

**2017** D-40B Nonresident Request for Refund



Important: Print in CAPITAL letters using black ink. Leave lines blank that do not apply.

STAPLE OTHER REQUESTED DOCUMENTS IN UPPER LEFT BEHIND THIS FORM

**Personal information**

OFFICIAL USE ONLY  
Vendor ID#0000

Your first name  M.I.  Last name

Your Taxpayer Identification Number (TIN)  Your date of birth (MMDDYYYY)  Daytime phone number

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

City  State  Zip Code + 4

Country or U.S. commonwealth/U.S. territory

**Review categories 1 - 2** below and attach your withholding statements.

- 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 more than 183 days. (see instructions). DC tax was erroneously withheld from salary and wages paid to me by my employer.
- Military spouse exemption: If your non-resident military spouse was in the armed services during 2017, and you are not a DC resident, enter the state of domicile declared on DD Form 2058.
- List the type and location of any DC real property you own.
 

Type of property

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

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

**Refund request**

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

- |  |                           |    |
|--|---------------------------|----|
| 1. DC income tax withheld <i>Attach copies of your withholding statements.</i> | 1 \$ <input type="text"/> | 00 |
| 2. 2017 DC estimated income tax payments                                       | 2 \$ <input type="text"/> | 00 |
| 3. Refund request <i>Add Lines 1 and 2.</i>                                    | 3 \$ <input type="text"/> | 00 |

Will the refund go to an account outside the US?  Yes  No See instructions.

**Refund Options:** For information on the tax refund card and program limitations, see instructions or visit our website [MyTax.DC.gov](http://MyTax.DC.gov)

Mark one refund choice:  Direct Deposit  ReliaCard (See Instructions)  Paper Check

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

Routing Number  Account Number

Third party designee To authorize another person to discuss this return with OTR, fill in here  and enter the name and phone number of that person. See instructions.

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)