Form **4419** (September 2019)

Department of the Treasury - Internal Revenue Service

Application for Filing Information Returns Electronically (FIRE)

Purpose of form: Revise Transmitter Control Code (TCC) information or request an additional TCC. Do not use this form to request an original TCC.

OMB Number 1545-0387

IRS Use Only

1. Purpose for Form 4419	Revised TCC information	Addition	nal TCC	reque	est	
2. Current Transmitter Control Code (TCC) (refer to instructions p.	age 2) - Required					
3. Transmitter and/or Payer information				_!	II	
Legal name (associated with EIN in Block 4) - Required						
Logal name (continued)						
Legal name (continued)						
Mailing address	City	State	tate ZIP code			
4. Employer Identification Number (EIN) (SSN not permitted)						
5. Person to contact about this request						
Name						
Position title						
1 Ostion title						
Email address		Telephone	Telephone number			
Additional TCC Request						
6. Reason additional TCC is needed						
7. Is the request for a foreign transmitter without a TIN		Yes	No)		
8. Check the box(es) next to the form type(s) for which you are	requesting an additional TCC					
Note: The IRS encourages transmitters who file for multiple p	payers to submit one application and	use the assig	ned TCC	for a	ll payers.	
Forms 1097, 1098, 1099, 3921, 3922, 5498 and W-2G (Se	ee Publication 1220)					
Form 1042-S, Foreign Person's U.S. Source Income Subj	iect to Withholding (See Publication 11	87)				
Form 8027, Employer's Annual Information Return of Tip	Income and Allocated Tips (See Publi	ication 1239)				
Form 8955-SSA, Annual Registration Statement Identifyin (See Publication 4810)	ng Separated Participants with Defen	red Vested B	enefits			
9. I have read the Affidavit in the Instructions on page 2 and and/or payer.	I am authorized to sign the documer	nt on behalf o	of the tran	smitte	er	
Under penalties of perjury, I declare that I have examined this c knowledge and belief, it is true, correct, and complete	document including any accompanyir	ng statements	s, and to	the be	est of my	
10. Official of the company or organization						
Name	Position title					
Signature (a computer generated signature is not acceptable)			Date			
For Privacy Act and Paperwork Reduction Act Notice, see Instructions.						

General Instructions

Purpose of Form: Only submit paper Form 4419 to revise current Transmitter Control Code (TCC) information or to request an additional TCC for a form type listed in Box 8. An original TCC must be submitted electronically via the FIRE System at https://fire.irs.gov/.

Revised TCC information: Complete Blocks 1-5, 9 and 10. An authorized signature is required.

A revised Form 4419 can only be submitted if you are updating information for a previously approved Form 4419 for the following:

- · Block 3 Legal name and address
- Block 5 Person to contact or contact information

Additional TCC Request

Only submit paper Form 4419 if you are requesting an additional TCC for a form type that you currently have an active TCC or for another form type listed in Box 8. Complete Blocks 1 –10. An authorized signature is required.

You may not need more than one TCC. Transmitters who file for multiple payers may submit one application and use the assigned Transmitter Control Code (TCC) for all payers. You may transmit files for as many companies as you need under the one TCC.

We will delete your TCC if you don't use the TCC to transmit information returns for two consecutive tax years. Once deleted from our database, you will need to submit a Fill-In Form 4419 at https://fire.irs.gov. A new TCC will be assigned.

Note: In order to file electronically through the FIRE System, you must have software or a service provider that will create the file in the standard ASCII format. A scanned or PDF document will **not** be accepted.

Forms W-2: Do not use Form 4419 to request authorization to electronically file Form W-2. Form W-2 information is only sent to the Social Security Administration (SSA). Refer to Social Security Administration (SSA) website at https://www.ssa.gov.

This application is subject to review before the approval to transmit electronically is granted and may require additional documentation at the request of the IRS. If a determination is made concerning the validity of the information returns transmitted electronically, the IRS has the authority to revoke the TCC and terminate the release of files.

