

MFUT-15 IFTA Quarterly Return

___ Check here if you have changed or updated this information.

$$\frac{1}{2} \times \frac{1}{2} = \frac{1}{4}$$

Cancel fuel license, effective / /

D Jurisdiction	E Fuel type (See Fuel Type Table)	F Total miles	G Taxable miles	H Taxable gallons (Divide Column G by Step 1, Column C)	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Tax/credit due (Multiply Column J by Column K)	M Interest due
IL	D	9208	9208	1074	1063	11	.7570	8.33	0.00
IN	D	16045	16045	1872	1587	285	.5900	168.15	0.00
MI	D	857	857	100	0	100	.4800	48.00	0.00
WI	D	4770	4770	557	952	[395]	.3290	[129.96]	0.00
Total Side 1		30880	30880	3603	3602	1		94.52	
Total Side 2									
Grand Total		30880	30880	3603	3602	1		94.52	

7 \$ 94.52

Date _____

KY WEIGHT DISTANCE TAX FORM

KYU NO 693089

DATE RECEIVED _____

YOU CANNOT USE THIS FORM FOR FILING YOUR KENTUCKY MILE TAX.

QTR ENDING 12/31/2024

EITHER COPY THE INFORMATION ON THE FORM THE STATE MAILED

DATE DUE 01/31/2025

YOU OR GO TO THE LINK BELOW, ENTER YOUR INFORMATION,

PRINT YOUR RETURN, AND SEND IT TO THE STATE.

☐ Amended Return<https://apps.transportation.ky.gov/MCIWizard/kyuwizard.aspx>☐ Ceased OperationsKY miles 0 x \$ 0.0285 = \$ _____

Quarters
1st 3/31
2nd 6/30
3rd 9/30
4th 12/31

If filed after due date Add 20% Penalty _____

NONE

and 6 % Interest Per Annum. _____

Total Penalty & Interest \$ _____

Total amount due \$ 0

Business Name C5 ENTERPRISE, LLC

Address 7420 E PLANK TRAIL CT

City, State Zip FRANKFORT, IL 60423

MAKE A COPY FOR YOUR RECORDS

Make check payable to Kentucky State Treasurer

Mail this report with remittance to:

TRANSPORTATION CABINET
DIVISION OF MOTOR CARRIERS
PO BOX 2004
FRANKFORT KY 40602-2004

Phone: 502-564-4150

Fax: 502-564-2132

<http://transportation.ky.gov/dmc>

I declare under penalties of perjury that this report
is true, correct and complete to the best of my
knowledge and belief.

Signed _____

Date 01/06/2025

Phone () _____