

NOTICE OF TESTING REQUIREMENTS

For the 2024 testing season, testing of this developer-supported form is required even if there are no changes from the prior year. Consult the “Tax Year 2024-25 Miscellaneous Guidelines” for instructions on submitting miscellaneous forms. Failure to test this form could result in rejection of Michigan tax returns (e-file and paper) generated by your software and filed by your customers.

This change to testing expectations is the result of an annual review of the e-file and substitute form programs and procedures of the Michigan Department of Treasury. We appreciate your patience and cooperation as we work together to provide exceptional products to our mutual customers, the taxpayers of the State of Michigan.

Standard testing requirements still apply to all miscellaneous forms unless otherwise noted.

2024 MICHIGAN Individual Income Tax Certification for e-file MI-8453

NOTE: Do not send MI-8453 to the Michigan Department of Treasury unless requested to do so.

1. Filer's First Name		M.I.	Last Name		2. Filer's Full Social Security No. (Example: 123-45-6789)	
If a Joint Return, Spouse's First Name		M.I.	Last Name		_____	
Home Address (Number, Street, or P.O. Box)					3. Spouse's Full Social Security No. (Example: 123-45-6789)	
City or Town					State	ZIP Code

PART 1: TAX RETURN INFORMATION.

The taxpayer should obtain and keep a copy of the return.

Form MI-1040, Individual Income Tax Return

4. Total federal adjusted gross income from line 10	4.		00
5. Total Michigan income tax from line 20	5.		00
6. Michigan tax withheld from line 30	6.		00
7. Tax due from line 34	7.		00
8. Refund from line 37	8.		00

Form MI-1040CR, Homestead Property Tax Credit Claim

9. Homestead Property Tax Credit from line 44	9.		00
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Form MI-1040 CR-7, Home Heating Credit Claim

10. Home Heating Credit Claim from line 47	10.		00
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City of Detroit Tax Return Information

11. Adjusted Gross Income or Wages from Form 5118, line 9, Form 5119, line 9, or Form 5120, line 10 (Column A)	11.		00
12. Tax Due from Form 5118, line 22e, Form 5119, line 24e, or Form 5120, line 41e	12.		00
13. Refund from Form 5118, line 25, Form 5119, line 27, or Form 5120, line 44	13.		00

PART 2: CERTIFICATION AND E-FILE AUTHORIZATION

Under penalties of perjury, I declare that I have examined this return including any accompanying statements and schedules and, to the best of my knowledge and belief, it is true, correct, and complete. The tax return information in Part 1 agrees with the amounts on the corresponding lines of my Michigan and/or City of Detroit tax return. I consent to allow my Intermediate Service Provider, transmitter or Electronic Return Originator (ERO) to send my return to IRS and subsequently by the IRS to the Michigan Department of Treasury and to receive an acknowledgment of receipt or reason for rejection of the transmission.

Filer's Signature	Date	Spouse's Signature	Date
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PART 3: ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER CERTIFICATION

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

ERO Signature	Date	ERO is (check all that apply) <input type="checkbox"/> Paid Preparer <input type="checkbox"/> Self-Employed	ERO's SSN or PTIN
Firm's Name (or yours if self-employed)		FEIN	
Firm's Address (Street, City, State, ZIP Code)			Firm's Telephone Number

Preparer's Name (print or type)			Check if self-employed <input type="checkbox"/>
Preparer's Signature	Date	PTIN	
Firm's Name		Firm's EIN	
Firm's Address (Street, City, State, ZIP Code)			Firm's Telephone Number

Complete this form only if you are e-filing a Michigan or City of Detroit unlinked (standalone) return.