

NAMES OF CORPORATE OFFICERS

SECTION I BU	ISINESS INFORMA	INESS INFORMATION								
Business Name					EIN					
Account ID		Department of State Entity Number								
Street Address			City		State	ZIP Code				
SECTION II NAMES OF CORPORATE OFFICERS										
CORPORATE OFFICER	S SSN	I	LAST NAME FI				МІ			
President/Managing Parti	ner									
Vice President										
Secretary										
Treasurer/Tax Manager	r									
SECTION III AFFIRMATION										

By filing this form, the taxpayer consents to the release of the names of its corporate officers and its address to the Department of State where it will be available as a public record. I hereby affirm, under penalties prescribed by law, that information contained in this form is true and correct to the best of my knowledge and belief, and that I am authorized to execute this form on behalf of the taxpayer.

Preparer's Name		Preparer's Signature	Date
Title	Email		Telephone Number



Instructions for REV-1605 Names of Corporate Officers

REV-1605 IN (TR) 10-22

GENERAL INFORMATION

PURPOSE OF REV-1605

Use the Names of Corporate Officers, REV-1605 to add or change corporate officer information to an existing corporate tax account.

The Department of Revenue is required to forward the names of corporate officers received with tax reports to the PA Department of State for inclusion in the public records of the corporation. This information is provided from the corporate officer section of the RCT-101, Corporate Net Income Tax Report. Corporations may also update this information during the year by completing this form and submitting it to the Department of Revenue, which will forward this information to the PA Department of State for inclusion in the public records of the corporation.

NOTE: Corporations may update names of corporate officers electronically through myPATH at **mypath.pa.gov**.

FORM INSTRUCTIONS

SECTION I

BUSINESS INFORMATION

Provide the business name, federal entity identification number (EIN), Account ID, Department of State entity number and business address. **IMPORTANT:** The Department of State Entity Number must be provided in order for the updates to be made to the Department of State.

SECTION II

NAMES OF CORPORATE OFFICERS

Complete all fields for each corporate officer.

SECTION III

AFFIRMATION

An officer or a representative of the corporation must complete and sign the form.

HOW TO FILE

Submit the completed and signed form by fax or email to: Fax: 717-787-3708

Email: RA-BTFTREGISFAX@PA.GOV