

How-To-Guide- How to File for an EIN number

How to complete the EIN form

Exempt Organizations

- Line 1 Enter the legal name of the exempt organization.
- Line 2 N/A
- Line 3 Enter the name of the responsible party for the organization.
- Line 4a-b Enter the mailing address. This is the address where all IRS correspondence will be sent.
- Lines 5a-b Enter only if different from the mailing address in 4a and 4b.
- Line 6 Enter the county and state where the exempt organization is located.
- Line 7a-b Enter the name and SSN or ITIN of a responsible and duly authorized member or officer of the exempt organization.
- Line 8a N/A.
- Line 8b N/A26
- Line 8c N/A
- Line 9a Check only one box. If you check “other”, enter the specific reason for applying.
- Line 9b If you are a corporation, enter the State or Foreign Country where you were incorporated.
- Line 10 If your reason is not specifically listed, check the “Other” box and enter the reason.
- Line 11 Enter the date you first started or acquired your organization.
- Line 12 Enter the last month of your accounting year or tax year.
- Line 13 Enter the highest number of employees expected in the next 12 months (Agricultural, Household or Other). If none, enter 0 and skip to Line 16.
- Line 14 If you expect your employment tax liability to be \$1,000 or less in a full calendar year and want to file Form 944 annually instead of Forms 941 quarterly check “Yes”. (To file Forms 941, check “No”.)
- Line 15 If your business has (or will have) employees enter the date the business began or will begin to pay wages (Month, Date, Year.) If you have no employees, leave blank. If the applicant is a withholding agent, enter date income will first be paid to nonresident alien.
- Line 16 Check one box that best describes the type of business you operate (construction, real estate, etc.). If none of the listed boxes apply, check the “Other” box and write your specific type of business. Do not leave blank or enter “none” or “N/A”.
- Line 17 Describe the applicant’s principal line of business in more detail (type of merchandise sold, specific construction work, product produced or service provided). Do not leave blank or enter “none” or “N/A”.
- Line 18 If the applicant shown on line one (1) ever previously applied for and received an EIN, check “Yes”. If “yes”, enter previous EIN on the line.
- Complete the Third Party Designee section only if you want to authorize the named individual to receive the EIN and answer questions about the completion of this form. You must also sign the application for the authorization to be valid.
- Name and Title: Print your name and title.

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- Telephone Number: Enter the telephone number where we can reach you if we have questions about your application.

Signature: A responsible and duly authorized member or officer having knowledge of the exempt organization's affairs must sign the application if there is a Third Party Designee.