

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) ▶ _____
- 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) ▶ _____
 MANI BABU THAMMISETTI 881-69-7169
- 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 ▶ _____

Name (see instructions) Name at birth if different . . ▶	1a First name SHIVARATHRI	Middle name	Last name THABITHA
	1b 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.**
 1947 SAUTERNE CT APT C

City or town, state or province, and country. Include ZIP code or postal code where appropriate.
 SAINT LOUIS MO USA 63146

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

4 Date of birth (month / day / year) 05/29/1999 Country of birth INDIA City and state or province (optional) _____ **5** Male Female

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 _____ Date of entry into the United States (MM/DD/YYYY): _____

Issued by: INDIA No.: S6473434 Exp. date: 10/21/2028

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** _____ **IRSN** _____ and name under which it was issued ▶ _____
 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) _____ Delegate's relationship to applicant Parent Court-appointed guardian 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 _____

