

**REV-1605**  
 BUREAU OF REGISTRATION  
 AND TAXPAYER MANAGEMENT

**NAMES OF CORPORATE  
 OFFICERS**

SECTION I BUSINESS INFORMATION			
Business Name	FEIN		
Account ID	Department of State Entity Number		
Street Address	City	State	ZIP Code

SECTION II NAMES OF CORPORATE OFFICERS				
CORPORATE OFFICERS	SSN	LAST NAME	FIRST NAME	MI
President/Managing Partner				
Vice President				
Secretary				
Treasurer/Tax Manager				

SECTION III AFFIRMATION		
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) 12-24

### GENERAL INFORMATION

#### PURPOSE OF REV-1605

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

 **NOTE:** Corporations may update names of corporate officers electronically through myPATH at [mypath.pa.gov](http://mypath.pa.gov).

### FORM INSTRUCTIONS

#### SECTION I

#### BUSINESS INFORMATION

Provide the business name, Federal Employer Identification Number (FEIN), Account ID, Department of State entity number, and business address.

#### 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](mailto:RA-BTFTREGISFAX@PA.GOV)