ANNUAL REPORT

2020

Form 1 Due April 15th

MARYLAND STATE DEPARTMENT OF ASSESSMENTS AND TAXATION Taxpayer Services - Charter Division P.O. Box 17052, BALTIMORE, MARYLAND 21297-1052

Type of Business Check one business type below	Dept. ID Prefix	Filing Fee	Type of Business Check one business type below	Dept. ID Prefix	Filing Fee
Domestic Stock Corporation	(D)	\$300	Domestic Limited Liability Company	(W)	\$300
Foreign Stock Corporation	(F)	\$300	Foreign Limited Liability Company	(Z)	\$300
Domestic Non-Stock Corporation	(D)	-0-	Domestic Limited Partnership	(M)	\$300
Foreign Non-Stock Corporation	(F)	-0-	Foreign Limited Partnership	(P)	\$300
Foreign Insurance Corporation	(F)	\$300	Domestic Limited Liability Partnership	(A)	\$300
Foreign Interstate Corporation	(F)	-0-	Foreign Limited Liability Partnership	(E)	\$300
SDAT Certified Family Farm	(A,D,M,W)	\$100	Domestic Statutory Trust	(B)	\$300
Real Estate Investment Trust	(D)	\$300	Foreign Statutory Trust	(S)	\$300

Date Received by Department

SECTION I – ALL BUSINESS ENTITIES COMPLETE	PLEASE CHECK HERE IF THIS IS AN AMENDED REPOR
NAME OF BUSINESS	
MAILING ADDRESS Check here if this is a change of mailing address.	
PLEASE NOTE : This will not change your principal office address. You must file a Resolution to Change a Principal Office Address.	
DEPARTMENT ID NUMBER (Letter Prefix followed by 8-digits)	
FEDERAL EMPLOYER IDENTIFICATION NUMBER (9-digit number assigned by the IRS)	
FEDERAL PRINCIPAL BUSINESS CODE (If known, the 6-digit number on file with the IRS)	
NATURE OF BUSINESS	
TRADING AS NAME	- <u></u> -
EMAIL ADDRESS Include an email to receive important reminders from the Department of A	Assessments and Taxation
SECTION II - ONLY CORPORATE ENTITIES COMPLETE A. Corporate Officers (names and mailing addresses)	
President	
Vice President	
Secretary	
Treasurer	
B. Directors (names only)	
Required information for certain corporations, MD Code	e, Tax Property Article §11-101 - Please see instructions
*Total number of directors	*Total number of female directors

Department ID#	2020 Form 1
SECTION III – ALL BUSINESS ENTITIES COMPLETE	Annual Report
A. Does the business own, lease, or use personal property located in Maryland? If you answered yes, but your entity* is exempt, or has been granted an exemption from business personal property assessment by the Department. DO NOT complete the Personal Property Tax Return.	[] Yes [] No
For religious groups, charitable or educational organizations, the form SD-1 is optional.	
B. Does the business require or maintain a trader's (retail sales) or other license with a local unit of government? Example: Clerk of the Court or Liquor Board	[] Yes [] No
C. Did the business have gross sales in Maryland? If yes, \$total or amount of business transacted in MD.	[] Yes [] No
D. Did the entity dispose, sell, or transfer ALL of its business personal property prior to January 1? If you answered yes, please complete form SD-1. Do not complete the Personal Property Tax Return.	[] Yes [] No
If you answer " Yes " to questions A or B in Section III, and are not exempt as described in question A. please cor Business Personal Property Tax Return, (Form 1 Sections V through VII) and return it, along with this Annual Re Department. The Personal Property Tax Return and important instructions can be found online at https://dat.maryland.gov/Pages/sdatforms.aspx#BPP	nplete the port to the
If you answer "No" to the questions A and B in Section III, above you DO NOT need to complete the Personal Pr	operty Tax
Return. Please complete Section IV below, sign and return this Annual Report to the Department:	
Department of Assessments and Taxation, Charter Division Box 17052, Baltimore, Maryland 21297-1052	
Questions? Contact Charter at 410-767-1340 • 888-246-5941 within Maryland • Email: sdat.charterhelp@	gmaryland.gov
SECTION IV – ALL BUSINESS ENTITIES COMPLETE	
By signing this form below, you declare, under the penalty of perjury, and pursuant to Tax-Property Artic Annotated Code of Maryland, that this Annual Report, including any accompanying forms, schedules, as been examined by you and, to the best of your knowledge and belief, is a true, correct, and complete All Entity listed in Section I.	nd/or statements, has
A. Corporate Officer or Principal of Entity:	
PRINT NAME	
X SIGNATUREDATE	
MAILING ADDRESS	
EMAIL ADDRESSPHONE NUMBER	
B. Firm or Individual, other than taxpayer, preparing this Annual Report/Personal Property Tax Re	turn:
PRINT NAME	
X SIGNATURE DATE	
MAILING ADDRESS_	
EMAIL ADDRESSPHONE NUMBER	

