Tobacco Master Settlement Agreement Idaho State Tax Commission Idaho Activity for Nonparticipating Cigarette Brands

Name:	EIN:
Tax Period:	Permit Number:

Use this schedule to report the cigarettes purchased from nonparticipating manufacturers and then **stamped and sold in Idaho**. You must complete this schedule **in addition** to completing the Idaho Cigarette Tax Return CG 1550 and all required supporting schedules. To find a list of participating manufacturers and brands online, go to **ag.idaho.gov**. For more information on the Tobacco Master Settlement Agreement, please visit the Idaho Attorney General's Website at **ag.idaho.gov**.

	a. Brand Name	b. Nonparticipating Manufacturer's Name & Address	c. Quantity Packs of 20	d. Total Cigarettes (Col c. X 20)	e. Quantity Packs of 25	f. Total Cigarettes (Col. e. X 25)		
		Total Colum	Total Column d. from additional page(s) 🔶					
		hat I am authorized to sign this document and that the correct to the best of my knowledge.	Total Column d. →					
Date	Printed Name Signature		Total Column f. from additional page(s) →					
				Total Column f. 🔿				
			GRAND	GRAND TOTAL Columns d. + f. →				

Idaho Activity for Nonparticipating Cigarette Brands (page 2)

Use this schedule to report any additional nonparticipating cigarette brands **stamped and sold** in Idaho. To find a list of **participating** manufacturers and brands online, go to **ag.idaho.gov**.

a. Brand Name	b. Nonparticipating Manufacturer's Name & Address	c. Quantity Packs of 20	d. Total Cigarettes (Col. X 20)	e. Quantity Packs of 25	f. Total Cigarette (Col. e. X 25)	
			. ,			
		Total Column d. →				
		Total Column f. 🔿				
		Carry the Total for Column d. and the Total for Column f. to the front page				