Issued under	IICHIGAN Estat authority of Public Act 281 of 19 not send MI-8453-FE to the	67, as amended.			55-1 L	
	Estate or Trust		•		oyer Identification Number (FEIN)	
3. Name an	Title of Fiduciary			I		
L						
	TAX RETURN INFOR		3)		4.	00
	nigan taxable income (MI-		-			00
	l tax (MI-1041, line 13)					00
	due (MI-1041, line 25)					00
8. Ref	und (MI-1041, line 28)				. 8.	00
PART 2:	FIDUCIARY CERTIFIC	CATION AND E-FIL	E AUTHORIZATIO	N		
					nents and schedules and, to t the amounts on the correspor	
					nsmitter or Electronic Return	
			RS to the Michigan De	epartment of Treasury	and to receive an acknowle	dgment of
	eason for rejection of the t			ERO Firm Name		
	PIN Authorization (Check one box only) I authorize the identified ERO Firm to enter or generate my PIN as my authorization for my tax				e	
	2023 electronically filed tax retur					
				PIN (Enter five r	numbers. Do not enter all zeros)	
l will	I will enter my PIN as my authorization for my tax year 2023 electronically filed tax return.					
Fiduciary R	iciary Representative Officer Signature				Date	
Fiduciary R	iduciary Representative Officer Name (print or type)				Title	
					The second secon	
L						
PART 3:	ELECTRONIC RETUR	RN ORIGINATOR (E	ERO) AND PAID PI	REPARER CERTI	FICATION	
I declare t	hat the information contair	ned in this electronic ta	ax return is the information	ation furnished to me	by the filer. If the filer furnis	shed me a
					t contained in the return provi dentifying information in the a	
portion of t	his electronic return. If I am	the paid preparer, unde	er the penalties of perju	iry I declare that I have	e examined this electronic ret	urn, and to
	-	it is true, correct, and co	-		rmation of which I have any k	nowledge.
ERO Signat	lre	Date	ERO is (check all that ap		ERO's SSN or PTIN	
			Paid Preparer	Self-Employed	d	
Firm's Nam	e (or yours if self-employed)		L	FEIN		
Firm's Addre	ess (Street, City, State, ZIP Code	)			Firm's Telephone Number	
Prenarer's	lame (print or type)					
					Check if self-employed	
Preparer's S	ignature	Date		PTIN	<b>!</b>	
Firm's Nam	3			Firm's EIN		
Firm's Addre	ess (Street, City, State, ZIP Code	)			Firm's Telephone Number	
	So toucor, only, orare, ZIF COue	7				