PLEASE BE SURE TO SIGN THIS ANNUAL REPORT TO AVOID REJECTION BY THE DEPARTMENT!

BUSINESS PERSONAL PROPERTY TAX RETURN

MARYLAND STATE DEPARTMENT OF ASSESSMENTS AND TAXATION, TAXPAYER SERVICES DIVISION P.O. BOX 17052 Baltimore, Maryland 21297-1052; 410-767-1170 • 888-246-5941 within Maryland

2020 FORM 1 Due April 15th

Date Received by Department

NOTE: BEFORE FILLING OUT THIS PERSONAL PROPERTY RETURN MAKE CERTAIN YOU HAVE COMPLETED THE ANNUAL REPORT. A copy of the Annual Report form can be found online at https://dat.maryland.gov/Pages/sdatforms.aspx#BPP

SECTION V - ALL BUSINESS ENTITIES COMPLETE	
NAME OF BUSINESS	
MD DEPARTMENT ID NUMBER(Letter prefix and 8 digits *Required to ensure the correct Departmental account is credited	s)*
A. Mailing address	
B. Email address	
C. Is any business conducted in Maryland? [] Yes [] No	
D. Date began:	
E. Nature of business: F. If business operates on a fiscal year: Start date	
G. Total Gross Sales, or amount of business transacted during prior year	in Maryland: \$
If you report Total Gross Sales in question G of Section V, but do not repexplain how business is conducted without using personal property. If the business entity, please provide the name and address of that business e	e business is using personal property of another entity below.
NAME OF THE OTHER BUSINESS	
MD DEPT. ID OF THE OTHER BUSINESS	
LOCATION OF THE OTHER BUSINESS	
REMARKS:	

BUSINESS	JSINESS PERSONAL PROPERTY TAX RETURN OF DEPT ID#							2020 Form 1	
SECTION V	I - ALL BUSINE	SS ENTITIES	COMPLETE				L		
Show the exa and street add more jurisdict 5 or more loca	E THE ACTUAL ct physical location dress (PO Boxes ions, provide a brations, please included there if this is a	on(s) of all perso are not accept eakdown for eac lude the informa	nal property or able). This ass th location by or tion per location	wned and used sures proper dis completing add	in the State of stribution of assitional copies o	Maryland, inclusessments. If prof Section VI (Pa	ding county operty is loc iges 2 and 3	ated in two or	
		Address	s, include Cit	y or Town, Co	ounty and Zip	Code			
	ovide the origi not used for m					xtures, tools,	machinery	/ and/or	
ear Acquired	А	В	С	D	E	F	G	Total Cost	
2019								0	
2018								0	
2017								0	
2016								0	
2015								0	
2014								0	
2013								0	
2012 & Prior								0	
Totals	0	0	0	q	0	0		Q 0	
2. Commer Note: Busii	perty identified in cial Inventory nesses that ne	– Furnish am eed a Trader's	nounts from s License (F	ı your most	recent Mary	land Income	Tax Retui	'n.	
Ope	ning Inventory			Amount \$					
Clos	sing Inventory da	ate							
3. Supplies	Average Cos	t \$							
4. Manufac	turing and/or I	Research and	l Developm	ent (R&D) A	vg. Monthly	Inventory \$			

