
SS-4 Application for Employer Identification Number

1. Legal name of entity (or individual) for whom the EIN is being requested

2. Trade name of business (if different from #1)

3. State where principal business is located

4. Full address

5. Mailing address (if different from #4)

6. Name of responsible party, Phone number, Tax number

7. SSN, ITN or EIN of the responsible party (if applicable)

8. Is this an application for the limited liability company (LLC)? Yes No
 - 8a. If yes, please provide the number of LLC members. (Number of people)

9. Type of entity (sole proprietor, partnership, corporation, etc.)
 - 9a. If corporation, please provide the state of foreign country that it was incorporated in

10. Reasons for applying a EIN application

Started new business (specify type)

Hired employees

Banking purpose (specify purpose)

Changed type of organization

Purchased going business

Created trust (specify type)

Created a pension plan (specify type)

11. Incorporation Date (MM/DD/YYYY)

12. Closing month of accounting year

13. Highest number of employees expected in the next 12 months (in US)? Yes No

13a. If yes, when is the first date where wages or annuities were paid?

14. Principal activity of the business

- | | |
|---------------------------------|------------------------------------|
| a. Construction | g. Health care & social assistance |
| b. Rental & leasing | h. Accommodation & food service |
| c. Transportation & warehousing | i. Wholesale-agent/broker |
| d. Real Estate | j. Wholesale-other |
| e. Manufacturing | k. Retail |
| f. Finance & insurance | l. Other (Specify) |

15. Principal line of product or services provided