

2024 D-40B Nonresident Request for Refund



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

Personal information

OFFICIAL USE ONLY Vendor ID#0002

Form fields for 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, City, State, Zip Code + 4, Country or U.S. commonwealth/U.S. territory, Email Address.

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.

Review categories A, B, and C with checkboxes and text boxes for property information.

Refund request

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

Refund request table with 3 rows and columns for amount and description.

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 or Paper Check

Direct Deposit section with routing and account number fields.

Fill in if you agree to receive your 1099-G Income Tax Refund Statement electronically (see instructions).

Third party designee section with name and phone number fields.

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.

Signature section with fields for your signature, date, preparer's signature, and PTIN.

STAPLE OTHER REQUESTED DOCUMENTS IN UPPER LEFT BEHIND THIS FORM