Model, Serial Number, or Capacity ■ Check New or Used ■ Total Cost of the Lease to You ■ Original Installed Cost ■ Lease Number ■ Lease Term (From-To) ■ Total Amount of Annual Rent. Please note if any of the leased equipment listed is capitalized on your books and records.

**E. RENEWABLE ENERGY PERSONAL PROPERTY:** Check the appropriate boxes regarding renewable energy property at this location. If the RENEWABLE PROPERTY IS OWNED BY YOU, RENEWABLE PROPERTY FORM DS 058 is required to be filed with the assessor.

**F. DECLARATION AND SIGNATURE:** Print the personal property owner’s Federal Employer Identification Number (FEIN) or Social Security Number (SSN). Print name of owner, name of person signing, phone number, and e-mail address. Then sign, date, and return this form to assessor by **April 15th**. § 39-5-107, C.R.S.

State of Colorado  
PERSONAL PROPERTY  
DECLARATION SCHEDULE  
(CONFIDENTIAL DATA)

19 DPT-AS Form  
DS 056S 10-19

DO NOT USE – FOR ASSESSOR ONLY

RECEIVED

COMPLETED

LATE FILING PENALTY APPLIED  YES  NO

**RETURN TO COUNTY ASSESSOR**

County

B.A. CODE

T.A. CODE

SCHEDULE/ACCT. NO.

Assessment Date

Due Date

January 1, 2019

April 15, 2019

A. NAME AND MAILING ADDRESS (INDICATE ANY CHANGES OR CORRECTIONS)

BUSINESS NAME AND PHYSICAL LOCATION OF THE PERSONAL PROPERTY AS OF JANUARY 1, 2019

B. BUSINESS: Start-Up Date (at this location)

Square Footage the Business Occupies

Product or Service Provided

C. BUSINESS STATUS: (Please check the appropriate boxes ONLY).

NOT CURRENT BUSINESS OWNER. If you are not the current business owner, check here and provide the name and address of the new owner: \_\_\_\_\_

Date Sold: \_\_\_\_\_

NEW BUSINESS/ORGANIZATION. You must give a **complete itemized listing** of all personal property. Use the first part of Section D and attach separate sheet(s) if needed. **The assessor may select your business for an audit whether or not you file a declaration schedule.**

EXISTING BUSINESS/ORGANIZATION. Indicate any additions and/or deletions to your listing in Section D.

NEW OWNER OF PREVIOUSLY EXISTING BUSINESS/ORGANIZATION. You must give a complete itemized listing of all personal property acquired in a business purchase. Include additions made prior to Jan. 1 since that purchase.

**AS OF JANUARY 1, DID YOUR BUSINESS CEASE OPERATIONS?**  Yes  No If yes, please complete below:

Personal Property Sold  Personal Property Stored Date Sold / Stored \_\_\_\_\_

If sold, Selling Price of Furnishings, Assets, and Equipment Only: \$ \_\_\_\_\_

If sold, Name and Contact Information of New Owner of the Personal Property: \_\_\_\_\_ Phone Number \_\_\_\_\_

**NOTE:** If sold to more than one new owner, please attach a listing of the new owners.

PROPERTY CHANGED LOCATION TO \_\_\_\_\_ ON (DATE) \_\_\_\_\_

D. ITEMIZED LISTING OF PERSONAL PROPERTY:

ATTACH A COMPLETE ITEMIZED ASSET LISTING WITH EACH BUSINESS PERSONAL PROPERTY DECLARATION FILING.

CHECK HERE IF THERE ARE NO CHANGES FROM LAST YEAR'S DECLARATION SCHEDULE INFORMATION. IF SO, GO DIRECTLY TO SECTION E. COMPLETE THE FORM, SIGN IT, AND RETURN FORM TO THE ASSESSOR. **NOTE: DO NOT CHECK THIS BOX IF THIS IS A NEW ORGANIZATION.**

1. If NO ADDITIONS, check here; otherwise, **attach a detailed listing.**

NOTE: Include ALL Expensed Assets with a Life of Greater Than 1 Year, Fully Depreciated Assets Still in Use, and Stored Assets that are Subject to IRS Depreciation. **Do not report licensed vehicles.**

2. If NO DELETIONS, check here; otherwise, **attach a detailed listing** of all personal property sold, traded, or discarded prior to January 1.

3. If you had any leased, loaned, or rented personal property at this location on January 1, check here and **attach a detailed listing.**

E. IS THERE ANY RENEWABLE ENERGY PROPERTY (e.g., solar panels, wind turbines, hydroelectric property) AT THIS LOCATION?  Yes  No, IF YES, THE PROPERTY IS:  Owned  Leased, IF OWNED, COMPLETE THE DS 058 FORM.

F. DECLARATION

THIS RETURN IS SUBJECT TO AUDIT

"I declare, under penalty of perjury in the second degree, that this schedule, together with any accompanying exhibits or statements, has been examined by me and to the best of my knowledge, information, and belief sets forth a full and complete list of all taxable personal property owned by me, or in my possession, or under my control, located in this county, Colorado, on the assessment date of this year; that such property has been reasonably described and its value fairly represented; and that no attempt has been made to mislead the assessor as to its age, quality, quantity, or value." § 39-5-107(2), C.R.S.

PROPERTY OWNER'S FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)/SOCIAL SECURITY NUMBER (SSN) \_\_\_\_\_

NAME OF OWNER \_\_\_\_\_

PRINT NAME OF PERSON SIGNING \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

SIGNATURE OF OWNER OR AGENT \_\_\_\_\_ DATE \_\_\_\_\_

Check here if new agent. If new agent, submit a letter of authorization when filing this form.

**PLEASE COMPLETE, SIGN AND RETURN TO THE ASSESSOR ON OR BEFORE APRIL 15, 2019.**

**MAKE A COPY FOR YOUR RECORDS.**