

TT-104S: Wisconsin Combined Tobacco and Vapor Products Use Taxes Return

Reporting Period

Date (YYYY - MM)

Due Date: Not later than the 15th day of the month following the month in which you acquire untaxed products

Name of Individual (last, first, middle initial), Partnership, or Corporation			Federal Employer Identification Number (FEIN)	
Mailing Address - Street or PO Box			Social Security Number (SSN)	
City	State	Zip Code	Wisconsin County	
Type of Organization (check one) Indicate Date Incorporated <input type="checkbox"/> Individual _____ <input type="checkbox"/> Wisconsin corporation _____ <input type="checkbox"/> Other: Describe below: _____ <input type="checkbox"/> Partnership _____ <input type="checkbox"/> Out-of-state corporation _____				

Section 1: Excise Tax - Computation of Cigar, Moist Snuff, Tobacco and Vapor Products

1 Tobacco products tax (from Schedule TT-106S, line 3)	1	\$	
2 Moist snuff tax (from Schedule TT-107S, line 3)	2	\$	
3 Cigar tax (from Schedule TT-108S, line 7)	3	\$	
4 Vapor products tax (from Schedule TT-109S, line 3)	4	\$	
5 Total tobacco and vapor products tax (add lines 1 through 4)	5	\$	
6 Total interest on tobacco and vapor products tax (see instructions)	6	\$	
7 Total tobacco and vapor products tax and interest (add lines 5 and 6)	7	\$	

Section 2: Sales/Use Tax - Computation of Use Tax on Purchases of Cigars, Moist Snuff, Tobacco and Vapor Products

8 Use tax on tobacco products (from Schedule TT-106S, line 8)	8	\$	
9 Use tax on moist snuff (from Schedule TT-107S, line 8)	9	\$	
10 Use tax on cigars (from Schedule TT-108S, line 12)	10	\$	
11 Use tax on vapor products (from Schedule TT-109S, line 8)	11	\$	
12 Total state, county, and stadium use tax (add lines 8 through 11)	12	\$	
13 Total interest on use tax (see instructions)	13	\$	
14 Late filing fee on use tax (see instructions)	14	\$	
15 Total use tax, interest and late filing fee (add lines 12, 13, 14)	15	\$	
16 Total Amount Due (add lines 7 and 15)	16	\$	

I declare under penalties of law that the above information is true, correct, and complete to the best of my knowledge and belief.

Signature	Date	Telephone Number
-----------	------	------------------