



BOSSIER PARISH ASSESSOR'S OFFICE

P.O. BOX 325

BENTON, LOUISIANA 71006-0325

YEAR	ASSESSMENT NO.
MAIL TO	

DUE ON OR BEFORE APRIL 1ST
IMPORTANT LAT-5 TAX FORM

FOLD-----FOLD

IMPORTANT

LAT-5 BUSINESS PERSONAL PROPERTY TAX
SELF REPORTING FORM

LEGAL CITATION & INSTRUCTIONS: THIS REPORT SHALL BE FILED WITH THE ASSESSOR OF THE PARISH INDICATED BY APRIL 1ST OR WITHIN FORTY-FIVE (45) DAYS AFTER RECEIPT, WHICHEVER IS LATER, IN ACCORDANCE WITH RS 47:2324.

NEED ASSISTANCE?

PHONE: (318) 965-2213

EMAIL: personalproperty@bossierparish.org

FORM AVAILABLE ONLINE: www.bossierparishassessor.org • Forms • LAT-5

AFTER YOU REVIEW THE ENCLOSED TAX FORM AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOUR PARISH ASSESSOR AS LISTED ABOVE. THANK YOU.

CONFIDENTIAL: RS 47:2327. Only the Assessor, the governing authority, and Louisiana Tax Commission shall use this form filled out by the taxpayer solely for the purpose of administering the statute.

NOTE: Penalties for failure to file this form include waiver of rights to Appeal your assessment and may include a monetary penalty. (RS 47:1992 & 2330).

LAT 5

REV 01/26

PERSONAL PROPERTY REPORT

Year 20__

Name of Business		NAME/ADDRESS (indicate any changes)
Doing Business As (DBA)		
Type of Business		
Property Location (E911 and/or Physical Address)		
Owner/Person to Contact	Phone Number	
Email		

IMPORTANT!

- An itemized depreciation schedule, listing assets (including fully depreciated assets and/or expensed items).
- Firms having 10-year exemptions shall complete form LAT 5A and attach to this form.
- Banks only: attach to this report a list of shareholders and a copy of your consolidated report of condition and consolidated report of income as furnished to the office of financial institutions or to the comptroller of currency as of December 31st.

SECTION 1

INVENTORIES AND MERCHANDISE

Method of Reporting-Check One LIFO FIFO COST RETAIL OTHER (Explain)

	MERCHANDISE	RAW MATERIAL	WORK IN PROGRESS	FINISHED GOODS	SUPPLIES	TOTAL
JANUARY						
FEBRUARY						
MARCH						
APRIL						
MAY						
JUNE						
JULY						
AUGUST						
SEPTEMBER						
OCTOBER						
NOVEMBER						
DECEMBER						

GRAND TOTAL \$ _____

AVERAGE \$ _____

Instructions: This Verification Form shall be completed and filed with the assessor whenever materials or documents are submitted to an assessor in addition to a personal property taxpayer's business's property tax rendition(s) (LAT Forms). This Form shall be filed contemporaneously with the taxpayer's other LAT filings.

ASSESSMENT NUMBER(S):

NAME OF BUSINESS:

SIGNATURE AND VERIFICATION

The undersigned declares, under the penalty of perjury and the penalties for filing false reports, the following:

1. that he/she is a bona fide representative of the business identified above;
2. that the materials and documents furnished to the assessor along with the above identified business's property tax rendition(s) (LAT Forms) have been examined by me and to the best of my knowledge and belief, are true, correct, and complete; and
3. that he/she has personal knowledge and information in order to verify the accuracy of the information contained in the materials and documents furnished to the assessor along with the above identified business's property tax rendition(s) (LAT Forms).

SIGNATURE

DATE

PRINTED NAME

TITLE

EMAIL ADDRESS

PHONE NUMBER

MAILING ADDRESS

LAT 5 FORM INSTRUCTIONS

TO MAINTAIN YOUR RIGHT TO APPEAL, THE FORM MUST BE RECEIVED BY OUR OFFICE ON OR BEFORE APRIL 1ST OF EACH YEAR.

SELF REPORTING – PERSONAL PROPERTY REPORT

1. Fill in the blanks with the appropriate information pertaining to your business:
 - NAME OF BUSINESS – the legal name of the business entity.
 - DOING BUSINESS AS (DBA) – if the business is a DBA list the doing business as name.
 - TYPE OF BUSINESS – please specify the primary type of work performed by your company and in what industry.
 - PROPERTY LOCATION – the physical address of the business as listed with the post office or used for parcel delivery service.
 - OWNER/CONTACT PERSON – list the person and his/her phone number the Assessor's office should contact with any questions.
 - NAME/ADDRESS (Indicate Any Changes) –Should there be any changes from the name/address on the first page, print the correct name and/or correct mailing address of the business in this section.

