

Form 8946 (Sept 2010)	PTIN Supplemental Application For Foreign Persons Without A Social Security Number		OMB Number 1545-xxxx
Do not submit this form if you have, or are eligible to get, a U.S. Social Security Number (SSN)			
Name (see instructions)	1 First name	Middle Name	Last Name
Applicant's Complete Mailing Address	2 Street address, Apt. number, or rural route number. If you have a P.O. box, see instructions. City or town, state or province, and country. Include ZIP code or postal code where appropriate		
Applicant's Complete Permanent Non-U.S. Address (see instructions)	3 Street address, apartment number, or rural route number. Do not use a P.O. box number City or town, state or province, and country. Include postal code when appropriate		
Birth Information	4 Date of birth (mm/dd/yyyy)	Country of birth	5 <input type="checkbox"/> Male <input type="checkbox"/> Female
	Name at birth (if different from above) First name Middle name Last name		
Foreign Status And Identification Information	6 Foreign status and identification document(s) submitted (see instructions) <input type="checkbox"/> Passport <input type="checkbox"/> Foreign Driver's License <input type="checkbox"/> National ID Card <input type="checkbox"/> Foreign Voter's Registration Card <input type="checkbox"/> U.S. Military ID Card <input type="checkbox"/> Foreign Military ID Card <input type="checkbox"/> Civil Birth Certificate <input type="checkbox"/> U.S. Visa		
Sign Here	Under penalty of perjury, I 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. Signature of applicant Date Phone number		
For IRS Use Only			