	Arizona Form 131 Claim for Refund on Behalf of Deceased Taxpayer						r CALENDAR YEAR	
		Please print of	r type.					
	For calendar year dece	dent was due a refund: <u>2,0,1</u>	<u>_6</u> OR 🛛 F	iscal year	ending: MON	TH YEAR		
1 Decedent's Name (last, first, middle initial)							s Social Security Number	
4 Name of Person Claiming Refund (last, first, middle initial) 5 Claimant's Social Second					l nt's Social Secur	ity or Federal	I.D. No.	
6 Home Address of Person Claiming Refund - number and street, rural route Apt. No. REVENUE USE ONLY. DO						OT MARK IN TH	IIS AREA.	
7 City	, Town or Post Office	State ZIP Coo	le	Γ				
8 Cla	imant's Relationship to Decedent			-				
Part	Part 1 Check the box that applies to you. Check only one box. 81 PM Be sure to complete Part 3 below. 81 PM					80 RCVD		
9a	Surviving spouse claimin	ng a refund based on a joint retu	rn.	1				
9b	Court-appointed or certificate	ied personal representative. e (issued after death) showing y	our appointmer	nt.				
9c	Person other than 9a or See instructions and con	9b claiming refund for the deceo nplete Part 2 below.	lent's estate.					
Part	2 Complete Part 2 only if y	you checked box 9c in Part 1 ab	ove.					
10a	Did the decedent leave a wi	ll?				YES 10a	NO □	
10b	0b Has a personal representative been appointed for the estate of the decedent?							
10c	C If you answered "No" on line 10b, will one be appointed? If you answered "Yes" to 10b or 10c, do not file this form. The personal representative must file for the refund.					10c 🔲		
11	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?					11 🔲		
		e 11, a refund cannot be made u as personal representative or un law to receive the refund.						
Part	3							
		d by, or on behalf of, the deceden amined by me and to the best						

Signature of Person Claiming Refund

Date