



PO Box 92860  
Albuquerque, NM 87199-2860  
505-797-6059  
www.nmbar.org/IOLTA

## Attorney Notice Eligible to Financial Institutions

### Notice to Attorney:

1. Complete this notice;
2. Take the notice to an eligible financial institution;
3. After the account has been opened or converted, send a copy of this notice to the State Bar, and;
4. Retain a copy for your records.

*I hereby enroll in the Interest on Lawyer Trust Account (IOLTA) program established by the New Mexico Supreme Court. Accordingly, I direct my financial institution to (1) open, if new; OR, (2) convert, if existing, my/my firm's pooled client trust account to an interest bearing IOLTA account in accordance with Rule 24-109 NMRA of the Rules Governing the New Mexico Bar.*

- Firm Name: \_\_\_\_\_
- Attorney Name: \_\_\_\_\_
- Mailing Address: \_\_\_\_\_
- E-Mail: \_\_\_\_\_
- City/State/Zip: \_\_\_\_\_
- Telephone/Fax: \_\_\_\_\_
- Authorized Signature Law/Law Firm: \_\_\_\_\_
- Additional Account Signer(s): \_\_\_\_\_

*(Attach additional sheets if necessary)*

### Notice to Financial Institution:

The IOLTA account must be established in the name of the attorney or law firm opening or converting this account, with further designation indicating the fact that this is an IOLTA account. The Taxpayer Identification Number (TIN) must be that of the State Bar of New Mexico (85-0242641). The State Bar is a tax exempt organization and is exempt from backup withholding. No IRS form 1099 is required for IOLTA accounts opened under this program and a financial institution is not subject to penalty for a mismatched TIN when the payee is an exempt organization.

The establishment of interest bearing trust accounts by law firms, including professional corporations, under the IOLTA program has been approved by federal regulatory agencies. Interest as computed in accordance with the applicable disclosures for this account must be remitted monthly or quarterly to the State Bar of New Mexico, PO Box 92860, Albuquerque, NM 87199-2860. If you wish to transmit interest electronically, please call 505-797-6059.

- Financial Institution Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Telephone: \_\_\_\_\_
- By *(financial institution representative)*: \_\_\_\_\_
- Date: \_\_\_\_\_
- Account Name: \_\_\_\_\_
- Account No: \_\_\_\_\_

---

Please attach voided check or deposit slip here. This notice must be filed by attorney with the financial institution and IOLTA