



**SCHEDULE OF DEDUCTION FROM ASSESSED VALUATION
PERSONAL PROPERTY IN CERTIFIED TECHNOLOGY PARK**

State Form 54483 (R6 / 11-16)

Prescribed by the Department of Local Government Finance

January 1, 2017
FORM 103-CTP

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9.

INSTRUCTIONS:

1. In order to qualify for this deduction, entities must meet the requirements of IC 6-1.1-12.7.
2. Entities should attach this schedule to the Form 103-Long and file with the proper assessing official by May 15 or the extended due date. A deduction that is claimed on a return that is not timely filed will not be allowed for that assessment date, but can qualify for future years if properly claimed.
3. This schedule must be filed for each year the deduction is being claimed.
4. Qualified personal property is defined in IC 6-1.1-12.7-3. It will be assessed for the first time after December 31, 2010 and does not include that which is primarily used for administrative purposes such as office communications, accounting, record keeping and human resources. It also cannot be a part of the assessed value for which a personal property tax allocation has been made for the payment on bonds or lease rentals under IC 5-28-26, IC 6-1.1-39, IC 8-22-3.5, IC 36-7-14, IC 36-7-14.5, IC 36-7-15.1, IC 36-7-30, IC 36-7-30.5, or IC 36-7-32.
5. For any new acquisitions included herein since the last assessment date, attach a list of the newly included equipment on Form 103-CTP/EL.
6. If the County Assessor changes the amount of the deduction claimed, the taxpayer may appeal that change under IC 6-1.1-15.

| SECTION 1 | | OWNER INFORMATION | |
|--|----------|--|---------------------------------------|
| Name of owner of the qualified personal property | | Name of contact person | |
| Address where property is located | | E-mail address of contact person | |
| County | Township | Taxing District | Telephone number () |
| SECTION 2 | | CERTIFIED TECHNOLOGY PARK INFORMATION | |
| Name of body designating the Certified Technology Park | | Ordinance number | Length of deduction (from 2-10 years) |
| Ordinance adoption date (month, day, year) | | Date designation will terminate (month, day, year) | |

Attach ordinance to this schedule for the first year of claiming the deduction.

| SECTION 3 | INFORMATION ON THE QUALIFIED PERSONAL PROPERTY |
|--|--|
| Description of the qualified personal property used to conduct a high technology activity (use additional sheets if necessary) | |

- Is this qualified personal property located within a certified technology park? Yes No
- Is this qualified personal property primarily used to conduct a high technology activity as defined in IC 36-7-32-7? Yes No
- Is an abnormal obsolescence adjustment claimed on the Form 103-Long? Yes No

NOTE: If an abnormal obsolescence adjustment is claimed, an applicable adjustment must be taken on this deduction. Show the calculations on the Form 106.

| | |
|--|----|
| Deduction claimed from page 2 of this schedule | \$ |
|--|----|

| SECTION 4 | | | TAXPAYER CERTIFICATION |
|--|-------|--------------------------------|--|
| | | | I hereby certify that the representations in this schedule are true. |
| Signature of authorized representative | Title | Date signed (month, day, year) | |

| SECTION 5 | | | COUNTY ASSESSOR DETERMINATION |
|------------------------------|--------------------------|--------------------------------|--|
| | | | I hereby certify that I have made the following determination on this claim for deduction. |
| Signature of County Assessor | Approved Deduction \$ | Date signed (month, day, year) | |

INSTRUCTIONS FOR COUNTY ASSESSOR:

1. Forward a copy of Page 1 of this form to the County Auditor when it is filed. NOTE: Page 2 is confidential and is not forwarded.
2. Review this claim for deduction and make a determination before the January 1 that next succeeds the assessment date for which the deduction is claimed.
3. If the deduction claimed is changed or denied, the County Assessor shall notify the taxpayer of the change on a Form 113/PP.
4. Once a determination is made and Section 5 is completed, provide the County Auditor with a copy of Page 1 of this form.

QUALIFIED PERSONAL PROPERTY POOLING SCHEDULE

**THIS PAGE CONTAINS INFORMATION
CONFIDENTIAL PURSUANT TO IC 6-1.1-35-9**

POOL NUMBER 1 (1 TO 4 YEAR LIFE)

| | Form 103-Long, Sched. A Column C, Adjusted Cost | TTV % | True Tax Value | Deduction | | Deduction Claimed |
|-----|--|-------|----------------|-----------|---------|-------------------|
| | | | | Year | Percent | |
| 13 | 1-2-16 to 1-1-17 | 65% | | 1 | 100% | |
| 14 | 3-2-15 to 1-1-16 | 50% | | 2 | 100% | |
| 15 | 3-2-14 to 3-1-15 | 35% | | 3 | 100% | |
| 16A | 3-2-13 to 3-1-14 | 20% | | 4 | 100% | |
| 16B | 3-2-12 to 3-1-13 | 20% | | 5 | 100% | |
| 16C | 3-2-11 to 3-1-12 | 20% | | 6 | 100% | |
| 16D | 3-2-10 to 3-1-11 | 20% | | 7 | 100% | |
| 16E | 3-2-09 to 3-1-10 | 20% | | 8 | 100% | |
| 16F | 3-2-08 to 3-1-09 | 20% | | 9 | 100% | |
| 16G | 3-2-07 to 3-1-08 | 20% | | 10 | 100% | |
| 17 | TOTAL POOL NUMBER 1 | | \$ | | | \$ |

