

# B-A-105 Snuff Floor Tax Form

Return for Month Ended (MM-DD-YY) \_\_\_\_\_

DOR Use Only

Legal Name (First 35 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)

Trade Name

Physical Address (Address Associated with License)

City State Zip Code

Name of Contact Person State of Domicile

Phone Number Fax Number

FEIN or SSN

NCDOR ID

## Schedule A. Schedule of Additional Tax Due For Snuff in Inventory as of July 1, 2025

A wholesale dealer or retailer dealer that holds snuff in inventory as of July 1, 2025 must complete and return, with payment of any tax due, Form B-A-105 Snuff Floor Tax Return for each location on or before July 20, 2025.

- |  |                    |
|--|--------------------|
| <p><b>1. Total Ounces of Snuff in Inventory</b><br/>(From Schedule B, Total of Column H)</p>                             | <p>1. _____</p>    |
| <p><b>2. Total Weight-Based Tax for Snuff in Inventory</b><br/>Multiply Line 1 by \$0.40</p>                             | <p>2. _____</p>    |
| <p><b>3. Total Cost Price Taxed Snuff in Inventory</b><br/>(From Schedule B, Total of Column G)</p>                      | <p>3. _____</p>    |
| <p><b>4. Total Cost Price Tax for Snuff in Inventory</b><br/>Multiply Line 3 by 12.8% (0.128)</p>                        | <p>4. _____</p>    |
| <p><b>5. Total Additional Excise Tax Due for Snuff in Inventory</b><br/>Line 2 minus Line 4; if negative, enter zero</p> | <p>5. \$ _____</p> |

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
I certify that, to the best of my knowledge, this return is accurate and complete.

**Payments must be made by check or money order and must be in the form of U.S. currency from a domestic bank and payable to North Carolina Department of Revenue. Mail to: North Carolina Department of Revenue, PO Box 25000, Raleigh, North Carolina 27640-0950. Electronic payments and ACH payments are not available for this form.**

**Schedule B. Inventory of Snuff as of July 1, 2025**

(A) Manufacturer	(B) Brand	(C) Product Description as Shown on Invoice	(D) Weight per Unit (In Ounces)	(E) Cost Price per Unit as Shown on Invoice	(F) Number of Units in Inventory	(G) Total Cost Price Taxed in Inventory (Multiply Column E by Column F)	(H) Total Ounces in Inventory (Multiply Column D by Column F)
						\$	

**Total of Column G**  
Enter the total here and on Schedule A, and on Schedule A, Line 3

**Total of Column H**  
Enter the total here and on Schedule A, and on Schedule A, Line 1