Form AS 2746

Rev. 05.21



Government of Puerto Rico DEPARTMENT OF THE TREASURY Internal Revenue Area

CERTIFICATION FOR LISTING ON PUERTO RICO DIRECTORY

	Original	Supplemental	Calendar Year of	f Submission:	
	RT I: BUSINESS INFORMATION				
1.	Applicant Tobacco Product Manu		<u>, </u>		
Applicant Legal Name Applicant Trade Name		Applicant Trade Name	Employer Identification Number		
Stre	et Address	'	Phone Number	Fax Number	
			()	()	
Mail	ing Address (if different from above)		E-Mail Address	Website Address	
N 4 = 1=	unfonturing Dlant/a) Name and Chroat	Zip Code	Name/Title of Person Comm	oleting Certification and E-mail Address	
ivian	Manufacturing Plant(s) Name and Street Address (if different from above)		INditie/TitleOff ersonComp	neuing Certification and E-mail Address	
2.	The undersigned certifies under	oath that as of the date of this Certification, t	he above - named applicant is (initia	ıl one):	
	•			,	
	a Participating Manufacture	er ("PM").			
		acturer ("NPM") in full compliance with Act No. 4 deposits into a Qualified Escrow Fund.	101 of September 9, 2000, as amende	ed, and implementing regulations, including	
3.	Applicant is the manufacturer of sold in Puerto Rico through an i	the brands listed in this Certification which mporter.	are intended to be sold in Puerto F	Rico, including Cigarettes intended to be	
	Yes No				
4.	Applicant is the first purchaser any Rico.	where for resale in Puerto Rico of Cigarettes m	anufactured anywhere that the manufa	acturer does not intend to be sold in Puerto	
	Yes No				
	and the relationship to applicant. Ider	igarette manufacturer, its plant street address, mai ntify the location of the transfer of ownership of Ciga sary, to provide a complete response.			

5.		an entity described in question	s 3 or 4 above (i.e., manufacturer or first importer).	
6.			, explain the basis for applicant's claim that it is a Tobacco Product N additional sheet(s), as necessary, to provide a complete response.	lanufacturer and submit all
	II: BRAND FAMILY IDENTIFI			
1.	Brand Families and Unit Sal			
		and Families and Unit Sales Rep	ort must be submitted with this certification.)	
2.	Trademark Holder(s)			
	Provide the name, address, e	mail and phone number of the trac	demark holder(s) of each brand listed above.	
	Brand	Trademark Holder and Contact Person	Physical Address	Phone and E-mail
Atta	ch additional sheet(s), as nece	essary, to provide a complete resp	onse.	
PAI	RT III: ADDITIONAL BUSINES	SINFORMATION		
1	I. Applicant Information			
	Please indicate whether th	e following statements describe a	applicant by marking either Yes or No after the statement:	
	a. Applicant sold Cigarettes	s in Puerto Rico in the preceding	calendar year	Yes No
	b. Applicant made escrow of	deposits in the preceding calenda	ır year	Yes No
	c. Applicant sold in the pre-	ceding calendar year one or more	e of the Brand Families listed in this Certification	Yes No
	d. Applicant made escrow	deposits in the preceding calenda	r year for one or more of the Brand Families listed in this Certification	Yes No
			of the Brand Families listed in this Certification within the past two calend	
			catalogs and uses the mail or other delivery service to deliver Cigarettes to Pue	
			per 9, 2000, as amended, prior to the establishment of the Directory, or at any	

