

FOR OFFICE USE ONLY
Check # _____ Amt. _____

TO: **Lawyers Professional Responsibility Board**
445 Minnesota Street, Suite 2400
St. Paul, MN 55101-2139

2020

PROFESSIONAL FIRMS ANNUAL REPORT

The Minnesota Professional Firms Act, Minn. Stat. § 319B, requires this form to be completed, signed under oath, and filed with the Lawyers Professional Responsibility Board before furnishing professional services within Minnesota on or before January 1, 2021. If additional space is needed for any answer, please attach a separate sheet.

The undersigned states the following under oath:

(1) Firm Name: _____
(Name as registered with Secretary of State)

Firm Address (as registered with Secretary of State - *P.O. Box itself is not acceptable*):

City, State and Zip Code: _____

Firm Telephone Number: _____

Firm Email: _____

(2) Has there been any amendment made to the firm's organizational document, certificate of authority, or statement of qualification during the current reporting year?

Yes ___ No ___

If yes, please provide a copy of the amendment(s) with proof of filing.

(3) Please designate the position(s) within the firm that have governance authority (e.g., owner, shareholder, partner, member). N/A or a lawyer's name is not acceptable.

- (4) Please list the name and address of anyone who, during the reporting year, had either an ownership interest or governance authority in the firm (*see* Minn. Stat. § 319B.02). (If additional space needed, please attach list to this report.) N/A is not acceptable.

Name: _____

Address: _____

City, State and Zip: _____

Name: _____

Address: _____

City, State and Zip: _____

- (5) Are all employees, agents and independent contractors who furnish professional **legal** services (as defined by Minn. Stat. § 319B.02, subdiv. 19) within Minnesota, on behalf of the professional firm, professionals authorized to practice law?*

Yes ___ No ___ N/A ___ (No employees, agents or independent contractors.)

***NOTE: Clerks, paralegals and other support staff furnishing services under the supervision of a licensed attorney are not furnishing professional services as defined in Minn. Stat. § 319B.02, subdiv. 19.**

- (6) Were all of the owners of the firm and others who had governance authority authorized to practice law? Yes ___ No ___

This firm has, as of this date, complied with all of the provisions of the Minnesota Professional Firms Act.

I, _____, declare under oath and penalty of perjury
(Print name of authorized attorney)

that the above statements are true and correct and that I am an owner or employee of the firm, licensed to practice law, and authorized to make the above statement on behalf of the professional firm.

Dated: _____
(Signature of authorized attorney)

Make Checks Payable to: Lawyers Professional Responsibility Board. The fee is \$25.00.