

2005 D-40B SUB Nonresident Request for Refund



OFFICIAL USE ONLY

Personal information

Your first name M.I. Last name
ABCDEFGHIJKLMN ABC A ABCDEFGHIJKLMNOPQRST

Your social security number Your daytime phone number
123456789 1234567890

Current mailing address Apartment number
12345ABCDEFGHIJKLMN 12ABC
ABCDEFGHIJKLMN

City State Zipcode
ABCDEFGHIJKLMN AB 123456789

Country or U.S. Commonwealth

ABCDEFGHIJKLMN

Fill in if you filed one of the following forms in the previous year:
ABCDEFGHIJKLMN X40 X-40EZ X-40B If not, give reason.

Refund request Attach a signed copy of your state return(s)

Round cents to the nearest dollar.

If the amount is zero, leave the line blank.

Table with 3 columns: Line number, Description, Amount. Includes rows for Total gross income, DC gross income, DC income tax withheld, 2005 DC estimated income tax payments, and Refund request.

Residence information

2005 DC residence From MMDD To MMDD
DC address (number and street) City State Zipcode
12345ABCDEFGHIJKLMN ABCDEFGHIJKLMNOPQRST AB 123456789

2005 permanent residence
State or Country or U.S. commonwealth
AB ABCDEFGHIJKLMNOPQRST

Did you return or do you intend to return to this permanent residence? X Yes X No
If yes, date you returned or intend to return MMDDYY

Reason you lived in DC during 2005
ABCDEFGHIJKLMN

Reason you moved or intend to move out of DC
ABCDEFGHIJKLMN

List the states where you resided during the last 10 years, beginning with your present residence.

Table with 6 columns: Label, State, From (MMYY), To (MMYY), State, From (MMYY), To (MMYY). Includes rows a, b, c, d, e, f.



Enter your last name ABCDEFGHIJKLMNOPQ

Your social security number 123456789

Other residence information

9 Place of birth (city and state) State Date of birth
ABCDEFGHIJKL ABC AB MMDDYY
10 State where you last voted AB Date you voted MMDDYY Are you registered to vote in DC? X Yes X No
11 Complete only if you were in military service during 2005.
State where inducted AB Induction date MMDDYY

Residence at time of induction

State or Country or U.S. commonwealth
AB ABCDEFGHIJKLMNOPQ

Employment history

12 Current employer From
ABCDEFGHIJKL MMDDYY
Current employer's address (number and street) City State Zipcode
12345ABCDEFGHIJKL ABC 123456789
Previous employer From
ABCDEFGHIJKL MMDDYY
Previous employer's address (number and street) City State Zipcode
12345ABCDEFGHIJKL ABC 123456789

Property information

13 List all DC real property owned and the location
Type of property
ABCDEFGHIJKL
Address (number and street) City State Zipcode
12345ABCDEFGHIJKL ABC 123456789
Type of property
ABCDEFGHIJKL
Address (number and street) City State Zipcode
12345ABCDEFGHIJKL ABC 123456789

14 List income tax and/or intangible personal property tax you paid in the tax year to the jurisdiction of your permanent residence listed on line 7.
Mark tax type: X Income tax X Intangible personal property tax Amount \$ 123456789.00
Mark tax type: X Income tax X Intangible personal property tax Amount \$ 123456789.00

Signature Under penalties of the law, I declare that I have examined this request and any attached statements, and to the best of my knowledge it is correct.

Your Signature

Date

Send your signed and completed request to:
Office of Tax and Revenue
PO Box 7861
Washington, DC 20044-7861

Who must file a Form D-40B?

- Any nonresident of DC claiming a refund of DC income tax withheld or paid by estimated tax payments.
A nonresident is anyone whose permanent home was outside DC during all of 2005 and who did not live in DC for a total of 183 days or more during 2005.

A joint request for refund is not permitted.

How will we respond to your request?

- We will send you a refund check for the amount of your request if the information you have provided is correct; or
Based on the information you provide, we may determine that you qualify as a DC resident. If so, we will send you a notice of your residency status and require that you file either a Form D-40 or D-40EZ to request a refund.