Michigan Unredeemed Beverage Container Deposit Report

Report Year
2024
ZUZT

This report is for calendar year 2024. (Due date: On or before March 1, 2025.)					
1. Complete Company Name (include, if applicable, Corp., Inc., P.C., L.L.C., etc.)			er (FEIN, ME or	TR Number)	
Business Name, Assumed Name or DBA (if used)		3. Email Address			
Address (Number and Street or P.O. Box)	City		State	ZIP Code	

Distributors and manufacturers of beverages sold in returnable containers must file annual reports and pay all unredeemed beverage container deposits to the Michigan Department of Treasury. The reports must include:

- The total value of deposits originated on beverage containers sold in Michigan. "Originated" means that you have not paid a deposit to another manufacturer or distributor -- the deposit started with you.
- The total value of refunds made on redeemed returnable containers for which deposits were originated. See Michigan Compiled Laws (MCL) section 445.571 for the definition of returnable container.

Note: If you received a quarterly refund or purchased/sold returnable containers, you must complete page 2 of this form before you can determine if you have an amount due.

4.	Enter the total dollar value of deposits you originated in 20244.		\$
5.	Enter the total dollar value of containers you sold (from page 2)5.		\$
6.	Add lines 4 and 5 and enter the total here6.		\$
7.	Enter the total dollar value of refunds you made in 2024		\$
8.	Enter the total value of containers you purchased in 2024 (from page 2)8.		\$
9.	Add lines 7 and 8 and enter the total here9.		\$
١0.	If line 9 is greater than line 6, you are an overredeemer. Enter the difference here10.		\$
11.	If line 9 is less than line 6, you an underredeemer. Enter the difference here11.	- }	\$
12.	Enter the total Quarterly Refunds received for Calendar Year 2024 (from page 2)12.		\$
13.	If line 12 if greater than 0, subtract line 12 from line 10 and enter the total here13.	. !	\$
14.	If line 13 is less than 0, add lines 11 and 12 and enter the total here14.	. :	\$
	te: If this is your second report as an underredeemer, you may apply the credit(s) to the used credits may be carried forward for three years or until depleted, whichever occurs first		amount due on this report
15.	Overredeemer Credit(s) carried forward from prior years:		
	15a. Enter amount of credit from report year 2021 here 15a. \$		
16	Enter the analyst from the 45s have		Φ.
	Enter the amount from line 15a here		D
17.	Subtract line 16 from the greater of line 11 or 14 and enter the difference here. If less than 0, enter 0. This is the amount due		\$
18	Enter the amount from line 10 here or line 13 here (if greater than 0).	•	Ψ
٠.	THIS IS THE REFUND DUE.		\$
The	e undersigned certifies that the above information is true and complete.		
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Signature of Taxpayer or Authorized Agent	Date	Preparer's Signature	Date
Print or Type Name of Taxpayer or Authorized Agent	Telephone Number	Type or Print Name of Preparer	Telephone Number

Contact the Special Taxes Division, Misc. Taxes and Fees Unit, at 517-636-0515 with any questions. Make checks payable to the "State of Michigan." Write your account number and the words "unredeemed deposits" on your check.

Mail to:

Michigan Department of Treasury Special Taxes Division - Misc. Taxes and Fees PO Box 30781 Lansing, MI 48909

Unclaimed Bottle Deposit Purchases/Sales

Sales: (for overredeemers)

Indicate the dollar value of the empty returnable beverage containers you sold to an underredeemer(s). Enter the total dollar value of containers you sold on **line 5**, on the reverse side of this form.

Company Sold To	Account N	umber	Value of Empty Returnable Beverage Containers Sold:
Address (Street or RR#)			\$
City	State	ZIP Code	+
Company Sold To	Account N	umber	Value of Empty Returnable Beverage Containers Sold:
Address (Street or RR#)			\$
City	State	ZIP Code	
Total Dollar Value of Containe	ers Sold:		TOTAL Value of Containers Sold:
Purchases: (for underredeem Indicate the dollar value of the total dollar value of containers y	empty returnable	line 8, on the rev	ers you purchased from an overredeemer(s). Enter the erse side of this form. Value of Empty Returnable Beverage Containers Purchased:
Address (Street or RR#)			\$
City	State	ZIP Code	+
Company Purchased From	Account N	umber	Value of Empty Returnable Beverage Containers Purchased:
Address (Street or RR#)			\$
City	State	ZIP Code	
Total Dollar Value of Containe	ers Purchased:		TOTAL Value of Containers Purchased:
NOTE: If more than three cor	mpanies are invo	olved, photocopy	this form and attach all the pages to your report.
2004 Overstanks Beforeder			
2024 Quarterly Refunds:			
Enter total refund received of the state of the stat	luring the 2024 1s	st Quarter	
Enter total refund received of	· ·		
-	luring the 2024 2r	nd Quarter	