

**MARK J. NOVAK**  
Assessor, Marion County, MO

906 Broadway  
Hannibal, MO 63401-4248  
573-221-0589  
Email: tguibor@marioncounty-mo.gov

**2024 BUSINESS ASSESSMENT LIST**

Dear Business Owner / Manager: You are required by law to provide a list, indicating *type, year purchased* and *original cost*, for all tangible personal property, e.g. Vehicles, Computers & Office Equipment, Furniture, Fixtures, Manufacturing Equip. & Tooling, etc., belonging to you or under the control of your company in Marion County, Missouri, on Jan. 1st. Complete this form, sign and return it **before March 1st** to avoid penalty.  
**Follow instructions below and on back.**

**AVOID PENALTY Return by March 1st**



MARK J NOVAK  
MARION COUNTY ASSESSOR  
906 BROADWAY  
HANNIBAL MO 63401-4248

**E-File - Scan QR code or Go to:**

**Check one:**  Inside City  Rural

Please check spelling of name above. Correct if necessary.

**Physical Location:**

**BUSINESS INFORMATION:** LIST ACTUAL PHYSICAL LOCATION AND TELEPHONE NUMBER OF PROPERTY COVERED BY THIS RETURN (STREET ADDRESS, NOT P.O. BOX NUMBER)

STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE ( )
----------------	------	-------	----------	------------------

**IMPORTANT:** Last year you reported the property shown below.

1. Please draw a line through any items you **did NOT own on Jan. 1<sup>st</sup>** --->
2. List **ANY items NOT SHOWN** in this box in the areas below or on back.

**HOW TO REMOVE AN ITEM:**

~~4901 FORD F 400 XL FD7QA61035550257~~  
↑ **EXAMPLE** ↑



Please check one of these boxes after completing front and back of form. Sign before returning.



**CHANGES HAVE BEEN MADE**

Items were added, deleted, or address was changed



**NO CHANGES MADE**

No new items owned on Jan. 1st

**\*\*\*Do not re-list any items that appear correctly in box above.\*\*\***

PURCHASE PRICE OF BUSINESS ITEMS	YEAR PURCHASED	Computers, Peripherals & Telephone Equip.	Office Furniture, Fixtures & Equip.	Manufacturing Equip. and Machinery	Dies, Molds, Jigs, Special Tooling	Construction Equip. & Machinery	Professional, Medical Dental & Lab Equip.
	2023						
	2022						
	2021						
	2020						
	2019						
	2018						
	2017						
PRIOR YEARS							

  

PURCHASE PRICE OF BUSINESS ITEMS	YEAR PURCHASED	Store, Restaurant & Bar Equipment	Household Goods for Hotel, Motel, Apt. Rental	Service Station, Bulk Plant, Car Wash Equip.	Video Movies, Tapes, Games/Vend Machines	Equip. Owned by You and Leased to Others	OTHER: e.g. Pollution Control Equip., Signs, etc.
	2023						
	2022						
	2021						
	2020						
	2019						
	2018						
	2017						
PRIOR YEARS							

**LEASED PERSONAL PROPERTY SUMMARY** Please list below any leased or rented equipment in your possession.

ITEM LEASED	DATE OF LEASE	LENGTH OF LEASE	OWNER'S NAME, ADDRESS & PHONE	ORIGINAL COST	WHO IS RESPONSIBLE FOR TAX?

**ATTENTION!** Your listing is subject to audit. Upon request, please be prepared to provide documentation for its contents. To assure a fair and accurate assessment of your business personal property, and to avoid listing each item on this form, **PLEASE ATTACH YOUR COMPANY'S COMPLETE AMORTIZATION SCHEDULE.** Returns marked "same as last year" will not receive depreciated valuation.

