

How to Register Your CPN

GOTO: <https://sa2.www4.irs.gov/modiein/individual/index.jsp>



EIN Assistant

Important Information Before You Begin

For help or additional information on any topic, click the underlined key words, or view Help Topics on the right side of the screen. Make sure that pop-ups are allowed from this site.

Use this assistant to apply for and obtain an Employer Identification Number (EIN).

[Do I need an EIN?](#)

[Do I need a new EIN?](#)

About the EIN Assistant

- You must complete this application in one session, as you will **not** be able to save and return at a later time.
- For security purposes, your session will expire after 15 minutes of [inactivity](#), and you will need to start over.
- You will receive your EIN immediately upon verification. [When will I be able to use my EIN?](#)
- If you wish to receive your confirmation letter online, we strongly recommended that you install [Adobe Reader](#) before beginning the application if it is not already installed.

Restrictions

- Effective May 21, 2012, to ensure fair and equitable treatment for all taxpayers, the Internal Revenue Service will limit Employer Identification Number (EIN) issuance to one per [responsible party](#) per day. 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.
- If a [third party designee](#) (TPD) is completing the online application on behalf of the taxpayer, the taxpayer must [authorize the third party](#) to apply for and receive the EIN on his or her behalf.
- The business location must be within the United States or [U.S. territories](#).
- Foreign filers without an Individual Taxpayer Identification Number (ITIN) cannot use this assistant to obtain an EIN.
- If you were incorporated outside of the United States or the U.S. territories, you cannot apply for an EIN online. Please call us at 267-941-1099 (this is not a toll free number).

Begin Application >>

CLICK: Begin Application>>

LISTING YOUR LEGAL CPN NUMBER

SELECT YOUR BUSINESS TYPE

- Corporate Users select your business type and proceed by clicking continue>>
- **Personal Use CPN's** Sole Proprietor or Partnerships are preferred. (Please be aware only 1 sole EIN can be issued; so if you previously had a sole proprietorship EIN please proceed the Partnership Classifications.



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- Your Progress:
 - 1. Identify
 - 2. Authenticate
 - 3. Addresses
 - 4. Details
 - 5. EIN Confirmation

What type of legal structure is applying for an EIN?

Before applying for an EIN you should have already determined what type of legal structure, business, or type of organization is being established.

Choose the type you are applying for. If you don't see your type, select "View Additional Types."



Sole Proprietor

Includes individuals who are in business for themselves and household employers.



Partnerships

Includes partnerships and joint ventures.



Corporations

Includes S corporations, personal service corporations, real estate investment trusts (REIT), regulated investment conduits (RIC), and settlement funds.



Limited Liability Company (LLC)

A limited liability company (LLC) is a structure allowed by state statute and is formed by filing articles of organization with the state.



Estate

An estate is a legal entity created as a result of a person's death.



Trusts

All types of trusts including conservatorships, custodianships, guardianships, irrevocable trusts, revocable trusts, and receiverships.



View Additional Types, Including Tax-Exempt and Governmental Organizations

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You have chosen Partnerships.

Read the descriptions below and choose the type for which you are applying.



Partnership

A partnership is a relationship existing between two or more persons or groups who join together to carry on a trade or business. Each partner contributes money, property, labor, or skill, and expects to share in the profits and losses of the business.



Joint Venture

A joint venture is a partnership formed between two or more business entities. These businesses share risk or expertise on a specific project or group of projects.

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Please confirm your selection.

Confirm your selection of **Partnership** as the type of structure applying for an EIN.

What it is...

- A partnership is an unincorporated organization with two or more members. It is generally classified as a partnership for federal tax purposes if its members carry on a trade, business, financial operation, or venture and divide its profits and losses.

What it is not...

- A partnership cannot be [incorporated](#).
- A partnership is not a joint undertaking merely to share expenses; it must provide a service as well.

If you need to change your type of structure, we recommend that you do so **now**, otherwise you will have to start over and re-enter your information. Additional help may be found by reviewing [all types of organizations and structures](#) before making your selection.

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Why is the Partnership requesting an EIN?

Choose **one** reason that best describes why you are applying for an EIN.



Started a new business

Select this option if you are beginning a new business.



Hired employee(s)

Select this option if you already have a business and need to hire employees.



Banking purposes

Select this option if the reason for applying for the EIN is strictly to satisfy banking requirements or local law.



Changed type of organization

Select this option if you are changing the type of organization you currently operate, such as changing from a sole proprietor to a partnership, changing from a partnership to a corporation, etc.