SECTION 1 – INVENTORIES/MERCHANDISE

1. In the column labeled "MERCHANDISE" list the inventory at cost for each month the business was operating in the prior year (the report is filed in arrears-meaning the merchandise from the previous year).
2. Continue to list the values of material in your possession at cost for each column – RAW MATERIALS, WORK IN PROGRESS, FINISHED GOODS, and SUPPLIES.
3. Add the values for each category for the month of January and put the total of these values in the TOTAL column. Continue this process for each month.
4. Add your monthly totals that are in the TOTAL column to find your grand total and put this grand total figure in the box next to GRAND TOTAL.
5. Determine your average by dividing the grand total by the total number of months reporting. For example, if you have monthly inventory figures, then divide the GRAND TOTAL by 12; if you have beginning and ending inventory figures, then divide GRAND TOTAL by 2.
6. If you file a Federal Form 1040-Schedule C, Form 1065, or Form 1120, provide a copy with your LAT-5 report.

NOTE: For SECTIONS 2, 3, 4 & 5 below, an itemized depreciation schedule, including fully depreciated assets or expensed items (meaning if asset/item is not listed on the depreciation schedule but still being used in the operation of your business it is required to be listed), should accompany this report. If one is unavailable, a complete listing of all assets used in the operation of your business should be listed individually by describing asset/item, its year of acquisition and its original acquisition cost. If there is not enough space on the actual LAT-5 form you will need to provide the information on a separate sheet of paper to accompany this report form.

SECTION 2 – FURNITURE & FIXTURES

1. In the YEAR OF ACQUISITION column put the year furniture and fixtures (e.g. desk, table, chairs, room décor, shelves, bookcases, etc.) were purchased (including all depreciated assets or expensed items). You may group furniture and fixtures by year of acquisition (it is not necessary to list each item separately).
2. In the ACQUISITION COST column put the original purchase amount of the furniture and fixtures or total per year.

SECTION 3 – MACHINERY AND EQUIPMENT

1. Repeat the instructions for Section 2, this time listing any machinery equipment (which would also include signs, phones, security camera, appliances, mounted equipment on a licensed trailer, etc.).

SECTION 4 – COMPUTER EQUIPMENT/ELECTRONIC EQUIPMENT

1. Repeat the instructions for Section 2, this time listing computer equipment (e.g. monitors, servers, software) and electronic equipment (e.g. fax machine, copier).

SECTION 5 – LEASEHOLD IMPROVEMENTS AND MISCELLANEOUS PROPERTY

1. Repeat the instructions for Section 2, this time listing any leasehold improvements and miscellaneous property. Please describe the leasehold improvements. Leasehold is any improvement made to a building that is being leased or rented by the business owner such as painting, electrical, or any other renovations. Miscellaneous property includes such item as, a portable building, safes, etc.

SECTION 6 – CONSIGNED GOODS, LEASED, LOANED OR RENTED EQUIPMENT, FURNITURE, ETC.

1. List any consigned goods, leased, loaned or rented equipment, furniture, etc. that you use in this business.
2. LESSOR: List the names of the companies from whom you lease, rent or have consigned goods.
3. LESSOR ADDRESS AND PHONE #: List the addresses and phone numbers of the Lessors.
4. CONSIGNED GOODS: State if the item is a consigned good or not.

NOTE: To avoid a dual assessment, all leased equipment and consigned goods must be reported. The owner's complete mailing address and phone number must be included.

SIGNATURE AND VERIFICATION

1. This form **MUST** be signed by both the taxpayer and the prepared when submitted to the Bossier Parish Assessor's Office.

If the form is not completed properly, it will be returned. Should our office not receive a properly completed form your assessment will receive an estimate and penalty, if applicable, (R.S. 47:2330(A)). By failing to file a complete report when it is due you lose the right to appeal the assessment value by the Assessor (R.S. 47:2329).

LAT VERIFICATION FORM INSTRUCTIONS

SIGNATURE AND VERIFICATION

1. This form **MUST** be signed and submitted to the Bossier Parish Assessor's Office when additional materials or documents are submitted with the LAT Form.

If you have any questions please call (318) 965-2213 and ask to speak with a Personal Property Department staff member.