ARIZONA FORM 131

Claim for Refund on Behalf of Deceased Taxpayer

2000

Refund clai	im for calendar year	, or other tax ye	ar beginning	, and endi	ng		<u></u> .
Print or Type	1 Name of decedent - last, first,	middle initial	2 Date of death	3 Social security num	nber of decedent		
Decedent				-	1		
Information	4 Number and street - permanent residence or domicile on the date of death			5 City or town, state,	and ZIP code		
Information to be	6 Name of person claiming refund - last, first, middle initial 7 Relationship to deced			8 Claimant's social security number or Federal ID number			
Provided by Claimant	9 Number and street of person claiming refund			10 City or town, state, and ZIP code			
11 I am filing this statement as <i>(check only one box):</i>							
b. ☐ De c. ☐ Pe <i>Sc</i>	riviving spouse claiming a refur ecedent's personal representati erson, other than (a) or (b), clair chedule A and attach a copy of	ive. Attach a court certificate ming refund for the deceden the death certificate or proo	t's estate. <i>Complete</i> <i>f of death.</i>	88			
Please attach requested information and sign below. If you checked box (c), also complete Schedule A. [81]					80		
SCHEDULE A (to be completed only if you checked box (c) above.)						Yes	No
12 Did the decedent leave a will?							
a. Has a personal representative been appointed for the estate of the decedent? b. If "No," will one be appointed?							
			representative should file for the				
•	•		pay out the refund according to				
If "No," a i	refund cannot be made until yo	ou submit a court certificate s	showing your appointment as pe			<u>I</u>	<u> </u>
	ntitled, under state law, to recei			11 11 11		II	
Signature of Claimant	I request a refund of taxes overpaid by, or on behalf of, the decedent. I, the undersigned claimant, certify under all penalties, fines and forfeitures imposed by law for the making of false or fraudulent claims against the State of Arizona or the making of false statements in connection therewith, that the statements made herein have been examined by me and that such statements are true to the best of my knowledge and belief.						
	Signature of person claiming	refund		Date			_
Notary Public	Note: If the claimant is sor return with the deced	meone other than the surv dent, the claimant's signat					
	Subscribed to and sworn bef	ore me this	day of				
	My commission expires				D. LE.		
	(Notary Public)						
	Attach this form to the front of the income tax return that would have been filed if the decedent had lived.						
	If the refund is issued in the name of the decedent it may be cashed with the endorsement of the executor or administrator of the estate.						
	Attach any required documents, certificates, etc., to this form.						
	For military personnel, the original, or an authentic copy, of a telegram or letter from the Department of Defense notifying the next of kin of the decedent's death while in active service, or a death certificate issued by the Department of Defense will be sufficient proof of death.						
	As the surviving spouse or personal representative, you may be required to file a fiduciary return (Form 141) or an estate tax return (Form 74 or 76) for the decedent's estate. For further information concerning these forms call (602) 255-3381, or nationwide, toll-free (800) 352-4090.						