# MASSACHUSETTS GAMING COMMISSION
# PUBLIC MEETING #215

April 27, 2017
10:00 a.m.
**Massachusetts Gaming Commission**
101 Federal Street, 12th Floor
Boston, MA

**NOTICE OF MEETING and AGENDA**
**April 27, 2017**

Pursuant to the Massachusetts Open Meeting Law, G.L. c. 30A, §§ 18-25, notice is hereby given of a meeting of the Massachusetts Gaming Commission. The meeting will take place:

**Thursday, April 27, 2017**
**10:00 a.m.**
**Massachusetts Gaming Commission**
**101 Federal Street, 12th Floor**
**Boston, MA**

## PUBLIC MEETING - #215

1. Call to order

2. Approval of Minutes
   a. March 30, 2017 – **VOTE**
   b. April 13, 2017 – **VOTE**

3. Administrative Update – Ed Bedrosian, Executive Director
   a. General Update
   b. Review Massachusetts Gaming Commission Mission and Values
   c. Service Employees Registration – C. Blue, General Counsel and K. Wells, Director – Investigations and Enforcement Bureau

4. Investigations and Enforcement Bureau – Karen Wells, Director
   a. Licensee Outside Director Background Checks
   b. Qualifier Suitability – **VOTE**

5. Licensing Division – Paul Connelly, Director
   a. Licensing Quarterly Report
   b. Updated License and Registration Forms – **VOTE**
   c. 205 CMR 134.00: Licensing of Employees, Vendors, Junket Enterprises and Representatives and Labor Organizations – Amended – Initial Review

6. Legal Division – Catherine Blue, General Counsel
   a. 205 CMR 143.01: Update to standards for gaming devices incorporating Gaming Labs International (GLI)-11 3.0 (including skill based gaming) – Approval for Formal Promulgation Process – **VOTE**

7. Research and Responsible Gaming – Mark Vander Linden, Director
    a. General Update

8. Commissioner's Updates

9. Other business – reserved for matters the Chair did not reasonably anticipate at the time of posting.

I certify that on this date, this Notice was posted as "Massachusetts Gaming Commission Meeting" at www.massgaming.com and emailed to: regs@sec.state.ma.us, melissa.andrade@state.ma.us.

4/25/17
DATE

Enrique Zuniga, Commissioner

**Date Posted to Website:** April 25, 2017 at 10:00 a.m.

# Massachusetts Gaming Commission Meeting Minutes

**Date/Time:** March 30, 2017 – 10:00 a.m.

**Place:** Massachusetts Gaming Commission
101 Federal Street, 12th Floor
Boston, Massachusetts

**Present:** Chairman Stephen P. Crosby
Commissioner Gayle Cameron
Commissioner Bruce Stebbins
Commissioner Enrique Zuniga

**Absent:** Commissioner Lloyd Macdonald

**Time entries are linked to corresponding section in Commission meeting video**

**Call to Order**
See transcript page 2

10:00 a.m. Chairman Crosby called to order the 213th Commission meeting. He noted the absence of Commissioner Macdonald and referred the approval of the minutes to Commissioner Zuniga.

**Approval of Minutes**
See transcript pages 2-4

10:00 a.m. *Commissioner Zuniga moved for the approval of the March 16, 2017, Commission meeting minutes subject to any corrections, typographical errors, or other nonmaterial matters. Commissioner Zuniga noted a typographical error – IGA should be IGT. Motion seconded by Commissioner Cameron. Commissioner Stebbins requested, at time entry 10:57 a.m., to note the changes that were made to the regulations as a result of comments received. General Counsel Catherine Blue suggested waiting until final approval of the regulations when all comments have been incorporated. Motion passed 4 to 0.*

**Administrative Update**
See transcript pages 4-7

10:02 a.m. Executive Director Edward Bedrosian, Jr. reported that the public comment period for the MGM Springfield operational diversity plan will be extended until April 13th

at 5:00 p.m. He stated that the Commission will not have a public meeting on this matter today at 5:00 p.m. as reported on some sites.

Executive Director Bedrosian noted the retirement of two long-time racing employees –Jeff Bothwell and Trooper Joe Sinkevich. He wished them well.

Executive Director Bedrosian stated that he virtually attended the Springfield "topping off" ceremony (installation of the last beam at MGM Springfield) and it was a great event. He stated that Commissioner Zuniga will provide an update on this event.

**Racing Division**
See transcript pages 7-79

10:05 a.m. General Counsel Catherine Blue presented on a request from Sterling Suffolk Racecourse, LLC for the Commission to approve the transfer of Suffolk Downs to a third-party purchaser for redevelopment. She provided an overview of the provisions in M.G.L. c. 128A, §11C for the transfer of the property and she stated that Suffolk Downs addressed the requirements in section 11C. She stated that Suffolk Downs proposes 6 days of live racing in 2017 and may engage in live racing, with a lease and Commission approval, in 2018. She noted that Suffolk Downs is not proposing to transfer their racing license and they will be responsible for the requirements of the racing license. She noted that the transfer will not impact the integrity of racing.

Commissioner Cameron stated that she does not feel that the sale affects the integrity of racing and she is in favor of the proposal. Chip Tuttle, Chief Operating Officer for Suffolk Downs, stated that they no longer have an agreement with casino operator Mohegan Sun, but they may have an ongoing agreement with Caesars Casino. Bruce Barnett, Attorney for Suffolk Downs, stated that Suffolk Downs is not part of the ownership of the buyer of the property and they anticipate closing on April 27th. Mr. Tuttle stated that any improvements to the racing property will be their responsibility. Attorney Barnett stated that he does not foresee any changes to the lease after the closing. Chairman Crosby inquired about the simulcast license and Mr. Tuttle stated that they would like to maintain the simulcast operation into the future. Chairman Crosby stated that he received public comments pertaining to the simulcast license. Chairman Crosby doesn't know whether the Commission has the authority to pull the simulcast license and give it to someone else, but in any event, Suffolk Downs has a second simulcast license at Wonderland which is legislatively mandated. He also stated that we have never been approached by any entity to bid for a simulcast license.

10:28 a.m. *Commissioner Cameron moved that the Commission find that Sterling Suffolk, LLC has satisfied their requirements described in Section 11C of the Mass. General Laws Chapter 128A as more fully described in the letter from DLA Piper dated March 16, 2017, found in the Commissioner's packet, and further moved that in accordance with Section 11C the Commission approve the sale of the property described in the March 16th letter and leaseback of the property to Sterling Suffolk, LLC for the use of a racetrack in 2017 and potentially in 2018 subject to the issuance of a license to Suffolk Downs in 2018. Motion seconded by Commissioner Stebbins. Motion passed unanimously.*

*Commissioner Cameron further moved that as a condition of the Commission's approval, Sterling Suffolk, LLC is required to abide by all of the terms and conditions of its racing license issued by the Commission and the requirements of Mass. General Laws, 128A and 128C as amended or revised and any other laws applicable to horse racing in the Commonwealth now and in the future. Motion seconded by Commissioner Stebbins. Motion passed unanimously.*

Commissioner Stebbins requested that Attorney Barnett provide him with a copy of the signed lease.

10:30 a.m. Ed Nowak, President of the Standardbred Owners of Massachusetts, requested to be reappointed as the organization which manages the breeding of Standardbred horses in Massachusetts and the racing of these horses in the Sire Stakes program. He provided a summary of a chart detailing numbers on horses and purses since receipt of the Race Horse Development Fund. He noted that the number of broodmares have increased from 65 in 2016 to 111 in 2017. He stated that they are a growing industry which means more business for farms, vets and blacksmiths; and people from around the country are taking notice. Dr. Alexandra Lightbown, Director of Racing, recommended that the Commission approve the request of the Standardbred Owners of Massachusetts.

10:41 a.m. *Commissioner Cameron moved that the Commission approve the request of the Standardbred Owners of Massachusetts to be recognized as the group of representative Standardbred Breeders to administer the Massachusetts Standardbred breeding program and Sire Stakes races in 2017. Motion seconded by Commissioner Zuniga. Motion passed unanimously.*

10:42 a.m. Dr. Lightbown provided a Racing Division update which included the following: installation of new computers for racing employees, meetings with the horsemen on medication issues, human resource orientation and ethics training scheduled for racing seasonal employees, a facility walkthrough will be conducted to determine readiness and safety, meetings with security officials and judges to go over expectations, licensing application overhaul, and changes in the health certificate requirements. Commissioner Cameron noted the growth and professionalism of the racing program under the leadership of Dr. Lightbown.

10:45 a.m. Steve O'Toole, Director of Racing at Plainridge Park Casino, noted that Dr. Lightbown's work on getting the health certificate change will help the horsemen avoid a cumbersome process. He also provided an overview of the 2017 racing meet which included the following: racing signage, 125 days of live racing, purses, handles, simulcasting, racing employees, horsemen licenses, promotions, events, player rewards, Hollywood Races, improvement projects, community business events, Pentafecta "Wicked Hi 5" promotion, MA State Lottery events, Yuengling sponsorships, and the Spirit of Massachusetts Trot which will be held on July 28th with a $250,000 purse. Mr. O'Toole stated that the Spirit of Massachusetts Trot is a Grand Circuit event for the best open trotters in the country. He also provided a brief history of Grand Circuit events.

Dr. Lightbown stated that the Racing Division and horsemen will miss long-term racing employees Jeff Bothwell and Trooper Joe Sinkevich who are retiring. She

stated that it was a pleasure to work with them, they did an excellent job, and we wish them well.

