ARTICLES OF INCORPORATION
DOMESTIC NONPROFIT CORPORATION
State Form 4162 (R21 / 05-24)

INSTRUCTIONS:
1. Use 8½" x 11" white paper for attachments.
2. Please **TYPE** or **PRINT LEGIBLY** in **INK**. Print all forms single sided.
3. For additional forms please visit *in.gov/sos/business/division-forms*
4. Make check or money order payable to the Secretary of State.
5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

REQUIREMENTS:
1. *Nonprofit corporations must qualify with the Internal Revenue Service and the Indiana Department of Revenue. It is strongly suggested you do not complete or file this form before contacting both agencies.*
2. *Article VII **MUST** be completed appropriately. Please see (1) above.*

INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.

Name of business

E-mail address of business *(SOS use only)*

RETURN DOCUMENTS TO:

Name

Street address, line 1

Street address, line 2

City	State	ZIP code

Telephone number	E-mail address *(If different from above – SOS use only)*
( )	

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State Form 4162 (R21 / 05-24)

Indiana Code 23-17-3-2
23-0.5-9-14

FILING FEE: $50.00

ARTICLES OF INCORPORATION
The undersigned, desiring to form a Corporation (hereinafter referred to as the "Corporation") pursuant to the provisions of the Indiana Nonprofit Corporation Act of 1991 (hereinafter referred to as the "Act"), execute the following Articles of Incorporation:

ARTICLE I – NAME AND PRINCIPAL OFFICE

Name of the Corporation: *(The name must include the word Corporation, Incorporated, Limited, Company or an abbreviation thereof.)*

Address of Principal Office *(number and street)*	City	State	ZIP code

ARTICLE II – STATEMENT OF PURPOSE

The purposes for which the Corporation is formed are:
Specific language is required by the IRS in this article in order to be approved for 501(c) status. Contact the IRS for assistance.

ARTICLE III – TYPE OF CORPORATION *(CHECK ONLY ONE.)*

The Corporation is a:

☐ public benefit corporation, which is organized for a public or charitable purpose;

☐ religious corporation, which is organized primarily or exclusively for religious purposes; or

☐ mutual benefit corporation *(all others).*

ARTICLE IV – REGISTERED AGENT INFORMATION

To determine if your Registered Agent is a Commercial Registered Agent (CRA), go to INBIZ.in.gov.

Provide either commercial registered agent or noncommercial registered agent information below.

☐ Commercial registered agent	Name of registered agent *(Do not provide address.)*

OR

☐ Noncommercial registered agent	Name of registered agent

Address *(number and street) (A P.O. Box is not acceptable unless accompanied by a Rural Route number.)*	City	State **IN**	ZIP code

(OPTIONAL) E-mail address of the registered agent at which the registered agent will accept electronic service of process

☐ By checking the box, the Signator(s) represent(s) that the Registered Agent named in these Articles of Incorporation has consented to the appointment of Registered Agent.

ARTICLE V – MEMBERSHIP

Indicate if Corporation will have members.　　☐ Yes　　☐ No members

ARTICLE VI – INCORPORATOR(S) *(INCORPORATORS MAY NEVER BE AMENDED.)*

The names and addresses of the officers of the Incorporators is/are as follows:

Name	Number and Street or Building	City	State	ZIP code

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ARTICLE VII – DISTRIBUTION OF ASSETS ON DISSOLUTION OR FINAL LIQUIDATION

Please note: This section must be completed.

Refer to Indiana Code 23-17-22-5 for permitted activities following Dissolution:
Specific language is required by the IRS in this article in order to be approved for 501(c) status. Contact the IRS for assistance.

SIGNATURE

In witness whereof, the undersigned _____ of said Corporation
(Title)

executes this document, and verifies subject to penalties of perjury, that the facts contained herein are true,

this _____ day of _____, 20_____.

Signature	Printed name