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KANSAS SECRETARY OF STATE
**Limited Partnership
Annual Report**

GENERAL FILING INSTRUCTIONS

The following form **must be complete** and accompanied by **the correct filing fee** or the document will **not** be accepted for filing.

Save time and money by filing your annual report online at **www.sos.ks.gov**. There, you can also stay up-to-date on your organization's status, annual report due date, and contact addresses.

<input type="checkbox"/> Filing fee	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.
<input type="checkbox"/> Payment	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.
<input type="checkbox"/> Due date	The annual report shall be filed at the time prescribed by law for filing the annual Kansas tax return.
<input type="checkbox"/> Forfeiture date	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.
<input type="checkbox"/> Amending annual reports	If you wish to correct information that was erroneously provided on a previously filed annual report, file a completed Corrected Document form COR with a complete and correct new Annual Report form LP and submit with a \$55 filing fee.
<input type="checkbox"/> Additional information	If additional space is needed, please provide an attachment.
<input type="checkbox"/> Domestic and foreign	Use this form to file for both domestic or foreign entities.

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Limited Partnership
Annual Report

Memorial Hall, 1st Floor
120 S.W. 10th Avenue
Topeka, KS 66612-1594

(785) 296-4564
kssos@ks.gov
www.sos.ks.gov

THIS SPACE FOR OFFICE USE ONLY.

1. Business entity ID #

This is NOT the Federal Employer ID Number (FEIN).

2. Limited partnership name

Must match name on record with Kansas Secretary of State.
(56-1a606(b)(1), 56-1a607(b))

3. Tax closing date

Month

Year

4. State of organization

5. Name and address of each partner who owns 5% or more of capital (Kansas limited partnerships only)

If additional space is needed, please provide attachment.
(56-1a606(b)(2))

Name	Address		
City	State	Zip	Country
Name	Address		
City	State	Zip	Country
Name	Address		
City	State	Zip	Country

6. Does this limited partnership own or lease any land in Kansas that is suitable for use in agriculture?

Yes (Complete AG LP attachment.)

No (Skip to Question 7.)

7. Federal Employer Identification Number (FEIN)
(Not required)

8. I/We declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct. (17-7909)

Signature of General Partner (56-1a606(d), 56-1a607(d))

X

Name of Signer (printed or typed)

Phone Number

Signature of General Partner

X

Name of Signer (printed or typed)

Phone Number



KANSAS SECRETARY OF STATE
Annual Report Agricultural Attachment
 for Form LP

Complete this form **only** if the limited partnership owns or leases land suitable for agricultural use. **All information must be complete** or this document will **not** be accepted for filing.

Note: This form must be completed if Question 6 of annual report form is answered “yes.”

1. Provide information on each lot, tract, or parcel of agricultural land in Kansas owned or leased by limited partnership, or include an attachment.

Location of tract or lot (56-1a606(c)(1), 56-1a607(c)(1))				Number of acres in tract or lot	Acquired after July 1, 1981? (56-1a606(c)(2), 56-1a607(c)(2))	
County	Section	Township	Range		Yes	No
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
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					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

See attachment