REV-459 (9-05) ESTATES, TRUSTS, PARTNERSHIPS, LIMITED LIABILITY COMPANIES, ASSOCIATIONS, PA DEPARTMENT OF REVENUE PA S CORPORATIONS ONLY CHANGE FORM **BUREAU OF INDIVIDUAL TAXIES** Please print or type your correct information PO BOX 280510 Use this form ONLY if the information on your PA-40ES form is incorrect HARRISBURG PA 17128-0510 This taxpayer is - fill in one oval: Estate Trust Partnership PAS Corporation Limited Liability Company Association Type of change - fill in all that apply: O Employer Identification Number O Name Address **INSTRUCTIONS: IMPORTANT:** The Bureau of Individual Taxes will make all the changes that you request. However, the Bureau will only send new PA-40ES forms if you change 1. Fill in the oval for the type of entity. your name or Employer Identification Number. If only changing the address, the 2. Enter the CORRECT and INCORRECT information in the spaces provided. bureau will correct the account, but please continue to use the PA-40ES forms that show the correct EIN and name. 3. You must enter the Employer Identification Number, even if it is correct on **REMEMBER:** Enter the suffix that follows the EIN on the PA-40ES form. Estates and Trusts have an "F" suffix. Partnerships, Associations, Limited Liability your PA-40ES form. 4. Fill in the appropriate oval(s) explaining the change(s) you are making. Companies, and PAS corporations have a "C" suffix. This letter code distinguish-5. Mail the completed form to the address shown above. es 9-digit Employer Identification Numbers from 9-digit Social Security Numbers. IMPORTANT: WE CANNOT CORRECT YOUR ACCOUNT WITHOUT YOUR CORRECT EIN. **CORRECT Information** Enter the letter code (F or C) here 1 **INCORRECT Information** Enter the letter code (F or C) here 1 Employer Identification Number **Employer Identification Number Business Name** Business Name Street Address Street Address City State Zip Code City State Zip Code Authorized Representative (PLEASE PRINT) Title Signature Date Daytime Telephone

REV-459 (9-05)
PA DEPARTMENT OF REVENUE
BUREAU OF INDIVIDUAL TAXIES
PO BOX 280510

INDIVIDUALS ONLY CHANGE FORM

Please print or type your correct information
Use this form **ONLY** if the information on your PA-40ES
form is incorrect

HARRISBURG PA 17128-0510 form is incorrect									
I am changing - fill in all that apply	Social S	ecurity Number	01	lame	Address				
Filing Status - Enter the correct status:	→ Single	Married, F	iling Jo	intly	Married, Filing S	Separatel	у О	Final	
O Deceased - Date of Death:									
INSTRUCTIONS:			IMP	ORTANT: The	Bureau of Individua	l Taxes w	vill make all	the changes that you	
 Enter the CORRECT and INCORRECT information in the spaces provided. You must enter the Correct Social Security Number, even if it is correct on your PA-40ES form. Fill in the appropriate oval(s) explaining the change(s) you are making. Mail the completed form to the address shown above. 				request. However, the Bureau will only send new PA-40ES forms if you change your name or Social Security Number. If you are only changing your address, the bureau will correct your account, but please continue to use the PA-40ES forms that show your correct SSN and name.					
IMPORTANT: WE CANNOT CORRECT YOUR ACCOUNT WITHOUT YOUR CORRECT SSN.									
CORRECT Information			INCO	RRECT Infor	mation				
Your Social Security Number			Soci	al Security Nu	mber				
Also enter your spouse's Social Security Number, if applicable									
Name N				Name					
Street Address S				Street Address					
City	State	Zip Code	City	City State Zip Code				Zip Code	
Signature	1	1		Date		Daytime Telephon	е	1	