**CONTINUED ON BACK** →

**Enterprise Zone:** If your facility is located in an Enterprise Zone, please provide a list showing acquisition date by year and cost for tools and equipment used for pollution control, and for tools and equipment used in retooling to introduce new product line or to make improvements to an existing product line. List your Standard Industrial Classification (SIC) code: \_\_\_\_\_

<b>CARS, MINIVANS &amp; SUVs</b> <i>Do not list LEASED vehicles</i>	YEAR	MAKE (Chev., Ford, etc.)	MODEL (Lumina, Taurus, etc.)	SERIES (SL, SE, etc.)	# DOORS	(CIRCLE ONE) 2WD 4WD AWD	VIN (Vehicle ID Number)		
						2WD 4WD AWD			
						2WD 4WD AWD			
<b>HISTORIC VEH.</b>				HISTORIC PLATES: <input type="checkbox"/> YES <input type="checkbox"/> NO		EST. VALUE \$:			
<b>PICKUPS &amp; CARGO VANS</b>	YEAR	MAKE	MODEL	TONS (CIRCLE ONE) 2WD 4WD	EXT CAB YES NO	DIESEL YES NO	VIN (Vehicle ID Number)		
				2WD 4WD	YES NO	YES NO			
				2WD 4WD	YES NO	YES NO			
<b>TRUCKS &amp; SEMI TRACTORS</b>	YEAR	MAKE (Sterling, Mack, etc.)	MODEL	GROSS VEH. WEIGHT	BODY TYPE (Flatbed, Grain)	MO MILES	TOTAL MILES	VIN (Vehicle ID Number)	
<b>SEMI TRAILERS</b>	YEAR	MAKE / MODEL	TYPE (Reefer, Flat, Van, Tanker, Etc.)	AXLES	LENGTH	MO MILES	TOTAL MILES	VIN (Vehicle ID Number)	
<b>MOTORCYCLES ATVs &amp; UTVs</b>	YEAR	MAKE	MODEL	# OF WHEELS	TYPE (CIRCLE ONE) MC ATV UTV	CC / HP	VIN (Vehicle ID Number)		
					MC ATV UTV				
					MC ATV UTV				
<b>MOTOR HOMES &amp; RVs</b>	YEAR	MAKE / CHASSIS	MODEL	SERIES	LENGTH	VIN (Vehicle ID Number)			
<b>BUSES</b>	YEAR	MAKE / CHASSIS	MODEL / SERIES	# PASSENGERS	LENGTH	VIN (Vehicle ID Number)			
<b>CAMPER TRAILER</b>	YEAR	MAKE	MODEL	TYPE (Circle One) 5TH WHEEL UPRIGHT FOLD DOWN HI/LOW	LENGTH	VIN (Vehicle ID Number)			
<b>TRAILERS</b> <i>Including BOAT Trailers</i>	YEAR	PULL (Circle One)	TYPE (Circle One or add type below)				MATERIAL (Circle One)	LENGTH	VIN (Vehicle ID Number)
		Gooseneck Bumper	Stock Flat Boat Cargo Utility Dump Tank			Steel Alum			
		Gooseneck Bumper	Stock Flat Boat Cargo Utility Dump Tank			Steel Alum			
		Gooseneck Bumper	Stock Flat Boat Cargo Utility Dump Tank			Steel Alum			
<b>BOATS &amp; JET SKIS</b>	YEAR	MAKE	MODEL	TYPE (Bass, Jon)	MATERIAL (Circle One) Fiber Alum. Wood	LENGTH	VIN / SERIAL NUMBER		
					Fiber Alum. Wood				
					Fiber Alum. Wood				
<b>BOAT MOTORS</b>	YEAR	MAKE	MODEL	TYPE (Circle One) Inboard Outboard	HP	VIN / SERIAL NUMBER			
				Inboard Outboard					
				Inboard Outboard					
<b>AIRPLANES</b>	YEAR	MAKE	MODEL	TYPE (Jet, Propeller)	ENGINE Single Twin	KIT YES NO	VIN / SERIAL NUMBER		
	MAX CERTIFIED GROSS TAKEOFF WEIGHT:			HOURS FLOWN LAST YEAR:					

<b>GRAIN / HAY</b> <i>Resale Only</i>	CORN: # BUSHEL: _____	BEANS: # BUSHEL: _____	OTHER: _____	# BUSHEL / TONS: _____					
	TYPE	NO.	TYPE	NO.	TYPE	NO.	TYPE	NO.	
	CALVES		PIGS (0-90 lbs.)		SOWS/BOARS (400 lbs - over)		GOATS		
	YEARLINGS		FEEDERS (90-250 lbs.)		LAMBS / SHEEP		CHICKENS / TURKEYS		
		COWS / BULLS		BARROWS/GILTS (250-400 lbs.)		HORSES, MULES, PONIES		OTHER / EXOTICS	

\* List ONLY Farm Machinery changes made during last year IF you have provided a listing previously. Otherwise, list all machinery below.

