	NASF-D Claim for Refund on Behalf of Deceased Native Ame	erican Vet	eran
☐ For	calendar year decedent was due a refund: 1993 1994 1995 1996 1997 199		
OR	□ 2000 □ 2001 □ 2002 □ 2003 □ 2004 □ 200 □ Fiscal year ending: □ , , , , , , , , , , , 66	5	
1 Decedent's Name (last, first, middle initial) 2 Date of Death 3 Decedent's Social Security Number			
4 Name of Person Claiming Refund (last, first, middle initial) 5 Claimant's Social Security			.D. No.
6 Home Address of Person Claiming Refund - number and street, rural route Apt. No. REVENUE USE ONLY. DO N 88			IIS AREA.
7 City, Town or Post Office State ZIP Code			
8 Clain	nant's Relationship to Decedent		
Part 1	Check the box that applies to you. Check only one box. Be sure to complete Part 3 below.	80 RCVD	
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.		
	Does the value of decedent's estate exceed \$30,000?	YES 10a 🔲	NO
10b	Did the decedent leave a will?	10b 🔲	
10c	Has a personal representative been appointed for the estate of the decedent?	10c □	
ı	If you answered "No" on line 10c, will one be appointed?	10d 🗌	
	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 🗆	
,	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			
	est a refund of taxes overpaid by, or on behalf of, the decedent. Under penalties of perjury, I declare on this form have been examined by me and to the best of my knowledge, they are true, co		
→	ignature of Person Claiming Refund Date		