



DTF-96

(9/22)

Department of Taxation and Finance

Report of Address Change for Business Tax Accounts

For office use only



The fastest and easiest way to report an address change is **online** (not available for all tax types). Visit our website (see *Need help?*) and select the option to change your address. See the instructions on page 2.

Step 1
Identify your business as **currently** on file with the NYS Tax Department.

Identification number (with suffix, if any)	Legal name (see instructions)			
For corporations - Year of incorp.: _____ State of incorporation: _____	Trade name (DBA)			
Physical address (number and street)				
City	County	State	ZIP code	Country if not U.S. (see instructions)

Step 2
Select tax type(s) to change in Step 3.

<input type="checkbox"/> All business tax types on file with NYS Tax Dept.	<input type="checkbox"/> Withholding/MCTMT	<input type="checkbox"/> Petroleum business (all fuels)	<input type="checkbox"/> Limited Liability Company (LLC) or Limited Liability Partnership (LLP)
<input type="checkbox"/> Corporation	<input type="checkbox"/> IFTA	<input type="checkbox"/> Alcoholic beverages	<input type="checkbox"/> Other (list below):
<input type="checkbox"/> Sales and use	<input type="checkbox"/> Highway use	<input type="checkbox"/> Cigarette/Tobacco products	

Tax type	Account number

Step 3
List your **new** address(es); enter only if different from current information.

New physical address	Note: To change the physical address for petroleum business, alcoholic beverages, adult-use cannabis, medical cannabis, and cigarette tax types, see legal restrictions.	Effective date of this address change
	Physical location of business (number and street) - Do not enter a PO Box here.	New telephone number
	City County State ZIP code	Country if not U.S. (see instructions)

Note: The address(es) you list in Step 3 will be used for the tax types you marked in Step 2.

New mailing address	Business or firm name to which NYS Tax Department mailings are to be sent	Effective date of this address change
	Name of person to whom NYS Tax Department mailings are to be sent (optional)	
	New number and street or PO Box	New contact telephone number
	City County State ZIP code	Country if not U.S. (see instructions)

Step 4
Sign and mail your report. For where to file see instructions.

 Sign here	I certify to the best of my knowledge and belief that this report is true, correct, and complete, and that I am authorized to report address changes.	
	Signature	
	Title	Date
	Print contact name	Contact's daytime telephone number
	Email address of contact person	

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Instructions

If not doing so online, use Form DTF-96 to correct or change your business location (physical address) or mailing address, or both, for business tax accounts on record with the New York State Department of Taxation and Finance (Tax Department). If you need to report any other changes for your business records, you must use Form DTF-95, *Business Tax Account Update*. You can report address changes on Form DTF-95 instead of filing both forms. If there are no changes to be made at this time, keep this form in your files for future use. If a change occurs, complete the form and send it to us as soon as possible.

Address changes to withholding tax information will also update corresponding information on your unemployment insurance account with the New York State Department of Labor and your Metropolitan Commuter Transportation Mobility Tax (MCTMT) account.

Legal restrictions for petroleum-, alcohol-, adult-use cannabis, medical cannabis-, and cigarette-related businesses

Filing Form DTF-96 is not a substitute for prior approval required for certain changes. Failure to obtain prior approval may result in the cancellation of your registration, license, or permit.

If you are registered, licensed, or granted a permit for any of the following activities, in addition to filing Form DTF-96 you must also notify the Tax Department in writing to report changes to the owner, officer, partner, member, director, controlling person, or responsible person, and information of any type of registrant or licensee, or to report changes, additions, and deletions of the location of a warehouse of a cigarette agent or wholesale dealer. This notification is required for:

- a distributor of beer, cider, wine, liquor, or other alcoholic beverages (Article 18);
- a cigarette agent, wholesale dealer of cigarettes, distributor of tobacco products or wholesale dealer of tobacco products, or a chain store (Articles 20 and 20-A);
- a motor fuel distributor, importing/exporting transporter, terminal operator, or liquefied petroleum gas fuel permittee (Articles 12-A and 13-A);
- a diesel motor fuel distributor, retailer of heating oil only, or distributor of kero-jet fuel only (Articles 12-A and 13-A);
- an aviation fuel business or residual petroleum products business (Article 13-A); or
- a registered organization that dispenses medical cannabis, or a distributor or retailer of adult-use cannabis products (Articles 20-B and 20-C).