Purchased active business

Select this option if you are purchasing a business that is already in operation.

SELECT YOUR REASON FOR SELECTING A PARTNERSHIP

- In most cases Starting a New Business is most typical. Starting a Partnership with Yourself or Others where you are changing or creating a new business name will constitute reason for generating a new EIN for your CPN (Credit Profile Classification.)

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Who is the Responsible Party?

The [responsible party](#) can be either an [individual](#) OR an [existing business](#).

Please choose **one**:

- ☒ Individual
- ☐ Existing business

SELECT WHO IS THE RESPONSIBLE PARTY

- HERE: If your attaching this EIN to an Existing Business you will need to know the Business Name and EIN in the Following Screen; and your CPN will be attached to your existing business. Typically CPN's will be attached to a individual; So in the next screen you will need to enter your SSN, to proceed. **Fear not: you will not merge your credit profiles by providing the IRS both your SSN and CPN! The IRS does not share this data with creditors or credit bureaus.**

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You selected individual. Please tell us about the Responsible Party.

*** Required fields**

Must match IRS records or this application cannot be processed.

The only punctuation and special characters allowed are hyphen (-) and ampersand (&).

First name*

Middle name/initial

Last name*

Suffix (Jr, Sr, etc.)

[SSN/ITIN](#)* - -

Choose One:*

- ☒ I am a responsible and duly authorized [partner](#) or [general partner](#) of this partnership.
- ☐ I am a third party applying for an EIN on behalf of this partnership.

ENTER YOUR NAME AND SSN OR BUSINESS NAME AND EIN HERE:

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Where is the Partnership physically located?

* Required fields

The only special characters allowed for street and city are - and /.

Note: Must be a U.S. address. Do not enter a P.O. box. [For military addresses click here.](#)

Street *

City *

State *

ZIP *

Phone * - -

Do you have an address **different** from the above where you want your mail to be sent? * ☐ Yes ☒ No

Before continuing, please review the information above for typographical errors.

ENTER YOUR PHYSICAL STREET ADDRESS AND PHONE NUMBER HERE:

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- Your Progress:
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Tell us about the Partnership.

*Required fields

The only punctuation and special characters allowed are hyphen (-) and ampersand (&).
The legal name may not contain any of the following endings: Corp, LLC, PLLC, LC, Inc.
The trade name may not contain an ending such as 'LLC', 'LC', 'PLLC', 'PA', 'Corp', or 'Inc'.

Legal name of Partnership* ENTER YOUR CPN NAME HERE (JOHN DOE OR WHATEVER)

[Trade name/Doing business as](#) ENTER YOUR CPN NUMBER ISSUED BY LEGAL CPN HERE

County where Partnership is located* YOUR COUNTY

State/Territory where Partnership is located* YOUR STATE

Partnership [start date](#)* Year DATE YOUR BUSIENSS STARTED

[Closing month of accounting year](#)*

Before continuing, please review the information above for typographical errors.

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Tell us more about the Partnership.

* Required fields

Does your business own a [highway motor vehicle](#) with a [taxable gross weight](#) of 55,000 pounds or more?*

Yes ☐ No ☒

Does your business involve [gambling/wagering](#)?*

Yes ☐ No ☒

Does your business need to file [Form 720](#)
(Quarterly Federal [Excise Tax Return](#))?*

Yes ☐ No ☒

Does your business sell or manufacture alcohol, tobacco, or
firearms?*

Yes ☐ No ☒

Do you have, or do you expect to have, any [employees](#)
[who will receive Forms W-2](#) in the next 12 months?*

(Forms W-2 require additional filings with the IRS.)

Yes ☐ No ☒

Before continuing, please review the information above.

ENTER YOUR BUSINESS DETAILS HERE (TYPICALLY THESE QUESTIONS ARE NO):

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What does your business or organization do?

Choose **one** category that best describes your business. Click the underlined links for additional examples for each category.



[Accommodations](#)

Casino hotel, hotel, or motel.



[Construction](#)

Building houses/residential structures, building industrial/commercial structures, specialty trade contractors, remodelers, heavy construction contractors, land subdivision contractors, or site preparation contractors.



[Finance](#)

Banks, sales financing, credit card issuing, mortgage company/broker, securities broker, investment advice, or trust administration.



[Food Service](#)

Retail fast food, restaurant, bar, coffee shop, catering, or mobile food service.



