



Update Ownership Information – Required for all changes in owners or officers (Form 5208C-2)

The Amended Tax and Wage Report form is available online at www.esd.wa.gov/tax-forms.

All registered employers must complete this form to add or remove changes in ownership or officers. You also can use this form if you have not previously reported this information to the department. Your company's business structure determines which information you must report.

DIRECTIONS: Check the box that represents your business structure*, then complete the required information for that structure in the spaces below. **Use black ink.**

- Sole proprietorship – include the business owner and spouse or state-registered domestic partner.
- Partnership – include all partners.
- Limited liability company – include all members (officers and owners).
- For profit corporation – include all corporate officers. Do not include shareholders or officers' spouses.
- Nonprofit corporation – include all corporate officers, except those officers who volunteer their services and receive no compensation.
- Other (please specify): _____-include information for at least one contact person.

1. Business Name

2. ESD Number

3. Preparer's Name

4. UBI

5. Preparer's Phone

6. EIN

Last Name _____	First Name _____ MI _____
Title _____	Social Security Number _____
Phone Number (_____) _____	Email Address (optional) _____
Mailing Address _____	
City _____	State _____ Zip Code _____
Date became owner/officer _____	End date (if applicable) _____
FOR-PROFIT CORPORATIONS ONLY, PLEASE COMPLETE THE FOLLOWING:	
Amount of stock owned: <input type="checkbox"/> zero percent <input type="checkbox"/> less than 10 percent <input type="checkbox"/> 10 percent or more	
Is this person related to other officers who own 10 percent or more (i.e., parent, stepparent, grandparent, spouse or state-registered domestic partner, children, brother, sister, stepchildren, adopted children or grandchildren)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Last Name _____	First Name _____ MI _____
Title _____	Social Security Number _____
Phone Number (_____) _____	Email Address (optional) _____
Mailing Address _____	
City _____	State _____ Zip Code _____
Date became owner/officer _____	End date (if applicable) _____
FOR-PROFIT CORPORATIONS ONLY, PLEASE COMPLETE THE FOLLOWING:	
Amount of stock owned: <input type="checkbox"/> zero percent <input type="checkbox"/> less than 10 percent <input type="checkbox"/> 10 percent or more	
Is this person related to other officers who own 10 percent or more (i.e., parent, stepparent, grandparent, spouse or state-registered domestic partner, children, brother, sister, stepchildren, adopted children or grandchildren)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

*Terms used in business structures are defined in rule. You can read the rule (WAC 192-310-010(2)(c)) online at esd.wa.gov/rcw-wac. You may copy this form if additional space is needed. **Please number your pages.**

**Send completed forms to ESD, Registration Unit
PO Box 9046, Olympia, WA 98507-9046 or fax to 1-800-794-7657**