Send your written notification to:

**NYS TAX DEPARTMENT
REGISTRATION AND BOND UNIT
W A HARRIMAN CAMPUS
ALBANY NY 12227-2993**

Certain changes may require you to complete a new registration for your business.

Step 1 – Identify your business

Identify your business by filling in **all** the requested information for your business as **currently** on file with the Tax Department. This will assist us in updating your records.

Identification number – Enter your identification number as it appears on materials you are currently receiving or the identification number that you entered when you last filed a tax return.

Legal name – For a corporation or limited liability company (LLC), enter the exact legal name of the business as it appears on the *Certificate of Incorporation* or *Certificate of Registration*. For an unincorporated business, use the name in which the business owns property or acquires debt, or for a partnership, use the registered partnership name. A sole proprietor must use the name of the individual owner.

Trade name (DBA) – Enter the trade name, doing business as name (DBA), or assumed name, if different from the legal name. For an unincorporated business, use the name filed with the county clerk's office.

Corporations – Enter the year and state of incorporation in the spaces provided.

Physical address – Enter the address where your business is physically located.

Country – If you are located outside of the United States and you find that your address will not fit in the spaces provided, you may attach a separate sheet with your address information. Be sure to identify for which tax type(s) each address is to be used.

Step 2 – Select tax type(s) to change

See *Legal restrictions for petroleum-, alcohol-, adult-use cannabis, medical cannabis-, and cigarette-related businesses* before selecting the tax types. Then indicate which business tax records should be changed by marking an **X** in the appropriate box(es) in this section. If the updated information is the same for all your business tax types on file with the NYS Tax Department, you only need to mark the first box, *All business tax types on file with the NYS Tax Dept.* If you are not marking the first box and your change affects a tax not listed, mark the box labeled *Other* and enter the tax type and account number in the spaces below that check box.

Note: If you want to change the address for more than one tax type, and the address is different for each tax type, you must either attach another Form DTF-96 for each additional tax type or, using the same format, create and attach a separate listing that contains all the address information, the tax type(s) for that address, and your identification number.

Step 3 – List your new address(es)

Enter address information only if it is different from current information.

If applicable, enter the **new physical location**, the effective date of the address change, and the new telephone number of your business.

If applicable, enter your **new mailing address** or the mailing address of the person and firm that you want to receive mailings sent by the Tax Department. Also enter the effective date of the change and the new contact telephone number for a person who can be contacted about any tax information.

Step 4 – Sign and mail your report

The authorized person must sign and date the report, enter their title, and print the name of a contact and the contact's daytime telephone number (including area code and extension, if any). There is also an area to provide the contact's business email address. The person who signs the form must be authorized to report updates for this business.

Mail your completed report to:

**NYS TAX DEPARTMENT
RASB/ACCOUNT UPDATE UNIT
W A HARRIMAN CAMPUS
ALBANY NY 12227-0865**

Privacy notification

New York State Law requires all government agencies that maintain a system of records to provide notification of the legal authority for any request for personal information, the principal purpose(s) for which the information is to be collected, and where it will be maintained. To view this information, visit our website, or, if you do not have Internet access, call and request Publication 54, *Privacy Notification*. See *Need help?* for the Web address and telephone number.

Need help?



Visit our website at www.tax.ny.gov

- get information and manage your taxes online
- check for new online services and features

Telephone assistance

Personal Income Tax Information Center:	518-457-5181
Corporation Tax Information Center:	518-485-6027
Sales Tax Information Center:	518-485-2889
Withholding Tax Information Center:	518-485-6654
Miscellaneous Tax Information Center:	518-457-5735

To order forms and publications: 518-457-5431

Text Telephone (TTY) or TDD
equipment users

Dial 7-1-1 for the
New York Relay Service