



**AE-2**  
State Form 54085  
(R5 / 7-21)

Indiana Department of Revenue  
**Annual Report of Exempt Aircraft Usage**

Required by IC 6-2.5-5-8(e)

**Mail To:** Indiana Department of Revenue  
Special Tax – Aeronautics  
P.O. Box 644  
Indianapolis, IN 46206-0644  
Telephone (317) 615-2710  
Fax (317) 615-2691

Due annually 30 days after the end of the month in which  
the aircraft was originally placed in service for leasing.

FAA N Number	Make and Model	Aircraft Serial Number	Purchase Price
Base Airport		Manufacture Year	

**Registered Owner of Aircraft**

Name	Federal ID Number / Indiana Taxpayer ID Number		
Street Address	Telephone Number		
City	State	ZIP Code	

**Organization Aircraft Leased to:**

Name	Federal ID Number / Indiana Taxpayer ID Number		
Street Address	Telephone Number		
City	State	ZIP Code	

Month/Year of Use	Total Hours Flown Per Month	Total Lease / Rental Revenue	Total Sales Tax Remitted
January/		\$	\$
February/		\$	\$
March/		\$	\$
April/		\$	\$
May/		\$	\$
June/		\$	\$
July/		\$	\$
August/		\$	\$
September/		\$	\$
October/		\$	\$
November/		\$	\$
December/		\$	\$

Annual Hours Flown	Annual Lease / Rental Hours	Annual Hours of Use by Owners
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**I certify under the penalties of perjury that all of this information is true and correct to the best of my knowledge.**

Signature of Authorized Person	Date
Printed Name of Authorized Person	Title