

**Minnesota Importers
Cigarette Reconciliation**

Complete this schedule to reconcile stamps and cigarettes.

Licensee	Address	Minnesota Tax ID Number	Period of Return (mo/yr)
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	A Non-fee Brands	B Fee Brands	C Total (A + B)
1 Beginning inventory (from CT501-R, line 5, of preceding month; if this is your first return, enter zero)	1		
2 Cigarettes imported during the month (from CT501-A, lines 19A, 19B and 20)	2		
3 Total cigarettes available (add lines 1 and 2)	3		
4 Cigarettes sold out-of-state (from CT501-D, lines 19A, 19B and 19C)	4		
5 Ending inventory (from CT501-I, lines 3 and 4)	5		
6 Cigarettes to be accounted for (subtract lines 4 and 5 from line 3)	6		
7 Unstamped cigarettes sold to Minnesota distributors (from CT501-C, lines 19A, 19B and 19C)	7		
8 <input type="checkbox"/> Shrinkage. Line 7 is more than line 6	8		
<input type="checkbox"/> Overage. Line 6 is more than line 7.			

Reconciliation

I declare that this return and supporting schedules are correct and complete to the best of my knowledge and belief.

Authorized Signature	Title	Date	Daytime Phone ()
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Attach schedules and mail to Minnesota Revenue, Mail Station 3331, St. Paul, MN 55146-3331.
Phone 651-556-3035.

Sign Here