

**Schedule D**

**Tobacco Products Exported**

rev 07 - 18

Federal ID Number		Taxpayer Name		Address		City	State	Zip Code
Name and Address of the Receiver of Product	State of Destination	Tobacco Products (excluding Liquid Nicotine, Moist Snuff, & Roll-Your-Own)	Liquid Nicotine (fluid milliliter)	Moist Snuff (ounces)	Roll-Your-Own Tobacco			
<b>Total</b>								

**INSTRUCTIONS FOR COMPLETING SCHEDULE D  
TOBACCO PRODUCTS EXPORTED**

Enter your Federal Identification Number, Taxpayer Name, and address, including your city, state, and zip code.

Provide the name, address, and state destination of the receiver to whom Tobacco Products, Liquid Nicotine, Moist Snuff, and Roll-Your-Own Tobacco was exported.

- **Exclude Liquid Nicotine, Moist Snuff, and Roll-Your-Own from the amounts for Tobacco Products.**

For each receiver, enter the monthly total wholesale price of Tobacco Products exported for the month.

For each receiver, enter the monthly total fluid milliliters of Liquid Nicotine exported for the month.

For each receiver, enter the monthly total ounces of Moist Snuff exported for the month.

For each receiver, enter the monthly total wholesale price of Roll-Your-Own Tobacco exported for the month.

**TOTAL EACH COLUMN AND ENTER THE TOTALS ON LINE 10 OF THE TPT-10 RETURN.**