11:15 a.m. The Commission took a short recess.
11:22 a.m. The meeting resumed.

**Research and Responsible Gaming**
See transcript pages 80-207

11:22 a.m. Dr. Rachel Volberg, Principal Investigator for the SEIGMA (Social and Economic Impacts of Gambling in Massachusetts), and Dr. Robert Williams, Co-Principal Investigator on the SEIGMA project, provided a summary on a deeper analysis of the Baseline General Population Survey published in 2015. Dr. Williams participated via telephone. Dr. Volberg stated that the peer review process from GRAC (Gaming Research Advisory Committee) and RDASC (Research Design and Analysis Subcommittee) resulted in a greater product. Dr. Volberg stated that a deeper analysis was conducted to identify predictors of gambling and problem gambling in Massachusetts and to inform problem gambling prevention, intervention, and treatment initiatives. Dr. Volberg provided an overview of the following: survey challenges, characteristics in multivariate models, characteristics that distinguish non-gamblers from recreational gamblers, variables that predict higher gambling involvement, variables that distinguish at-risk gamblers from recreational gamblers, characteristics of gambling formats, characteristics that distinguish problem/pathological gamblers from recreational gamblers, and predictors (demographic, health and gambling variables). Dr. Volberg stated that this information will be of great use in the development of problem gambling services in Massachusetts.

12:25 p.m. The Commission took a short recess.
12:29 p.m. The meeting resumed.

12:29 p.m. Director Mark Vander Linden stated that Wynn Boston Harbor and MGM Springfield will present an update on their planning, preparation and possible development of a responsible gaming platform (PlayMyWay) at their facilities and review of space for the GameSense information center.

12:33 p.m. Mike Mathis, President of MGM Springfield, presented on the location of the Problem Gaming Office ("PGO") on the casino floor. He stated that the PGO will be located near the M Life desk area - a high traffic area and best location to interact with patrons. He stated that it will be approximately 370 square feet. Director Vander Linden stated that the requirements for a PGO (GameSense Center) include close proximity to the casino floor and a private location for sensitive conversations.

Mr. Mathis reported that they will implement GameSense corporate-wide, but they want to see the study on PlayMyWay at Plainridge Park Casino. He stated that they will talk to IGT (International Game Technology) regarding compatibility issues and they will do their due diligence. There was a discussion of the pros and cons of when to launch PlayMyWay. Mr. Mathis stated that it is risky to launch new software in a live environment. He also stated that they would prefer to voluntarily implement a program. Director Vander Linden noted that the workload was

significant in launching PlayMyWay at Plainridge Park Casino and a partnership is essential.

12:54 p.m. Robert DeSalvio, President of Wynn Boston Harbor, introduced Greg Dauenhauer, the Vice President/Chief Information Officer. Mr. DeSalvio reported that he met with IGT and PlayMyWay will require modification, but it will not affect the hardware or wiring. He stated that launching new software on opening day is not a good idea. He stated that based upon his personal experience, he doesn't believe that there is any software that can identify problem gamblers more than trained casino staff and their interactions with patrons. He also stated that the research on PlayMyWay may show unintended consequences.

Mr. DeSalvio provided an overview of the GameSense center on the casino floor. He stated that they picked a heavy traffic area and the center will include a private area and storage space. He reported that he will provide the square footage of the center to Chairman Crosby. Chairman Crosby inquired about an additional/mobile center due to the large facility. Mr. DeSalvio stated that a mobile cart may get in the way and it may be in conflict with fire standards. He stated that they could have a permanent area for GameSense and make information available in other areas of the casino. Chairman Crosby stated that this will be considered further.

1:13 p.m. Director Vander Linden reported that the Responsible Gaming Framework, adopted in 2015, is currently under review. He stated that he looks forward to getting comments from the Commissioners, our licensees, and stakeholders.

1:14 p.m. Commissioner Zuniga stated that he attended the "topping off" event at MGM Springfield. The event highlighted the last beam that was placed in the building. He stated that it was well attended by representatives, most notably the laborers. He noted that there were two teams of father-daughter laborers working on the site. A video was shown of the event.

Jacqui Krum, Senior Vice President and General Counsel of Wynn Resorts Development, reported that Wynn celebrated a milestone as the last bucket of 650,000 tons of soil was taken away from the Wynn Boston Harbor site. Mr. DeSalvio reported that he went to MGM National Harbor and it is an amazing property. He congratulated Mr. Mathis and the team.

1:18 p.m. Director Vander Linden stated that National Problem Gambling Awareness Month activities draw attention to issues around problem gambling, treatment and prevention services.

Marlene Warner, Executive Director of Massachusetts Council on Compulsive Gambling, reported on the Council's National Problem Gambling Awareness Month activities which included: visiting treatment centers, trainings, connecting with recovery centers, working with youth through the CAPS program (Curriculum for Activities Probability and Statistics), outreach to Veterans, and social media activities targeting youth and sports gambling during March Madness. Ms. Warner reported that casino employees are a high-risk group for problem gambling. She also reported on the GameSense activities for employees at Plainridge Park Casino which included prevention, product, GameSense and financial literacy information

disseminated through bulletin boards, bathroom stalls, newsletters, and games. Chairman Crosby thanked Lisa McKenney and Lance George for their partnership.

1:29 p.m. Director Vander Linden provided an update on a new media campaign, which was launched during National Problem Gambling Awareness Month. He stated that two weeks of data for online ad buys and social media showed an increase in traffic on the GameSense website and a successful ad campaign on Facebook. He stated that the videos posted on Facebook were viewed 5,213 times and the most successful static image message was "Don't Chase Your Losses." Mr. Vander Linden reported that GameSense was mentioned through several media outlets due to the efforts of Communications Director Elaine Driscoll. He also reported that the campaign ad buys will continue through the end of May.

**Legal Division**
See transcript pages 208-217

1:36 p.m. Deputy General Counsel Todd Grossman presented on amendments to 205 CMR 136.08, which eliminate the requirement to list on a gaming beverage license the names and contact information for managers and other principals. The licensees will still need to identify those individuals and present them to the Investigations and Enforcement Bureau. Paul Connelly, Director of Licensing, stated that frequent name changes would require reissuance of a license on a frequent basis. Deputy General Counsel Grossman stated that he will put the amendment out for informal public comment.

1:40 p.m. Deputy General Counsel Grossman presented on a new section to 205 CMR 143.02 – which set forth the guidelines for a gaming licensee to transfer a progressive jackpot.

**Investigations and Enforcement Bureau**
See transcript pages 217-220

1:44 p.m. Bruce Band, Assistant Director and Gaming Agents Division Chief, presented on the last set of game rules (13) for the Commission's review, which included: Boston 5 Stud Poker, Double Cross Poker, Double Attack Blackjack, Four Card Poker, Texas Hold'em Bonus Poker, Flop Poker, Two Card Joker Poker, Asia Poker, Ultimate Texas Hold'em, Winner's Pot Poker, Supreme Pai Gow, Mississippi Stud, and Casino War. He stated that they will be posted for informal public comment.

**Commissioner's Updates**
See transcript pages 221-225

1:47 p.m. Chairman Crosby reported that he testified before the Marijuana Committee and brought forth the Commissioners comments. He also reported on the DFS Online Commission and stated that they had a fascinating speaker who was the owner of eSports teams. Commissioner Zuniga stated that he observed the meeting and the owner spoke about how eSports got started and the unintended by-product of "skins", which created a secondary market.

**Other Business Not Reasonably Anticipated**
See transcript pages 225-226

1:52 p.m. *Having no further business, a motion to adjourn was made by Commissioner Cameron. Motion seconded by Commissioner Zuniga. Motion passed unanimously.*

## List of Documents and Other Items Used

1. Massachusetts Gaming Commission, Notice of Meeting and Agenda dated March 30, 2017
2. Massachusetts Gaming Commission, Draft Meeting Minutes dated March 16, 2017
3. Letter from Attorney Bruce Barnett (DLA Piper) to the Massachusetts Gaming Commission, dated March 16, 2017 regarding Request for Approval of Sale of Suffolk Downs Racing Facility, with attachments
4. M.G.L. c. 128A, §11C - Sale of Ten Per Cent or More of Stock; Notice; Approval
5. Massachusetts Gaming Commission, Memorandum dated March 23, 2017 regarding Standardbred Owners of Massachusetts Recognition, with attachments
6. Plainridge Park Casino Racing PowerPoint Presentation
7. SEIGMA (Social and Economic Impacts of Gambling in Massachusetts), Predictors of Gambling & Problem Gambling in Massachusetts, Dr. Rachel Volberg and Dr. Robert Williams, dated March 30, 2017 (PowerPoint Presentation)
8. SEIGMA (Social and Economic Impacts of Gambling in Massachusetts), Gambling and Problem Gambling in Massachusetts: In-Depth Analysis of Predictors, dated March 23, 2017
9. Wynn Boston Harbor Casino Floor Plan/GameSense Information Center
10. Massachusetts Gaming Commission, Memorandum dated March 30, 2017 regarding Review of March 2017 Problem Gambling Awareness Month
11. Draft 205 CMR 136.08: Form of the Gaming Beverage License
12. Draft 205 CMR 143.02: Progressive Gaming Devices
13. Draft Table Games/Rules of the Games: Boston 5 Stud Poker, Double Cross Poker, Double Attack Blackjack, Four Card Poker, Texas Hold'em Bonus Poker, Flop Poker, Two Card Joker Poker, Asia Poker, Ultimate Texas Hold'em, Winner's Pot Poker, Supreme Pai Gow, Mississippi Stud, and Casino War.
14. MGM Springfield Floor Plan/New M Life Floor Plan

/s/ Catherine Blue
Catherine Blue, Assistant Secretary

# Meeting Minutes

**Date/Time:** April 13, 2017 – 10:00 a.m.

**Place:** Massachusetts Gaming Commission
101 Federal Street, 12th Floor
Boston, Massachusetts

**Present:** Chairman Stephen P. Crosby
Commissioner Gayle Cameron
Commissioner Bruce Stebbins
Commissioner Enrique Zuniga

**Absent:** Commissioner Lloyd Macdonald

**Time entries are linked to corresponding section in Commission meeting video**

**Call to Order**
See transcript page 2

10:00 a.m. Chairman Crosby called to order the 214th Commission meeting. He asked Commissioner Zuniga to bring the minutes forward for approval.

