

# 2023 Annual Return to Smithfield, R.I. Assessor

The Law is Mandatory – A Return Must Be Filed (R.I. Gen Laws § 44-5-15, as amended)  
 Mail This Form To: Assessor's Office, 64 Farnum Pike, Smithfield, RI 02917

## Statement of Valuation as of 12/31/2022

*Please enter name and address  
 in the box to the left. This will be  
 used for tax bill mailing.*

Account Number \_\_\_\_\_

For your convenience, we have supplied you with this form for the declaration of taxable property located in Rhode Island. According to The General Laws of Rhode Island, taxable property must be declared to the Assessor between **DECEMBER 31, 2022 and JANUARY 31, 2023**. If a taxpayer is unable to make such declaration within the prescribed time, they may submit written notice, prior to **JANUARY 31, 2023**, of intention to submit declaration by **MARCH 15, 2023**. Failure to file a true and full account, within the prescribed time, eliminates the right to appeal. **No amended returns will be accepted after MARCH 15, 2023.**

**STATE LAW REQUIRES THE FILING OF THIS DECLARATION.  
 FAILURE TO DO SO MAY RESULT IN AN INCREASED ASSESSMENT.  
 THIS FORM IS NOT SUBJECT TO PUBLIC INSPECTION.  
 YOU MAY EMAIL THIS FORM TO: [deputyassessor@smithfieldri.com](mailto:deputyassessor@smithfieldri.com)**

2022  
Value

I, \_\_\_\_\_ My Residence: \_\_\_\_\_  
 (Name) \_\_\_\_\_  
 \_\_\_\_\_ My Email: \_\_\_\_\_  
 (Title) am responsible for the \_\_\_\_\_  
 information contained within this form. My Daytime Phone Number: \_\_\_\_\_

2023  
Value

**Give a General Description of Your Business Operation:** NAICS # (if known) \_\_\_\_\_

Manufacturing  Wholesale  Retail  Home Based  Other: \_\_\_\_\_

Date Business Began: \_\_\_\_\_

Number of Employees as of December 31, 2022: \_\_\_\_\_

Square Feet Occupied: \_\_\_\_\_

Do you own or lease the space occupied? \_\_\_\_\_

Monthly Rent: \_\_\_\_\_

**Ownership:**  Corporation  Co-Partnership  Individual  Other \_\_\_\_\_

Owner Name(s): \_\_\_\_\_

Business Name / DBA: \_\_\_\_\_

Business Location: \_\_\_\_\_

Adjustment

### SECTION 1 REAL ESTATE OWNED

If you need additional space, attach addendum.

Location & Description	Parcel ID (Plat/Lot)	Claimed Full Value

**SECTION 2 SHORT LIFE - COMPUTER EQUIPMENT ONLY**

Please list all short life (PC computer equipment) separately in this section. **Manufacturers** include all equipment **NOT** used directly in the actual manufacturing process. Attach a separate sheet if necessary. *List all leased / rented equipment in section 8.*

Calendar Year Purchased	Acquisition Cost	Depreciation Rate	Depreciated Value	Assessor's Use Only
2022		5%		
2021		20%		
2020		40%		
2019		70%		
2018 & PRIOR		80%		
<b>TOTALS</b>				

**SECTION 3 TANGIBLE PERSONAL PROPERTY**

List by year the total acquisition cost for all furniture, fixtures, equipment, signs and **unregistered vehicles** owned by you that are used in conducting the operations of any retail, wholesale, service, contracting, professional or other type of business that have an economic life between 6 and 12 years.

*Manufacturers should only report furniture, fixtures and equipment that are NOT used directly in the actual manufacturing process.*

**IMPORTANT:** Be sure to declare all acquisitions still in use, even though fully depreciated on your books. *List all leased / rented equipment in Section 8. Be sure to list all computer equipment separately in Section 2.*

Calendar Year Purchased	Acquisition Cost	Depreciation Rate	Depreciated Value	Assessor's Use Only
2022		5%		
2021		10%		
2020		20%		
2019		30%		
2018		40%		
2017		50%		
2016		60%		
2015 & PRIOR		70%		
<b>TOTALS</b>				