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	h.	Applicant or one of its Brand Directory	Families listed in this Certification was pre-	viously denied listing on the Directory or wa	s removed from the	Yes	□ No
	i.	Applicant is enjoined or band	ned from selling any Cigarettes by court ord	er, state or federal agency ruling or determ	ination	Yes	☐ No
	j.	A Brand Family formerly solo agency or a federal court	d by applicant or a Brand Family that applica	ant intends to sell is enjoined from sale by a	a state court, state	Yes	□ No
	k.		entered a judgment finding that applicant en o products			Yes	☐ No
PAR	ΓIV:	NPM APPLICANT CERTIFIC	ATION				
1.	Age	ent for Service of Process					
	a.	Is applicant domiciled in Pue	erto Rico?			Yes	s 🔲 No
	b.	Is applicant a non-resident o	r foreign NPM that has registered to do bus	iness in Puerto Rico as a foreign corporation	on or business entity?	Yes	s 🔲 No
	C.	Name, address and phone n	umber of agent for service of process				
2.		NOTICE OF APPOINTMEN	o questions "a" and "b" above, applicant mus IT OF REGISTERED AGENT AND REGIST al Institution e of this Certification, applicant:	•	ocess by submitting a c	ompleted	
	a.						s 🔲 No
	b.	Has executed a Qualified Es governs that Qualified Escre	crow Agreement that has been reviewed an ow Fund for the Government of Puerto Ric	d approved by Puerto Rico Secretary of the	e Treasury and (that	. 🔲 Yes	s 🔲 No
3.	Fi	inancial Institution Informa	tion				
Name				Authorized Escrow Agent	Escrow Account Nu	ımber	
Addre	SS			Phone Number ()	Fax Number ()	
			Zip Code	Total Funds Held in Separate Account f	or Puerto Rico:		
4.	Q	ualified Escrow Fund Depo	osit/Withdrawal History for Puerto Rico	· -			
		DATE	DEPOSIT	WITHDRAWAL	BALA	NCE	

DATE	DEPOSIT	WITHDRAWAL	BALANCE

Attach additional sheet(s), as necessary, to provide a complete response.

NOTE: This Certification will not be processed or considered until all the required documents are submitted.

	Brand Family	Units	Date of Destruction	
ttack	n support of the returns or destructions certification provided by the Puerto R	ion Treasury Denartment		
		NOWLEDGMENT AND SIGNATURE		
Und	er penalty of criminal prosecution under the laws of Puerto Rico, I decla	re and acknowledge that:		
1.	. I have read the instructions for this Certification for Listing on Puerto Rico Directory.			
2.	I understand that the Attorney General and the Secretary of the Treasury Department may require additional information and/or documentation to determine applicant qualifies for listing on the Puerto Rico Directory.			
3.	Applicant will immediately notify the the Internal Revenue Area (P.O. Box 9024140, San Juan, PR, 00902-4140) if any information on this Certification changes before the Secretary of the Treasury Department approves the Certification.			
4.	This Certification must be signed by a qualified company officer or other such individual authorized to bind the applicant company. My position with the compan and my actual authority to certify on behalf of applicant meets the foregoing requirements.			
5.	I have examined this Certification, including attachments and supporting documents and, to the best of my knowledge and belief, this Certification, including attachments and supporting documents, is true, correct, and complete.			
lam	e of Authorized Officer:			
itle:				
-ma	ail address:			
	phone: Dat			
ign	ature of Authorized Officer:			
	avit No			
Affida				
Swo	rn and subscribed before me by	, of legal age	e, [civil status	
Swo	rn and subscribed before me by [occupation], and resident of, at, at,		e, [civil status , personally known _day of	
Swo	rn and subscribed before me by [occupation], and resident of, at, at,		e, [civil status, personally known,	

This Certification must be filed with the Department of the Treasury:

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE AREA
ATT. TOBACCO LITIGATION AND ENFORCEMENT
PO BOX 9024140
SAN JUAN, PR 00902-4140

Retention Period: Six (6) years.

or email to: tobaccotax@hacienda.pr.gov

CERTIFICATION FOR LISTING ON PUERTO RICO DIRECTORY (FORM AS 2746) GENERAL INSTRUCTIONS

Who is required to file this Certification (Form AS 2746)?

Tobacco Product Manufacturers.