[Health Care](#)

Doctor, mental health specialist, hospital, or outpatient care center.



[Insurance](#)

Insurance company or broker.



[Manufacturing](#)

Mechanical, physical, or chemical transformation of materials/substances/components into new products, including the assembly of components.



[Real Estate](#)

Renting or leasing real estate, managing real estate, real estate agent/broker, selling, buying, or renting real estate for others.



[Rental & Leasing](#)

Rent/lease automobiles, consumer goods, commercial goods, or industrial goods.



[Retail](#)

Retail store, internet sales (exclusively), direct sales (catalogue, mail-order, door to door), auction house, or selling goods on auction sites.



[Social Assistance](#)

LISTING YOUR LEGAL CPN NUMBER

Youth services, residential care facility, services for the disabled, or community food/housing/ relief services.



[Transportation](#)

Air transportation, rail transportation, water transportation, trucking, passenger transportation, support activity for transportation, or delivery/courier service.



[Warehousing](#)

Operating warehousing or storage facilities for general merchandise, refrigerated goods, or other warehouse products; establishments that provide facilities to store goods but do not sell the goods they handle



[Wholesale](#)

Wholesale agent/broker, importer, exporter, manufacturers' representative, merchant, distributor, or jobber.



Other

ENTER EXACT BUSINESS CLASSIFICATION OR PROPOSED BUSINESS CLASSIFICATION HERE:

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- Your Progress:
 - 1. Identity ✓
 - 2. Authenticate ✓
 - 3. Addresses ✓
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How would you like to receive your EIN Confirmation Letter?

You have **two** options for receiving your confirmation letter. Please choose one below:



Receive letter online. This option requires [Adobe Reader](#).
You will be able to view, print, and save this letter immediately. It will not be mailed to you.



Receive letter by mail. The IRS will send the letter to the mailing address you provided - allow up to 4 weeks for delivery.

CLICK RECEIVE LETTER BY MAIL SO YOU CAN RECEIVE A PHYSICAL COPY OF YOUR BUSINESS NAME, EIN, AND DBA CPN NUMBER:

CLICK: CONTINUE TO PROCEED>>

LISTING YOUR LEGAL CPN NUMBER



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- Your Progress:
 - 1. Identity ✓
 - 2. Authenticate ✓
 - 3. Addresses ✓
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Summary of your information

Please review the information you are about to submit. If any of the information below is incorrect, you will need to [start a new application](#).

Click the "Submit" button at the bottom of the page to receive your EIN.

Organization Type: Partnership

Partnership Information

Legal name:	LEGAL CPN EXAMPLE
Trade name/Doing business as:	123 45 6789
County:	WAYNE
State/Territory:	TX
Start date:	MARCH 2012
Closing month of accounting year:	DECEMBER

Addresses

Physical Location:	12345 EXAMPLE HOUSTON TX 77656
Phone Number:	123-456-7890

Responsible Party

Name:	YOUR NAME GEN PTR
SSN/ITIN:	YOUR SSN# 123-45-6789

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Principal Business Activity

What your business/organization does:

YOUR BUSINESS TYPE

Principal products/services:

YOUR SUB BUSINESS TYPE

Additional Partnership Information

Owns a 55,000 pounds or greater highway motor vehicle:

NO

Involves gambling/wagering:

NO

Involves alcohol, tobacco or firearms:

NO

Files Form 720 (Quarterly Federal Excise Tax Return):

NO

Has employees who receive Forms W-2:

NO

Reason for Applying:

STARTED A NEW BUSINESS

We strongly recommend you print this summary page for your records as this will be your only copy of the application. You will not be able to return to this page after you click the "Submit" button.

Click "Submit" to send your request and receive your EIN.

Submit

Once you submit, please wait while your application is being processed. It can take up to two minutes for your application to be

IMPORANT: COPY OR SCREEN SHOOT EACH OF THE NEXT 3 PAGES!!

- **We find it easy to highlight each of the 3 summary pages and paste it into word, works, open office, or copy and paste it into your email and send it to yourself. This way you can always have a copy in your email account for long term storage of your CPN number and EIN.**

CLICK: CONTINUE TO PROCEED (COPY AND PASTE YOUR CPN DETAILS)>>

- **TO SUPERCHARGE YOUR LEGAL CPN NUMBER; WITH SEASONED TRADELINES>> CALL JASON WILLIAMS 313-460-1660 OR VISIT US AT WWW.LEGALCPN.COM**