4 5				0 1 2 3 4 5 6 7 8 9 0 1	2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 <u> </u> 9	9 0 1 2
	Michigan Department of Treasury 5596 (Rev. 08-23)	Final Dra	aft 8/16/2023			
	2023 MICHIGAN Estate	or Trust Ce	ertification for	e-file MI-845	3-FE	
	Issued under authority of Public Act 281 of 1967, as NOTE: Do not send MI-8453-FE to the Mic		of Treasury unless requ	ested to do so.		
	Name of Estate or Trust				r Identification Number (FEIN)	$\neg$
	Name and Title of Fiduciary					_
	o. Name and Title of Fiducially					
	PART 1: TAX RETURN INFORMAT	ΓΙΟΝ				
	4. Federal taxable income of fiducial					00
	<ul><li>5. Michigan taxable income (MI-104</li><li>6. Total tax (MI-1041, line 13)</li></ul>					00 00
	7. Tax due (MI-1041, line 25)					00
	8. Refund (MI-1041, line 28)				8.	00
	PART 2: FIDUCIARY CERTIFICAT	ION AND E-FIL	E AUTHORIZATION	I		
	Under penalties of perjury, I declare that I	have examined thi	is return including any a	ccompanying statemen	ts and schedules and, to the best	t of
	my knowledge and belief, it is true, correct, of my Michigan Fiduciary Income Tax Re					
	(ERO) to send my return to IRS and sub-	sequently by the II				
	receipt or reason for rejection of the transi	mission. 		LEDO Eiro Norre		
	PIN Authorization (Check one box only)  I authorize the identified ERO Firm to enter	or generate mv PIN a	s mv authorization for mv tax	ERO Firm Name		
	year 2023 electronically filed tax return. (Th	ne ERO must complete	Part 3.)			
	PIN (Enter five I will enter my PIN as my authorization for my tax year 2023 electronically filed tax return.				bers. Do not enter all zeros)	
	I will enter my PIN as my authorization for r					
	Fiduciary Representative Officer Signature			Date	Date	
	Fiduciary Representative Officer Name (print or type)			Title	Titlo	
	Fiduciary Representative Officer Name (print or ty	Title	Title			
	PART 3: ELECTRONIC RETURN (	ORIGINATOR (E	ERO) AND PAID PRI	EPARER CERTIFIC	CATION	
	I declare that the information contained in	<u>`</u>				
	completed tax return, I declare that the info	ormation contained	in this electronic tax retu	ırn is identical to that co	ontained in the return provided by t	the
	filer. If the furnished return was signed by portion of this electronic return. If I am the					
	the best of my knowledge and belief, it is t					
	ERO Signature	Date	ERO is (check all that apply		ERO's SSN or PTIN	
			Paid Preparer	Self-Employed		
	Firm's Name (or yours if self-employed)	•	F	EIN		
	Firm's Address (Street, City, State, ZIP Code)				Firm's Telephone Number	
	Time Addison (Street, Sky, State, Zii Scacy				Time religione realizer	
						_
	Preparer's Name (print or type)  Check if self-employed					
					Officer if self-employed	
	reparer's Signature Date PTII			TIN		
	Firm's Name	irm'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 Fiduciary Income Tax unlinked (standalone) return.					
	Complete this form only if	all are a filling -	Michigan Eiduaia.	v Incomo Tov usli:	akad (etandalana) ratur	
	Complete this form only if yo	ou are e-filing a	ı Michigan Fiduciar	y Income Tax unlii	nked (standalone) return.	