Tobacco Product Manufacturer means an entity that:

- (1) manufactures cigarettes anywhere that such manufacturer intends to be sold in Puerto Rico, including cigarettes intended to be sold in Puerto Rico through an importer, distributor, retailer or similar intermediary, or
- (2) is the first purchaser anywhere for resale in Puerto Rico of cigarettes manufactured anywhere that the manufacturer does not intend to be sold in Puerto Rico; or
- (3) becomes a successor of an entity described in subsection (1) or (2) above.

The answers provided in this Certification, when completed must be reviewed, and signed by an officer with the authority to bind the applicant company ("Applicant").

When is this Certification due?

Every Tobacco Product Manufacturer currently selling in Puerto Rico must file a Certification (Form AS 2746) no later than April 30, 2006. After April 30, 2006, Tobacco Product Manufacturers which intend to sell Cigarettes in Puerto Rico must file a Certification and qualify for listing on the Directory prior to any sales in Puerto Rico. Tobacco Product Manufacturers listed on the Directory must file this form on or before April 30th each year.

Supplemental Certifications: In completing a supplemental Certification, applicant must check the "Supplemental" box at the top of page one, enter only the new or modified information, then sign and date the supplemental Certification form. In circumstances in which information provided on the Certification becomes inaccurate, a supplemental Certification (Form AS 2746) must be filed within thirty (30) days <u>after</u> the information becomes inaccurate. A Tobacco Product Manufacturer shall file a supplemental Brand Family and Unit Sales Report (Form AS 2743) no later than thirty (30) days <u>prior</u> to any change in a manufacturer for any Brand Family or any addition to or modification of its Brand Families.

Where must this Certification be filed?

This Certification must be filed with the Department of the Treasury of Puerto Rico:

Mailing Address: Department of the Treasury

Internal Revenue Area

Attn.: Tobacco Litigation and Enforcement

PO Box 9024140

San Juan, PR 00902-4140

E-mail: tobaccotax@hacienda.pr.gov

Definitions:

- (a) "Brand Family" means all styles of cigarettes sold under the same trademark and differentiated from one another by means of additional modifiers, including, but not limited to, "menthol", and includes 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 or similar to, or identifiable with, a previously known brand of cigarettes.
- (b) "Cigarette" means any product that contains nicotine, is intended to be burned or heated under ordinary conditions of use, and consists of or contains: (i) any roll of tobacco wrapped in paper or in any substance not containing tobacco; or (ii) tobacco, in any form, that is functional in the product, which, because of its appearance, the type of tobacco used in the filler, or its packaging and labeling, is likely to be offered to, or purchased by, consumers as a cigarette; or (iii) any roll of tobacco wrapped in any substance containing tobacco, which, because of its appearance, the type of tobacco used in the filler or its packaging and labeling, is likely to be offered to, or purchased by, consumers as a cigarette described in clause (i) of this definition. The term "cigarette" includes "roll-your-own" tobacco" (i.e., any tobacco, which, because of its appearance, type, packaging, or labeling, is suitable for use and likely to be offered to, or purchased by, consumers as tobacco for making cigarettes). For purposes of this definition of "cigarette", 0.09 ounces of "roll-your-own" tobacco constitutes one individual "cigarette". See Act No. 401 of September 9, 2000, as amended.
- (c) "Directory" means the listing of all Tobacco Product Manufacturers that have provided current and accurate certifications conforming to the requirements of Act No. 305 of September 15, 2004 and all Brand Families that are listed in such certifications.
- (d) "Escrow Agent" means a federally or local chartered financial institution having no affiliation with any tobacco product manufacturer and having assets of at least one billion dollars (\$1,000,000,000) with whom the Non-Participating Manufacturer subscribes an escrow arrangement that requires that such financial institution holds the escrowed funds principal for the benefit or releasing parties and prohibits the tobacco product manufacturer placing the funds into escrow from using, accessing, or directing the use of the funds principal except as consistent with certain circumstances described in Act No. 401 of September 9, 2000, as amended.