**Approval of Minutes**
See transcript pages 2-6

10:00 a.m. *Commissioner Zuniga moved for the approval of the March 30, 2017, Commission meeting minutes subject to any corrections, typographical errors, or other nonmaterial matters. Commissioner Stebbins asked if the request for a copy of the Suffolk Downs lease was required in the motion or was it added after the motion. General Counsel Catherine Blue responded that Commissioner Stebbins requested a copy of the lease so it was put in the minutes. Motion seconded by Commissioner Cameron. Chairman Crosby inquired about the level of detail and the characterization of conversations in the minutes. General Counsel Blue stated that the level of detail is appropriate and we could review areas in the minutes where the Chairman has questions and make changes. Chairman Crosby tabled the motion until the next Commission meeting.*

**Administrative Update**
See transcript pages 6-34

10:04 a.m. Executive Director Edward Bedrosian, Jr. reported that it was opening day for racing at Plainridge Park Casino on Monday. He noted that a lot of the seasonal employees returned, the racing office space was organized, and there were no backups with licensing. Commissioner Cameron noted that the racing staff is engaged and experienced and it is a well-run organization. Commissioner Stebbins stated that he previously did a walk-through with the racing team and he noted that improvements were made to the stable area. Commissioner Cameron also noted that the weather was beautiful, the crowds were great, and a Chamber event was held in the facility to support racing.

10:08 a.m. On behalf of the Commission, Jill Griffin, Director of Workforce and Supplier Diversity, presented a tribute to State Senator Kenneth J. Donnelly who recently passed away. She provided a summary of his achievements which included fighting for the unemployed and underemployed and supporting workforce development and training to advance opportunities for low-wage employees. Director Griffin commended his work and stated that he brought his passion and integrity to changing many lives in Massachusetts.

10:14 a.m. Senior Financial Analyst Douglas O'Donnell presented on the new racing revenue software. He stated that the new program, which integrates information from the tote companies and our racing billing system, is user-friendly, efficient, and will save the Racing Division approximately $55,000 a year. He stated that the system went live on January 1st and he commended Dan MacDonald, Manager of Infrastructure and Applications, for creating the new program. He stated that prior to this program they were using a system that was created over 20 years ago.

10:18 a.m. Executive Director Bedrosain provided an overview of the Commission's Internal Compliance Working Group. He stated that the group meets monthly and addresses the following areas: main compliance issues, risk analysis for the Commission, and audit functions. Commissioner Zuniga stated that we have significant internal as well as external compliance that the group and different departments look at. He also stated that we need to think about a model for the audit function. Chairman Crosby raised the matter about succession planning and risk assessment. He also suggested adding the Responsible Gaming Framework to the compliance section to ensure the plan is being adhered to by our licensees. Commissioner Zuniga provided an update on the Plainridge Park Casino ("PPC") audit. He stated that a draft of the audit has been sent to PPC for final review and it will come before the Commission.

**Financial Division**
See transcript pages 34-72

10:32 a.m. Chief Financial and Accounting Officer ("CFAO") Derek Lennon presented on the 3rd Quarter FY 2017 budget. He stated the Commission approved a fiscal year budget of $27.17 million which required an initial assessment of $22.39 million on our licensees. He reported on spending reductions and stated that we are keeping our costs in control. He also reported on regulatory cost spending (Office of the

Attorney General and Research and Responsible Gaming), adjustments, and division expense budgets.

10:48 a.m. Agnes Beaulieu, Finance and Budget Office Manager, provided an update on diversity spend. She stated that the Commission reached and surpassed the benchmark for small businesses and we are on target to reach the benchmark for minority-owned businesses. She reported the current encumbrances to date for FY17 are $305,000 for minority-owned businesses, $615,000 for small businesses, and $305,000 for women-owned businesses. She also reported that they are struggling to meet the benchmark for women-owned businesses but they are working with contractors and the Supplier Diversity Office. CFAO Lennon stated that we have met and surpassed the state benchmarks but not our own. He stated we are working daily to reach our higher benchmarks.

10:59 a.m. CFAO Lennon presented on the selection of Eastern Bank for the Commission's depository accounts. He stated that the racing fees will remain with the Bank of America because that bank is closer to Plainville. He stated that Eastern Bank is a bank approved by the State. Chairman Crosby stated that Eastern Bank is a local bank that is notable for its diversity and inclusion. He stated that we wanted to use a vendor that aligned with our mission for inclusion and diversity. Commissioner Cameron requested information about equal pay and leadership roles for women at Eastern Bank. She stated that Director Griffin found that 25% of Eastern Bank's Board Directors are women and they are very good with equity pay. Commissioner Zuniga stated that we are not losing any functionality with this move. CFAO Derek Lennon thanked Maria Bottari for her work on the bank move.

11:09 a.m. The Commission took a short recess.
11:15 a.m. The meeting resumed.

**Ombudsman's Report**
See transcript pages 72-94

11:15 a.m. Ombudsman John Ziemba presented on a request from the Town of Foxborough for the use of its mitigation reserves. They requested $1,180 for a module that will enable them to extract data and participate in the ongoing crime study. Commissioner Cameron stated that she met with the new Foxborough Police Chief and he expressed a need for the module and a willingness to participate in the crime study.

11:18 a.m. *Commissioner Cameron moved that the Commission approve the Foxborough Community Mitigation Reserve Fund being used for this purpose, which is the module needed to extract data. Motion seconded by Commissioner Zuniga. Motion passed unanimously.*

11:20 a.m. Ombudsman Ziemba provided an overview of the following pending legislation that is of interest to the Commission: horse racing and wagering, horse park feasibility study, Race Horse Development Fund and the Community Preservation Trust Fund, thoroughbred breeding program, simulcast racing, municipal and regional planning agency, employee participation in advisory committees, limited slot machine license for Veteran's organizations, charitable gaming, stickers on slot machines describing their addictive nature, education fund, requirement for the Commission

to procure products and services from Massachusetts businesses, certain game machines not to be governed by the gaming statute, gaming local aid fund, CORI (Criminal Offender Record Information), online gaming, budget sections related to the Commission, sale of alcohol on the casino floor from 2:00 to 4:00 a.m., and the Bureau of Substance Abuse name change. Ombudsman Ziemba stated that they will watch the budget and the amendment filed relating to the Race Horse Development Fund. Chairman Crosby stated that he receives frequent requests for the Commissions opinions on bills. Commissioner Zuniga stated that the Chairman has a process that he can rely on and he can also continue to exercise discretion.

**Investigations and Enforcement Bureau (IEB)**
See transcript pages 94-131

11:37 a.m. General Counsel Blue presented on the Amended Small Business Impact Statement and final draft for amendments to regulation 205 CMR 152 (Individuals Excluded from a Gaming Establishment). She reported that no comments were received at the public hearing. She requested approval for staff to complete the promulgation process.

11:38 a.m. *Commissioner Stebbins moved that the Commission approve the Amended Small Business Impact Statement, the final version of 205 CMR 152 that's included in the packet, and authorize staff to take all of the steps necessary to file a regulation with the Secretary of the Commonwealth and complete the regulation promulgation process. Motion seconded by Commissioner Cameron. Motion passed unanimously.*

11:38 a.m. IEB Director Karen Wells presented on licensee (Wynn, MGM, and Penn National) outside director background checks. She stated that the Commission conducts background checks on outside directors. Consultants Michael & Carroll prepared an analysis on how other jurisdictions treat outside directors. Director Wells provided an overview of the analysis. She also went over reasons for and against having directors go through the suitability process. Chairman Crosby stated that this matter was brought to his attention by the CEO of Penn National who stated that he would like to see this area changed. Commissioner Zuniga stated that he liked the Pennsylvania approach and believes that there is already a lot of scrutiny that exists on public companies. There was a discussion about what public information is available for company directors. Commissioner Cameron stated that doing what we do gives us the most information but if we are going to make a change, she prefers the Pennsylvania model. Chairman Crosby suggested that we put this issue out to our licensees and others for comments.

11:52 a.m. Paul Connelly, Director of Licensing, presented on changes to the license and registration forms. He stated that the licensing forms are tools to collect contact information for individuals and to support the background investigation. He provided highlights of the changes which included the following: created consistency across all forms, simplified and streamlined questions, added a "not applicable" check off feature, added a request for a driver's license number, added an out of state residency field, removed references on the key standard form, and removed offices and positions. He also went over the Non-Gaming Vendor Forms and noted that they tried to streamline questions, simplify instructions, and highlight the process. Director Wells stated that Director Connelly did reach out to

the licensees for their comments on the forms. Executive Director Bedrosian stated that the Commissioners can review the forms and it will be brought back for final approval.

