

**Contact Information**

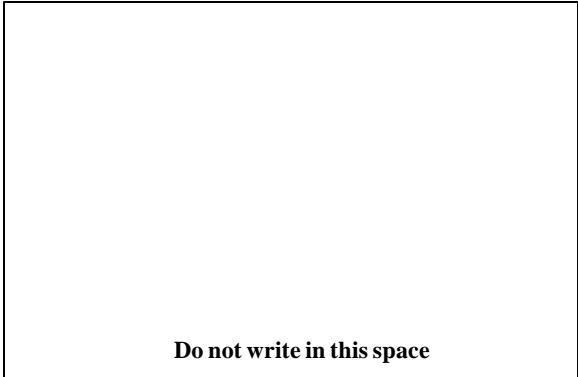
Kansas Secretary of State  
**Ron Thornburgh**  
Memorial Hall, 1st Floor  
120 S.W. 10th Avenue  
Topeka, KS 66612-1594  
(785) 296-4564  
kssos@kssos.org  
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**KANSAS SECRETARY OF STATE  
Not For Profit Articles of Incorporation**

**CN**

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All information must be completed or this document will not be accepted for filing.



1. Name of the corporation:

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2. Address of registered office in Kansas:

*Address must be a street address. A post office box is unacceptable.*

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Street address City State Zip

3. Name of resident agent at above address:

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4. Nature of corporation's business or purposes:

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5. Will this corporation have authority to issue capital stock? Yes \_\_\_ No \_\_\_

If yes, the total number of shares authorized:

\_\_\_\_\_ shares of \_\_\_\_\_ stock, class \_\_\_\_\_ par value of \_\_\_\_\_ dollars each  
\_\_\_\_\_ shares of \_\_\_\_\_ stock, class \_\_\_\_\_ par value of \_\_\_\_\_ dollars each  
\_\_\_\_\_ shares of \_\_\_\_\_ stock, class \_\_\_\_\_ without nominal or par value  
\_\_\_\_\_ shares of \_\_\_\_\_ stock, class \_\_\_\_\_ without nominal or par value

If applicable, state any designations, powers, rights, limitations or restrictions applicable to any class of stock or any special grant of authority to be given to the board of directors:

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6. Are conditions of membership fixed by the bylaws? Yes \_\_\_ No \_\_\_

If no, state conditions of membership:

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7. Name and mailing address of incorporator(s):

Name	Street address	City	State	Zip

8. Name and mailing address of each director:

Name	Street address	City	State	Zip

9. Is this corporation perpetual? Yes\_\_\_\_ No\_\_\_\_

If *no*, the term for which this corporation is to exist is: \_\_\_\_\_  
Month Day Year

• Tax closing date, if known: \_\_\_\_\_  
Month Day

I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

Executed on the \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year

(Signatures must correspond exactly to the names of the incorporators listed in number 7.)

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### Mailing Information

Where would you like the Secretary of State’s office to send official mail? If no address is given, the mail will be sent to the registered office.

\_\_\_\_\_

Street address City State Zip

The mail should be addressed to the following named individual: \_\_\_\_\_

### Instruction

Submit this form in duplicate with the \$20 filing fee.  
Notice: There is a \$25 service fee for all returned checks.

### Notice:

Not for Profit Corporations do not automatically qualify for exemption from federal taxes. In order to qualify for exemption, the Internal Revenue Service (IRS) requires that the articles of incorporation contain certain provisions. This form does not contain these requisite provisions. Accordingly, if the corporation plans to seek federal tax exemption from the IRS, you should refer to section 501(c)(3) of the Internal Revenue Code. The IRS publication “Tax Exempt Status for Your Organization,” IRS Publication 557, contains explanations and sample language for the provisions required. You can call the IRS at (800)829-3676 for a copy of the publication or download the publication at [www.irs.ustreas.gov](http://www.irs.ustreas.gov). If you have any additional questions about federal tax exemption you should contact the IRS.