



Participating Manufacturer’s Product

Schedule of Cigarettes and  
Roll-Your-Own Sold Outside Louisiana

PM

NON-LOUISIANA SALES

This schedule is due with the monthly tax return during which the cigarettes or “roll-your-own” were reported.

|                  |  |
|------------------|--|
| Filing Period    |  |
| Contact Person   |  |
| Telephone Number |  |
| FEIN             |  |

|                |      |         |
|----------------|------|---------|
| Account Number | Name | Address |
|----------------|------|---------|

**Instructions** are on the reverse side and are available on the Louisiana Department of Revenue’s website under Forms. The information on this schedule is required to comply with Louisiana laws relating to the Master Settlement Agreement (“MSA”). You must file this schedule even if you report zero amounts. Complete this schedule and attach the original to your monthly Tobacco Tax Return (Form R-5604), and forward a copy of this schedule, along with a computer printout of the brands and quantities of all sales of PM cigarettes and roll-your-own to a jurisdiction other than Louisiana that occurred in the calendar month being reported, to the Department of Justice, Tobacco Section, P.O. Box 94005, Baton Rouge, LA 70804-9005.

| A                                     | B                                        | C     | D                        |                          | E                              | F                       | G                              |     | H                     |             | I                              |             | J                         |
|---------------------------------------|------------------------------------------|-------|--------------------------|--------------------------|--------------------------------|-------------------------|--------------------------------|-----|-----------------------|-------------|--------------------------------|-------------|---------------------------|
| Product Brand Name                    | Tax Value of Stamps Placed on Cigarettes | State | Stamp Affixed            |                          | Number of Sticks of Cigarettes | Ounces of Roll-Your-Own | Dollar Amount of Roll-Your-Own |     | Vendor Purchased From |             | Manufacturer or First Importer |             | Product Country of Origin |
|                                       |                                          |       | Yes                      | No*                      |                                |                         |                                |     | Name                  | City, State | Name                           | City, State |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
|                                       |                                          | .00   | <input type="checkbox"/> | <input type="checkbox"/> |                                |                         |                                | .00 |                       |             |                                |             |                           |
| Subtotal (if additional sheet needed) |                                          | .00   |                          |                          |                                |                         |                                | .00 |                       |             |                                |             |                           |
| Total                                 |                                          | .00   |                          |                          |                                |                         |                                | .00 |                       |             |                                |             |                           |

\*If “No” was indicated in Column D above, please provide an explanation on a separate sheet to detail the reason why no tax stamp was affixed to the product.

I swear, under penalty of perjury, that the above information is true and correct. By signing below, I acknowledge that I am the individual who prepared this form and have the authorization to submit such on behalf of the aforementioned entity.

|                       |                        |
|-----------------------|------------------------|
| Signature of Preparer | Print Name of Preparer |
| Title of Preparer     | Date (mm/dd/yyyy)      |

General Information

The information on this schedule is required to comply with Louisiana laws relating to the Master Settlement Agreement (“MSA”). Under Louisiana law (LSA-R.S. 13:5061 et seq. and LSA-R.S. 13:5071 et seq.), information about cigarettes and loose-leaf tobacco suitable for making cigarettes (“roll-your-own”) reported on the Tobacco Tax Return (Form R-5604) must be itemized on this schedule. Separate schedules must be completed for Participating Manufacturers and Non-Participating Manufacturers. A current list of cigarette and roll-your-own tobacco manufacturers, approved for sale in Louisiana, is maintained on the Louisiana Attorney General’s website <http://ladoj.ag.state.la.us> or [www.ag.state.la.us](http://www.ag.state.la.us), and may be viewed by clicking on the link entitled “Tobacco Unit” followed by the “Approved Manufacturers and Brands” link. You must file this schedule even if you report zero amounts. Complete this schedule and attach the original to your monthly Tobacco Tax Return (Form R-5604) and forward a copy of this schedule, along with a computer printout of the brands and quantities of all sales of PM cigarettes and roll-your-own to a jurisdiction other than Louisiana that occurred in the calendar month being reported, to the Department of Justice, Tobacco Section, P.O. Box 94005, Baton Rouge, LA 70804-9005.