12:10 p.m. Executive Director Bedrosian stated that the Commission will release Plainridge Park Casino's monthly gross gaming revenue on April 18th because April 15th falls on a Saturday and April 17th is a Holiday.

**Racing Division**
See transcript pages 131-141

12:10 p.m. Director Alexandra Lightbown thanked Steve O'Toole and Don Longabody for their cooperation in getting the first meet up and running. Steve O'Toole stated that the biggest feedback they received on opening day was on Mike Sangalang's Twitter video from the starting cart.

Director Lightbown presented on a request from Plainridge Racecourse for approval of their special events pursuant to M.G.L. c. 128C. She recommended that the Commission approve the 15 special events.

*Commissioner Cameron moved that the Commission approve the request of Plainridge Park Casino to simulcast the 15 races listed on their letterhead dated April 8th as special events. Motion seconded by Commissioner Stebbins. Motion passed unanimously.*

12:14 p.m. Senior Financial Analyst Douglas O'Donnell presented on the 2015 reimbursement of unclaimed tickets for the horse tracks and dog simulcasting tracks in the following amounts: $208,279.26 for Sterling Suffolk Downs, $158,701.82 for Plainridge Racecourse, $17, 216.75 for Wonderland Greyhound Park, and $180,953.94 for Raynham Taunton Greyhound.

12:16 p.m. *Commissioner Cameron moved that the Commission approve the request to distribute the checks from Sterling Suffolk Downs, Plainridge Racecourse, Wonderland Greyhound Park, and Raynham Taunton Greyhound back to those tracks. Motion amended by Chairman Crosby to reflect that the distribution goes back to the purse accounts for the horses and the Racing Stabilization Fund for the dogs. Motion seconded by Commissioner Stebbins. Motion passed unanimously.*

12:17 p.m. Mr. O'Donnell presented on the quarterly local aid distribution to the cities and towns where racing activities take place for a total of $232,961.07.

12:17 p.m. *Commissioner Cameron moved that the Commission approve the payments of the local aid quarterly payments through March 31st back to the appropriate cities and towns. Motion seconded by Commissioner Stebbins. Motion passed unanimously.*

**Legal Division**
See transcript pages 141-146

12:18 p.m. John Glennon, Chief Information Officer, presented on amendments to 205 CMR 143 and the adoption of new GLI (Gaming Laboratories International) Standards 3.0. He stated the new version includes technical standards around skill-based

gaming and improvements in the structure of the regulations. He stated that he will post the draft for informal public comment.

12:21 p.m. Deputy General Counsel Todd Grossman presented on draft amendments to regulations 205 CMR 143.02 (transfer of progressive jackpots) and 136.08 (names on alcoholic beverage license) and a request to move them through the formal promulgation process. He stated that the draft amendments were circulated for informal public comment and no comments were received.

12:22 p.m. *Commissioner Zuniga moved that the Commission approve the following regulations, 205 CMR 136, as well as 205 CMR 143 as included in the packet and direct staff to start the formal promulgation process. Motion seconded by Commissioner Cameron. Motion passed unanimously.*

**Research and Responsible Gaming**
See transcript pages 146-162

12:23 p.m. Director Mark Vander Linden provided an update on the Public Health Trust Fund ("PHTF"). He stated that the PHTF Executive Committee was created out of an MOU (Memorandum of Understanding) between the Massachusetts Gaming Commission and the Executive Office of Health and Human Services ("OHHS") and it consists of the following five members: Chairman Crosby, Lindsey Tucker from the Department of Public Health, Michael Sweeney from the Mass State Lottery, Rebekah Gewirtz from the Mass Public Health Association, and Jennifer Queally from the Executive Office of Public Safety and Security. He stated that the PHTF Executive Committee was created to align the efforts of the Commission's Research and Responsible Gaming initiatives and the OHHS (Department of Public Health) problem gambling services. He stated that the PHTF Executive Committee recently met and they are focused on developing an agenda for FY18. Director Vander Linden stated that once the budget is adopted by the PHTF Executive Committee it will be brought before the Commission for consideration.

Director Vander Linden provided a brief update on the Research and Responsible Gaming Framework. He stated that they want to revisit and update the framework. He reported that he is being assisted by Dr. Jeff Marotta who has met with the Commissioners, licensees, GameSense Advisors, and the recovery board. He stated that feedback from the recovery board highlighted a need for the GameSense program.

**Commissioner's Update**
See transcript page 163

12:42 p.m. No updates were reported.

**Other Business Not Reasonably Anticipated**
See transcript page 163

12:42 p.m. *Having no further business, a motion to adjourn was made by Commissioner Cameron. Motion seconded by Commissioner Zuniga. Motion passed unanimously.*

**List of Documents and Other Items Used**

1. Massachusetts Gaming Commission, Notice of Meeting and Agenda dated April 13, 2017
2. Massachusetts Gaming Commission, Draft Meeting Minutes dated March 30, 2017
3. Massachusetts Gaming Commission, Memorandum dated April 13, 2017 regarding Fiscal Year 2017 (FY17) Third Budget Update, with attachments
4. Town of Foxborough, 2017 Community Mitigation Fund Grant Application
5. Massachusetts Gaming Commission, Memorandum dated April 10, 2017 regarding Foxborough 2015 Community Mitigation Reserve Fund
6. Massachusetts Gaming Commission, 2017-2018 Racing and Gaming Bills
7. Amended Small Business Impact Statement, 205 CMR 152.00: Individuals Excluded from a Gaming Establishment
8. Final Draft Amendments to 205 CMR 152.00: Individuals Excluded from a Gaming Establishment
9. Treatment of Outside Directors in Other Jurisdictions (Casino Companies), Chart
10. Draft Non-Gaming Vendor Registration Form
11. Draft Gaming Service Employee Registration Form
12. Draft Gaming Employee License Application Form
13. Draft Key Gaming Employee-Standard License Application Form
14. Massachusetts Gaming Commission, Memorandum dated April 9, 2017 regarding Plainridge Special Events Request, with attachment
15. Massachusetts Gaming Commission, Memorandum dated April 13, 2017 regarding 2015 Reimbursement of Unclaimed Tickets – Horse Tracks, with attachment
16. Massachusetts Gaming Commission, Memorandum dated April 13, 2017 regarding 2015 Reimbursement of Unclaimed Tickets – Dog Tracks, with attachment
17. Massachusetts Gaming Commission, Memorandum dated April 13, 2017 regarding Local Aid Distribution, with attachments
18. 2015 Reimbursement of Unclaimed Tickets – Horse Tracks, with attachments
19. Draft amendments to 205 CMR 143.00: Gaming Devices and Electronic Gaming Equipment
20. Draft amendments to 205 CMR 138.00: Uniform Standards of Accounting Procedures and Internal Controls
21. Draft amendments to 205 CMR 139.00: Continuing Disclosure and Reporting Obligations of Gaming Licensees
22. Draft Amendments to 205 CMR 136.00: Sale and Distribution of Alcoholic Beverages at Gaming Establishments
23. Draft Amendments to 205 CMR 143.00: Gaming Devices and Electronic Gaming Equipment

/s/ Catherine Blue
Catherine Blue, Assistant Secretary

# No Documents

## Core Values

The Commissioners and all employees of the Massachusetts Gaming Commission are committed to a set of core values that will underpin and guide our work:

We value an unyielding commitment to a participatory, transparent and fair process for the ~~licensing~~ regulation of expanded gaming in Massachusetts.

We value an environment with a free-flowing and open exchange of ideas in which all are encouraged to question and participate, with the understanding that all will use their best efforts to implement the resulting decisions.

We value an uncompromising commitment to the integrity of the ~~licensing and~~ regulatory process, and strict adherence to the letter and spirit of our Enhanced Code of Ethics and the Conflict of Interest law, with a thoughtful balance between the need for rigorous regulation and enforcement, and the burden involved and effort required to achieve ~~of~~ compliance.

We value a diverse workforce and supplier base, and an inclusive culture internally and among ~~our partners in~~ the Massachusetts Gaming Industry.

We value a deep commitment to customer service that assures a respectful and professional experience for all with whom we come in contact, no matter their point of entry or point of view.

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## Mission Statement

The mission of the Massachusetts Gaming Commission is to create a fair, transparent, and participatory process for implementing the expanded gaming law passed by the Legislature and signed by the Governor in November, 2011.

In creating that process, the Commission will strive to ensure that its decision-making and regulatory systems engender the confidence of the public and participants, and that they provide the greatest possible economic development benefits and revenues to the people of the Commonwealth, reduce to the maximum extent possible the potentially negative or unintended consequences of the ~~new~~ legislation, and allow an appropriate return on investment for gaming providers that assures the operation of casino-resorts of the highest quality.

TO: Commissioners

FROM: Edward R. Bedrosian Jr., Executive Director
Catherine Blue, General Counsel
Karen Wells, Director of Investigations and Enforcement Bureau

DATE: April 27th, 2017

RE: Gaming Service Employee Registration Review – Automatic Criminal Conviction Disqualifiers

---

## Introduction

As the opening of the Commonwealth's category 1 gaming facilities approaches and we prepare to license and register thousands of employees, members of the Commission have asked staff to review the Commission's requirements in "registering" Gaming Service Employees. Specifically, there has been discussion about the automatic criminal conviction disqualifiers under the gaming statutes.

