Note: Form SS-4 begins on the next page of this document.

Change to Fax-TIN Numbers

There is a change to the Instructions for Form SS-4 (Rev. February 2016). On page 2, under the **"Where to File or Fax"** table, the Fax-TIN numbers have changed.

If you have a principal place of business, office or agency, or legal residence in the case of an individual, located in:	File or Fax to:			
One of the 50 states or the District of Columbia	Internal Revenue Service Attn: EIN Operation Cincinnati, OH 45999 Fax: (855) 641-6935			
If you have no legal residence, principal place of business, or principal office or agency, in any state:	Internal Revenue Service Attn: EIN Operation Cincinnati, OH 45999 Fax: (855) 215-1627 (within the U.S.) Fax: (304) 707-9471 (outside the U.S.)			

These changes will be included in the next revision of the Instructions for Form SS-4.

Application for Employer Identification Number

(For use by employers, corporations, partnerships, trusts, estate government agencies, Indian tribal entities, certain individuals,

ates, churches,	.
s. and others.)	

OMB No. 1545-0003

Department of the Treasury

Interr	nal Revenue	e Service	See separate instructions	s for each lin	e.	► Keep	a copy	for your rec	ords.	
			ntity (or individual) for who	m the EIN is b	peing re	quested				•
arly.	2 Tr	ade name of b	ousiness (if different from na	ame on line 1))	3 Exe	ecutor, a	dministrator,	trustee,	"care of" name
Type or print clearly.	4a M	ailing address	(room, apt., suite no. and	street, or P.O.	. box)	5a Stro	eet addr	ess (if differe	nt) (Do n	ot enter a P.O. box.)
or pr	4b Ci	ity, state, and	ZIP code (if foreign, see ins	structions)		5b City	y, state,	and ZIP code	e (if forei	gn, see instructions)
Туре		•	e where principal business	is located						
	7a Na	ame of respon	sible party				7b S	SSN, ITIN, or	EIN	
8a	(or a fo	oreign equivale	or a limited liability companent)?	🗆 Ye	es [□ No	1			ne number of ▶
8c	If 8a is	"Yes," was th	ne LLC organized in the Uni	ted States?						· · · · 🗌 Yes 🔲 No
9a	Type o	of entity (chec	k only one box). Caution.	f 8a is "Yes,"	see the	instruct	ions for	the correct b	ox to che	eck.
		ole proprietor (• •				_	ate (SSN of c		
	_	artnership					_	n administrat		
		•	tor form number to be filed				_	st (TIN of gra	. ,	-
			ter form number to be filed)				_		intor)	
	_	ersonal service	•				_	tional Guard		State/local government
	_		ch-controlled organization					mers' coopera		Federal government/military
			organization (specify) 🕨 _					MIC		Indian tribal governments/enterprises
		ther (specify)					Group I	Exemption Nu	umber (G	EN) if any ▶
9b		rporation, nam able) where in	ne the state or foreign coun corporated	try (if	State				Foreign	country
10	Reaso	n for applyin	g (check only one box)		☐ Baı	nking pu	rpose (s	pecify purpo	se) ▶	
	_		siness (specify type)					ganization (s		ew type) ►
			· · · · · · · · · · · · · · · · · · ·	_		rchased		-	,	· · ·
	Пні	red employee	s (Check the box and see li	ne 13)			-	ecify type) ►		
			n IRS withholding regulation					plan (specify	tv(00)	
	_			15		eateu a p	Jei iSiOi i	plair (Specify	type)	
44		ther (specify)					10	Ola aira ar ras ara		
11	Date b	usiness starte	ed or acquired (month, day,	year). See ins	struction	ns.	12			counting year
							14			apployment tax liability to be \$1,000 or
13	Highes	t number of en	nployees expected in the nex	t 12 months (e	enter -0-	if none).				year and want to file Form 944 orms 941 quarterly, check here.
	If no e	mployees exp	ected, skip line 14.					,		x liability generally will be \$1,000
										to pay \$4,000 or less in total wages.)
		Agricultural	Household		Other					nis box, you must file Form 941 for
								every quarter		25%, 900
15	Firet d	late wages or	annuities were naid (mon	th day year	Note	If annli	cant is	<u> </u>		enter date income will first be paid to
13		-	onth, day, year)					>	y agent,	enter date income will first be paid to
16			pest describes the principal a					care & social a	aeeietano	e Wholesale-agent/broker
		onstruction		ensportation & w		_		modation & fo		
		_		•		ilig 🗀			ou sei vic	de 🔲 Wilolesale-otillei 🔲 Hetali
		eal estate		nance & insura		<u> </u>	,	specify) ►		
17	indicat	te principai iin	e of merchandise sold, spe	CITIC CONSTRUC	tion wo	rk aone,	produc	is produced,	or servic	es provided.
40	l loo th	a annliaant an	titu abayya an lina 1 ayay a	anlind for and	l raaaire	nd on FIN	uo [7 Vaa - F	No	
18			itity shown on line 1 ever a	opiled for and	receive	an En	N!	_ Yes _	_ NO	
	IT "Yes	`, 	us EIN here		a al ila alissia			atituda FINI aaal		
 .				thorize the name	ea maivid	auai to rec	eive trie e	entity S EIN and	answer qu	uestions about the completion of this form.
Thi		Designee's	name							Designee's telephone number (include area code
Par	_									
Des	signee	Address ar	nd ZIP code							Designee's fax number (include area code
		1								
Unde	r penalties o	of perjury, I declare	that I have examined this application,	and to the best of	my knowle	edge and be	elief, it is tru	e, correct, and cor	mplete.	Applicant's telephone number (include area code
Nam	e and title	type or print cl	early) ►							
										Applicant's fax number (include area code)
Sign	ature ►						Date ►			

