



(4/24)

# New Jersey Exempt Organization Request for Updated or Replacement ST-5

Use this form to request an organization name change, or a replacement ST-5. You may also use this form if you are unable to use the online system to update the physical address or mailing address of your organization. **Attach a copy of your current ST-5.**

**\*\*Must be completed or will delay the processing of the request.**

<b>Type of Request</b> (check one or more):				Replacement ST-5	Name Change	Address (Physical or Mailing Address) Change	
<b>General Information</b> (As it currently appears on your business registration)							
Organization Name				Federal Employer ID Number (FEIN) **			
Trade Name (if applicable)				NJ Tax Exempt Number (if applicable, may be the same as the FEIN)			
Contact Person	Telephone Number	Fax Number	Email Address				
<b>Current Address</b>							
Current Physical Address (physical location of organization, no PO Box)							
City					State	Zip Code	
Current Mailing Address							
City					State	Zip Code	
<b>Name Change</b> (You must include a copy of the amendment to your certificate of incorporation, constitution, etc.)							
New Organization Name							
<b>Address Change</b> (Check which address you are changing)							
New Physical Address (physical location of organization, no PO Box)							
City			State	Zip Code	<a href="#">County/ Municipality Code</a> **		
New Mailing Address							
City			State	Zip Code			

I declare, under penalty of perjury, that the information provided on this form and any attachments, to the best of my knowledge, is true, correct, and complete. If prepared by a person other than an officer, partner or owner of the organization, this signed declaration is based on all information on which that person has knowledge.

Signature	Date
Print Name	Title

You can submit this completed form and any corresponding documentation by:

<b>Fax:</b> (609) 292-8764 <b>Email:</b> <i>exemptorganization.taxation@treas.nj.gov</i> <b>Upload Online:</b> <a href="#">Tax Correspondence Manager</a> Use PO Box 269	<b>Regular mail to:</b> Regulatory Services Branch - Exempt Organization Unit New Jersey Division of Taxation PO Box 269 Trenton, NJ 08695-0269	<b>Courier, other than USPS Express:</b> New Jersey Division of Taxation Exempt Organization Unit 7 <sup>th</sup> Floor 3 John Fitch Plaza Trenton, NJ 08611
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Once this form is submitted, allow a minimum of three weeks for processing and issuing of a new Form ST-5.