

Form <b>8946</b> (Sept 2010)	<b>PTIN Supplemental Application For Foreign Persons Without A Social Security Number</b>		OMB Number 1545-xxxx
<b>Do not submit this form if you have, or are eligible to get, a U.S. Social Security Number (SSN)</b>			
<b>Name</b> (see instructions)	1 First name	Middle Name	Last Name
<b>Applicant's Complete Mailing Address</b>	2 Street address, Apt. number, or rural route number. <b>If you have a P.O. box, see instructions.</b>  City or town, state or province, and country. Include ZIP code or postal code where appropriate		
<b>Applicant's Complete Permanent Non-U.S. Address</b> (see instructions)	3 Street address, apartment number, or rural route number. <b>Do not use a P.O. box number</b>  City or town, state or province, and country. Include postal code when appropriate		
<b>Birth Information</b>	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		
<b>Foreign Status And Identification Information</b>	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		
<b>Sign Here</b>	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		
<b>For IRS Use Only</b>			