The filing fee for the annual report is $55. If you are filing this annual report as part of a reinstatement due to forfeiture, you may owe a different fee (fees are listed with the reinstatement form). For more information, please call (785) 296-4564.

Please enclose a check or money order payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. Please do not send cash. **NOTICE:** There is a $25 service fee for all checks returned by your financial institution. Also, to expedite processing, please do not use staples on your documents or to attach checks.

This is the address where you would like to receive official mail from the Secretary of State’s office. If your address has changed, check the box on the form, so that we may update our records with your new address.

Annual reports are due on the 15th day of the fourth month following the tax closing month. **EXAMPLE:** If the tax closing month is December, the due date is April 15 of the following year. The annual report may be filed as early as January 1.

If the annual report is not filed and the appropriate fee is not paid within 90 days following the due date, the business will be forfeited in Kansas. If the forfeited business wishes to return to active and good standing status, a reinstatement process is required and penalties will be assessed. **EXAMPLE:** If the tax closing month is December, the due date is April 15, and the forfeiture date is July 15. A business must file the annual report and pay the annual report fee on or before the forfeiture date to avoid forfeiture.

If you wish to correct information that was erroneously provided on a previously filed annual report, you may file a Corrected Document form (form COR). Complete the form and attach a complete and correct new Annual Report (form BT) and submit with a $55 filing fee.

If additional space is needed, please provide an attachment.
# Kansas Secretary of State

## Business Trust Annual Report

<table>
<thead>
<tr>
<th>Kansas Office of the Secretary of State:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Memorial Hall, 1st Floor</td>
</tr>
<tr>
<td>120 S.W. 10th Avenue</td>
</tr>
<tr>
<td>Topeka, KS 66612-1594</td>
</tr>
<tr>
<td>(785) 296-4564</td>
</tr>
<tr>
<td><a href="mailto:kssos@sos.ks.gov">kssos@sos.ks.gov</a></td>
</tr>
<tr>
<td><a href="http://www.sos.ks.gov">www.sos.ks.gov</a></td>
</tr>
</tbody>
</table>

## Form Fields

1. **Business entity ID #**
   - This is not the Federal Employer ID Number (FEIN).

2. **Business trust name**
   - Must match name on record with Kansas Secretary of State.

3. **Mailing address**
   - Address will be used to send official mail from the Secretary of State’s Office.
   - Do not leave blank.
   - Attention Name
   - Address
   - City
   - State
   - Zip
   - Country
   - Check this box if this is a new address. Our records will be updated only if this box is checked.

4. **Principal office address**
   - Must be a street, rural route, or highway. A P.O. box is unacceptable.
   - Street Address
   - City
   - State
   - Zip
   - Country

5. **Tax closing date**
   - Month
   - Year

6. **State of incorporation**
   - Name 1
   - Address
   - City
   - State
   - Zip
   - Country
   - Name 2
   - Address
   - City
   - State
   - Zip
   - Country
   - Name 3
   - Address
   - City
   - State
   - Zip
   - Country

8. **Federal Employer Identification Number (FEIN)**

9. **I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct and that I have remitted the required fee.**
   - Signature of Trustee or other Authorized Officer
   - X
   - Month
   - Day
   - Year
   - Name of Signer (printed or typed)
   - Title/Position
   - Phone Number

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Please review to ensure completion.