Department of the Treasury

Application for Employer Identification Number (For use by employers, corporations, partnerships, trusts, estates, churches, government agencies, Indian tribal entities, certain individuals, and others.) See separate instructions for each line. Keep a copy for your records. Go to www.irs.gov/FormSS4 for instructions and the latest information.

	OIVIB NO.	1545-0003	
FINI			

EIN

Intern	al Revenue	Service Go to www.irs.gov/FormSS4 for ins	structi	ons and	tne ia	atest informatio	on.		
	<b>1</b> Le	gal name of entity (or individual) for whom the EIN is b	eing r	equested					
arly.	2 Tra	2 Trade name of business (if different from name on line 1)		3 Executor, administrator, trustee, "care of" name					
Type or print clearly.	4a Mailing address (room, apt., suite no. and street, or P.O. box)			5a Street address (if different) (Don't enter a P.O. box.)					
or pr	<b>4b</b> Cit	ry, state, and ZIP code (if foreign, see instructions)		<b>5b</b> City	y, sta	te, and ZIP code	e (if forei	ign, see instructions)	
- Lype	<b>6</b> Co	unty and state where principal business is located							
•	<b>7a</b> Na	me of responsible party			7b	SSN, ITIN, or E	EIN		
8a		application for a limited liability company (LLC) reign equivalent)?	es	□No	8b If 8a is "Yes," enter the number of LLC members				
8c					٠.			Yes	
9a	Type o	f entity (check only one box). Caution: If 8a is "Yes,"	see th	e instruct	ions	for the correct b	ox to ch	neck.	
	☐ So	e proprietor (SSN)				Estate (SSN of c			
	Pai	rtnership				Plan administrat			
	_	rporation (enter form number to be filed)			_	Trust (TIN of gra			
	_	rsonal service corporation				Military/National		State/local government	
		urch or church-controlled organization				Farmers' coopera	ative	☐ Federal government	
	_	ner nonprofit organization (specify)				REMIC		Indian tribal governments/enterprises	
		ner (specify) poration, name the state or foreign country (if	Stata		Grou	ıp Exemption Νι			
9b 		ble) where incorporated	State Foreign country						
10	Reason for applying (check only one box)			anking pu	purpose (specify purpose)				
				Changed type of organization (specify new type)					
					rchased going business				
					eated a trust (specify type)				
					pensi	on plan (specify	type)		
11		ner (specify) Isiness started or acquired (month, day, year). See ins	struotio	nne -	12	Closing month	of acco	ounting year	
••	Date bt	isiness started or adquired (month, day, year). See inc	sti uctic	JI 13.					
13	Highest number of employees expected in the next 12 months (enter -0- if If no employees expected, skip line 14.  Agricultural Household Other				14 If you expect your employment tax liability to be \$1,000 or less in a full calendar year and want to file Form 944 annually instead of Forms 941 quarterly, check here. (Your employment tax liability will generally be \$1,000 or less if you expect to pay \$5,000 or less, \$6,536 or less if you're in a U.S. territory, in total wages.) If you don't check this box, you must file Form 941 for				
						every quarter.			
15	First date wages or annuities were paid (month, day, year). <b>Note:</b> If applicant is a withholding agent, enter date income will first be paid to nonresident alien (month, day, year)								
16	Check o	one box that best describes the principal activity of your	busine	ess. 🔲	Heal	th care & social a	assistano	ce Wholesale-agent/broker	
	_	nstruction Rental & leasing Transportation & w		sing 🔲		ommodation & fo	od servi	ce Wholesale-other Retail	
		al estate 🗌 Manufacturing 🔲 Finance & insura				er (specify)			
17	Indicate	e principal line of merchandise sold, specific construc	tion w	ork done,	proc	lucts produced,	or servi	ces provided.	
18	Has the	applicant entity shown on line 1 ever applied for and	receiv	ed an Ell	۷?	Yes	No		
	If "Yes,	" write previous EIN here							
		Complete this section <b>only</b> if you want to authorize the name	ned ind	ividual to re	eceive	the entity's EIN a	nd answe		
Thir								Designee's telephone number (include area code)	
Par	_	Address and 7/D and						Designation of the second of t	
Des	ignee	Address and ZIP code						Designee's fax number (include area code)	
116 - 2		I was a second of the second o	£ !	lad 1	L - P - C -	t to to to	1 :	Applicant's telephone number (include area and a)	
	•	perjury, I declare that I have examined this application, and to the best o	i my kno	wiedge and	beliet, i	t is true, correct, and	complete.	Applicant's telephone number (include area code)	
Name	and title	(type or print clearly)						Applicant's fax number (include area code)	
Signs	ature				Date			, wphoding and number (include area code)	

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## Do I Need an EIN?

File Form SS-4 if the applicant entity doesn't already have an EIN but is required to show an EIN on any return, statement, or other document. 1 See also the separate instructions for each line on Form SS-4.

