Form 1310 (Rev. November 2005) Department of the Treasury Internal Revenue Service

Statement of Person Claiming Refund Due a Deceased Taxpayer

► See instructions below and on back.

OMB No. 1545-0074

Attachment Sequence No. **87**

Tax	year decedent was due a refund:					
Cale	ndar year , or other tax year beginning	,	, and ending	,		
Please print or type	Name of decedent		Date of death Decedent's so		cial security number	
			/ /			
	Name of person claiming refund			Your social security number		
				!		
	Tierre dadices (tarres and encey). If you have a 1101 box, ess mendenens.			Apt. no.		
	City, town or post office, state, and ZIP code. If you have a foreign address, see instructions.			State	ZIP	
Pai	t I Check the box that applies to you. Check of	only one box.	Be sure to compl	ete Part III bel	ow.	
A	A Surviving spouse requesting reissuance of a refund check (see instructions).					
В	Court-appointed or certified personal representative (defined below). Attach a court certificate showing your appointment, unless previously filed (see instructions).					
С	Person, other than A or B, claiming refund for the decedent's estate (see instructions). Also, complete Part II.					
Par	t II Complete this part only if you checked the	box on line	C above.			
					Yes	No
	1 Did the decedent leave a will?					
	Has a court appointed a personal representative for the est					
	f you answered "No" to 2a, will one be appointed?					
	f you answered "Yes" to 2a or 2b, the personal representa					
C	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?					
	f you answered "No" to 3, a refund cannot be made until you as personal representative or other evidence that you are e					
Pai	t III Signature and verification. All filers must c	omplete this	part.			
	uest a refund of taxes overpaid by or on behalf of the decedent. Uest of my knowledge and belief, it is true, correct, and complete.	Jnder penalties o	f perjury, I declare that	I have examined th	is claim	, and to

Signature of person claiming refund ▶

Date ▶