Specific Instructions

Due Date: Submit Form 4419 at least 45 days before the due date of the return to ensure timely filing.

When completing this form, please print or type clearly.

- **Block 1** Check a box to indicate the purpose for the form. **Required.**
- Block 2 Enter your current TCC. Required.
- **Block 3** Enter the legal name associated with the EIN in Block 4 and the complete address of the organization that will submit electronic files (transmitter and/or payer). **Required.**
- **Block 4** Enter the employer identification number (EIN), Qualified Intermediary Number (QI-EIN), Withholding Partnership Number (WP-EIN), or Withholding Trust Number (WT-EIN) of the organization transmitting the electronic files. A social security number is not permitted. **Required.**
- **Block 5** Enter the name, position title, email address and telephone number (with area code) of the person to contact about this application. This should be a person who is knowledgeable about the electronic filing of your information returns. **Required.**
- Block 6 Provide the reason an additional TCC is necessary. Required.
- **Block 7** Check the appropriate box to indicate if you are a foreign transmitter who does not have a nine-digit Taxpayer Identification Number. **Required.**
- **Block 8** Only check the box next to the form types for which you are requesting an additional TCC. A separate TCC will be assigned for each box checked in Block 8. **Required.**

Block 9 - **Affidavit.** This application must be completed and submitted by: (a) the owner, if the applicant is a sole proprietorship, (b) the president, vice president, or other principal officer, if the applicant is a corporation, (c) a responsible and duly authorized member or officer having knowledge of its affairs, if the applicant is a partnership, government entity, or other unincorporated organization, or (d) the fiduciary, if the applicant is a trust or an estate.

Check the box to confirm that you have read the affidavit and are authorized to sign on behalf of the transmitter and/or payer. **Required.**

Block 10 - The form must be signed and dated by an official of the company or organization requesting authorization to file electronically. **Required.**

For further information concerning the electronic filing of information returns, visit IRS.gov. The following publications are available:

- Publication 1220, Specifications for Electronic Filing of Forms 1097, 1098, 1099, 3921, 3922, 5498, and W-2G
- Publication 1187, Specifications for Electronic Filing of Form 1042-S, Foreign Person's U.S. Source Income Subject to Withholding
- Publication 1239, Specifications for Electronic Filing of Form 8027, Employer's Annual Information Return of Tip Income and Allocated Tips
- Publication 4810, Specifications for Electronic Filing of Form 8955-SSA, Annual Registration Statement Identifying Separated Participants With Deferred Vested Benefits

How to submit Form 4419:

- Fill-In Form 4419 at https://fire.irs.gov. (Original TCC request)
- Mail or Fax Form 4419 (Revised or Additional TCC) to: Internal Revenue Service
 230 Murall Drive, Mail Stop 4360 Kearneysville, WV 25430
 Fax: (877) 477-0572 (within the U.S.) (304) 579-4105 (International)

Contact the IRS Monday through Friday

- (866) 455-7438 (Toll Free)
- (304) 263-8700 (International)

Note: A TCC will not be issued over the phone or via email. If you don't receive your TCC within 45 days, contact the IRS at the phone numbers listed above.

Privacy Act and Paperwork Reduction Act Notice

The authority for requesting this information is Internal Revenue Code sections 7801, 6011(f) and 6109. The primary purpose for requesting the information is to identify you and to verify your fitness to transmit returns using the Filing Information Returns Electronically (FIRE) System. Your response is mandatory if you are required to file returns electronically. If you do not provide all or part of the information, we may not be able to process your application; providing false or fraudulent information may subject you to penalties. We may give this information to the Department of Justice for use in civil and/ or criminal litigation, to the public to help identify approved electronic filing practitioners, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, and to federal law enforcement and intelligence agencies to combat terrorism

We ask for the information on these forms to carry out the Internal Revenue Laws of the United States. You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The time needed to provide this information would vary depending on individual circumstances. The estimated average time is:

If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we would be happy to hear from you. Write to the Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. DO NOT SEND FORM 4419 TO THIS OFFICE. Refer to the instructions above on where to mail or fax.