

Form of notice for Fiscal Year 2025 under the provisions of General Laws, chapter 58, Section 5.

The Commonwealth of Massachusetts

# ASSESSORS' NOTICE

In accordance with provisions of General Laws, chapter 59, Section 29  
TO ALL PERSONS SUBJECT TO TAXATION IN THE CITY OF

## NEWBURYPORT

### ON OR BEFORE MARCH 1, 2024

All individuals, partnerships, associations or trusts, and corporations, residents of or owning property located in NEWBURYPORT notified that they are required to bring in to the local BOARD OF ASSESSORS in the form prescribed by the COMMISSIONER OF REVENUE, True Lists of Property.

ALL TAXABLE TANGIBLE PERSONAL PROPERTY  
SHALL BE LISTED IN THE FOLLOWING FORMS:

FORM 2 - FOR ALL PERSONAL PROPERTY OF INDIVIDUALS, PARTNERSHIPS, TRUSTS AND CORPORATIONS DOING BUSINESS IN THE CITY OF NEWBURYPORT

FORM 2HF - FOR ALL HOUSEHOLD FURNISHINGS AND EFFECTS OF INDIVIDUALS IF KEPT AT A PLACE OTHER THAN THEIR DOMICLE

FORM 2-504-E - FOR ALL ELECTRIC DISTRIBUTION & TRANSMISSION UTILITY COMPANIES

FORM 2-504-G - FOR ALL GAS DISTRIBUTION AND TRANSMISSION UTILITY COMPANIES

FORM 3(ABC) - FOR ALL REAL AND PERSONAL PROPERTY HELD FOR LITERARY, TEMPERANCE, BENEVOLENT, CHARITABLE OR SCIENTIFIC PURPOSES ON JANUARY 1, 2024, or at the election of the corporation, on the last day of its fiscal year last preceding JANUARY 1, 2024, such lists to include the amount of RECEIPTS AND EXPENDITURES FOR SAID PURPOSES during the year of the return.

FRATERNAL BENEFITS CORPORATIONS which make returns to the Commissioner of Insurance under General Laws, Chapter 176, Section 38 are not required to file this list.

BOARD OF ASSESSORS  
Newburyport



JANUARY 1, 2024

FORMS MAY BE OBTAINED AT THE OFFICE OF THE BOARD OF ASSESSORS OR WILL BE MAILED/EMAILED BY THE ASSESSORS OFFICE UPON REQUEST. FORMS ARE ALSO AVAILABLE ON LINE [www.cityofnewburyport.com](http://www.cityofnewburyport.com)

Mail: Assessor's Office, 60 Pleasant Street, Newburyport, MA 01950, [assessor@cityofnewburyport.com](mailto:assessor@cityofnewburyport.com)