

Please print or type.

For calendar year decedent was due a refund: 2014 OR Fiscal year ending: MONTH YEAR MM,YY **66**

1 Decedent's Name (last, first, middle initial)		2 Date of Death M M D D Y Y Y Y	3 Decedent's Social Security Number
4 Name of Person Claiming Refund (last, first, middle initial)			5 Claimant's Social Security or Federal I.D. No.
6 Home Address of Person Claiming Refund - number and street, rural route		Apt. No.	REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 88
7 City, Town or Post Office	State	ZIP Code	
8 Claimant's Relationship to Decedent			

Part 1 Check the box that applies to you. Check only one box. Be sure to complete Part 3 below.

81 PM	80 RCVD
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- 9a Surviving spouse claiming a refund based on a joint return.
- 9b Court-appointed or certified personal representative.
Include a court certificate (issued after death) showing your appointment.
- 9c Person other than 9a or 9b claiming refund for the decedent's estate.
See instructions and complete Part 2 below.

Part 2 Complete Part 2 only if you checked box 9c in Part 1 above.

	YES	NO
10a Did the decedent leave a will?	10a <input type="checkbox"/>	<input type="checkbox"/>
10b Has a personal representative been appointed for the estate of the decedent?	10b <input type="checkbox"/>	<input type="checkbox"/>
10c If you answered "No" on line 10b, will one be appointed?	10c <input type="checkbox"/>	<input type="checkbox"/>
If you answered "Yes" to 10a or 10b, do not file this form. The personal representative must file for the refund.		
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 <input type="checkbox"/>	<input type="checkbox"/>

If you answered "No" on line 11, a refund cannot be made until you submit a court certificate showing your appointment as personal representative or until you submit other evidence that you are entitled under state law to receive the refund.

Part 3

I request a refund of taxes overpaid by, or on behalf of, the decedent. Under penalties of perjury, I declare that the statements made on this form have been examined by me and to the best of my knowledge, they are true, correct and complete.

→ _____
Signature of Person Claiming Refund

_____ Date