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1 2 3 4	56789012345678901234567	8 9 0 1 2 3 4	5 6	7 8 9 0	1 2 3 4	5678	3 9 0 1 2	3 4 5 6 7 8 9 0	1 2 3 4	56789	9012	3 4 5 6 7	8 9 0 1	2 3 4 5
		Draf	ft 4/′	28/20	2.1									
0 4	Michigan Department of Treasury	1,01		20,20,	- 1									0 4
0 5	5596 (Rev. 04-21)													0.5
0 6	2021 MICHIGAN Estate	or Trust	Ce	ertifi	cati	on fo	or e-f	ile MI-845	53-FE					0 6
0 7	Issued under authority of Public Act 281 of 1967, as				J J J J	Ť								0 7
0.8	NOTE: Do not send MI-8453-FE to the Mic	nigan Depart	ment	of Trea	sury u	nless re	equested	d to do so.						0.8
0 9	1. Name of Estate or Trust							2. Federal Emplo	yer Identi	fication Nu	ımber (FE	IN)		0 9
1 0														1 0
1 1	3. Name and Title of Fiduciary													1 1
1 2														1 2
1 3	<del>                                     </del>											++++		13
14														14
	DADT 4. TAY DETUDN INFODMA	riosi .												
1 5	PART 1: TAX RETURN INFORMAT	i i i i i i		<u> </u>									laal	1 5
1 6	4. Federal taxable income of fiducia	ry (MI-1041,	line	8)					4.			++++	00	1 6
1 7	5. Michigan taxable income (MI-104	1, line 12)							5.				00	17
1 8	6. Total tax (MI-1041, line 13)												00	1 8
1 9	7. Tax due (MI-1041, line 24)			++-		++++			7.				00	19
2 0	8. Refund (MI-1041, line 27)		4.4.4			4-4-4-	4-4-4-4-		8.				00	2 0
2 1		IONI ANID *		p= A 2 0	<del>-</del>	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b></b>							2 1
2 2	PART 2: FIDUCIARY CERTIFICAT	IUN AND E	=-FIL	.E AU	IHUF	(IZAII)	UN						Щ.	2 2
2 3	Under penalties of perjury, I declare that I	have examin	ned th	is retur	n inclu	ding an	y accom	panying statem	ents and	l schedu	ıles and	to the Ł	est of	2 3
2 4	my knowledge and belief, it is true, correct	and complet	te. Th	e tax re	turn in	formatic	n in Par	t 1 agrees with th	ne amou	ınts on th	ne corre	sponding	lines	2 4
2 5	of my Michigan Fiduciary Income Tax Re	turn. I consei	nt to	allow n	ıy Inte	rmediate	e Servic	e Provider, trans	smitter c	r Electro	onic Ret	urn Orig	inator	2 5
2 6	(ERO) to send my return to IRS and sub		the I	RS to t	he Mic	higan E	Departme	ent of Treasury	and to n	eceive a	ın ackno	wledgm	ent of	2 6
2 7	receipt or reason for rejection of the trans	mission.												2 7
2 8	PIN Authorization (Check one box only)							ERO Firm Name						2 8
2 9	I authorize the identified ERO Firm to enter					on for my	tax							2 9
3 0	year 2021 electronically filed tax return. (The	ie ERO must co	ompiete	e Part 3.)										3 0
3 1								PIN (Enter five nu	ımbers. D	o not ente	er all zeros	3)		3 1
3 2	I will enter my PIN as my authorization for r	ny tax year <mark>20</mark> 2	1 elec	tronically	filed tax	return.								3 2
3 3														3 3
3 4	Fiduciary Representative Officer Signature							Date						3 4
3 5														3 5
3 6	Fiduciary Representative Officer Name (print or ty	pe)						Title						3 6
3 7														3 7
3 8														3 8
3 9	PART 3: ELECTRONIC RETURN (	DRIGINATO	OR (I	ERO)	AND	PAID F	PREPA	RER CERTIF	ICATIO	N				3 9
4 0											CI C			4 0
4 1	I declare that the information contained in completed tax return. I declare that the info		1 1 1	1 1 1 1	1 1 1	1 1 1 1	1 1 1 1			1 1 1 1	1 1 1 1	1 1 1 1		4 1
4 2	filer. If the furnished return was signed by													4 2
4 3	portion of this electronic return. If I am the													4 3
4 4	the best of my knowledge and belief, it is t													44
4 5	ERO Signature	Date		ERO	s (checl	call that a	apply)		ERO's	s \$SN or F	PTIN	+++++		4 5
4 6			+++			Preparer		Self-Employed				++++		4 6
4 7			+++	1111	ı aıu r	, upai oi		] our-minioyea				++++		4.7
4 8	Firm's Name (or yours if self-employed)		+++	+		++++	FEIN					++++		4 8
4 9	(3. )5415 5411 5411 5411						1 "					++++		4 9
50	Firm's Address (Street, City, State, ZIP Code)						-		Firm'e	Telephon	e Numbe	r		5 0
									1		S. MIRIDE	++++		5 1
5 1							++++					++++		
5 2	Preparer's Name (print or type)						++++					++++		52
5 3	i repara a rearine (hinir di ràhe)									Ch	- Je			5 3 5 4
5 4										Uneck if	self-empl	oyed	4	54
5 5	Brandrat's Stancture	<del></del>	Deta			++++	I DTIN					++++		5 5
5 6	Preparer's Signature		Date				PTIN							56
5 7	Firm's Name					++++	Eina-1- F	=INI				++++		5 7
5 8	Firm's Name						Firm's E	⊒II <b>N</b>						5 8
5 9							1		+ +	7.1	- N/			5 9
6 0	Firm's Address (Street, City, State, ZIP Code)								Hirm's	Telephon	e Numbe			6 0
6 1	<del>                                     </del>												Ш.	6 1
6:2: :		الو <b>اع</b> أن أن أن أن الأ	Section 1.	_ i m in si_ ni	المراط بلطاف	armeter i de la des	•	المال والرباعات الماشينيات	re de missa i anti-	والمستهجرة	(4) 1 4 4 4 4 4 A	والمناء والمنافرة والمارات		612