

■ Filing Form MFUT-16, Illinois Interstate Motor Fuel Use Tax Quarterly Return

TO: Illinois Interstate Motor Carriers

All qualified motor carriers registered under the Illinois Interstate Program are required to file Form MFUT-16, Illinois Interstate Motor Fuel Use Tax Quarterly Return. This return is used to report the number of miles traveled and the number of gallons of fuel purchased and consumed during each quarter and to pay any tax due.

We would like to bring to your attention several areas on the return we have identified that may cause processing delays if not correctly completed. When you complete and file your returns properly, you can avoid billing notices that may include penalty and interest charges.

Please use this bulletin as a guide when you file Form MFUT-16.

For a sample return and additional information, see the reverse side.

What should I do to ensure that my returns are properly filed?

To ensure timely processing of your returns, you should

- use only the preprinted Form MFUT-16 we send you for each quarter

Tax rates may change from quarter to quarter. If you use only the preprinted return identified for each quarter, you can be sure you are using the correct rates. If you do not have the correct preprinted return for a quarter, please call us.

Note: You may no longer file annually.

- round miles to the nearest whole mile and gallons to the nearest whole gallon
- report "total miles" and "total gallons" for all states in which you traveled

Even though you may not have traveled in Illinois during the quarter, you must report the total number of miles traveled and gallons purchased in all states.

- pay the entire amount due

To avoid billing notices and penalty and interest charges, please pay the entire amount due.

Note: You are required to pay any amount due that is greater than zero.

- complete all information requested

Carefully read the instructions for each section, and fill in all required information. If you have any questions, please call us.

- sign your return

We cannot process your return unless it has the signature of the owner, a partner, a corporate officer, or an authorized preparer.

Questions?

If you have questions or need more information, please call or write us. Our telephone numbers and address are printed at the bottom of this bulletin.



Check if your entire fleet had absolutely **no** miles (your vehicles were not driven at all) in **any** state during the quarter.

Check if your company is going out of business or will no longer have business operations in Illinois. Write in the effective date of cancellation. You may receive another return for the next quarter depending on when your cancellation was processed. If so, you must complete and file that return.


If the fuel types we have checked are not correct for your fleet, please call us immediately so that we may update our records.

You must fill out Lines 1 through 3 even if you have no Illinois miles.

If you have any questions about a preprinted amount on Line 11, please call us.

Pay the entire amount due. You are required to pay any amount due that is greater than zero. Indicate any credit or refund in brackets or parentheses.

Sign your return.


Illinois Department of Revenue
MFUT-16
Illinois Interstate Motor Fuel Use Tax Quarterly Return

Do not write above this line

Licensee name and mailing address _____ Account no.: _____
 Report quarter: 94/01
 Due date: 04/30/94

Part 1: Tell us your filing status (Check all that apply)
 Quarterly filing Amended No operation Cancel fuel license, effective _____

Part 2: Fuel type summaries (Our records indicate your operations include the following fuel types)
 Diesel Gasoline Gasohol Liquefied petroleum gas (LPG) Compressed natural gas (CNG)
 You are required to supply information for each fuel type in your fleet, even if there was no activity. If you have changed your operations, you should contact us for further instructions.

Part 3: Figure your total tax (Indicate any credits in brackets)

	Diesel	Gasoline/gasohol	LPG	CNG
1 Total miles traveled in all jurisdictions	1 _____	_____	_____	_____
2 Total gallons of fuel consumed in all jurisdictions	2 _____	_____	_____	_____
3 Average miles per gallon (Divide Line 1 by Line 2, and round to two decimal places)	3 _____	_____	_____	_____
4 Total miles traveled in Illinois	4 _____	_____	_____	_____
5 Total gallons (Divide Line 4 by Line 3)	5 _____	_____	_____	_____
6 Tax-paid gallons in Illinois	6 _____	_____	_____	_____
7 Net taxable gallons in Illinois (Line 5 minus Line 6)	7 _____	_____	_____	_____
8 Tax rate	8a .27500	.24600	.24800	.23700
9 Tax due (Multiply Line 7 by Line 8)	9a _____	9b _____	9c _____	9d _____
10 Total tax for all fuel types (Add Lines 9a, 9b, 9c, and 9d)	10 \$ _____			
11 Credit or balance due carried forward from preceding quarter	11 \$ 0.00			
12 Subtotal (Add Line 10 and Line 11)	12 \$ _____			
13 Penalty if filed late (10% (.10) of Line 12 amount or \$50, whichever is greater)	13 \$ _____			
14 Interest if paid late (Line 12 times the number of months late, times 1% (.01))	14 \$ _____			
15 Total due or refund claimed. Add Lines 12, 13, and 14. Pay any balance due. Indicate any refund in brackets. (Verified refunds of \$25 or greater will be issued automatically. Verified refunds of less than \$25 will be credited to your next quarter's return.)	15 \$ _____			

Make your check payable to "Illinois Department of Revenue."
 (Please write your account number and reporting period on your check.)

Part 4: Sign below
 Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Owner or officer's signature	Signature of preparer other than taxpayer
Title	Address
Phone	Phone
Date	Date

Mail to: ATTN MOTOR FUEL USE TAX SECTION
 ILLINOIS DEPARTMENT OF REVENUE
 PO BOX 19028
 SPRINGFIELD IL 62794-9028

If you have any questions, call 217 785-1387.
This return must be completed and filed regardless of activity.

This form is authorized as outlined by the Illinois Motor Fuel Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-9281