POOL NUMBER 2 (5 TO 8 YEAR LIFE)

| | Form 103-Long, Sched. A Column C, Adjusted Cost | TTV % | True Tax Value | Deduction | | Deduction Claimed |
|-----|--|-------|----------------|-----------|---------|-------------------|
| | | | | Year | Percent | |
| 18 | 1-2-16 to 1-1-17 | 40% | | 1 | 100% | |
| 19 | 3-2-15 to 1-1-16 | 56% | | 2 | 100% | |
| 20 | 3-2-14 to 3-1-15 | 42% | | 3 | 100% | |
| 21 | 3-2-13 to 3-1-14 | 32% | | 4 | 100% | |
| 22 | 3-2-12 to 3-1-13 | 24% | | 5 | 100% | |
| 23 | 3-2-11 to 3-1-12 | 18% | | 6 | 100% | |
| 24A | 3-2-10 to 3-1-11 | 15% | | 7 | 100% | |
| 24B | 3-2-09 to 3-1-10 | 15% | | 8 | 100% | |
| 24C | 3-2-08 to 3-1-09 | 15% | | 9 | 100% | |
| 24D | 3-2-07 to 3-1-08 | 15% | | 10 | 100% | |
| 25 | TOTAL POOL NUMBER 2 | | \$ | | | \$ |

POOL NUMBER 3 (9 TO 12 YEAR LIFE)

| | Form 103-Long, Sched. A Column C, Adjusted Cost | TTV % | True Tax Value | Deduction | | Deduction Claimed |
|----|--|-------|----------------|-----------|---------|-------------------|
| | | | | Year | Percent | |
| 26 | 1-2-16 to 1-1-17 | 40% | | 1 | 100% | |
| 27 | 3-2-15 to 1-1-16 | 60% | | 2 | 100% | |
| 28 | 3-2-14 to 3-1-15 | 55% | | 3 | 100% | |
| 29 | 3-2-13 to 3-1-14 | 45% | | 4 | 100% | |
| 30 | 3-2-12 to 3-1-13 | 37% | | 5 | 100% | |
| 31 | 3-2-11 to 3-1-12 | 30% | | 6 | 100% | |
| 32 | 3-2-10 to 3-1-11 | 25% | | 7 | 100% | |
| 33 | 3-2-09 to 3-1-10 | 20% | | 8 | 100% | |
| 34 | 3-2-08 to 3-1-09 | 16% | | 9 | 100% | |
| 35 | 3-2-07 to 3-1-08 | 12% | | 10 | 100% | |
| 37 | TOTAL POOL NUMBER 3 | | \$ | | | \$ |

POOL NUMBER 4 (13 YEAR AND LONGER LIVES)

| | Form 103-Long, Sched. A Column C, Adjusted Cost | TTV % | True Tax Value | Deduction | | Deduction Claimed |
|----|--|-------|----------------|-----------|---------|-------------------|
| | | | | Year | Percent | |
| 38 | 1-2-16 to 1-1-17 | 40% | | 1 | 100% | |
| 39 | 3-2-15 to 1-1-16 | 60% | | 2 | 100% | |
| 40 | 3-2-14 to 3-1-15 | 63% | | 3 | 100% | |
| 41 | 3-2-13 to 3-1-14 | 54% | | 4 | 100% | |
| 42 | 3-2-12 to 3-1-13 | 46% | | 5 | 100% | |
| 43 | 3-2-11 to 3-1-12 | 40% | | 6 | 100% | |
| 44 | 3-2-10 to 3-1-11 | 34% | | 7 | 100% | |
| 45 | 3-2-09 to 3-1-10 | 29% | | 8 | 100% | |
| 46 | 3-2-08 to 3-1-09 | 25% | | 9 | 100% | |
| 47 | 3-2-07 to 3-1-08 | 21% | | 10 | 100% | |
| 51 | TOTAL POOL NUMBER 4 | | \$ | | | \$ |

TOTAL DEDUCTION CLAIMED (carry the amount shown to Section 3 and to the Summary section of the Form 103-Long) \$

Line numbers reference pooling schedule line numbers on the Form 103-Long - added and deleted numbers accommodate the ten (10) year deduction limitation.