

**INSTRUCTIONS FOR REV-854
PA CORPORATION TAXES EIN/TAX YEAR/ADDRESS CHANGE COUPON**

NOTE: You may make these account updates electronically through e-TIDES at www.etides.state.pa.us

- 1. Enter account information** including Revenue ID, employer identification number (EIN), corporation name, current tax year begin, current tax year end and complete mailing address.
- 2. Enter changes** in account information on the right-hand side of the coupon including EIN, tax year begin, tax year end, and address. If the address has changed, enter the entire new address on the form. Do not use this coupon to change a corporation name. Call the Department of State, Corporation Bureau at 717-787-1057 (Option 4) and speak to a customer service representative for change of name information.
- 3. Signature, title, date, email address and telephone number** must be provided by a representative of the corporation.
- 4. Mail coupon to:**

PA DEPARTMENT OF REVENUE
327 WALNUT ST FL 3
PO BOX 280701
HARRISBURG, PA 17128-2005

DETACH HERE BEFORE MAILING



REV-854 CT (06-15)

**PA CORPORATION TAXES
REV-854 EIN/TAX YEAR/ADDRESS CHANGE**

DEPT USE ONLY

REVENUE ID <input style="width: 90%; height: 20px;" type="text"/>	1. CURRENT EIN <input style="width: 90%; height: 20px;" type="text"/>	1. NEW EIN <input style="width: 90%; height: 20px;" type="text"/>	
CORPORATION NAME <input style="width: 95%; height: 20px;" type="text"/>		2. NEW TAX YEAR BEGIN MM DD YYYY <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	3. NEW TAX YEAR END MM DD YYYY <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>
2. CURRENT TAX YEAR BEGIN MM DD YYYY <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	3. CURRENT TAX YEAR END MM DD YYYY <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	4. NEW ADDRESS STREET <input style="width: 95%; height: 20px;" type="text"/> <input style="width: 95%; height: 20px;" type="text"/> CITY <input style="width: 95%; height: 20px;" type="text"/> STATE ZIP <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	
4. CURRENT ADDRESS STREET <input style="width: 95%; height: 20px;" type="text"/> <input style="width: 95%; height: 20px;" type="text"/> CITY STATE ZIP			

DO NOT ENCLOSE OTHER COUPONS OR PAYMENTS.

SIGNATURE	TITLE	DATE	EMAIL	TELEPHONE
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