* FARM MACHINERY & OTHER EQUIPMENT	DESCRIPTION	YEAR	MAKE	MODEL	4X4	HP	ENGINE (circle)	YR. PURCHASED	ORIG. COST
	TRACTOR					YES NO		GAS DIESEL	
TRACTOR					YES NO		GAS DIESEL		\$
COMBINE					YES NO		GAS DIESEL		\$
COMBINE					YES NO		GAS DIESEL		\$
PLANTER / DRILL					YES NO		GAS DIESEL		\$
DISC / PLOWS					YES NO		GAS DIESEL		\$
BALER					YES NO		GAS DIESEL		\$
OTHER					YES NO		GAS DIESEL		\$
SKIDLOADER / FORKLIFT					YES NO		GAS DIESEL		\$
DOZER / SCRAPER					YES NO		GAS DIESEL		\$
BACKHOE / GRADER					YES NO		GAS DIESEL		\$
MISC. / OTHER					YES NO		GAS DIESEL		\$

<b>BUILDINGS &amp; SHEDS</b>	Did you make improvements to, remove or add buildings last year? <input type="checkbox"/> Yes <input type="checkbox"/> No	MARI2 - 102 (Rev 8/23)
	If Yes, Indicate type and size of Improvement or Removal: _____	<b>064B</b>
	Was your construction / demolition completed before January 1st? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>MOBILE HOMES</b> <i>(MANUFACTURED HOME USED AS RESIDENCE)</i>	YEAR	MAKE	MODEL	WIDTH	LENGTH	DATE PURCHASED	VIN / SERIAL NUMBER
	Do you own the land? <input type="checkbox"/> YES <input type="checkbox"/> NO If not, list landowner below. *			PARK NAME			
	LOCATION: <input type="checkbox"/> MOBILE HOME PARK <input type="checkbox"/> TOWN LOT <input type="checkbox"/> RURAL ACREAGE			ADDRESS & LOT NO.			
				* NAME & ADDRESS OF LANDOWNER (IF DIFFERENT)			
							PENALTY: Y N \$

<b>Failure to return your Assessment List will result in a Penalty.</b> <input checked="" type="checkbox"/> Late Personal Property Lists - Sec. 137.280 of SB 62 requires the assessor to assess a penalty on any person who fails to return his personal property tax list by the first day of March. Assessment will be <u>DOUBLED</u> if list is found to be fraudulent. Statute #137.285.	<b>ASSESSED VALUE</b>	<b>PENALTY</b>	<b>ASSESSED VALUE</b>	<b>PENALTY</b>
	0 - \$1,000	\$15	\$5,001 - \$6,000	\$65
	\$1,001 - \$2,000	\$25	\$6,001 - \$7,000	\$75
	\$2,001 - \$3,000	\$35	\$7,001 - \$8,000	\$85
	\$3,001 - \$4,000	\$45	\$8,001 - \$9,000	\$95
	\$4,001 - \$5,000	\$55	\$9,001 and above	\$105

<b>AGENT OR PREPARER'S INFORMATION</b>		
NAME	ADDRESS	
CITY, STATE, ZIP CODE	TELEPHONE ( )	TAX I.D. NUMBER

I, \_\_\_\_\_,  President  Treasurer  Owner  Manager  Other \_\_\_\_\_ of \_\_\_\_\_, do solemnly swear, or affirm, that the foregoing list contains a true and correct statement of all the tangible personal property, made taxable by the laws of the state of Missouri, which I owned or which I had under my charge or management on the first day of January. I further solemnly swear, or affirm, that I have not sent or taken, or caused to be sent or taken, any property out of this state to avoid taxation. So help me God.

**SIGN HERE**  \_\_\_\_\_ Date \_\_\_\_\_  I have listed additional property on sheet attached.