

Filing Status [ ] Single [X] Married filing jointly [ ] Married filing separately (MFS) [ ] Head of household (HOH) [ ] Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Form fields for personal information: Your first name and middle initial (VENKATA NAGA PRASAD), Last name (DASARI), Your social security number (707-37-7624), Spouse's social security number (848-50-7129), Home address (12424 STREAMDALE DR), City (TAMPA), State (FL), ZIP code (33626), Foreign country name, Foreign province/state/county, Foreign postal code.

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? [ ] Yes [X] No

Standard Deduction Someone can claim: [ ] You as a dependent [ ] Your spouse as a dependent [ ] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [ ] Were born before January 2, 1956 [ ] Are blind Spouse: [ ] Was born before January 2, 1956 [ ] Is blind

Table with 6 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes dependents VENKTA NAGA CHETAN DASARI and ESWAR DASARI.

Main income tax calculation table with 15 rows. Includes sections for Attach Sch. B if required, Standard Deduction for (with bullet points for filing status), and final taxable income calculation (15 Taxable income: 109,163).

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.



# Application for IRS Individual Taxpayer Identification Number

OMB No. 1545-0074

► For use by individuals who are not U.S. citizens or permanent residents.  
► See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

Application type (check one box):  
 Apply for a new ITIN  
 Renew an existing ITIN

**Before you begin:**

• Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN).

**Reason you're submitting Form W-7.** Read the instructions for the box you check. **Caution:** If you check box **b, c, d, e, f,** or **g,** you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions).

- a  Nonresident alien required to get an ITIN to claim tax treaty benefit
- b  Nonresident alien filing a U.S. federal tax return
- c  U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return
- d  Dependent of U.S. citizen/resident alien } If d, enter relationship to U.S. citizen/resident alien (see instructions) ► SON
- e  Spouse of U.S. citizen/resident alien } If d or e, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ► DASARI VENKATA NAGA PRASAD 707-37-7624
- f  Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception
- g  Dependent/spouse of a nonresident alien holding a U.S. visa
- h  Other (see instructions) ►

Additional information for **a** and **f**: Enter treaty country ► and treaty article number ►

<b>Name</b> (see instructions) Name at birth if different ►	<b>1a</b> First name VENKTA NAGA CHETAN	Middle name	Last name DASARI
	<b>1b</b> First name	Middle name	Last name

**Applicant's Mailing Address**

**2** Street address, apartment number, or rural route number. **If you have a P.O. box, see separate instructions.**  
12424 STREAMDALE DR

City or town, state or province, and country. Include ZIP code or postal code where appropriate.  
TAMPA FL USA 33626

**Foreign (non-U.S.) Address**  
(see instructions)

**3** Street address, apartment number, or rural route number. **Don't use a P.O. box number.**

City or town, state or province, and country. Include postal code where appropriate.

**Birth Information**

<b>4</b> Date of birth (month / day / year) 09 / 01 / 2007	Country of birth INDIA	City and state or province (optional)	<b>5</b> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
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**Other Information**

**6a** Country(ies) of citizenship  
INDIA

**6b** Foreign tax I.D. number (if any)

**6c** Type of U.S. visa (if any), number, and expiration date

**6d** Identification document(s) submitted (see instructions)  Passport  Driver's license/State I.D.  
 USCIS documentation  Other

Issued by: INDIA No.: T8267019 Exp. date: 04 / 03 / 2024 Date of entry into the United States (MM/DD/YYYY): 04 / 04 / 2019

**6e** Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?  
 No/Don't know. Skip line 6f.  
 Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).

**6f** Enter ITIN and/or IRSN ► **ITIN** 926-99-0120 **IRSN** and name under which it was issued ► VENKTA NAGA CHETAN DASARI  
 First name Middle name Last name

**6g** Name of college/university or company (see instructions) ► City and state ► Length of stay ►

**Sign Here**  
Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.

Keep a copy for your records.

Signature of applicant (if delegate, see instructions)	Date (month / day / year)	Phone number
Name of delegate, if applicable (type or print) DASARI VENKATA NAGA PRASAD	Delegate's relationship to applicant <input checked="" type="checkbox"/> Parent <input type="checkbox"/> Court-appointed guardian <input type="checkbox"/> Power of attorney	
Signature	Date (month / day / year)	Phone Fax
Name and title (type or print)	Name of company	EIN Office code
		PTIN

# Application for IRS Individual Taxpayer Identification Number

OMB No. 1545-0074

► For use by individuals who are not U.S. citizens or permanent residents.  
 ► See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

Application type (check one box):  
 Apply for a new ITIN  
 Renew an existing ITIN

**Before you begin:**

• Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN).

**Reason you're submitting Form W-7.** Read the instructions for the box you check. **Caution:** If you check box **b, c, d, e, f,** or **g,** you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions).

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- b  Nonresident alien filing a U.S. federal tax return
- c  U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return
- d  Dependent of U.S. citizen/resident alien } If d, enter relationship to U.S. citizen/resident alien (see instructions) ► SON
- e  Spouse of U.S. citizen/resident alien } If d or e, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ► DASARI VENKATA NAGA PRASAD 707-37-7624
- f  Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception
- g  Dependent/spouse of a nonresident alien holding a U.S. visa
- h  Other (see instructions) ►

Additional information for **a** and **f**: Enter treaty country ► and treaty article number ►

<b>Name</b> (see instructions) Name at birth if different ►	<b>1a</b> First name ESWAR	Middle name	Last name DASARI
	<b>1b</b> First name	Middle name	Last name

**Applicant's Mailing Address**

**2** Street address, apartment number, or rural route number. **If you have a P.O. box, see separate instructions.**  
 12424 STREAMDALE DR  
 City or town, state or province, and country. Include ZIP code or postal code where appropriate.  
 TAMPA FL USA 33626

**Foreign (non-U.S.) Address**  
(see instructions)

**3** Street address, apartment number, or rural route number. **Don't use a P.O. box number.**  
 City or town, state or province, and country. Include postal code where appropriate.

<b>Birth Information</b>	<b>4</b> Date of birth (month / day / year) 10 / 15 / 2011	Country of birth INDIA	City and state or province (optional)	<b>5</b> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
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**Other Information**

**6a** Country(ies) of citizenship: INDIA

**6b** Foreign tax I.D. number (if any):

**6c** Type of U.S. visa (if any), number, and expiration date:

**6d** Identification document(s) submitted (see instructions)  Passport  Driver's license/State I.D.  
 USCIS documentation  Other \_\_\_\_\_  
 Issued by: INDIA No.: T8267051 Exp. date: 04 / 03 / 2024 Date of entry into the United States (MM/DD/YYYY): 04 / 04 / 2019

**6e** Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?  
 No/Don't know. Skip line 6f.  
 Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).

**6f** Enter ITIN and/or IRSN ► ITIN 926-99-0113 IRSN and name under which it was issued ► ESWAR DASARI  
 First name Middle name Last name

**6g** Name of college/university or company (see instructions) ► City and state ► Length of stay ►

**Sign Here**  
 Keep a copy for your records.

Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.

Signature of applicant (if delegate, see instructions)	Date (month / day / year)	Phone number
Name of delegate, if applicable (type or print) DASARI VENKATA NAGA PRASAD	Delegate's relationship to applicant <input checked="" type="checkbox"/> Parent <input type="checkbox"/> Court-appointed guardian <input type="checkbox"/> Power of attorney	

**Acceptance Agent's Use ONLY**

Signature	Date (month / day / year)	Phone	Fax
Name and title (type or print)	Name of company	EIN	PTIN
		Office code	