

Checklist for Licenses and Premises Permit

7/16

To conduct lawful gambling in Minnesota, your organization must apply for and receive:

1. an organization license,
2. a gambling manager license, and
3. at least one premises permit.

Use this checklist to complete the required attachments to each application.

LG200A Organization License Application and the following attachments

- LG200B Organization Officers Affidavit - for chief executive officer (CEO) and treasurer.
- Proof of nonprofit status.
- Organization bylaws, signed and dated by your CEO.
- Membership list showing at least 15 active voting members including date of membership for each member; the list must be signed and dated by your CEO.
- \$350 annual license fee (non-refundable); make check payable to "State of Minnesota".
FEE WAIVER: If your organization receives less than \$100,000 in gross annual receipts, you may request a waiver of the organization license fee after your first licensed year.

LG212 Gambling Manager Application and the following attachments

- A copy of the dishonesty bond, in the position or name of gambling manager, for \$10,000 in favor of your organization.
- \$100 annual license fee (non-refundable); make check payable to "State of Minnesota".

LG214 Premises Permit Application and the following attachments

- LG215 Lease for Lawful Gambling Activity (if premises is leased).
- \$150 annual permit fee for **each** premises permit (non-refundable); make check payable to "State of Minnesota".

Mail applications and attachments to:

NOTE: Fees may be combined in one check.

Minnesota Gambling Control Board
Suite 300 South
1711 West County Road B
Roseville, MN 55113

Did your organization discontinue gambling more than 90 days ago?

If yes, an LG204 License Termination Plan must be submitted and approved before any licenses and premises permits can be issued. Contact a Licensing Specialist at 651-539-1900.

Questions?

Check our website at mn.gov/gcb or contact a Licensing Specialist at 651-539-1900.

LG200A Organization License Application

Annual Fee \$350 (NON-REFUNDABLE)

ORGANIZATION INFORMATION

Legal Name: _____ Other Names Used: _____

Minnesota Sales & Use Tax Permit: _____ Federal Employer Identification #: _____ Business Phone: _____

The organization business address cannot be the same as the gambling manager’s address. If your organization does not have an address, list the home address of your CEO or obtain a P.O. box.

Mailing Address (Street or P.O. box): _____

City: _____ State: _____ Zip: _____ County: _____

BYLAWS: ATTACH A COPY OF YOUR ORGANIZATION’S OFFICIAL BYLAWS, SIGNED AND DATED BY THE CEO

Board staff will review your bylaws to determine your organization’s compliance with statutes and rules to be licensed, including membership requirements and voting rights, type and frequency of meetings conducted, and treasurer duties.

OFFICER INFORMATION - CHIEF EXECUTIVE OFFICER (CEO)

- The CEO:
- **must complete an LG200B Organization Officers Affidavit;**
 - is the person responsible for your organization, such as the president or commander;
 - cannot be your gambling manager; and
 - must attend a Gambling Manager’s Seminar before an organization license may be issued.

First Name: _____ Full Middle: _____ Last: _____

Maiden or Previous Name(s): _____

Date CEO attended Gambling Manager’s Seminar: _____

OFFICER INFORMATION - TREASURER

- The treasurer:
- **must complete an LG200B Organization Officers Affidavit;**
 - is the person who handles nongambling monies for your organization, such as bookkeeper or accountant; and
 - may not be your gambling manager and may not sign checks from your gambling account.
 - The CEO may be the same person as the treasurer, depending on your organization’s size and structure.
 - If the CEO is the treasurer, then the CEO may not be a signatory on your organization’s gambling account.

First Name: _____ Full Middle: _____ Last: _____

Maiden or Previous Name(s): _____

NONPROFIT STATUS

Type of Nonprofit Organization (check one):

Fraternal Religious Veterans Other Nonprofit Organization

Attach a copy of at least one of the following showing proof of nonprofit status of at least three years:

(DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)

_____ Current calendar year Certificate of Good Standing

Don’t have a copy? This certificate must be obtained each year from:

MN Secretary of State, Business Services Division
60 Empire Drive, Suite 100
St. Paul, MN 55103

Secretary of State website, phone numbers:

www.sos.state.mn.us
651-296-2803, or toll free 1-877-551-6767

_____ Internal Revenue Service - IRS income tax exemption 501(c) letter in your organization’s name

Don’t have a copy? Obtain a copy of your federal income tax exempt letter by having an organization officer contact the IRS at 877-829-5500.

_____ Internal Revenue Service-Affiliate of national, statewide, or international parent nonprofit organization (charter)

If your organization falls under a parent organization, attach copies of both of the following:

1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling, and
2. the charter or letter from your parent organization recognizing your organization as a subordinate.

MEETINGS

When does your organization hold regular meetings? Example: 2nd Thursday 8:00 p.m.

___ Day _____ Time: _____ ___ a.m. ___ p.m.
 ___ Day _____ Time: _____ ___ a.m. ___ p.m.

VOTING RIGHTS

Are all organization members eligible to vote on gambling matters at your monthly meeting?

___ **Yes**
 ___ **No** If no, then your "board members" are considered the active members for gambling purposes, plus the gambling manager must be a member of your board.

MEMBERSHIP LIST

___ Attach a membership list that contains the first and last names of at least 15 active voting members, and the original date of membership for each member. The list must be signed and dated by your CEO.
 ___ If you answered "no" to the voting rights question above, the list must specifically identify all board members with board membership date.

MEMBERS

List the number of full active members your organization has: _____. (Must have at least 15 active voting members.)

ACKNOWLEDGMENT

I declare that:

- I am the chief executive officer of the organization.
- All required information has been fully disclosed.
- I assume full responsibility for the fair and lawful operation of all activities to be conducted.
- I will familiarize myself with the laws of Minnesota governing lawful gambling and rules of the Board, and agree, if licensed, to abide by those laws and rules, including amendments to them.
- Failure to provide required information or providing false or misleading information may result in the denial or revocation of the license.
- I affirm that the gambling manager will be bonded and licensed as required per Minnesota Statutes.

- A termination plan will be submitted to the Board within 30 calendar days of termination of gambling.
- I understand the fee is nonrefundable regardless of license approval/denial.

For 501(c)(3) organizations and 501(c)(4) festival organizations: I acknowledge the requirements of Minnesota Rules, part 7861.0320, subpart 14, i.e. if our organization intends to transfer gambling funds to our general account for its primary purpose, that our organization has met the standards and will obtain written approval from the Board (using form LG200C) before making any transfers.

SIGNATURE OF CHIEF EXECUTIVE OFFICER (CEO)

I have read this application and all information submitted to the Board, and declare that all information submitted is true, accurate, and complete. Any changes in the information in this application will be submitted to the Board in writing within ten days of the change.

Signature of CEO: _____ Date: _____
(must be CEO's signature; designee may not sign)

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a license (or permit). If your organization supplies the information requested, the Board will be able to process

your organization's application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the license (or permit). When the Board issues the license (or permit), all information provided will become public. If the Board does not issue a license (or permit), all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to: Board members; Board

staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor; national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

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