	Arizona Form 131 Claim for Refund on Behalf of Deceased Taxpayer							AR YEAR 18
			Please print or	type.				
☐ For ca	llendar year dece	edent was due a	refund: <u>2,0,1</u>	<u>8</u> OR □F	iscal year		TH YEAR	
1 Decedent's Name (last, first, middle initial)				2 Date of Death	h / V V V	3 Decedent's	Social Security	Number
4 Name of Person Claiming Refund (last, first, middle initial) Daytime Phone (with area code) 5 Claimant's Social Se 94 94								
6 Home Address of Person Claiming Refund - number and street, rural route Apt. No. REVENUE USE 0						USE ONLY. DO N	OT MARK IN TH	IIS AREA.
7 City, Town or Post Office State ZIP Code								
8 Claimant's Relation	nship to Decedent				-			
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 🔲 Survivii	ng spouse claimi	ng a refund base	d on a joint retur	۱.				
9b Court-appointed or certified personal representative. Include a court certificate (issued after death) showing your appointment.								
	other than 9a or tructions and cor	-		ent's estate.				
Part 2 Complete Part 2 only if you checked box 9c in Part 1.								
10a Did the decedent leave a will?							YES 10a 🔲	NO □
10b Has a personal representative been appointed for the estate of the decedent?							10b 🔲	
10c 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 🔲	
showing yo	vered "No" on line our appointment a titled under state	as personal repre	esentative or unti					
Part 3								
	d of taxes overpai rm have been e:							
→ Signature of P	erson Claiming Refu	nd		Date				