Form SS-4 (Rev. 1-2010) Page **2**

Do I Need an EIN?

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

IF the applicant	AND	THEN			
Started a new business	Does not currently have (nor expect to have) employees	Complete lines 1, 2, 4a–8a, 8b–c (if applicable), 9a, 9b (if applicable), and 10–14 and 16–18.			
Hired (or will hire) employees, including household employees	Does not already have an EIN	Complete lines 1, 2, 4a–6, 7a–b (if applicable), 8a, 8b–c (if applicable), 9a, 9b (if applicable), 10–18.			
Opened a bank account	Needs an EIN for banking purposes only	Complete lines 1–5b, 7a–b (if applicable), 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) ²	Complete lines 1–18 (as applicable).			
Purchased a going business 3	Does not 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 ⁴	Complete lines 1–18 (as applicable).			
Created a pension plan as a plan administrator ⁵	Needs an EIN for reporting purposes	Complete lines 1, 3, 4a–5b, 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 ⁶	Complete lines 1–5b, 7a–b (SSN or ITIN optional), 8a, 8b–c (if applicable), 9a, 9b (if applicable), 10, and 18.			
ls administering an estate	Needs an EIN to report estate income on Form 1041	Complete lines 1–6, 9a, 10–12, 13–17 (if applicable), and 18.			
Is a withholding agent for taxes on non-wage income paid to an alien (i.e., 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 (if applicable), 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 ⁷	Complete lines 1, 2, 4a–5b, 9a, 10, and 18.			
ls a single-member LLC	Needs an EIN to file Form 8832, Classification Election, for filing employment tax returns and excise tax returns, or for state reporting purposes ⁸	Complete lines 1-18 (as applicable).			
Is an S corporation Needs an EIN to file Form 2553, Election by a Small Business Corporation ⁹		Complete lines 1–18 (as applicable).			

¹ 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 does not have employees.

- ³ Do not use the EIN of the prior business unless you became the "owner" of a corporation by acquiring its stock.
- ⁴ However, grantor trusts that do not 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.
- ⁵ A plan administrator is the person or group of persons specified as the administrator by the instrument under which the plan is operated.
- ⁶ Entities applying to be a Qualified Intermediary (QI) need a QI-EIN even if they already have an EIN. See Rev. Proc. 2000-12.
- ⁷ See also Household employer on page 4 of the instructions. **Note.** State or local agencies may need an EIN for other reasons, for example, hired employees.
- ⁸ See Disregarded entities on page 4 of 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.

² However, do not 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).