The intent of the legislature in legalizing gaming in the Commonwealth appears in the first section of the chapter 23K. Of the nine declarations, the two relevant to this analysis are:

(1) *ensuring public confidence in the integrity of the gaming licensing process and in the strict oversight of all gaming establishments through a rigorous regulatory scheme is the paramount policy objective of this chapter*.

---

(5) *the commonwealth must provide for new employment opportunities in all sectors of the economy, particularly opportunities for the unemployed, and shall preserve jobs in the existing industries in the commonwealth; this chapter sets forth a robust licensing process whereby an applicant for a gaming license shall submit a comprehensive plan for operating a gaming establishment which includes how the applicant will foster and encourage new construction through capital investment and provide permanent employment opportunities to residents of the commonwealth*.

## Discussion

The operative sections of the Expanded Gaming Act that define a gaming service employee and the consequence of being a Gaming Service Employee are:

M.G.L. c. 23K § 2:

> *"Gaming service employee", an employee of a gaming establishment who is not classified as a gaming employee or a key gaming employee, but is required to register with the commission".*[1]

M.G.L. c. 23K § 30(a):

> *No person shall be employed by a gaming licensee unless such person has been licensed by or registered with the commission*.

M.G.L. c. 23K, § 30(c)

> *All other employees in a gaming establishment who are not considered to be gaming employees, key gaming employees or who have restricted access to an area of the gaming establishment or knowledge of security procedures, shall be required to register with the bureau as a gaming service employee and shall produce such information as the bureau may require to become registered under this chapter*.

The Expanded Gaming Act also sets conditions on who may be registered by the Commission:

M.G.L. c. 23K § 16(b):

> *The commission shall deny an application for a license or registration, other than a gaming license or a license for a key gaming employee, under this chapter if the applicant: (i) has been convicted of a felony or other crime involving embezzlement, theft, fraud or perjury; provided, however, that for convictions which occurred before the 10-year period immediately preceding application for licensure, an applicant may demonstrate, and the commission shall consider, the applicant's rehabilitation and whether such conviction should not be an automatic disqualification under this section: (ii) submitted an application for a license under this chapter that contains*

[1] The term "*Gaming* Service Employee" may lead to some confusion for members of the public. It is a catchall definition. Many of the employees who are classified under this definition and required to register and subject to the registration requirements are doing jobs not directly connected to the licensee's gaming operations. For example, line cooks, hotel attendants, and/or retail shop employees if employees of our licensees are required to register with the Commission as gaming service employees.

*false or misleading information; (iii) committed prior bad acts which have not been prosecuted or in which the applicant was not convicted but form a pattern of misconduct that makes the applicant unsuitable for a license under this chapter; or (iv) has affiliates or close associates that would not qualify for a license or whose relationship with the applicant may pose an injurious threat to the interests of the commonwealth in awarding a gaming license to the applicant.*

The rehabilitation factors that the Commission shall consider in determining whether a felony should act as an automatic disqualification are found in both statute and regulations. The rehabilitation factors are:

1. *the nature and duties of the position of the applicant;*
2. *the nature and seriousness of the offense or conduct;*
3. *the circumstances under which the offense or conduct occurred;*
4. *the date of the offense or conduct;*
5. *the age of the applicant when the offense or conduct was committed;*
6. *whether the offense or conduct was an isolated or repeated incident;*
7. *any social conditions which may have contributed to the offense or conduct; and*
8. *any evidence of rehabilitation, including recommendations and references of persons supervising the applicant since the offense or conduct was committed*.[2]

The Commission has considered the consequence of a felony conviction and/or certain designated misdemeanor convictions within 10 years for a gaming service employee at several public meetings, including one in September of 2016. At this time, there was discussion of whether these convictions within 10 years were mandatory disqualifiers or of whether the Commission could permissively still consider rehabilitation factors.[3] While the Commission did not reach a definitive conclusion on that issue, subsequently staff analyzed the gaming statute and regulations as they pertain to registering gaming service employees.

The Executive Director brought the Legal Division, the Licensing Division and the Investigation and Enforcement Bureau (I.E.B.) together for a series of meetings. During our meetings, we considered the effect of any options at two levels. First, was the option legally supportable. Second, what would the effect be on I.E.B's resources during the upcoming

[2] See M.G.L. c. 23K § 30(f); 205 CMR 134.10(4)
[3] See Commissioner Macdonald's memo included in the September 22, 2016 commissioner's packet.

opening licensing and registering process for both of our Category 1 licensees.[4] We considered the issue first raised by members of the Commission; whether the interpretation that certain criminal conviction disqualifications for gaming service employees were not mandatory but permissively allowed for a rehabilitation analysis. We did not reach consensus on the legal issue, besides, operationally, given the numbers of employees that need to be registered in such a short time AND the eight rehabilitation factors which would need to be investigated, a full rehabilitation investigation during the time sensitive licensing/registering period so close to opening is impractical. Additionally, the amount of information a registrant would need to provide and the exhaustive rehabilitation investigation very well may force applicants at this level to "select out" of the process.

We then explored legal options for a new category of employees, non-gaming service employees, for whom registration was not required, effectively "exempting" a subcategory of gaming service employees form registration requirements. We examined whether redefining the gaming property might create "geographic" jobs, i.e. off the gaming floor, which would not be subject to registration. However, if the "off-floor" employees would still be employed by the gaming licensee, the law is clear, registration is still required.

Our conclusion is that any person employed by the licensee working in the Commonwealth either needs to licensed or registered. Being licensed or registered with the Commission subjects the applicant/registrant to the requirements and disqualifications of § 16. We do not address interpretations of sections 16 and 30 because, operationally, it would be very challenging for I.E.B. to do statutorily required rehabilitation investigations during the licensing and registering of thousands of people.

Other Jurisdictions

Because we wanted to see what other jurisdictions' regulatory schemes were, we asked outside consultants to survey selected states for us. In analyzing other jurisdictions, most act on clear legislative authority either on whom they must license or that the Commission has the discretion on whom must be regulated. For example, New Jersey started out reviewing all casino employees and through various legislative actions over the years no longer reviews the same level of employees. Pennsylvania, Maryland and Michigan laws give their boards discretion on whom to license.

[4] It is estimated that I.E.B. will need to conduct investigations for approximately 1000 gaming employees and register 1200 gaming service employees in the 90-120 days before the opening of MGM Springfield. The numbers for the opening of Wynn will be even higher.

**NON-GAMING EMPLOYEES**

Michael & Carroll, LLC

| | New Jersey | Pennsylvania | Maryland | Michigan |
|---|---|---|---|---|
| STATUTORY REQUIREMENT | 1. Non-gaming employees: no provision for licensing or registering persons whose duties do not involve gaming activity. | Non-gaming employees are not mentioned in the statute. Board has the authority to require license or permit for anyone involved in the business of the casino. | 1. By statute, the Commission by regulation may exempt categories of employees who are not directly involved in gaming operations if the Commission determines that the requirement is not necessary in order to protect the public interest or accomplish the policies under the law. | 1. By statute, only those non-gaming employees who work in gaming areas or who meet certain compensation thresholds are licensed, but the Board is given discretion to license anyone it deems necessary. |
| | | | | |
| | New Jersey | Pennsylvania | Maryland | Michigan |
| APPLICABLE REGULATION | 1. No applicable regulation for employees. | Board can require registration of any employee not otherwise licensed but whose duties require them to be on the gaming floor, in a restricted area, or anyone else the Board deems appropriate | 1. Procedures established for non-gaming employee licensing as per statute. | Comprehensive regulations govern the standards for qualification and dis-qualification of applicants as implementing the statutory requirements. The regulations also contain authority for exemptions, also in keeping with the statutes. |
| | New Jersey | Pennsylvania | Maryland | Michigan |

| | | | | |
|---|---|---|---|---|
| NON-GAMING EMPLOYEES | No licensing or registration | Nothing done for employees who do not have access to gaming floor | Commission has exempted certain categories of employees who are not directly involved in gaming operations from the licensure requirement. | The Board implements the statutory requirements by licensing those employees with access to gaming areas and those at certain compensation levels. |
| | New Jersey | Pennsylvania | Maryland | Michigan |
| APPLICABLE HISTORY | 1.The statute began with a pre-approval process for non-gaming employees. It has evolved over the years to its present form. The relevant statutes have been amended 12 times. 2. For over thirty (30) years, non-gaming vendors were required by statute to be identified and then licensed if doing "regular or continuing business." This was interpreted by regulation by implementation of monetary thresholds. That "regular or continuing" business standard has now been removed from the statute. | The licensing standards described here have been in place since the outset as a matter of statute. | The statute on employees has always required licensing of all employees integral to the gaming operation, but within approximately the past year, the statute on rehabilitation was amended. It previously automatically barred persons with disqualifying offenses no matter when they occurred. It now only bars persons with disqualifying offenses within the past seven (7) years. | No statutory revisions have been made effecting the classifications of licensing. The Board occasionally adopts Resolutions in order to implement actions in interpretation within the confines of the statute |

## Possible Next Steps

While some may disagree with the current criminal disqualifications in the law and how it may limit employment opportunities for those who need them the most, one could conclude that the legislature did intend a very strict regulatory scheme and the mandatory criminal disqualifiers were in keeping with that strict scheme.

