### orm **SS-4**

(Rev. January 2010)

Department of the Treasur

### **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.

• Keen a copy for your records

OMB No. 1545-0003

Intern	al Reven	ue Service	See separate instructions for e	each line.	► K	(еер а	a cop	by for your records.			
			of entity (or individual) for whom the E	EIN is being r	eque	sted					
	Företagsnamn										
print clearly.		Trade name of business (if different from name on line 1)			3 Executor, administrator, trustee, "care of" name  Ditt namn						
nt c		a Mailing address (room, apt., suite no. and street, or P.O. box) Din adress				5a Street address (if different) (Do not enter a P.O. box.)					
pri	4b City, state, and ZIP code (if foreign, see instructions) Postnummer och postort					5b City, state, and ZIP code (if foreign, see instructions)					
ō											
Type	6 County and state where principal business is located										
_			sponsible party				7b	SSN, ITIN, or EIN			
	-	Ditt namn			1000		OL.	16 On in 1970 - 11 - 1 - 1			
a			n for a limited liability company (LLC) (or ent)?		<b>1</b>		86	If 8a is "Yes," enter t			
3c			as the LLC organized in the United S								
a		Type of entity (check only one box). Caution. If 8a is "Yes," see the instructions for the correct box to check.									
		Sole proprietor (SSN)					□ E	state (SSN of decede	nt)		
	Partnership					P	lan administrator (TIN)	)			
		☐ Corporation (enter form number to be filed) ▶				[	T	rust (TIN of grantor)	1.		
	Personal service corporation					[	$\square$ N	lational Guard	State/local government		
	100	Church or church-controlled organization				Ĺ		NATIONAL PARTIES AND	Federal government/military		
		Other nonprofit organization (specify) ►  Other (specify) ►				L		EMIC p Exemption Number (	Indian tribal governments/enterpri		
b	If a c	corporation	, name the state or foreign country	State	9	,	Group		n country		
0	(if applicable) where incorporated										
U		Reason for applying (check only one box)  ☐ Banking purpose (specify purpose) ▶									
	Started new business (specify type) ► Changed type of organization (specify new type) ►										
	☐ Hired employees (Check the box and see line 13.) ☐ Purchased going business ☐ Created a trust (specify type) ▶										
	☑ Compliance with IRS withholding regulations ☐ Created a pension plan (specify type)										
1		Other (spec	rry) ► started or acquired (month, day, year)	See instruc	tione		12	Closing month of a	accounting year		
•	Date	, paginoss (	marting of addition (mornin, day, your,	. coc mondo			9	<u> </u>			
3	Highe	Highest number of employees expected in the next 12 months (enter -0- if none).  If you expect your employment tax liability to be \$1,0 or less in a full calendar year and want to file Form 9									
	If no	If no employees expected, skip line 14.						annually instead of	Forms 941 quarterly, check here.		
	1000	ii no employees expected, skip line 14.							tax liability generally will be \$1,000 t to pay \$4,000 or less in total		
	Agricultural Household Oti				her				ot check this box, you must file		
								Form 941 for every	quarter.		
5			s or annuities were paid (month, day, n (month, day, year)	year). Note.		*80.07 5.076			nter date income will first be paid		
6	Chec	k one box	that best describes the principal activity	of your busin	ness.		Hea	alth care & social assistar	nce Wholesale-agent/broker		
		☐ Construction ☐ Rental & leasing ☐ Transportation & warehousing ☐ Accommodation & food service ☐ Wholesale-other ☐ Reta									
	□ F	Real estate Manufacturing Finance & insurance Other (specify)									
7	Indic	ate princip	al line of merchandise sold, specific o	construction	work	done,	prod	ducts produced, or se	rvices provided.		
8			nt entity shown on line 1 ever applied	d for and rec	eived	an El	IN?	☐ Yes 🔽 No			
	If "Y		revious EIN here ▶								
		Complete this section only if you want to authorize the named individua				to receive the		's EIN and answer questions			
300	ird	Designe	Designee's name						Designee's telephone number (include area o		
Party Designee		Address	Address and ZIP code						Decimació for combac final de acces		
D	signe	Address	S AND ZIF CODE						Designee's fax number (include area c		
nde	nenaltie	s of periusy 1.4	eclare that I have examined this application, and to t	he hest of my kno	owledge	and hel	lief it is	s true correct and complete	Applicant's telephone number (include area of		
			print clearly) Ditt namn	noor or my kill	- mouge	and bel	non It h	and complete.	( +46 )		
2.11		1.750 011		1-1-011-1-1-1					Applicant's fax number (include area c		
ian	ature >					ì	Date	<b>&gt;</b>			

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

## Change to Domestic Employer Identification Number (EIN) Assignment by Toll-Free Phones

Beginning January 6, 2014, the IRS will refer all domestic EIN requests received by toll-free phones to the EIN Online Assistant. You can access the Assistant by going to www.irs.gov, entering "EIN" in the "Search" feature and following instructions for applying for an EIN online.

# Attention Limit of one (1) Employer Identification Number (EIN) Issuance per Business Day

Effective May 21, 2012, to ensure fair and equitable treatment for all taxpayers, the Internal Revenue Service (IRS) will limit Employer Identification Number (EIN) issuance to one per responsible party per day. For trusts, the limitation is applied to the grantor, owner, or trustor. For estates, the limitation is applied to the decedent (decedent estate) or the debtor (bankruptcy estate). This limitation is applicable to all requests for EINs whether online or by phone, fax or mail. We apologize for any inconvenience this may cause.

### Change to Where to File Address and Fax-TIN Number

There is a change to the Instructions for Form SS-4 (Rev. January 2011). On page 2, under the "Where to File or Fax" table, the address and Fax-TIN number have changed. If you are applying for an Employer Identification Number (EIN), and you have no legal residence, principal place of business, or principal office or agency in any state or the District of Columbia, file or fax your application to:

Internal Revenue Service Center Attn: EIN International Operation

Cincinnati, OH 45999 Fax-*TIN*: 859-669-5987

This change will be included in the next revision of the Instructions for Form SS-4.

#### 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) <sup>2</sup>	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 <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, 9a, 10, and 18.			
ls 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 optional), 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 1–6, 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.			
ls 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, 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 <sup>8</sup>	Complete lines 1–18 (as applicable).			
ls 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).			

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.

<sup>&</sup>lt;sup>2</sup> 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).

<sup>3</sup> Do not 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 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.

<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>&</sup>lt;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 on page 4 of the instructions. Note. State or local agencies may need an EIN for other reasons, for example, hired employees.

<sup>8</sup> See Disregarded entities on page 4 of the instructions for details on completing Form SS-4 for an LLC.

<sup>9</sup> An existing corporation that is electing or revoking S corporation status should use its previously-assigned EIN.