3 Government of the District of Columbia 2023 D-40B SUB Nonresident Request for Refund 5 Request for Refund 230403 0351000 6 230403 000000 1000000 7 230403 0403510000 000000 8 Personal information Software Developer use only 9 Your first name M.I. Last name VENDOR # 9999 10 4000000000000000000000000000000000000	3 4 5 6 7 8 9 10
8 Personal information SOFTWARE DEVELOPER USE ONLY 9▲ Your first name VENDOR # 9999 10 H XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	8
9 Your first name M.I. Last name VENDOR # 9999 10 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
In the second	10
11 B. Your Taxpayer Identification Number (TIN) Your date of birth (MMDDYYYY) Daytime phone number 12 J.	
12 3 </td <td>11</td>	11
14 W Current mailing address (number, street and suite/apartment number if applicable) 14 W 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	12
	14
	16
16 9999XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	17
18 ₩ City State Zipcode + 4 19 ₩ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	18
	20
21 & Country or U.S. Commonwealth/U.S territory	21
	22
23 Email Address 24 9XXXX9XXXX9XXXX9XXXX9XXXXXXXXXXXXXXXX	23
 9XXXX9XXX9XXX9XXX9XXXXXXXXXXXXXXXXXXX	24 S 25
	26
 26 27 below. Please select only one between A and B. Provide property information on Line C if applicable. 27 4 A Commuter/Domiciliary State Exemption: I declare that during the taxable year shown above I either commuted on a daily basis from my place 28 4 of residence to work in the District of Columbia (DC) or I was a domiciliary or legal resident of the state listed and my only income from sources 	27
of residence to work in the District of Columbia (DC) or I was a domiciliary or legal resident of the state listed and my only income from sources	28
	29
 within DC was from wages and salaries, which are subject to taxation by (enter the 2 letter state abbreviation for your domiciliary or legal state of residency). I did not maintain a place of abode in DC for a total of 183 days or more. (see instructions). DC tax was erroneously withheld from salary and wages paid to me by my employer. 	30 XX 31
31 표 from salary and wages paid to me by my employer.	XX 31 32
ac 音 33 長 B Military spouse exemption: If your non-resident military spouse was in the armed services during 2023, and you are not a DC resident, or elected	33
$\frac{1}{2}$ to use the same residence as your non-resident military spouse, enter the state of domicile declared on DD Form 2058. You must complete and	34
to use the same residence as your non-resident military spouse, enter the state of domicile declared on DD Form 2058. You must complete and attach a copy of DD Form 2058, JAN 2018 with the D-40B.	XX 35 36
37 🖉 C List the type and location of any DC real property you own. Type of property XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	37
 Address(number, street and suite/apartment_number if applicable) 	38
	40
41	41
Address (number, street and suite/apartment number if applicable)	42
43 9999XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	43
44 Refund request Round cents to the nearest de la construction de la	blank
45 46 1 DC income tax withheld <u>Attach</u> copies of your withholding statements. 1 999999999	45 • 0 0 46
46 1 DC income tax withheld <u>Attach</u> copies of your withholding statements. 1 999999999 47 2 2023 DC estimated income tax payments 2 999999999	
48 3 Refund request Add lines 1 and 2. 3 999999999	
49 Will the refund go to an account outside the U. S.? X Yes X No See instructions	49
⁵⁰ Refund Options; For more information on the tax refund card and program limitations, see instructions or visit our website MyTax.DC.gov	50
51 Mark one refund choice X Direct Deposit or X ReliaCard (See Instructions) or X Paper Check	51
52 Direct Deposit If you want your refund deposited in your bank account, fill in type of account X checking X savings and enter the routin 53 number and account number below.	
53 number and account number below. 54 Routing Number 999999999999999999999999999999999999	53
Fill in X ifyou agree to receive your 1099-G Income Tax refund statement electronically (see instructions).	55
	56
Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that	
56 57 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 58 Designee's name Phone number	person. 57 58
56 57 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 58 Designee's name 59 Signature 59 Signature Under penalties of law, I declare that I have examined this request and any attached statements and, to the best of my knowledge, they are corrected and any attached statements and to the best of my knowledge. They are corrected attached statements and the best of my knowledge. They are constrained the statements and attached statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the best of my knowledge. They are constrained the statements and the statements and the best of my knowledge. They are constrained the statement of the stateme	person. 57 58 rect. 59
 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that Designee's name Signature Under penalties of law, I declare that I have examined this request and any attached statements and, to the best of my knowledge, they are cor 	rect. 57 60
56 57 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 58 Designee's name Phone number 59 Signature Under penalties of law, I declare that I have examined this request and any attached statements and, to the best of my knowledge, they are cor 60 0 61 Your signature Date	person. 57 58 rect. 59
56 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 57 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 58 Designee's name Phone number 59 Signature Under penalties of law, I declare that I have examined this request and any attached statements and, to the best of my knowledge, they are cor 60 Preparer's signature 61 Your signature Date 62 Preparer's Tax Identification Number (PTIN) 63 Preparer's Tax Identification Number (PTIN)	berson. 57 58 58 rect. 59 60 61
56 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 57 Third party designee To authorize another person to discuss this return with OTR, fill in here X and enter the name and phone number of that 58 Designee's name Phone number 59 Signature Under penalties of law, I declare that I have examined this request and any attached statements and, to the best of my knowledge, they are cor 60 Preparer's signature 61 Your signature Date 62 Preparer's Tax Identification Number (PTIN) 99999999999	berson. 57 58 59 60 61 62 62

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