

## 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):                        |
| <input checked="" type="checkbox"/> Apply for a new ITIN |
| <input type="checkbox"/> 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) ▶ DAUGHTER
- 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) ▶  
RAMABABU TATIKONDA 588-37-9123
- 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><br>(see instructions)<br>Name at birth if different ▶ | <b>1a</b> First name<br>GNAPIKA | Middle name | Last name<br>TATIKONDA |
|   | <b>1b</b> First name            | Middle name | Last name              |

|                                    |   |
|------------------------------------|---|
| <b>Applicant's Mailing Address</b> | <b>2</b> Street address, apartment number, or rural route number. <b>If you have a P.O. box, see separate instructions.</b><br>300 PARSIPPANY RD Apt 14 I |
|                                    | City or town, state or province, and country. Include ZIP code or postal code where appropriate.<br>PARSIPPANY NJ USA 07054                               |

|   |   |
|---|---|
| <b>Foreign (non-U.S.) Address</b><br>(see instructions) | <b>3</b> Street address, apartment number, or rural route number. <b>Don't use a P.O. box number.</b> |
|   | 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)<br>02 / 16 / 2019 | Country of birth<br>INDIA | City and state or province (optional) | <b>5</b> <input type="checkbox"/> Male<br><input checked="" type="checkbox"/> Female |
|--------------------------|---|---------------------------|---------------------------------------|--|

|                          |   |  |   |  |
|--------------------------|---|--|---|--|
| <b>Other Information</b> | <b>6a</b> Country(ies) of citizenship<br>INDIA  | <b>6b</b> Foreign tax I.D. number (if any) | <b>6c</b> Type of U.S. visa (if any), number, and expiration date<br>H4 R0515000 07 / 02 / 2022 |  |
|                          | <b>6d</b> Identification document(s) submitted (see instructions) <input checked="" type="checkbox"/> Passport <input type="checkbox"/> Driver's license/State I.D.<br><input type="checkbox"/> USCIS documentation <input type="checkbox"/> Other  |  |   | Date of entry into the United States (MM/DD/YYYY): |
|                          | <b>6e</b> Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?<br><input checked="" type="checkbox"/> <b>No/Don't know.</b> Skip line 6f.<br><input type="checkbox"/> <b>Yes.</b> Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions). |  |   |  |
|                          | <b>6f</b> Enter ITIN and/or IRSN ▶ <b>ITIN</b> <b>IRSN</b> and name under which it was issued ▶   |  | First name  | Middle name  |

**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)<br>RAMABABU TATIKONDA | Delegate's relationship to applicant<br><input checked="" type="checkbox"/> Parent <input type="checkbox"/> Court-appointed guardian<br><input type="checkbox"/> Power of attorney |              |

|                                    |                                |                           |       |      |
|------------------------------------|--------------------------------|---------------------------|-------|------|
| <b>Acceptance Agent's Use ONLY</b> | Signature                      | Date (month / day / year) | Phone | Fax  |
|                                    | Name and title (type or print) | Name of company           | EIN   | PTIN |