

# IOLTA REGISTRATION

## NOTICE TO KANSAS BAR FOUNDATION

*Your bank can assist you in completing this form. Present it when opening the account. It is the attorney's responsibility to ensure the form is sent to the Kansas Bar Foundation (see contact info below).*

**Financial Institution Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Financial Institution Routing Number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The undersigned elect(s) to participate in the interest bearing trust account program authorized by the Kansas Supreme Court (Rule No. 226 at Rule 1.15(d)(3)). *Please include the word "IOLTA" in the name of your account. For example: Anderson Law IOLTA Account.*

**Account Number:** \_\_\_\_\_

**Account Name:** \_\_\_\_\_

**Address:** *(Use your address. Do not use the KBF 1200 SW Harrison St. address.)*

\_\_\_\_\_  
**City, State Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email Address** \_\_\_\_\_

Interest on the average monthly balance in the account, or as otherwise computed in accordance with your standard accounting practice (net any service charges or fees), should be remitted at least quarterly to the Kansas Bar Foundation. The remittance of the interest can be done by check, automated clearinghouse, or any other method provided by the Federal Reserve System. The Foundation is a 501 (c) (3) charitable organization and the IRS does not require a Form 1099 for this program. If your financial institution does elect to send out a W-9 Form, it should reflect the Kansas Bar Foundation as the payee, should contain the Kansas Bar Foundation tax identification number (48-6116429), and should be sent to the Kansas Bar Foundation.

The establishment of trust accounts by law firms, including professional corporations, to implement this program has been approved by the Federal Reserve System, the Federal Home Loan Bank Board, and the Federal Deposit Insurance Corporation.

Your cooperation and support for this important program benefiting the residents of Kansas is appreciated.

\_\_\_\_\_  
Authorizing trust account signature-  
(attorney's signature)

\_\_\_\_\_  
Attorney printed name

**Attorneys-** Please email, fax or mail this completed form to:  
Kansas Bar Foundation  
IOLTA Program Coordinator  
1200 S.W. Harrison St.  
Topeka, KS 66612-1806  
Fax: 785-234-3813  
[info@ksbar.org](mailto:info@ksbar.org) (put IOLTA Application in the subject line)  
785-234-5696