Form SS-4 (Rev. 8-76)
Department of the Treasury
Internal Revenue Service

Application for Employer Identification Number

(For use by employers and others as explained in the instructions)

1	I Name (True name	as distinguished from t	rade name. If partner	ship, see Instructions	on page 4)			
2 Trade name, if any (Enter name under which business is operated, if different from item 1)						3 Social security num	nber, if sole proprietor	
4	4 Address of principa	I place of business (Nur		5 Ending month of accounting year				
-	5 City and State				7 ZIP code	8 County of busin	ess location	
9	Type of organizatio Governmental (See Instr. on page	Nonprofit		Partnership 0	 Other (specify)	10 Date you acquired or started this business (Mo., day, year)		
11	Reason for applying Started new business		d	Other (specify)		12 First date you paid or will pay wage for this business (Mo., day, year)		
13	3 Nature of business (See Instructions on page 4)					14 Do you operate of business?	more than one place	
15	Peak number of em next 12 months (I	ployees expected in f none, enter "0") ▶	Nonagricultural	Agricultural	Household		iness is manufactur pal product and rav	
17	To whom do you sel Business establishments	I most of your products General public	П	Other (specify)				
18	ber for this or any	ied for an identification other business?	95 No			-		
	Also enter the appr	ne and trade name (if roximate date, city, and blied and previous num	State					
Da	ate	Signature and title	<u>.</u>			Telephone number		
PI	ease leave blank	Geo.	Ind.	Class	Size	Reas. for appl.	Part I	

Instructions

Who must file.—Every person who has not previously obtained an identification number and who (a) pays wages to one or more employees, or (b) is required to have an identification number for use on any return, statement, or other document, even though not an employer.

Trusts, estates, corporations, partnerships, nonprofit organizations (such as churches, clubs, etc.), and similar nonindividual persons must use employer identification numbers even if they have no employees.

Individuals who file Schedules C or F (Form 1040) must also use employer identification numbers if they are required to file excise, alcohol, tobacco, firearms, or employment tax returns.

Only one application for an identification number should be filed, regardless of the number of establishments operated. This is true even though the business is conducted under one or more business or trade names. Each corporation of an affiliated group must be treated separately, and each must file a separate application. If a business is sold or transferred and the new owner does not have an identification number, the new owner cannot use the identification number assigned to the previous owner, and must file an application on Form SS-4 for a new identification number.

Where to file.— If your principal business, office or agency, or legal residence in the case of an individual, is located in:	File with the Internal Revenue Service Center at:		
New Jersey, New York City and counties of Nassau, Rockland, Suffolk, and West- chester	1040 Waverly Avenue Holtsville, N.Y. 11799		
New York (all other counties), Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	310 Lowell Street Andover, Mass. 01812		
District of Columbia, Delaware, Maryland, Pennsylvania	11601 Roosevelt Bivd. Philadelphia, Pa. 19155		
Alabama, Florida, Georgia, Mississippi, South Carolina	4800 Buford Highway Chamblee, Georgia 30006		
Michigan, Ohio	Cincinnati, Ohio 45298		
Arkansas, Kansas, Louisiana, New Mex- ico, Oklahoma, Texas	3651 S. Interregional Highway Austin, Texas 78740		
Alaska, Arizona, Col- orado, Idaho, Minne- sota, Montana, Ne- braska, Nevada, North Dakota, Oregon, South Dakota, Utah, Wash- ington, Wyoming	1160 West 1200 South Street Ogden, Utah 84201		

Illinois, Iowa Missouri, Wisconsin	2306 E. Bannister Road Kansas City, Missouri 64170
California, Hawaii	5045 East Butler Ave. Fresno, Calif. 93888
Indiana, Kentucky, North Carolina, Ten- nessee, Virginia, West Virginia	3131 Democrat Road Memphis, Tennessee 38110

If you have no legal residence, principal place of business, or principal office or agency in any Internal Revenue district, file your return with the Internal Revenue Service Center, 11601 Roosevelt Boulevard, Philadelphia, Pennsylvania 19155.

When to file.—(a) By those who pay wages, on or before the seventh day after the date on which business begins. (b) By others, in sufficient time for the identification number to be included in return, statement, or other document.

