Government of the District of Columbia

2024 D-40B SUB Nonresident Request for Refund

2 4 0 4 0 3 S 1 0 0 0 1

STAPLE OTHER REQUESTED DOCUMENTS IN UPPER LEFT

STAPLE W-2s AND OTHER WITHHOLDING STATEMENTS HERE

Personal information

SOFTWARE DEVELOPER USE ONLY
VENDOR # 9999

Your first name: XXXXXXXXXXXXXXX
M.I.: X
Last name: XXXXXXXXXXXXXXXXXXXX

Your Taxpayer Identification Number (TIN): 999999999
Your date of birth (MMDDYYYY): 99999999
Daytime phone number: 9999999999

Current mailing address (number, street and suite/apartment number if applicable)
9999XXXXXXXXXXXXXXXXXXXXXXXXXX
9999XXXXXXXXXXXXXXXXXXXXXXXXXX

City: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
State: XX
Zipcode + 4: 999999999

Country or U.S. Commonwealth/U.S. territory
XXXXXXXXXXXXXXXXXXXXXXXXXX

Email Address
9XXXX9XXXX9XXXX9XXXXXXXXXXXXXXXXXXX

Review categories A - B below and attach your withholding statements and, if applicable, DD Form 2058, JAN 2018. **Indicate the state in the boxes below. Please select only one between A and B. Provide property information on Line C if applicable.**

A Commuter/Domiciliary State Exemption: I declare that during the taxable year shown above I either commuted on a daily basis from my place 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 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. XX

B Military spouse exemption: If your non-resident military spouse was in the armed services during 2024, and you are not a DC resident, or elected 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

C List the type and location of any DC real property you own. Type of property XXXXXXXXXXXXXXXXXXXX

Address(number, street and suite/apartment number if applicable)
9999XXXXXXXXXXXXXXXXXXXXXX

Address (number, street and suite/apartment number if applicable)
9999XXXXXXXXXXXXXXXXXXXXXX

Refund request

Round cents to the nearest dollar.
If amount is zero, leave line blank

1	DC income tax withheld *Attach copies of your withholding statements.*	1 999999999.00
2	2024 DC estimated income tax payments	2 999999999.00
3	Refund request *Add lines 1 and 2.*	3 999999999.00

Will the refund go to an account outside the U. S.? X Yes X No See instructions

Refund Options; **For more information on the tax refund card and program limitations, see instructions or visit our website MyTax.DC.gov**

Mark one refund choice X *Direct Deposit* or X *ReliaCard (See Instructions)* or X *Paper Check*

Direct Deposit ***If you want your refund deposited in your bank account, fill in type of account*** X ***checking*** X ***savings and enter the routing number and account number below.***

Routing Number 999999999
Account Number 9999999999999999999

Fill in X ifyou agree to receive your 1099-G Income Tax refund statement electronically (see instructions).

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 person.*

Designee's name
Phone number

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 correct.

Your signature
Date
Preparer's signature

Preparer's Tax Identification Number (PTIN) 999999999

Revised 10/2024