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 partnership, see instructions on page 4.)

2. Trade name, if any (Name under which business is operated, if different from item 1.)

3. Social security number, 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 business location

9. Type of organization
   - Individual
   - Trust
   - Partnership
   - Other (specify)

10. Governmental (See Instructions on page 4)
    - Nonprofit organization (See Instructions on page 4)
    - Corporation

11. Reason for applying
    - Started new business
    - Purchased going business
    - Other (specify)

12. Date you acquired or started this business (Mo., day, year)

13. First date you paid or will pay wages for this business (Mo., day, year)

14. Do you operate more than one place of business? Yes No

15. Nature of business (See Instructions on page 4)
   - Nonagricultural
   - Agricultural
   - Household

16. If nature of business is manufacturing, state principal product and raw material used.

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

Part 1

Please leave blank ▶

Geo. Ind. Class Size Reas. for appl.
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, must file a Form SS-4.

Trusts, estates, corporations, partnerships, nonprofit organizations (such as churches, clubs, etc.), and similar non-individual 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:

<table>
<thead>
<tr>
<th>State/County</th>
<th>Service Center Address</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Jersey, New York City and counties of Nassau, Rockland, Suffolk, and Westchester</td>
<td>Holtsville, NY 00501</td>
<td></td>
</tr>
<tr>
<td>New York (all other counties), Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont</td>
<td>Andover, MA 05501</td>
<td></td>
</tr>
<tr>
<td>District of Columbia, Delaware, Maryland, Philadelphia, PA</td>
<td>Philadelphia, PA 19255</td>
<td></td>
</tr>
<tr>
<td>Alabama, Florida, Georgia, Mississippi, South Carolina</td>
<td>Atlanta, GA 31101</td>
<td></td>
</tr>
<tr>
<td>Michigan, Ohio</td>
<td>Cincinnati, OH 45999</td>
<td></td>
</tr>
<tr>
<td>Arkansas, Kansas, Louisiana, New Mexico, Oklahoma, Texas</td>
<td>Austin, TX 73301</td>
<td></td>
</tr>
</tbody>
</table>

Illinois, Iowa, Kansas City, MO 64999
Missouri, Wisconsin
California, Hawaii Fresno, CA 93888
Indiana, Kentucky, North Carolina, Tennessee, Virginia, West Virginia Memphis, TN 37501

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, Philadelphia, PA 19255.

When to file.—(a) Those who pay wages must file on or before the seventh day after the date on which business begins. (b) Others must file 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 be entered in item 1 and “Busy Bee Restaurant” in item 2. Enter the social security number (Continued on page 4)
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 partnership, see instructions on page 4.)

2 Trade name, if any (Name under which business is operated, if different from item 1.)

4 Address of principal place of business (Number and street)

6 City and State

7 ZIP code

9 Type of organization
   □ Individual □ Trust □ Partnership □ Other (specify)
   □ Governmental (See instructions on page 4)
   □ Nonprofit organization (See instructions on page 4) □ Corporation

11 Reason for applying
   □ Started new business □ Purchased going business □ Other (specify)

13 Nature of business (See Instructions on page 4)

15 Peak number of employees expected in next 12 months (If none, enter "0")
   □ Nonagricultural □ Agricultural □ Household

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

Part II

Reas. for appl.
Instructions (Continued)

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. Also, see instructions for item 10.

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. Also, see instructions for item 10.

If a partnership.—Enter the legal name (not trade name) of the partnership, according to the partnership agreement, in item 1 and the first name, middle initial, and last name of a general partner in item 2. A general partner should sign this application.

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

Item 10.—For trusts, enter the date the trust was legally created.

For estates, enter the date of death of the decedent whose name appears in item 1.

Item 13.—Describe the kind of business carried on by the applicant. 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: sawmill, 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, etc.

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