**SECTION 4 LONG LIFE ASSETS**

List by year the total acquisition cost for assets that have an economic life of 13 years or more. Manufacturers should only report assets that are NOT used directly in the actual manufacturing process. **IMPORTANT:** Be sure to declare all acquisitions still in use, even though fully depreciated on your books. *List all leased / rented equipment in section 8. DO NOT duplicate assets reported in Sections 2 and 3.*

Calendar Year Purchased	Acquisition Cost	Depreciation Rate	Depreciated Value	Assessor's Use Only
2022		5%		
2021		10%		
2020		15%		
2019		20%		
2018		25%		
2017		30%		
2016		35%		
2015		40%		
2014		45%		
2013		50%		
2012		55%		
2011		60%		
2010		65%		
2009 & PRIOR		70%		
<b>TOTALS</b>				

**SECTION 5 BUILDINGS & IMPROVEMENTS ON LEASED LAND**

Property Address: \_\_\_\_\_ PLAT \_\_\_\_\_ LOT \_\_\_\_\_

Property Used For: \_\_\_\_\_ CLAIMED FULL VALUE:

Name of Landowner: \_\_\_\_\_ \$ \_\_\_\_\_

**SECTION 6 SUPPLIES**

Average supplies at cost: \_\_\_\_\_ (do not include inventory)

**SECTION 7 MANUFACTURER INVENTORIES WHICH YOU CLAIM EXEMPT**

*- INVENTORY IS NOT TAXABLE IN RHODE ISLAND -*

**SECTION 8 LEASED / RENTED / CONSIGNED TANGIBLE PERSONAL PROPERTY**

This Section to be used by all businesses **including manufacturers**. If you need additional space, attach addendum.

Owner / Address	Item Description	Cost New	Lease Term	Monthly Rent	Lease #

**SECTION 9 TANGIBLE PROPERTY LEASED OR RENTED TO OTHERS**

On December 31, 2022, if you owned any items of tangible personal property, other than registered motor vehicles, which you leased or rented to others, **attach a separate schedule to this form and report all of the following information for each item:**

Lessee’s name and mailing address, location of property, description of property, your acquisition cost, date of acquisition or installation, date of manufacture, monthly rental or lease income, and dates of lease.

**SECTION 10 LEASEHOLD IMPROVEMENTS**

Please list all fixtures, equipment, etc. owned by you and attached to or used in real estate owned by others and not reported elsewhere. Leasehold improvements include, but are not limited to, wall paneling, carpeting, tile on wall and floors, ceilings, electrical and plumbing fixtures, partitions, building additions and the like.

Calendar Year Purchased	Improvement Cost	Depreciation Rate	Depreciated Value	Assessor’s Use Only
2022		5%		
2021		10%		
2020		20%		
2019		30%		
2018		40%		
2017		50%		
2016		60%		
2015 & PRIOR		70%		
<b>TOTALS</b>				

**SECTION 11 ATTESTATION**

I do hereby certify and declare that, to the best of my knowledge and belief, the foregoing is a true and complete list of all real estate and personal property owned by said Corporation, Co-Partnership or Individual in or ratable in said Town on the said thirty-first day of December, 2022 at 12 o'clock midnight, Eastern Standard Time; that the value placed against each item thereof is the full and fair cash value thereof at said time.

**Please  
Sign  
Here**

*Be sure to sign  
in the  
presence of a  
notary.*

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature

Title

Date

Telephone #

On \_\_\_\_\_, \_\_\_\_\_ personally appeared before me and made oath that the foregoing account, by him/her signed and exhibited, contains to the best of his/her knowledge and belief, a true and full account and valuation of all the ratable estate owned or possessed by said corporation, co-partnership, or individual.

\_\_\_\_\_  
Signature of Notary Public and Date

My Commission Expires: \_\_\_\_\_

**If you are no longer in business, please provide the date the  
business closed and the current location of the assets.  
*Failure to respond by January 31, 2023 will result in a 2023 Tax Bill.***

\_\_\_\_\_  
Date Closed

\_\_\_\_\_  
Location of Assets

**Leasing Companies: Please provide disposition list.  
If you no longer hold the leases, state where the equipment went.  
Examples: sold to lessee, returned to you, other, etc.**

**Thank you**

If you have any questions or if you need any assistance with this form,  
please feel free to call the Assessor's Office at 401-233-1014  
or email us at [deputyassessor@SmithfieldRI.com](mailto:deputyassessor@SmithfieldRI.com).