

**CLAIM FOR REFUND DUE  
ON BEHALF OF DECEASED TAXPAYER**

DECEDENT'S NAME

DATE OF DEATH

MM DD YY

DECEDENT'S SOCIAL SECURITY NUMBER

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CLAIMANT'S NAME

CLAIMANT'S SOCIAL SECURITY NUMBER

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CLAIMANT'S ADDRESS

CITY

STATE

ZIP CODE

**PART 1. CHECK THE BOX THAT APPLIES TO YOU (CHECK ONLY ONE BOX). MAKE SURE TO SIGN AND DATE IN PART 3 BELOW**

- A. ☐ Personal representative appointed or certified by court. You **MUST** attach a court certificate showing your appointment.
- B. ☐ Person, other than A, claiming refund for the decedent's estate. Complete Part 2 and attach a copy of the death certificate or proof of death.

**PART 2. COMPLETE THIS PART ONLY IF YOU CHECKED BOX B ABOVE**

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 1. Did the decedent leave a will?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2a. Has a personal representative been appointed by a court for the estate of the decedent?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2b. If "NO", will one be appointed?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b><i>If 2a or 2b is answered "YES", the personal representative must file for the refund</i></b>  |                          |                          |
| 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?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b><i>If 3 is answered "No", a refund cannot be made until you submit a court certificate showing your appointment as personal representative or other evidence that you are entitled, under state law, to receive the refund.</i></b> |                          |                          |

**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, and to the best of my knowledge and belief, it is true, correct, and complete.*

\_\_\_\_\_  
Claimant's Signature

MM DD YY  
Date