	SINESS PERSONAL PROPERTY RETURN OF DEPT ID#						2020 Form 1	
te the origi ler IRS rule anufacturii assessme maryland.	inal cost of es. If this bu ng / R&D e ent notice fo gov for an a	the property by yeusiness is engaged xemption application or the taxable year application and ad	used for manufacture ar of acquisition. Including the manufacturing / From must be submitted that includes the maditional information. It is should be included to	ude all fully depre R&D, and is claim d by September 1 inufacturing / R&E f the property is lo	eciated propering such an exor within 6 monoperty. Visposted in a tax	ty and proper kemption for to onths after the sit the website able jurisdicti	he first time, e date of the on, a	
Year cquired	А	С	D Year Acquire	Δ	С	D		
2019			201	5				
2018			2014	4				
2017			2013	3				
2016			2012 & p	orior				
scribe Pro	perty in C	& D above:				Total C	ost	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					\$		
cial mobil			ration and/or Unregi er plates) and unregi					
cial mobil	le equipmo				nould be repor			
cial mobil ructions	le equipmo	ent, and transport	er plates) and unregi	stered vehicles sh	nould be repor	ted here. See	specific	
ructions Year Ac	equired	ent, and transport	er plates) and unregis	stered vehicles sh	nould be repor		e specific	
Year Ac 201	equired 19 18	ent, and transport	Year Acquired	stered vehicles sh Original Co	nould be repor	ted here. See	e specific	
Year Ac 201 201 Son-farmir Book Value	equired 19 18 ng livestocue \$	Original Cost	Year Acquired 2017 2016 & prior	Original Co	st	Total Co	e specific	
Year Ac 201 201 Non-farmir Book Valu Other pers ile separat	equired 19 18 Ing livestocue \$ Instance of the schedule of the	Original Cost Criginal Cost Ck: erty: e giving a description thers and used o	Year Acquired 2017 2016 & prior Market Valu on of property, original or held by the busine and addresses of own	Original Co	te of acquisition	Total Co	e specific est	

schedules please see Form 1 instructions at https//dat.maryland.gov

Total Cost

\$

SECTION VII - ALL BUSINESS ENTITIES COMPLETE

A. If this is the business' first Maryland personal property return, state whether or not it succeeds an established business and give name:
B. Does the business own any fully depreciated and/or expensed personal property located in Maryland? [] Yes [] No If yes, is that property reported on this return? [] Yes [] No
C. If the hyginese transfers greats in arout of Maryland, or diaposes of coasts (\$200,000 or more or 50% of the total

C. If the business transfers assets in or out of Maryland, or disposes of assets (\$200,000 or more or 50% of the total property) during the prior year, complete Form SD-1. For additional details see Form 1 instructions at https://dat.maryland.gov

X Taxpayer's Signature/Date

Print Name

Phone Number & E-mail Address

X Preparer's Signature/Date

Phone Number & Email Address

Name and Address of Preparer

Mail the completed return to: DEPARTMENT OF ASSESSMENTS AND TAXATION Personal Property Division P.O. BOX 17052 Baltimore, Maryland 21297-1052 If you have questions contact the Personal Property Division

Telephone: 410-767-1170,

Toll free within Maryland 888-246-5941 Email: SDAT.PersProp@Maryland.gov

DEPRECIATION RATE CHART FOR PERSONAL PROPERTY

STANDARD DEPRECIATION RATE

Category A: 10% per annum*

All property not specifically listed below.

SPECIAL DEPRECIATION RATES

(The rates below apply only to the items specifically listed. Use Category A for other assets.)

Category B: 20% per annum*

Mainframe computers originally costing \$500,000 or more.

Category C: 20% per annum*

Autos (unlicensed), bowling alley equipment, brain scanners, carwash equipment, contractor's heavy equipment (tractors, bulldozers), fax machines, hotel, motel, hospital and nursing home furniture and fixtures (room and lobby), MRI equipment, mobile telephones, model home furnishings, music boxes, outdoor Christmas decorations, outdoor theatre equipment, photocopy equipment, radio and T.V. transmitting equipment, rental pagers, rental soda fountain equipment, self-service laundry equipment, stevedore equipment, theatre seats, trucks (unlicensed), vending machines, x-ray equipment.

Category D: 30% per annum**

Data processing equipment and other computer based equipment, canned software.

Category E: 33 11/3% per annum*

Blinds, carpets, drapes, shades. The following applies to equipment rental companies only: rental stereo and radio equipment, rental televisions, rental video cassette recorders and rental DVDs and video tapes.

Category F: 50% per annum*

Pinball machines, rental tuxedos, rental uniforms, video games.

Category G: 5% per annum*

Boats, ships, vessels, (over 100 feet).

Long-lived assets

Property determined by the Department to have an expected life in excess of 10 years at the time of acquisition shall be depreciated at an annual rate as determined by the Department.

- * Subject to a minimum assessment of 25% of the original cost.
- ** Subject to a minimum assessment of 10% of the original cost.

