SOUTH DAKOTA Certificate of Compliance
Non-Participating Manufacturer Escrow Payment
South Dakota Codified Law Ch. 10-50B

2019 Sales Reporting Period: Quarter 4
Plus Outstanding 2019 Inflation Adj.
Deposit Due: April 15, 2020

Part 1: Manufacturer's Identification

Name: ____________________________
Address: ____________________________
Phone: ___________________ Fax: _______________
List of Brand families: ____________________________________________________________

"Brand families" is defined as: all styles of cigarettes and roll your own tobacco sold under the same trademark and differentiated from one another by means of additional modifiers or descriptors, and any brand name (alone or in conjunction with any other word), trademark, logo, symbol, motto, selling message, recognizable pattern of colors, or any other indicia of product identification identical, similar to, or identifiable with a previously known brand of cigarettes or roll your own tobacco.

Part 2: Units Sold

Number of individual cigarettes and "roll-your-own" tobacco units (0.09 oz = 1 unit) sold by the Manufacturer identified above during Quarter 4 of 2019 ______________

The calendar year is divided into the following quarters: January 1st to March 31st (Quarter 1); April 1st to June 30th (Quarter 2); July 1st to September 30th (Quarter 3); and October 1st to December 31st (Quarter 4).

Part 3: Escrow Rates and Payments

For the sales year 2019, the rate per cigarette is .............. $0.0188482

Part 4: Escrow Deposit Due Without Inflation Adjustment

The appropriate deposit subtotal is $ ________________ (Part 2 x Part 3)

Part 5: Inflation Adjustment

The inflation adjustment for sales year 2019 is 84.38819 percent.

$ ________________________ (Part 4 x 0.8438819)

Part 6: Escrow Deposit Paid

The total amount that has been paid into the qualified escrow fund by the Manufacturer identified above for sales in Quarter 4 of year 2019 is $ ________________________ (Part 4 + Part 5)

Part 7: Outstanding Inflation Adjustment

A. The number of individual cigarettes and "roll-your-own" tobacco units (0.09 oz = 1 unit) sold by the Manufacturer identified above during Quarters 1-3 of 2019= ______________

B. The deposit subtotal = $ ______________ (Part 7A x $0.0188482)
C. The total inflation adjustment due for sales during Quarters 1-3 of 2019 = _________ (Part 7B x 0.8991984)

D. The estimated inflation adjustment paid for sales during Quarters 1-3 of 2019 = _________ (Refer to previous certificates of compliance for sales year 2019)

E. The outstanding inflation adjustment due for sales during Quarters 1-3 of 2019 = ________________ (Part 7C – Part 7D)

**Part 8: Financial Institution**

Name of Institution: ____________________________________________________________
Address:_____________________________________________________________________
Escrow Acct No:________________________ Sub-account No. for South Dakota: __________
Total Amt Held for South Dakota: ________ Total Balance in Escrow Account: ________________

Copies of your receipt or other proof of deposit from your financial institution, must be Attached and filed with this Certificate of Compliance.

**Part 9: Signature**

I hereby certify that the above-named manufacturer has deposited $0.0188482 for each unit sold (cigarette and "roll- your- own" tobacco as defined by SDCL 10-50B-4) in South Dakota in Quarter 4 of year 2019, plus the inflation adjustment due for all sales in 2019, into the above-described escrow account. Under penalty of perjury, I state that, to the best of my knowledge, all of the information contained in this Certificate of Compliance is true and accurate.

Name of Authorized Agent:________________________________________ Title: __________________________

Signature of Authorized Agent:________________________ Date: __________________________

Subscribed to and sworn to before me, a Notary Public, on this _____ day of __________, _____.

________________________________________

Notary Public

(SEAL)

My commission expires: _______________________

Mail this certificate of compliance to:
Office of the Attorney General
Attn: Tom Deadrick
Assistant Attorney General
1302 E. Highway 14, Suite 1
Pierre, SD 57501-8501