





## CLAIM FOR REFUND DUE ON BEHALF OF DECEASED TAXPAYER

DECEDENT INFORMATION				ESTATE INFORMATION			
TAXPAYER I	ID	DATE OF DEA	ATH	TAXPAYER ID			
FIRST NAME	М	.I. LAST NAME		ESTATE NAME			
ADDRESS				ADDRESS			
ADDICESS				ADDICESS			
CITY		STATE	ZIP CODE	CITY	STATE	ZIP CODE	
PART	A. Personal represer	ntative appointed o	r certified by court	BOX). MAKE SURE TO SIGN AND DA t. You MUST attach a court certificate d's estate. Complete Part 2 and attach	showing your appointment.	or proof of	death.
PART	COMPLETE THIS PART O	ONLY IF YOU CHEC	KED BOX B ABOV	E		YES	NO
	1. Did the decedent leave a will?						
	2a. Has a personal representative been appointed by a court for the estate of the decedent?						
	2b. If "NO", will one be appointed? If 2a or 2b is answered "YES", the personal representative must file for the refund.						
	3. As the person claiming the refund for the decedent's estate, will you pay out the refund according to the laws of the state where the decedent was a legal resident?						
	If the answer to que appointment as pers			made until you submit a court cert	ificate showing your		
PART  3	SIGNATURE AND VERIFICATION (All filers must complete this part)						
	I request a refund of taxes overpaid by or on behalf of the decedent. Under penalties of perjury, I declare that I have examined this claim, a the best of my knowledge and belief, it is true, correct, and complete.						and to
				DATE			

 $\ensuremath{\mathscr{Q}}$  Form to be submitted with the tax return seeking the refund.