Springfield and Everett as compared to Plainville are larger communities with a higher percentage of unemployment. While the licensing/registration numbers will be different from Plainville, the I.E.B has only had one applicant who was automatically disqualified as a gaming service employee at Plainridge Park Casino based upon a prior conviction.

If the Commission or other stake holders thought it was important to change the current licensing/registration requirements in the Gaming Act, a legislative change appears to be the best option. In terms of a range of legislative options, an amendment that gives the Commission discretion on which employees to register would be one option. Another option would be to for the legislature to define a class of true "service employees" who have no connection to gaming operations who do not need to register. A third option would be for the legislature to re-evaluate the time-frame for the "look-back" regarding automatic disqualification for certain criminal convictions.

## Current MGC Staff Activity

Currently, our staff is preparing for the licensing/registration requirements of our Category 1 casinos by developing an online licensing process that will help automate some of the background investigation. We are working with our licensees, for example by having monthly preparation meetings, with MGM Springfield's senior management. We have also developed a frequently asked questions form on the licensing/registering process trying to dispel any confusion about what criminal convictions trigger mandatory disqualifications.[5]

[5] Public education may help gaming service employee applicants understand: the difference between a misdemeanor and felony conviction; that certain court dispositions such as a continued without a finding or pre-trial probation are not "convictions"; and the process for sealing of court records.

# TREATMENT OF OUTSIDE DIRECTORS IN OTHER JURISDICTIONS (CASINO COMPANIES)

| STATE | GOVERNING STATUTE/REGULATION | TREATMENT OF OUTSIDE DIRECTORS OF CASINO APPLICANTS/LICENSEES |
|---|---|---|
| New Jersey | Statute – N.J.S.A. 5:12-85 | All Directors are required to be qualified but are subject to waiver by the Director of the Division of Gaming Enforcement on an individual basis depending on their degree of influence and control |
| Pennsylvania | 58 Pa. Code Sec. 433.2(d) | All Directors in a privately held company must qualify. For publicly traded companies, only those outside Directors who serve on the Audit Committee or are the Chairman of the Board. However, the Gaming Board, in its discretion, may determine that any Director must qualify |
| Illinois | Statute at 230 ILCS 10/6(c) and Regulations at 86 Section 3000.222(c) | No distinction is made between inside and outside Directors. All persons whom the Board determines exercise control and influence must qualify. |
| Indiana | Statute at IC 4-33-6-4(a)(1)(B) and Regulations at 68 IAC 1-1-57 and 68 IAC 2-1-4 | Commission must approve all substantial owners, key persons or any other person that the Commission deems necessary. Key persons are defined to include Directors. We have been advised by the Commission that it does not distinguish between inside and outside Directors except that outside Directors are not usually required to have a face to face interview. |
| Missouri | Statute at 313.020.1 and Regulations at 11 C.S.R. 45-4020(3) | All Directors are treated exactly the same whether inside or outside. |
| Michigan | Statute at Michigan Gaming Control and Revenue Act Section 432.205(b) and Regulations at R. 432.1104(c) and R. 432.1304 | All inside Directors are required to be qualified. Outside Directors are reviewed on a case by case basis depending on their role. Can file a limited disclosure. |

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April 25, 2017

Chairman Stephen Crosby
Massachusetts Gaming Commission
101 Federal Street
Boston, MA 02110

**RE: Background Investigation Requirements/Outside Directors**
**Via email:** mgccomments@state.ma.us

Dear Chairman Crosby:

On behalf of the American Gaming Association (AGA), we thank you for the opportunity to offer comments on the Massachusetts Gaming Commission's (MGC) request regarding background investigation requirements for outside directors of casino licensees.

Recruiting outside directors is a constant challenge for licensed gaming companies. Outside directors with strong backgrounds in fields like finance, marketing, and technology can make powerful contributions to a licensee's management and growth.

Yet many potential outside directors have never been licensed in the casino industry. An intrusive personal background check and suitability investigation for a part-time responsibility frequently deters talented business leaders. When such individuals confront the mandatory licensing process in all its scope and complexity, they often decline directorships with gaming companies.

This requirement shrinks the pool of talented individuals available to serve this important function, placing gaming companies at a competitive disadvantage with other forms of leisure and entertainment.

Compounding the problem is that outside directors who have already gone through the rigorous background investigation and licensing process in one state may be forced to undergo the same process all over again in another jurisdiction.

Instituting a reciprocity policy would spare individuals as well as regulatory agencies from a duplicative background investigation that is both time-consuming and drains agency resources. A reciprocity policy could be implemented through an abridged license application form.

Therefore, we respectfully suggest that the MGC consider adoption of the following principles:

- **Recognition of Reciprocity**: If an outside director is licensed in another U.S. regulated gaming jurisdiction, MGC would permit that individual to 'waive in' to Massachusetts, without further background investigation.

- **Basic Background Registration**: In the absence of an existing license in another state gaming jurisdiction, the outside director would disclose basic employment and identification information through a straightforward registration process.[1]

In addition, consistent with the approach in other jurisdictions including New Jersey, Pennsylvania and Michigan, the MGC would have discretion to require licensure depending on an individual's role.

We believe that this approach is aligned with the policy objectives of the MGC while also fostering a more modernized and efficient approach to licensing procedures. In addition, this shift from mandatory licensing of outside directors would substantially widen the field of individuals who may serve in director capacity with gaming licensees, potentially spurring important benefits industry-wide.

We thank you for your consideration of our comments and welcome the opportunity to further discuss this important issue with you and your staff.

Sincerely,

Geoff Freeman
President and CEO

[1]American Gaming Association, *Improving Gaming Regulation: 10 Recommendations for Streamlining Processes While Maintaining Integrity*, (page 6), https://www.americangaming.org/sites/default/files/research_files/reg_reform_white_paper_final.pdf

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April 25, 2017

Stephen Crosby, Chair
Massachusetts Gaming Commission
101 Federal Street, 12th Floor
Boston, MA 02110
Via email: mgccomments@state.ma.us

**Re: Background Investigation Requirements/Outside Directors**

Dear Chair Crosby:

Please accept these comments on behalf of MGM Resorts International ("MGM"), the publicly traded parent corporation of Category 1 casino licensee Blue Tarp reDevelopment, LLC, in response to the request of the Commission made at its April 13, 2017, meeting regarding the subject referred to above.

By way of background, the common stock of MGM is listed on the New York Stock Exchange ("NYSE"). It has a Board of Directors consisting of twelve members, nine of whom are independent under the rules of the NYSE. The Board of Directors of MGM has four standing committees: Compensation, Audit and Nominating/Corporate Governance Committees, and Corporate Social Responsibility. All members of the Compensation, Audit and Nominating/Corporate Governance Committees must be independent under the rules of the NYSE, the United States Securities and Exchange Commission and MGM's corporate governance rules. In addition, MGM seeks Board members who provide a mix of leadership, finance, industry, government and public company directorship experience.

While MGM has been successful in attracting highly qualified candidates to its Board, the process is difficult and is exacerbated by the gaming regulatory licensing requirements of some of the eight jurisdictions in which MGM is licensed. The licensing disclosure requirements and the extensiveness of the investigation process discourage suitable experienced candidates from participating, not because they have anything to hide, but simply because the benefits are outweighed by the burden and intrusiveness of the licensing process. Over the course of its

Fox Rothschild LLP
ATTORNEYS AT LAW

history, many potential Board candidates have declined to be considered for a Board seat because of the licensing process.

Any reduction in the licensing requirements of any jurisdiction in which MGM operates would be welcome and helpful in MGM's continuing endeavors to attract qualified Board members. While MGM has to comply with the licensing requirements in all the jurisdictions in which it operates, the lessening of the burden on Directors in just one jurisdiction would be beneficial and would be a progressive approach to gaming regulation.

Of course, gaming regulators should retain the discretion to require any director to be licensed. The approach taken by the Pennsylvania Gaming Control Board in which only Directors of publicly traded companies holding certain positions have to be licensed is an approach that we encourage the Commission to consider.

Respectfully,

Nicholas Casiello, Jr., Esquire
Fox Rothschild LLP

c: Edward R. Bedrosian Jr., Executive Director
Karen Wells, Director, Investigations and Enforcement Bureau
Seth Stratton, Esquire

RESORTS DEVELOPMENT

Wynn.

April 25, 2017

Massachusetts Gaming Commission
101 Federal Street, 12th Floor
Boston, MA 02110

Dear Commissioners:

In response to the Massachusetts Gaming Commission's (MGC) request for public comment regarding background investigation requirements for outside directors of casino Licensees, Wynn MA, LLC ("Wynn") offers the following comments for your consideration.

As you can appreciate, the recruitment of qualified and experienced directors is paramount to the success of our company and the industry as a whole. With respect to outside directors, in particular, we seek individuals who can bring skills and experience to our company from every industry, not just the gaming industry. As a result, our outside directors are not always familiar with the rigorous background checks and suitability investigations that are a part of our industry. For some, the complexity of the process deters their willingness to serve on our board.

Therefore, we respectively suggest that the MGC consider revoking mandatory licensure of outside directors while retaining the right to require licensure and/or to conduct an investigation on a discretionary basis as warranted by an individual's circumstances. We believe this approach would enable the industry to recruit highly qualified outside directors that would contribute to the industry's continued growth and profile and, as the responsibility for maintaining suitability is firmly placed on the licensee, the integrity of the process would be maintained.

