

**Form CIG-DIT**State Form 50985
(R3 / 5-25)Indiana Department of Revenue
Indiana Cigarette Floor Tax**Important: This return must be returned by July 31, 2025, via INTIME (intime.dor.in.gov/eServices).**

Return form via INTIME message "respond to a message."

Name of Cigarette Distributor		Cigarette License Number	
Mailing Address	City or Town	State	ZIP Code

This is to certify that a physical inventory was taken, at the close of business, on June 30, 2025, of the items as listed below. These inventories must be used as your closing inventories on your June report. Thirteen period operations must also file a report for a period ending on June 30, 2025.

Indiana Stamped Cigarettes and Stamps

1. Roll and Flat Stamps (Packages 20's)	<input type="text"/>	multiplied by 2.00	<input type="text"/>	1.	<input type="text"/>
2. Special Stamps (Packages 25's)	<input type="text"/>	multiplied by 2.50	<input type="text"/>	2.	<input type="text"/>
3. Indiana Stamped Cigarettes (Packages 20's)	<input type="text"/>	multiplied by 2.00	<input type="text"/>	3.	<input type="text"/>
4. Indiana Stamped Cigarettes (Packages 25's)	<input type="text"/>	multiplied by 2.50	<input type="text"/>	4.	<input type="text"/>
5. Amount Due (Add Lines 1, 2, 3 and 4)	<input type="text"/>			5.	<input type="text"/>
6. Penalty if Filed Late (10% of Line 5 or \$5.00, whichever is greater)	<input type="text"/>			6.	<input type="text"/>
7. Interest if Filed Late (Multiply Line 5 by <input type="text"/> (days late) by .000164 (daily interest rate)	<input type="text"/>			7.	<input type="text"/>
8. Total Amount Due (Add Lines 5, 6 and 7)	<input type="text"/>			8.	<input type="text"/>

You will receive a Demand for Payment from the department after submitting this form.

I hereby declare, under penalties of perjury, that the information contained in this return is true, correct and complete to the best of my knowledge and belief.		
Signature of Taxpayer or Authorized Agent		Date Signed
Typed or Printed Name	Title	Business Telephone Number

Instructions for Form CIG-DIT, Indiana Cigarette Floor Tax

You must take an inventory of all Indiana stamped cigarettes and unaffixed Indiana stamps as of the close of business on June 30, 2025.

Any stamps in transit that were purchased at the old rate must be counted in your June 30 inventory.

Your inventory of stamped cigarettes includes stamped cigarettes located in your warehouse, on your docks, in your trucks, and any other place where you have risk of loss.

Lines 1 and 2. List the number of unaffixed stamps for packages of 20's and 25's and multiply by the rate difference shown.

Lines 3 and 4. List the number of stamped individual packs of cigarettes and multiply by the rate difference shown.

Line 5. Add Lines 1, 2, 3 and 4

Line 6. Penalty if filed or postmarked after July 31, 2025, is 10% of Line 5 or \$5.00, whichever is greater.

Line 7. Interest if filed late is Line 5 times the number of days late times the daily interest rate of .000164.

Line 8. Add Lines 5, 6, 7 and 8 to compute the total amount due with this form. Do not remit payment at this time. You will receive a Demand for Payment after this form is returned and processed.

If you have any questions, please call 317-615-2710.