

Instructions for Handwritten Forms

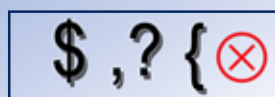
Guidelines



Do not use red ink.
Use blue or black ink.



Do not use dollar
signs, commas, or
other punctuation marks.



Printing



Set page scaling to
"none." The Auto-Rotate
and Center checkbox
should be unchecked.



Do not select "print on
both sides of paper."



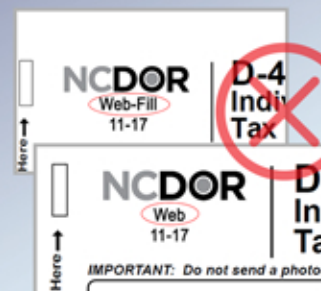
Before Sending



Do not submit
photocopies of returns.
Submit originals only.



Do not mix form types.





DOR Use Only

Trade Name

FEIN or SSN**Physical Address (As Shown on Tobacco License)**

City

State

Zip Code

Name of Contact Person

State of Domicile

NCDOR ID

Phone Number

Fax Number

Mail to: North Carolina Department of Revenue, PO Box 25000, Raleigh, North Carolina 27640-0950

Schedule B. Computation of Excise Tax Paid on Alternative Nicotine Products
(Schedule must be attached)

1. Number of Tax-paid Containers of Alternative Nicotine Products Returned to Manufacturer
(From Schedule C, Total of Column B)

1.

2. Excise Tax on Units Less Than or Equal to 20 in Each Container
Multiply Line 1 by \$0.10

2.

3. Units with Greater Than 20 per Container
(From Schedule C, Total of Column E)

3.

4. Excise Tax on Units Greater Than 20 in Each Container
Multiply Line 3 by \$0.005

4.

5. Total Excise Tax Paid on Alternative Nicotine Products Returned to Manufacturer
Add Lines 2 and 4

5.

\$

Schedule C. Detail Schedule for Excise Tax on Alternative Nicotine Products
(Schedule must be attached)

NOTE: Applicant must: (1) attach the manufacturer affidavits and invoices or equivalent information; and (2) only include one alternative nicotine product per line (items cannot be combined). Only alternative nicotine products for which the applicant has paid the North Carolina excise tax are eligible for refund.

(A) Alternative Nicotine Product Description as Shown on Affidavit	(B) Number of Tax-Paid Containers Returned	(C) Number of Units in Each Container	(D) Number of Units >20 per Container (Column C minus 20; if negative enter zero)	(E) Total Units with >20 per Container (Multiply Column B by Column D)
Total of Column B (Enter the amount here and on Schedule B, Line 1)		Total of Column E (Enter the amount here and on Schedule B, Line 3)		