

FORM OP-300

TOBACCO PRODUCTS TAX RETURN

Important: Please see instructions on the back of this return.

(Rev. 07/00)

▶	RETURN FOR PERIOD ENDED
▶	CT TAX REGISTRATION NUMBER
▶	FEDERAL EMPLOYER ID NUMBER

PLEASE CHANGE YOUR NAME AND MAILING ADDRESS IF SHOWN INCORRECTLY

Check if applicable: <input type="checkbox"/> Final Return (going out of business) <input type="checkbox"/> Amended Return

1.	Tobacco Products (excluding snuff tobacco products) Purchased, imported, received or acquired in Connecticut (from Schedule A-1 or A-2)	▶	1		
2.	Tobacco Products (excluding snuff tobacco products) Manufactured in Connecticut (from Schedule B)	▶	2		
3.	Subtotal (Add Line 1 and Line 2)	▶	3		
4.	Tobacco Products (excluding snuff tobacco products) Exported from Connecticut (from Schedule C)	▶	4		
5.	Tobacco Products (excluding snuff tobacco products) Sold to the federal government (from Schedule D)	▶	5		
6.	Subtotal (Add Line 4 and Line 5)	▶	6		
7.	Amount subject to tax (Subtract Line 6 from Line 3)	▶	7		
8.	TAX DUE ON TOBACCO PRODUCTS (Multiply Line 7 by 20% (.20))	▶	8		
9.	TAX DUE ON SNUFF TOBACCO PRODUCTS (from Schedule A-3 or A-4)	▶	9		
10.	TOTAL TAX DUE (Add Line 8 and Line 9)	▶	10		
11.	PENALTY: 10% (.10) of total tax due or \$50, whichever is greater	▶	11		
12.	INTEREST: 1% (.01) per month or fraction thereof from due date to date of payment	▶	12		
13.	TOTAL AMOUNT DUE (Add Lines 10, 11, and 12)	▶	13		

I declare under the penalty of false statement that I have examined this return, **FORM OP-300**, and, to the best of my knowledge and belief, it is true, complete, and correct. (The penalty for false statement is imprisonment not to exceed one year or a fine not to exceed two thousand dollars, or both.)

Signature	Title	Date
Print Name		

FORM OP-300 INSTRUCTIONS

GENERAL INSTRUCTIONS

1. Taxpayers must file a return for each calendar month by the 25th day of the following month.

Example: The Tobacco Products Tax Return for January 1 through January 31 must be filed on or before February 25.

A return must be filed even if no tax is due.

2. This return must be signed by the owner, a partner or a principal officer.
3. Make check or money order payable to: COMMISSIONER OF REVENUE SERVICES.
4. Mail to:

STATE OF CONNECTICUT
DEPARTMENT OF REVENUE SERVICES
PO BOX 5018
HARTFORD CT 06102-5018

DEFINITIONS

Tobacco Products mean: Cigars, cheroots, stogies, periques, granulated, plug cut, crimp cut, ready rubbed and other smoking tobacco, cavendish, plug and twist tobacco, fine cut and other chewing tobaccos, shorts, refuse scraps, clippings, cuttings and sweepings of tobacco and all other kinds and forms of tobacco, prepared in such manner as to be suitable for chewing or smoking in a pipe or otherwise or for both chewing and smoking, but shall not include any cigarette as defined in Conn. Gen. Stat. §12-285.

Snuff Tobacco Products mean: Tobacco products that have imprinted on the packages the designation "snuff" or "snuff flour" or the federal tax designation "Tax Class M," or both.

Wholesale Sales Price means: In the case of a manufacturer of tobacco products, the price set for such products or, if no price has been set, the wholesale value of such products, and, in the case of a distributor who is not a manufacturer of tobacco products, the price at which the distributor purchased such products.

SPECIFIC INSTRUCTIONS

Line 1. RESIDENT DISTRIBUTOR: Enter from Schedule A-1 the wholesale sales price of tobacco products purchased, imported, received or acquired in Connecticut by the distributor.

NONRESIDENT DISTRIBUTOR: Enter from Schedule A-2 the wholesale sales price of tobacco products imported into Connecticut by the distributor.

Line 2. Enter from Schedule B the wholesale sales price of tobacco products manufactured in Connecticut by the distributor.

Line 3. Add the amounts reported on Line 1 and Line 2.

Line 4. Enter from Schedule C the wholesale sales price of tobacco products exported from Connecticut that were imported, received, purchased, acquired or manufactured by the distributor.

Line 5. Enter from Schedule D the wholesale sales price of tobacco products sold to the federal government that were imported, received, purchased, acquired or manufactured by the distributor.

Line 6. Add the amounts reported on Line 4 and Line 5.

Line 7. Subtract the amount reported on Line 6 from the amount reported on Line 3.

Line 8. Multiply the amount of tobacco products reported on Line 7 by 20% (.20).

Line 9. Enter from Schedule A-3 or A-4 the total amount of tax due resulting from the manufacture, purchase, importation, receipt or acquisition of snuff tobacco products.

Line 10. TOTAL TAX DUE (Add Line 8 and Line 9).

Line 11. Penalty for failure to file or pay tax when due: 10% (.10) of the total tax due or \$50, whichever is greater.

Line 12. Interest for late payment: 1% (.01) of the total tax due per month or fraction thereof, from the due date until the date of payment.

Line 13. Add the amounts reported on Line 10, Line 11, and Line 12.

For Further Information

If you need additional information or assistance, please call the Excise/Public Services Taxes Subdivision at **860-541-3225**, Monday through Friday, between the hours of 8:00 a.m. and 5:00 p.m.

You may obtain forms and publications at any hour, seven days a week:

- **Internet:** Preview and download forms from the DRS web site: www.drs.state.ct.us
- **DRS TAX-FAX:** Call **860-297-5698** from the handset attached to your fax machine and select from the menu;
- **Telephone:** Call **1-800-382-9463** or **1-860-297-5962** and select **Option 2** from a touch-tone phone.

TTY, TDD, and Text Telephone users only may transmit inquiries 24 hours a day, seven days a week by calling **860-297-4911**.