

## Client interview checklist for obtaining an IRS Employer Identification Number (EIN)

### Instructions

To quickly obtain a federal tax ID (EIN), fill in this 5-minute PDF form, then submit it to Lawyer's Aid Service by email or fax. Lawyer's Aid screens your submitted information, deals with the IRS for you, and reports the EIN to you immediately, usually same or next day. You receive the SS-4 form by mail for your records. For two related EINs, simply fill out two checklists. If the principle officer's Social Security Number is not provided, acquisition of the EIN will likely take 2+ weeks.

On many of the questions, handy tooltips appear when your mouse hovers over them.

### A. Checklist for IRS Employer Identification Number (EIN)

1. Entity name: \_\_\_\_\_

All answers are required.

2. Entity type:  Corporation  Non-profit corporation  
 Limited liability company\*  Professional association  
 \*Number LLC members: \_\_\_\_\_  Other: \_\_\_\_\_

3. Date of formation of entity: \_\_\_\_\_ State or country of formation: \_\_\_\_\_

4. a. Street address of entity: \_\_\_\_\_ b. Mailing address, if different: \_\_\_\_\_

5. Principal officer's full name as in Social Security records: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Title:  President  other: \_\_\_\_\_

6. Tax classification:

**For-profit corporations and professional associations only:**

Check this box if you plan to apply for Subchapter S Status. (You must also file IRS Form 2553 within 75 days. A copy is included in our Texas Corporate Outfits.)

**Limited liability companies only** (choose one tax classification for the LLC):

Default: Single-member LLC is taxed as sole proprietorship  
 Multi-member LLC is taxed as a partnership

C Corporation (must file IRS Form 8832 within 12 months to elect this classification)

S Corporation (must file IRS Form 2553 within 75 days to elect this classification)

7. Closing month of accounting year:  December (recommended)  other: \_\_\_\_\_

8. Fill in this box only if there will be employees in the next 12 months:

Highest number of employees expected in next 12 months:

Agricultural: \_\_\_\_\_ Household: \_\_\_\_\_ Other: \_\_\_\_\_

Earliest date wages may be paid: \_\_\_\_\_

Do you expect to pay \$5,000 or less in wages next calendar year (Jan. – Dec.)?  Yes  No

9. Type of business or activity (e.g. healthcare, construction, transportation, food service, real estate, retail): \_\_\_\_\_

10. Specific merchandise sold or produced, or services provided: (continued)

11. Business phone:

12.  A Lawyer’s Aid Service representative is authorized as third-party designee to obtain the EIN.

13. Notify me of EIN by:  fax  phone  e-mail (Original is mailed with bill.)

Fax, phone, or email address: \_\_\_\_\_

**B. Order form, prices, and contact info**

*Prices may change without notice.*

**1. Tell us about your order:**

SSN provided (most common) ..... **\$50**

SSN not provided ..... **\$80**

**2. Submit to Lawyer’s Aid Service:**

**Email to** maindesk@  
LawyersAidService.com

**Print and fax to**  
(888) 474-4218

**Call** (888) 474-2112  
to place your order

**3. Submit simultaneous payment:**

**By credit card via online portal:**  
[www.LawyersAidService.com/Payment](http://www.LawyersAidService.com/Payment)

**Or mail to:**  
Lawyer’s Aid Service  
PO Box 848  
Austin, Texas 78767-0848

Attorney’s name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Firm name: \_\_\_\_\_ Fax: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Email: \_\_\_\_\_ Type or sign your name below to confirm you are sending simultaneous payment (required)

**Your further instructions, if any:**