We appreciate your consideration and welcome the opportunity to discuss further.

Sincerely,

Robert J. DeSalvio
President

## MacLachlan, Amy (MGC)

**From:** Yin Kon <yinkon@intergencapmgt.com>
**Sent:** Tuesday, April 25, 2017 1:49 PM
**To:** MGCcomments (MGC)
**Subject:** background investigation requirements/outside directors

**Follow Up Flag:** Follow up
**Flag Status:** Flagged

I think all directors should be qualified based on background checks with no exceptions - it increases individual director accountability, fosters integrity, and levels the playing field for all casinos.

--

Yin Kon, FCA, CFA
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## MacLachlan, Amy (MGC)

**From:** hals @boardassets.com <hals@boardassets.com>
**Sent:** Tuesday, April 25, 2017 4:53 PM
**To:** MGCcomments (MGC)
**Subject:** Background investigations of independent public company directors

**Follow Up Flag:** Follow up
**Flag Status:** Flagged

The question of initiating public-company background checks at the state level for independent directors serving on public-company boards in the gaming industry is an interesting one. On the one hand, I can appreciate why gaming-industry regulators and the general public would hope to impede organized and freelance crime from gaining a foothold in any gaming companies or the industry itself by making sure those directors' backgrounds reflect the highest personal integrity. From that perspective, the most extensive background check possible to investigate prior behavior, financial dealings and associates might be appropriate. However, since any action directed at "public" companies has an impact on our entire economic system, an onerous background-checking system could unnecessarily drain regulatory time and funds better spent elsewhere.

Nominees of potential independent directors for the boards of public companies undergo a number of screenings before they are presented to shareholders for election. The first, and most crucial, gate is the initial process of engaging a search firm. It is a "best" corporate-governance practice among the nominating committees of public companies to retain professional search consultants to conduct an independent search for candidates using board-determined selection criteria. Retaining an outside search firm diminishes the potential for an insular board faction to influence the nomination process. Second is the search firm's own self-interest in avoiding reputational risk by presenting to clients only those director candidates who have passed exacting background checks and been thoroughly vetted. Finally, the standing board members often do their own vetting of the recommended candidates by conferring with their personal networks. There is also the vetting of all board nominees by the federally chartered stock exchanges. So, while I can understand the motivation behind considering extensive state regulatory checks, such action runs the risk of being excessive.

To shine some light on the subject, I think it would be helpful for the Gaming Commission to undertake an analysis of the directors of companies that are or will be doing business in the state. Things to look at might include the current composition of their boards and the presence of best practices, such as age or term limits, diversity, cyber-security backgrounds, corporate-governance education (my brief review of two such gaming companies found one with a director who was a Corporate Governance Fellow, the highest NACD certification, and a board that required annual director education) and the retention of search consultants, as well as evidence of any fraudulent corporate practices.

In the interest of protecting citizens from inappropriate corporate behavior—after all it is the company as a whole, through its board, and not the individual directors that diminish or enhance its value in Massachusetts—

it seems to me that regulators are better served focusing on the performance of directors not merely their backgrounds.

Hal Shear is Managing Director of Board Assets, LLC, an advisory firm based in Massachusetts, through which he provides governance services to directors and boards throughout the U.S., Europe, the Middle East and Latin America. He has served on more than 28 boards and currently is on the advisory board of a technology company to which he provides strategic and operational advice as well as governance expertise. He also serves as an expert witness in corporate governance litigation. As a corporate governance educator, he has trained hundreds of public company directors; advised and counseled entire public-company boards; served as a senior advisor for the foremost director-education organization, the National Association of Corporate Directors (NACD); and served as a board member of NACD Chapters across the US and as CEO of Chapters in New England and Chicago. Through his independent expert-witness work in Corporate Governance he has opined on more than a dozen cases of corporate-governance litigation, both defending and opposing actions of public company officers and directors.

Hal Shear
--

Hal Shear

Trusted advisors on the business of business

Governance - Investment - Expert Witness

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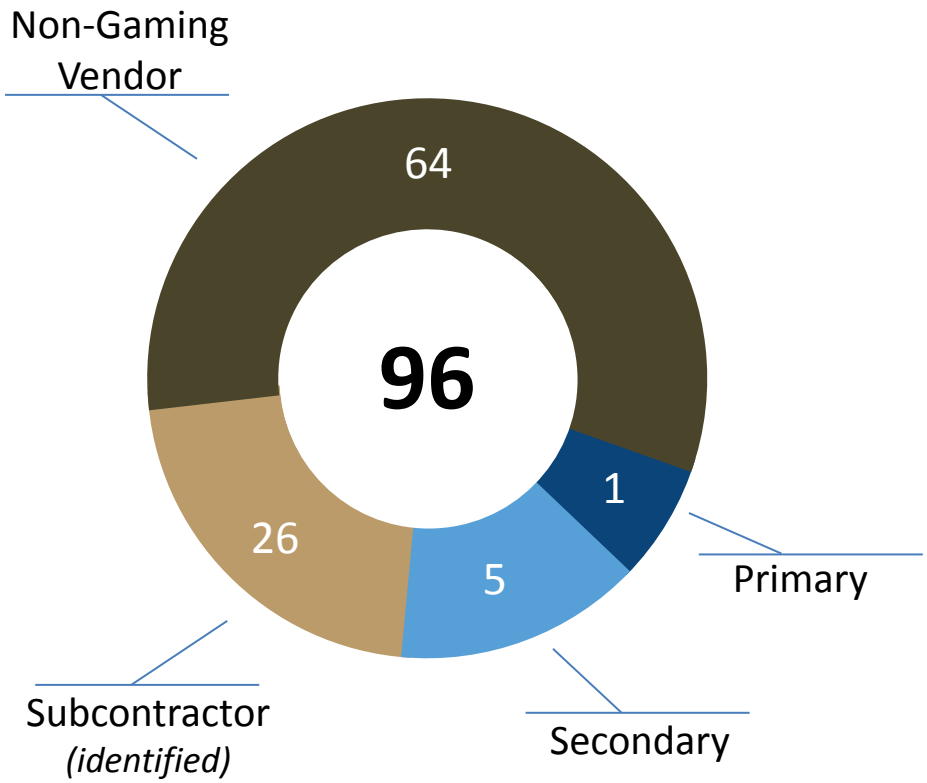
# No Documents

# LICENSING QUARTERLY REPORT

JANUARY – MARCH 2017

# QUARTERLY UPDATE: **VENDORS LICENSED OR REGISTERED (1/1/17 – 3/31/17)**

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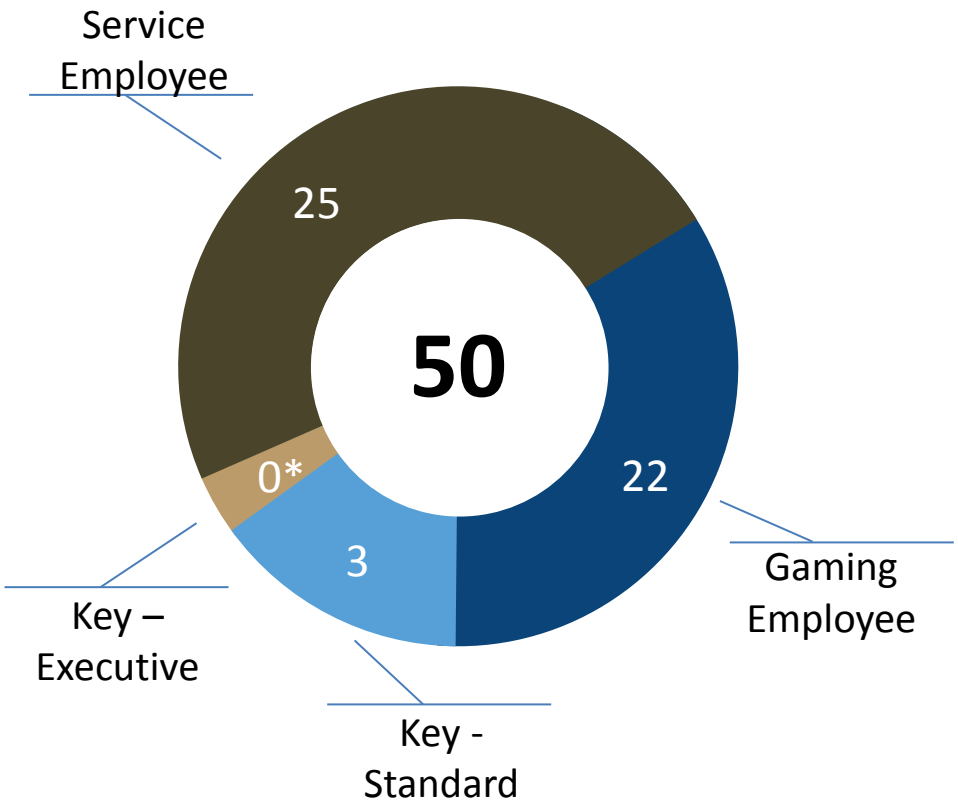
Impact of change to 134: Statement of Business Relationship

# QUARTERLY UPDATE: EMPLOYEES LICENSED OR REGISTERED (1/1/17 – 3/31/17)

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* 2 Temporary Licenses Issued

# GAMING EMPLOYEE LICENSE APPLICATION FORM

## APPLICANT:_____

### PLEASE NOTE

- This application should be completed only after you have received an offer of employment from a Massachusetts casino.
- Make sure you are filling out the correct form (**Gaming Employee License**) associated with your job offer.
- The fee for a Gaming Employee License is $300. This fee may be initially paid by the casino and recovered by way of deduction from the applicant's paycheck.
- If you are unable to understand this form fully in English, it is your responsibility to acquire adequate means of translation.