This schedule is to be completed for all cigarettes and Roll-Your-Own (RYO) products manufactured by a Participating Manufacturer (PM) and were invoiced to a jurisdiction other than Louisiana, regardless of whether a tax stamp was affixed on the product. Please note that only PM product actually sold during the calendar month for sale shall be included on this schedule. Product remaining in the dealer’s inventory as of the end of the reporting month shall NOT be reported on this schedule. Provide an explanation if no tax stamp was affixed on any product included in this schedule. This schedule shall be completed only by those Louisiana licensed wholesale dealers holding a stamping agent designation that are either domiciled in Louisiana or have a warehouse or other place of business located in Louisiana AND affix tax stamps in both Louisiana and other tax jurisdictions.

Definitions

For the purposes of this schedule:

|                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| “Importer”                  | means any person in the United States to whom non-tax paid cigarettes manufactured in a foreign country are shipped or consigned, any person who removes cigarettes for sale or consumption in the United States from a customs-bonded manufacturing warehouse, and any person who smuggles or otherwise unlawfully brings cigarettes into the United States.                                                                                                                                                                                                                                                                                                                                                                             |
| “Inventory”                 | means the cigarettes, whether stamped or unstamped, and RYO acquired, possessed, or located on hand in the warehouse of the wholesale dealer as of the last day of the month for which the report or schedule is being completed and does not include cigarettes or RYO purchased or invoiced during the month reported.                                                                                                                                                                                                                                                                                                                                                                                                                  |
| “Invoiced”                  | means an itemized bill for goods SOLD per month, containing individual prices, the total charge, and the terms of sale.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| “Product Country of Origin” | means the country of origin listed on the packaging of the cigarettes or RYO being reported.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| “Purchase”                  | means the total amount of cigarettes acquired per month in any manner, for any consideration and includes transporting or receiving product in connection with a purchase.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| “Sale or sell”              | means any transfer, exchange or barter in any manner or by any means for any consideration. The term includes distributing or shipping product in connection with a sale. References to a sale “in” or “into” a state refer to the state of the destination point of the product in the sale, without regard to where title was transferred. References to sale “from” a state refer to the sale of cigarettes that are located in that state to the destination in question without regard to where title was transferred.                                                                                                                                                                                                               |
| “Manufacturer”              | means an entity that directly, and not exclusively through any affiliate: <div><div>(a) Manufacturers cigarettes anywhere that the manufacturer intends to be sold in the United States, including cigarettes intended to be sold in the US through an importer, except if the importer is an original PM as defined in the MSA.</div><div>(b) Is the first purchaser anywhere for resale in the United States of cigarettes manufactured anywhere that the manufacturer does not intend to be sold in the United States.</div><div>(c) Becomes a successor of an entity described in (a) or (b). The term does not include an affiliate of a manufacturer unless such affiliate itself falls within any of (a), (b), or (c).</div></div> |

Instructions

For each product invoiced during the calendar month:

- Column A – Enter the brand name of the cigarette or RYO.
- Column B – If cigarettes, enter the value of the stamps placed on the packages of cigarettes.
- Column C – Indicate the state in or into which the product listed in Column A was invoiced.
- Column D – If cigarettes, indicate if a tax stamp was affixed. If no tax stamp was affixed, please provide an explanation on a separate sheet.
- Column E – Enter the number of cigarette sticks for each brand listed in Column A.
- Column F – Enter the number of ounces of RYO for each brand listed in Column A.
- Column G – Enter the dollar value of each brand of RYO listed in Column A.
- Column H – Enter the name and address of the vendor from whom the product in Column A was purchased.
- Column I – Provide the name and address of the product manufacturer or the first importer of the product listed in Column A.
- Column J – Provide the country of origin of each product listed in Column A.

If more than one sheet is needed to report the product invoiced within the reporting month, subtotal each sheet, and enter a total on the final page of this schedule