

Employer's Previous Business Information

This form must be completed by the individual assuming the role of the Employer. Please provide a response to every question below. If any of the questions *cannot* be answered, check "N/A" or write "Do not know" next to the question.

Please <u>do not</u> provide answers to the below questions based on a Partnership, Corporation, Limited Liability Company (LLC), Trust, Estate, Nonprofit or any other entity <u>not considered</u> a Sole Proprietor. Acumen Fiscal Agent, LLC can only accept an EIN and business information for a Sole Proprietor business. **If you have ever owned a Sole Proprietor (currently or in the past), you <u>must</u> let us know. Failure to do so will also drastically increase the time it takes to enroll and receive services under this program.**

Employer Full Name (as shown on Social Security Card) Employer Social Security Card)		Employer Social Secu	ecurity Number (SSN)			
Ot	her Names or Alias Used (please list all):					
			YES	NO	N/A	
1.	Have you ever received an Employer Identification Number (EIN) for any Sole Proprietor business you currently or have previously owned? If yes:					
	Please provide the previously assigned Federal EIN:					
	What was the nature of the business:					
	Is the business still active (including any requirements for filing income tax, payroll tax, or information returns): YESNO					
2.	Have you ever previously been enrolled with another Fiscal/Employer Agent (F/EA), sometimes known as a Financial Management Service Agency? If yes:					
	Please provide the name of the F/EA:					
	Please provide dates of when you were with the F/EA:					
3.	Was a business account ever established on your behalf for state unemployment insurance (SUTA) by your state's Department of Labor/Employment? If yes:					
	Please provide the account number, if known:					
4.	,	siness account for state income tax (SIT) withheld on behalf of your employees blished on your behalf with the state's Department of Revenue? If yes:				
	Please provide the account number, if known:	•				
eve	answered yes to question #2, please contact the prior F/EA to obnue Service (IRS) and state taxing authorities when you were granted include a Letter 147C or CP575 issued by the IRS, and confirmation	d your EIN and state tax	x accou	nts. Do	cume	
Employer Signature Date						

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