Specific Instructions

Items 1, 2, and 3.—Enter in item 1 the true name of the applicant and enter in item 2 the trade name, if any, adopted for business purposes. For example, if John W. Jones, an individual owner, operates a restaurant under the trade name of "Busy Bee Restaurant," "John W. Jones" should

(Continued on page 4)

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Application for Employer Identification Number

(For use by employers and others as explained in the Instructions)

1 Name (True name as distinguished from trade name. If p	artnership, see Instruction	s on page 4)			
2 Trade name, if any (Enter name under which business is	3 Social security num	ber, if sole proprietor			
4 Address of principal place of business (Number and street)	5 Ending month of	accounting year			
6 City and State		7 ZIP code	8 County of busine	ess location	
9 Type of organization Individual Governmental Nonprofit organization (See Instr. on page 4)	Partnership Corporation	Other (specify)	10 Date you acquired or started thi business (Mo., day, year)		
11 Reason for applying Started new Purchased business going business		12 First date you paid or will pay wage for this business (Mo., day, year)			
13 Nature of business (See Instructions on page 4)	14 Do you operate of business?	more than one plac			
15 Peak number of employees expected in next 12 months (If none, enter "0")	Household	16 If nature of bus ing, state princi material used	iness is manufactu pal product and ra		
17 To whom do you sell most of your products or services? Business establishments General public	Other (specify)	· · · · · · · · · · · · · · · · · · ·	-		
18 Have you ever applied for an identification number for this or any other business? Yes No If "Yes," enter name and trade name (if any). Also enter the approximate date, city, and State where you first applied and previous number if					
known. Date Signature and title			Telephone number	· · · · · · · · · · · · · · · · · · ·	
Please leave blank Geo. Ind.	Class	Size	Reas. for appl.	Part II	

Instructions (Continued)

be entered in item 1 and "Busy Bee Restaurant" in item 2. Enter the social security number in item 3, if you are a sole proprietor.

Note.—If a corporation.—Enter in item 1 the corporate name as set forth in its charter, or other legal document creating it.

If a trust.—Enter the name of the trust in item 1 and the name of the trustee in item 2.

If an estate of a decedent, insolvent, etc.—Enter the name of the estate in item 1 and the name of the administrator or other fiduciary in item 2.

If a partnership.—-Enter the first name, middle initial, and last name of each partner in item 1. If you need more space, attach a list.

Item 9.—Governmental.—Check if organization is a State, county, school district, municipality, etc., or is related to such entities, for example: county hospital, city library, etc.

Nonprofit organization (other than governmental).—Check if organized for reli-

gious, charitable, scientific, literary, educational, humane, or fraternal purposes, etc. Generally, a nonprofit organization must file with the Internal Revenue Service an application for exemption from Federal income tax. Details on how to apply are contained in IRS Publication 557.

Item 13.—Describe the kind of business carried on by applicant in item 1. See examples below.

- (a) Governmental.—State type of governmental organization, whether a State, county, school district, municipality, etc., or relationship to such entities, for example: county hospital, city library, etc.
- (b) Nonprofit (other than governmental).—State whether organized for religious, charitable, scientific, literary, educational, or humane purposes and state the principal activity, for example: religious organization—hospital; charitable organization—home for the aged; etc.
- (c) Mining and quarrying.—State the process and the principal product, for example: mining bituminous coal, contract

drilling for oil, quarrying dimension stone, etc.

- (d) Contract construction.—State whether general contractor or special trade contractor and show type of work normally performed, for example: general contractor for residential buildings, electrical subcontractor, etc.
- (e) Trade.—State the type of sale and the principal line of goods sold, for example: wholesale dairy products, manufacturer's representative for mining machinery, retail hardware, etc.
- (f) Manufacturing.—State type of establishment operated, for example: saw-mill, vegetable cannery, etc. In item 16, state the principal product manufactured and raw material used.
- (g) Other activities.—State exact type of business operated, for example: advertising agency, farm, labor union, real estate agency, steam laundry, rental of coin-operated vending machines, investment club, trust. etc.

Return both parts of this form to the Internal Revenue Service—your employer identification number will be mailed to you.