- (e) "Master Settlement Agreement" means the agreement subscribed between certain cigarette manufacturers and the Government of Puerto Rico on November 23, 1998
- (f) "Nonparticipating Manufacturer", or "NPM", means any Tobacco Product Manufacturer that is not a Participating Manufacturer.
- (g) "Participating Manufacturer" has the same meaning as in subsection II (j) of the MSA.
- (h) "Person" means an individual, partnership, committee, association, corporation or any other organization or group of persons.

All attachments to this Certification must indicate to which question it corresponds.

If any section of this Certification is not applicable to your company, be sure to check the box "not applicable" where relevant.

SPECIFIC INSTRUCTIONS

PART I. BUSINESS INFORMATION

Questions 3-6: Act No. 401 of September 9, 2000, as amended, sets forth three circumstances under which an entity is a Tobacco Product Manufacturer. Those circumstances are individually set forth in questions 3, 4 and 5. If applicant answered "no" to question 3, 4 and 5, applicant must provide an explanation for its assertion that it is a Tobacco Product Manufacturer in its response to question 6.

PART II. BRAND FAMILY IDENTIFICATION

Original Form AS 2743, Brand Families and Unit Sales Report must be submitted with this certification.

Brand Families and Unit Sales Report AS 2743: Identity by Brand Family all of the Cigarettes that the Tobacco Product Manufacturer intends to sell in Puerto Rico, whether directly or through any distributor, retailer, or similar intermediary, and seeks to have included in the Directory. Only the brands identified may be included in the Directory. A Participating Manufacturer shall list all of its Brand Families. By listing a Brand Family, the Participating Manufacturer affirms that the Brand Family is deemed to be its Cigarettes for the purpose of calculating its payments under the MSA for the relevant year. The Participating Manufacturer shall update such list at least thirty (30) days prior to any addition to or modification of its Brand Families by executing and delivering a supplemental Schedule (Form AS 2743) to the Department of the Treasury of Puerto Rico.

A Nonparticipating Manufacturer (NPM) shall: (i) List all of its Brand Families and the number of Units Sold of each Brand Family that were sold in Puerto Rico during the preceding calendar year; (ii) Identify by an asterisk any Brand Family sold in Puerto Rico during the preceding calendar year that is no longer being sold in Puerto Rico as of the date of the Certification; and (iii) Provide the complete name and address of every Tobacco Product Manufacturer that manufactured a Brand Family described in (i) above in the preceding calendar year. The NPM shall update such list at least thirty (30) days prior to any addition to or modification of its Brand Families by executing and delivering a supplemental Schedule (Form AS 2743) to the Department of the Treasury of Puerto Rico. By listing a Brand Family, the NPM affirms that the Brand Family is deemed to be its Cigarettes for the purpose of calculating its reserve fund deposits pursuant to Act. No. 401 of September 9, 2000, as amended.

PART III. ADDITIONAL BUSINESS INFORMATION

Information must be completed by Participating Manufacturers and Nonparticipating Manufacturers.

PART IV. NPM APPLICANT CERTIFICATION

Agent for Service of Process: Certify whether the NPM is (i) domiciled in Puerto Rico; (ii) a non-resident or foreign NPM that has registered to do business in Puerto Rico as a foreign corporation or business entity; or (iii) an NPM that has appointed a resident agent for service of process.

PART V. RETURNS AND DESTRUCTIONS

Returns and Destructions: Certify (i) Brand Family Name; (ii) Units Returned or Destructed; (iii) and Date of Destruction for the preceding calendar year.

Mail the original Certification (Form AS 2746) and a complete copy of all required forms and documents to:

Mailing Address: Department of the Treasury

Internal Revenue Area

Attn.: Tobacco Litigation & Enforcement

PO Box 9024140

San Juan, PR 00902-4140

E-mail: tobaccotax@hacienda.pr.gov