

# Michigan Bus Schedule

(See Instructions on page 2.)

Name	IFTA Account Number		
Address	City	State	ZIP Code
Tax Period			

**Note: This form should be completed by carriers whose entire fleet is comprised of motor coaches. If your fleet is a combination of motor coaches and other IFTA qualifying vehicles, please call 517-636-4580 for instructions.**

1. Enter the total number of tax paid gallons of diesel fuel purchased at Michigan retail stations or withdrawn from Michigan bulk storage for the quarter. .... 1. \_\_\_\_\_
2. Enter the number of Michigan taxable gallons from your IFTA schedule. .... 2. \_\_\_\_\_
3. Enter the lesser of line 1 or line 2. .... 3. \_\_\_\_\_
4. Multiply line 3 by .15. .... 4. \_\_\_\_\_
5. Enter the net Michigan tax due from your IFTA Schedule. If the amount is a negative, enter in brackets. .... 5. \_\_\_\_\_
6. Add lines 4 and 5 and enter here. .... 6. \_\_\_\_\_
7. If the amount on line 6 is a negative, enter the amount here. This is your tax due. .... **PAY** 7. \_\_\_\_\_
8. If the amount on line 6 is a positive amount, enter here. This is your refund. .... **REFUND** 8. \_\_\_\_\_  
If you have an amount on line 8, complete line 9.
9. Divide line 8 by .15 and enter this figure on line 11, Form 680, Claim for Refund of Motor Fuel Tax. .... 9. \_\_\_\_\_

**YOU MUST ATTACH A COPY OF THE IFTA SCHEDULE THAT WAS FILED WITH YOUR BASE JURISDICTION SHOWING THE CREDIT TAKEN IN THE MICHIGAN COLUMN**

## CERTIFICATION

*I declare, under penalty of perjury, that the information in this return, and attachments is true and complete.*

I authorize Treasury to discuss my return and attachments with my preparer.  Do not discuss my return with my preparer.

Taxpayer Signature	Date
Title	Telephone Number

I declare, under penalty of perjury, that this return is based on all information of which I have knowledge.

Preparer Signature	Date
Preparer Address	Preparer Telephone Number

## Instructions for Completing Form 2350, Michigan Bus Schedule

**Note:** If you are claiming a refund, you must also complete Form 680, Claim for Refund of Motor Fuel Tax.

A completed IFTA schedule must be attached to your Claim for Refund or your refund request will not be processed.

### General Instructions:

Complete all identifying information in Section 1 of the Michigan Bus Schedule. Be sure to include your IFTA account number, including your two-letter base state identification. The tax period should correspond with the IFTA return period.

### Line by Line Instructions:

**Line 1.** Report all gallons of tax paid diesel fuel purchased at Michigan retail stations or withdrawn from your Michigan bulk storage during the quarter and placed in your motor coaches. **(Column L if you file a Michigan IFTA return)** Fuel cannot be claimed for credit when it is purchased into storage but only as it is withdrawn and consumed in your vehicles. **Do not include dyed diesel fuel unless the tax was paid to the retailer.**

**If you are claiming credit for dyed diesel fuel you must attach copies of the invoices from the retail station where the fuel was purchased, or copies of the invoices from your fuel supplier if the fuel was purchased into storage.**

**Line 2.** Enter the number of Michigan taxable gallons from your IFTA schedule **(Column K if you file a Michigan IFTA return).**

**Line 3.** Enter the lesser of lines 1 and 2.

**Line 4.** Multiply line 3 by .15 and enter here.

**Line 5.** Enter the **net** Michigan tax due from your IFTA schedule. **(Column O if you file a Michigan IFTA return)** If the amount is a credit enter in brackets.

**Line 6.** Add lines 4 and 5 and enter here. If the amount is a negative amount, go to line 7. If the amount is positive, skip to line 8.

**Line 7.** If the amount on line 6 is a negative, enter

the amount here. **You have been over refunded on your IFTA return and this is your tax due. Do not complete lines 8 and 9.**

**Line 8.** If the amount on line 6 is positive enter the amount here. **This is your refund. If you are claiming a refund on line 8, complete line 9 and Form 680. If you do not have an amount on line 8, your payment and this schedule should be sent to the tax due address below. You must complete the Certification section on page 1 of this form.**

**Line 9.** Divide line 8 by .15 and enter the result on line 11, Form 680, Claim for Refund of Motor Fuel Tax.

### Tax Due

Mail your tax due schedule and payment to:  
Special Taxes Division - IFTA  
Michigan Department of Treasury  
P.O. Box 30474  
Lansing, MI 48909

### Refund

Mail your refund schedule attached to your Form 680, *Claim for Refund of Motor Fuel Tax* to:  
Special Taxes Division - IFTA  
Michigan Department of Treasury  
P. O. Box 30709  
Lansing, MI 48909

Forms and general information are available at Treasury's Web site at [www.michigan.gov/treasury](http://www.michigan.gov/treasury) or you may write to the address above.

You may also send a facsimile to (517) 636-4593 or call us at (517) 636-4600.

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