

Application for IRS Individual Taxpayer Identification Number

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

► See separate instructions.

OMB No. 1545-0074

| An IRS individual taxpayer identification number (ITIN) is for federal tax purposes only. | | | | | | | Application Type (Check one box): | | | |
|---|--|--|----------------------------------|--------------------------------------|-------------------|-----------------------------|-----------------------------------|--|------------------|--|
| Before you begin: | | | | | | | | | | |
| • Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN). | | | | | | | | Apply for a New ITIN | | |
| • Getting an ITIN doesn't change your immigration status or your right to work in the United States and doesn't make you eligible for the earned income credit. | | | | | | | Renew an Existing ITIN | | | |
| Reason you're su must file a U.S. fe | ubmitting Form W-7. Read the insederal tax return with Form W-7 | structions for unless you r | the box you | ou check. (of the exce | Caution ptions | n: If you (see in | u check bo structions) | x b, c, d, e, f, c | or g, you | |
| a Nonresident | alien required to get an ITIN to claim to | ax treaty bene | fit | | | | | | | |
| b Nonresident | b ☐ Nonresident alien filing a U.S. federal tax return | | | | | | | | | |
| c U.S. resident | esident alien (based on days present in the United States) filing a U.S. federal tax return | | | | | | | | | |
| _ ' | d ☐ Dependent of U.S. citizen/resident alien } Enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ▶ | | | | | | | | | |
| | use of U.S. citizen/resident alien | | | | | | | | | |
| | | | | | | | | | | |
| _ | | | | | | | | | | |
| | | | | | | | | | | |
| | formation for a and f: Enter treaty cour 1a First name | | and treaty article numb | | | | | | | |
| Name (see instructions) | e instructions) | | | | | | ast name | | | |
| Name at birth if different • | 1b First name | | | | | | t name | | | |
| A 11 : | 2 Street address, apartment number | er, or rural rout | te number. I t | you have a | a P.O. b | ox, see | separate in | structions. | | |
| Applicant's mailing address | City ou town all the | ad co:!- | Jude 710 | do 0 | 00-1 | hom | nron-i-i | | | |
| maining address | Only or town, state or province, ar | City or town, state or province, and country. Include ZIP code or postal code where appropriate. | | | | | | | | |
| Foreign (non- U.S.) address | | | | | | | | | | |
| (if different from above) (see instructions) | City or town, state or province, ar | nd country. Inc | clude ZIP co | de or postal | code w | here ap | propriate. | | | |
| Birth information | | ountry of birth | | City and st | | | | 5 Male Female | | |
| Other information | | Foreign tax I.I | | | : Type o | of U.S. vi | sa (if any), nu | mber, and expirati | ion date | |
| - | | 6d Identification document(s) submitted (see instructions) Passport Driver's license/State I.D. | | | | | | | | |
| | USCIS documentation | Other | | | | Da | ate of entry ir | nto the | | |
| | loound him | | . | oto | , | Ur | nited States | | | |
| - | Issued by: No.: | ITINI and the last | Exp. date: / / (MM/DD/YYYY): / / | | | | | | | |
| | 6e Have you previously received an I | | ınaı Kevenu | e service Ni | unber (l | u2IN). | | | | |
| 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). | | | | | | | | A | | |
| } | 6f Enter ITIN and/or IRSN ► ITIN | unan one, IIS | S. On a Sheet | and attach t | to this fo | | | ·y· | and | |
| | name under which it was issued | ┅┅╹ | шш [–] L | | 3 | ··• L | | | اللا مالا | |
| | namo ander which it was issued t | | name | Mid | dle nam | <u></u> | | 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. | | | | | | | | | |
| | Signature of applicant (if delegate, see instructions) Date (month / day / year) Phone number | | | | | | | | | |
| Keep a copy for your records. | Name of delegate, if applicable (type or print) | | | Delegate's relationship to applicant | | | Parent Power of | Parent Court-appointed guardian Power of Attorney | | |
| Accomtons | Signature | | | Date (month / day / year) P | | | Power or z | <u> </u> | | |
| Acceptance | F | | | | | | Fax | | | |
| Agent's Use ONLY | Name and title (type or print) | | Name of company | | E | EIN . | | PTIN | | |
| | <u></u> | | | | Office Code | | | | | |