

NONWITHHOLDING OF PA INCOME TAX APPLICATION

PURPOSE OF REV-291

Withholding Required. A partnership or PA S corporation is required to withhold Pennsylvania personal income tax on the PA-source income of each nonresident partner, member or shareholder. **Exception.** A partnership or PA S corporation is not required to withhold Pennsylvania personal income tax on income from a partner, member or shareholder if the partner or shareholder is one of the following and gives the partnership or PA S corporation a completed and a signed REV-291, Nonwithholding of PA Income Tax Application:

- A PA S corporation or other corporation
- A partnership or other unincorporated enterprise
- A pension, profit-sharing or charitable trust
- A resident individual, estate or trust

 A clearing agency (or its nominee) or a broker or financial institution (or its nominee) that holds an interest in a partnership or PA S corporation as a nominee on behalf of one of the above.

This application should be filed with the partnership or PA S corporation. Do not submit this form to the department.

a. Name of beneficial owner of partnership or PA S corporation interest		1b. Taxpayer Identification Number			
c. Permanent street address					
Address	City		State	ZIP Code	
d. Current mailing address, if different than permanent street address delivered to street address).	(include apartmer	nt or suite number or	post office	box if mail is not	
Address	City		State	ZIP Code	
e. Withholding agent (enter name of partnership or PA S corporation)		1f. Taxpayer Ident	er Identification Number		
g. Current mailing address (include apartment or suite number or post office	ce box if mail is no	t delivered to street a	ddress).		
Address	City		State	ZIP Code	
COMPLETE PART 2	OR PART 3				
art 2 CERTIFICATION BY BENEFICIAL OWNER					
□ A resident individual, estate or trust art 3 CERTIFICATION BY NOMINAL OWNER					
a. Name of nominal owner of partnership or PA S corporation interest	nominal owner of partnership or PA S corporation interest		3b. Taxpayer Identification Number		
c. Current mailing address (include apartment or suite number or post office	office box if mail is not delivered to str		reet address).		
Address	City		State	ZIP Code	
 d. The nominal owner holds its interest in withholding agent as a nom (check applicable block): A PA S corporation or other corporation A pension, profit-sharing or charitable trust, a business trust, a partners A resident individual, estate or trust 			er. The b	eneficial owner i	
Part 4 REVOCATION OR TERMINATION OF PRIOR WITH	HOLDING EX	EMPTION CERTI	FICATE		
☐ Check this box if you are revoking a prior Nonwithholding of PA I	Income Tax Appli	cation.			
nder penalties of perjury, I certify that to the best of my knowledge and belie	f the information e	ntered on this form is	correct.		
Print or type name of beneficial owner or authorized representative.					
Signature			Date		