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FINAL DRAFT 4/14/23

2024 Sales, Use and Withholding Taxes Monthly/Quarterly Return Issued under authority of Public Acts 167 of 1933, 94 of 1937, and 281 of 1967, all as amended.

This form cannot be used as an amended return; see the 2024 Amended Monthly/Quarterly Return (Form 5092).

Street Address		City			Return Period (MM-1111)		
					ZIP Code		
PART 1: SALES AND USE TAX	!	A. Sales		B. Use: S	Sales and Renta	als	
 Gross sales, rentals, accommodations and telecommunical services. Carry amount from line 4 on Worksheet 5095 			1b.				
		A. Sales Tax			3. Use Tax		
 Total sales and/or use tax. Taxable amount multiplied by 6% (0.06). Carry amount from line 7 on Worksheet 5095 	2a.		2b.				
Total prepaid tax from Form 5083, 5085 and/or 5086 (e-file only)	3a.	XXXXXXX	3b.	XX	$\langle XXX \rangle$	X	
Remaining amount of sales and/or use tax eligible for disco Subtract line 3 from line 2			4b.				
Total discount allowed (see instructions)	5a.		5b.				
6. Total sales and/or use tax due. Subtract line 5 from line 4	6a.		6b.				
PART 3: WITHHOLDING TAX 8. Total amount of Michigan income tax withheld			8.				
6. Total arrivant of morngan moonle ax maniful			0.				
PART 4: TOTAL TAX/PAYMENT DUE							
 Amount of sales, use and withholding tax due. Add lines 6a, 6b, 7, and 8. If amount is negative, this is the amount available for future tax periods (skip lines 10-14) 							
10. Total prior payment (including overpayments available from prior return periods or amounts previously paid for this return period)							
11. Amount of tax due. Subtract line 10 from line 9. If line 10 is greater than line 9, this is the amount available for future tax periods (skip lines 12-14)							
12. Penalty for late filing or late payment (see instructions)							
13. Interest for late payment (see instructions)							
14. TOTAL PAYMENT DUE. Add lines 11, 12 and 13			14.				
Taxpayer Certification. I declare under penalty of perjury that the							
Signature of Taxpayer or Official Representative (must be Owner, Officer,	, ivlember, Mar	nager, or Partner)	Date				
Print Taxpayer or Official Representative's Name	e		Phor	ne Number			
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This return is due on the 20th of the month following the return period.

File and pay this return for free on Michigan Treasury Online at mto.treasury.michigan.gov.

Alternatively, make check payable to "State of Michigan." Write the account number, "SUW Monthly/Quarterly" and return period on the check.

Send the return and payment due to: Michigan Department of Treasury, P.O. Box 30324, Lansing, MI 48909-7824