



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

STAPLE W-2s AND OTHER WITHHOLDING STATEMENTS HERE

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 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 2019, 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 <i>Attach copies of your withholding statements.</i>	1 \$.00
2. 2019 DC estimated income tax payments	2 \$.00
3. Refund request <i>Add Lines 1 and 2.</i>	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) _____