Government of the District of Columbia

2020 D-40B Nonresident
Request for Refund

2 0 0 4 0 1 1 1 0 0 0 0

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

Personal information

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 A - B below and attach your withholding statements and/or DD Form 2058, JAN 2018. **Indicate the state in the boxes below.**

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 more than 183 days. (see instructions). DC tax was erroneously withheld from salary and wages paid to me by my employer.

B. Military spouse exemption: If your non-resident military spouse was in the armed services during 2020, 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.

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

Type of property _____

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

Type of property _____

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** *Attach copies of your withholding statements.*   1 $ _____ .00

2. **2020 DC estimated income tax payments**   2 $ _____ .00

3. **Refund request** *Add Lines 1 and 2.*   3 $ _____ .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**
Mark **one** refund choice: ◯ Direct Deposit *or*   ◯ ReliaCard (see instructions) *or*   ◯ 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 _____

Fill in ◯ if you 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* ◯ *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) _____

Revised 04/20