IF the applicant	AND	THEN
started a new business	doesn't currently have (nor expect to have) employees	complete lines 1, 2, 4a-8a, 8b-c (if applicable), 9a, 9b (if applicable), 10-14, and 16-18.
hired (or will hire) employees, including household employees	doesn't already have an EIN	complete lines 1, 2, 4a–6, 7a–b, 8a, 8b–c (if applicable), 9a, 9b (if applicable), and 10–18.
opened a bank account	needs an EIN for banking purposes only	complete lines 1–5b, 7a–b, 8a, 8b–c (if applicable), 9a, 9b (if applicable), 10, and 18.
changed type of organization	either the legal character of the organization or its ownership changed (for example, you incorporate a sole proprietorship or form a partnership) <sup>2</sup>	complete lines 1-18 (as applicable).
purchased a going business <sup>3</sup>	doesn't already have an EIN	complete lines 1-18 (as applicable).
created a trust	the trust is other than a grantor trust or an IRA trust <sup>4</sup>	complete lines 1–18 (as applicable).
created a pension plan as a plan administrator <sup>5</sup>	needs an EIN for reporting purposes	complete lines 1, 3, 4a-5b, 7a-b, 9a, 10, and 18.
is a foreign person needing an EIN to comply with IRS withholding regulations	needs an EIN to complete a Form W-8 (other than Form W-8ECI), avoid withholding on portfolio assets, or claim tax treaty benefits <sup>6</sup>	complete lines 1–5b, 7a–b (SSN or ITIN as applicable), 8a, 8b–c (if applicable), 9a, 9b (if applicable), 10, and 18.
is administering an estate	needs an EIN to report estate income on Form 1041	complete lines 1–7b, 9a, 10–12, 13–17 (if applicable), and 18.
is a withholding agent for taxes on nonwage income paid to an alien (that is, individual, corporation, or partnership, etc.)	is an agent, broker, fiduciary, manager, tenant, or spouse who is required to file Form 1042, Annual Withholding Tax Return for U.S. Source Income of Foreign Persons	complete lines 1, 2, 3 (if applicable), 4a–5b, 7a–b, 8a, 8b–c (if applicable), 9a, 9b (if applicable), 10, and 18.
is a state or local agency	serves as a tax reporting agent for public assistance recipients under Rev. Proc. 80-4, 1980-1 C.B. 581 <sup>7</sup>	complete lines 1, 2, 4a-5b, 7a-b, 9a, 10, and 18.
is a single-member LLC (or similar single-member entity)	needs an EIN to file Form 8832, Entity Classification Election, for filing employment tax returns and excise tax returns, or for state reporting purposes <sup>8</sup> , or is a foreign-owned U.S. disregarded entity and needs an EIN to file Form 5472, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business	complete lines 1-18 (as applicable).
is an S corporation	needs an EIN to file Form 2553, Election by a Small Business Corporation <sup>9</sup>	complete lines 1–18 (as applicable).

<sup>&</sup>lt;sup>1</sup> For example, a sole proprietorship or self-employed farmer who establishes a qualified retirement plan, or is required to file excise, employment, alcohol, tobacco, or firearms returns, must have an EIN. A partnership, corporation, REMIC (real estate mortgage investment conduit), nonprofit organization (church, club, etc.), or farmers' cooperative must use an EIN for any tax-related purpose even if the entity doesn't have employees.

- <sup>3</sup> Don't use the EIN of the prior business unless you became the "owner" of a corporation by acquiring its stock.
- <sup>4</sup> However, grantor trusts that don't file using Optional Method 1 and IRA trusts that are required to file Form 990-T, Exempt Organization Business Income Tax Return, must have an EIN. For more information on grantor trusts, see the Instructions for Form 1041.
- <sup>5</sup> A plan administrator is the person or group of persons specified as the administrator by the instrument under which the plan is operated.
- <sup>6</sup> Entities applying to be a Qualified Intermediary (QI) need a QI-EIN even if they already have an EIN. See Rev. Proc. 2000-12.
- <sup>7</sup> See also Household employer agent in the instructions. **Note:** State or local agencies may need an EIN for other reasons, for example, hired employees.
- <sup>8</sup> See *Disregarded entities* in the instructions for details on completing Form SS-4 for an LLC.
- 9 An existing corporation that is electing or revoking S corporation status should use its previously assigned EIN.

<sup>&</sup>lt;sup>2</sup> However, don't apply for a new EIN if the existing entity only (a) changed its business name, (b) elected on Form 8832 to change the way it is taxed (or is covered by the default rules), or (c) terminated its partnership status because at least 50% of the total interests in partnership capital and profits were sold or exchanged within a 12-month period. The EIN of the terminated partnership should continue to be used. See Regulations section 301.6109-1(d)(2)(iii).