FORM 4 **MBT EXAMPLE**

Michigan Department of Treasury, Form 4 (Rev. 03-22) Application for Extension of Time to File Michigan Tax Returns Make check payable to "State of Michigan." Print "Michigan Extension" and last four digits of filer's Social Security number or full account number on the		
check. Mail to: Michigan Department of Treasury, PO 1. Extension request is for the following tax Check ONLY ONE Income Tax (excludes Income Tax (excludes Income Tax (includes Composite Filers) Income Business Tax Corporate Income Tax	2. Month and Year Your Tax Year Ends (MM-YYYY) 11-2022	 Full Federal Employer Identification or TR No. 11-3535353 Filer's Full Social Security No. (9 digits)
	 Check if extension is requested for good cause (see instructions). Check if an extension was granted for filer's federal tax return. 	7. Spouse's Full Social Security No. (if filing jointly)
8. Business or Trust Name LUGNUT NATION		9. Tentative Annual Tax
10. Filer's Name (first name, middle initial, last name) or Fiduciary/Trustee Name		11. Total Payments Made to Date
12. Mailing Address (Address, City, State and ZIP Code)		13. Payment Amount
DO NOT WRITE IN THIS SPACE		
5555	50557735 O 8 505	2 000000000 ll3535353 6

PERSONALIZATION

A developer's software program must print vouchers one to a page with top line generated to define the cutting edge for the preparer, measuring 8.5" wide and 3.5" in height. Position voucher at the bottom of the page to ensure dependable feeding edge. Verify voucher revision date and "MAIL TO:" address are correct.

Verify voucher elements with current year final voucher. Courier font preferred at a minimum 10-point size.

- Extension Request is For the Following Tax: "Michigan Business Tax" box should be checked. Box 1:
- Box 2: Month and Year Your Tax Year Ends (MM-YYYY): This should be listed as MM-YYYY (e.g., year ending November 2022 would read 11-2022).
- Box 3: Federal Employer Identification or TR Number: The nine-digit number must be formatted XX-XXXXXXX (include hyphen).
- Box 5/7: Filer's/Spouse Social Security Number: Should be empty.
- Business or Trust Name: Field should be in all CAPS. Box 8:

Software Developer Code: Should be entered in the bottom-left corner, aligned with the scanline.

SCANLINE CONTENT

- Font: OCR-A Ext 12-point size or OCR-A Std 10-point size.
- Location: .5" from the bottom edge and .5" from the right edge of the paper.
- Data Format: Six fields of varying length totaling 33 total characters plus five spaces between each field (38 • places).

Beginning at the left end, the scanline is constructed as follows:

- 1. 8 characters: The first six characters are the tax year end entered on line 2, but in YYYYMM format. The last two characters will be "84" if the FEIN (box 3) starts with "TR," or "32" (space) if it does not start with a "TR."
- 2. 2 characters: Tax Type = 08.
- 3. 4 characters: Represents Tax Year for which the payment applies.
- 4. 9 characters: Should be all zeros.
- 5. 9 characters: Represents FEIN. If a Treasury-assigned "TR" number, the first two characters are "84."
- 6. 1 character: Check Digit.