  *Si usted no puede entender este formulario completamente en Inglés, es su responsabilidad obtener los metodos necesarios de traducción.*

### IMPORTANT INSTRUCTIONS FOR COMPLETING THIS APPLICATION

- Please **read each question** carefully prior to answering.
- **Answer every question completely and honestly**. Do not omit information and be sure not to leave any question blank.
- This is **not an employment application** and the Massachusetts State Police will be conducting your background review to determine your suitability for licensure.
- Throughout this form, if you have nothing to disclose or if a question does not apply to you, please check **"|| N/A ☐ ||"** where available.
- Ensure that **all attachments required for this application are labeled** with the correct title and attachment numbers and are attached to the application filed with the Commission.
- **Initial and date** each page where indicated.
- All entries on this form, except signatures, must be **typed or printed in block lettering** using dark ink. If the application is not legible, it will not be accepted.
  *(Note: the Commission will not accept your application if it is illegible or if you have modified any of the questions or pre-printed information on this application.)*
- Sign and notarize the **Release Authorization** form included with this application.
- **Retain a completed copy** of this application for your own records.

Initials/Date:_____

## FINGERPRINTING & BACKGROUND INVESTIGATION

- Along with a completed application, you will be **required to be fingerprinted** so the Commission may initiate a criminal record check to determine your suitability for a Gaming Employee license.
- You will be **notified by your employer or the Commission of the location, time, and date** so that you may be fingerprinted and your photo taken.
- You will be required to provide **proof of identification** when you are being fingerprinted. Acceptable proof of identity includes:

1. A current and valid United States passport; ***OR*** a Certificate of United States Citizenship, or a Certificate of Naturalization; ***OR*** a current and valid identification card issued by the USCIS containing a photograph or fingerprints and identifying information such as name, date of birth, sex, height, color of eyes and address;

***OR***

2. A certified copy of a birth certificate issued by a state, county or municipal authority in the United States bearing an official seal, **AND any one of the following authentic documents**:

   a. A current and valid driver's license containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   b. A current and valid identification card issued to persons who serve in the United States military or their dependents by the United States Department of Defense containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   c. A current and valid student identification card containing a photograph, an expiration date, the seal or logo of the issuing institution, and the signature of the card holder; or

   d. A current and valid identification card issued by a Federal, state or local government agency containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address.

3. A current and valid foreign passport with an employment authorization issued by the USCIS, **AND any one of the following authentic documents:**

   a. A current and valid driver's license containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   b. A current and valid student identification card containing a photograph, an expiration date, seal or logo of the issuing institution, and the signature of the card holder; or

   c. A current and valid identification card issued to persons who serve in the United States military or their dependents by the United States Department of Defense containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   d. A current and valid identification card issued by a Federal, state or local government agency containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address.

## IMPORTANT INFORMATION

- The Massachusetts Public Records Law (Law), http://www.sec.state.ma.us/pre/preidx.htm found in Chapter 66, Section 10 of the Massachusetts General Laws, applies to records made or received by a Massachusetts governmental entity. Unless the requested records fall under an exemption to the Law, the responsive documents must be made available to the requester. A list of exemptions may be found in Chapter 4, Section 7(26) of the Massachusetts General Laws.

***If you have any questions regarding this application, please contact the Commission's Division of Licensing at 617.979.8400 or EmployeeLicensing.MGC@state.ma.us.***

Initials/Date:_____

## GAMING EMPLOYEE LICENSE APPLICATION

**PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED. FAILURE TO ANSWER ANY QUESTION ON THIS APPLICATION COMPLETELY AND TRUTHFULLY MAY RESULT IN THE DENIAL OF YOUR LICENSE APPLICATION.**

### REASON FOR FILING APPLICATION

1. Employer (CHOOSE ONE):

☐ MGM Springfield ☐ Plainridge Park Casino ☐ Wynn Boston Harbor

_____
JOB / POSITION

### CONTACT AND IDENTIFYING INFORMATION

_____
NAME: LAST (INCLUDE SR., JR., ETC., IF APPLICABLE) FIRST MIDDLE

HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME OR NAMES? YES ☐ NO ☐ IF YES, LIST THE ADDITIONAL NAMES BELOW AND SPECIFY DATES OF USE FOR EACH. (INCLUDE MAIDEN NAME, ALIASES, NICKNAMES, OR ANY OTHER NAME) _____

_____

_____
MAILING ADDRESS: NUMBER AND STREET APT# CITY STATE ZIP CODE

_____
HOME ADDRESS: IF DIFFERENT THAN MAILING ADDRESS APT# CITY STATE ZIP CODE

_____
TELEPHONE NUMBER EMAIL ADDRESS

SOCIAL SECURITY NUMBER _____ - _____ - _____ DATE OF BIRTH: _____
(MM/DD/YYYY)

DRIVER'S LICENSE/STATE ID _____ || N/A ☐ ||
DATE ISSUED LICENSE NUMBER JURISDICTION ISSUED

### CITIZENSHIP

2. Are you a citizen of the United States? Yes ☐ No ☐

PLACE OF BIRTH: _____
CITY/TOWN STATE/PROVINCE COUNTRY

3. If you answered "No" to question 2, please indicate:
   A. Your country of citizenship: _____
   B. Your place of birth: _____
      CITY COUNTRY
   C. Your port of entry to the United States: _____

Initials/Date: _____

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D. Name and address of your sponsor upon your arrival:

_____

_____

4. If you are not a United States citizen, but you are authorized to be employed in the United States, please provide your USCIS "A" number or other USCIS authorization number in the space provided below. Additionally, please attach a copy of your USCIS identification card and/or any other USCIS document that conditions or restricts your employment labeled as **attachment to question 4**.

USCIS "A" number: _____

## DESCRIPTIVE INFORMATION

| HAIR COLOR | EYE COLOR | SEX | RACE |
|---|---|---|---|
| ☐ BLACK ☐ BROWN | ☐ BLACK ☐ BROWN | ☐ MALE | ☐ AMERICAN INDIAN / ALASKAN NATIVE ☐ HISPANIC |
| ☐ BLONDE ☐ RED | ☐ HAZEL ☐ BLUE | ☐ FEMALE | ☐ BLACK / AFRICAN AMERICAN ☐ WHITE |
| ☐ GRAY ☐ WHITE | ☐ GRAY ☐ GREEN | | ☐ ASIAN / PACIFIC ISLANDER |
| ☐ BALD | | | ☐ OTHER _____ |

HEIGHT: _____ FT _____IN | WEIGHT: _____ LBS

## MARITAL STATUS

5. Indicate your current marital status:

☐Single ☐Married ☐Civil Union ☐Legally Separated ☐Divorced ☐Widow/Widower

Provide the name of your current spouse: _____ || N/A ☐ ||

## RESIDENCE DATA

6. Beginning with your current residence and working backward provide the following information with respect to each place where you have lived (including residences while attending college or while in the military) during the past five (5) years.

| DATES (MONTH / YEAR) FROM: | TO: | ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, AND ZIP CODE) | TELEPHONE NUMBER |
|---|---|---|---|
| | **PRESENT** | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 6.**

7. List any other residence that you have had in other states or countries since the age of 18. || N/A ☐ ||

| DATES (MONTH / YEAR) FROM: | TO: | ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, AND ZIP CODE) | TELEPHONE NUMBER |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 7.**

Initials/Date:_____



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## EMPLOYMENT HISTORY

8. In the chart below, provide the information regarding your employment for the past five (5) years. Begin with your present job and work backwards. Give dates of any unemployment between jobs in proper sequence. Include all part-time and full-time employment and any military service. Note by means of an asterisk (*) any gaming-related employment (e.g. casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.).

| N/A | DATES (MONTH / YEAR) | | NAME, MAILING ADDRESS AND PHONE NUMBER(S) OF EMPLOYER(S) | JOB TITLE | NAME OF SUPERVISOR | REASON FOR LEAVING |
|---|---|---|---|---|---|---|
| | FROM: | TO: | | | | |
| ☐ | | | | | | |
| ☐ | | | | | | |
| ☐ | | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 8.**

9. Regarding the jobs listed in question 8:

   (a). Were you ever discharged, suspended or asked to resign? Yes ☐ No ☐

   (b). During the last 10 year period, were you charged with any infraction in relation to any employment which was the subject of any disciplinary action? Yes ☐ No ☐

   If you checked yes to either question, provide a detailed explanation on a separate sheet labeled as **attachment to question 9.**

## LICENSING HISTORY

10. Have you ever had any interest or employment, in a gaming-related permit, registration, certification, or authorization and/or alcoholic beverage license **in Massachusetts or any other jurisdiction**?

    Yes ☐ No ☐

    If you checked "Yes", complete the following chart:

| NAME AND ADDRESS OF LICENSING AGENCY | TYPE OF LICENSE, PERMIT, REGISTRATION, CERTIFICATION, OR OTHER AUTHORIZATION | LICENSE, PERMIT, REGISTRATION, CERTIFICATION, OR OTHER AUTHORIZATION NUMBER | IDENTIFY GAMING, ALCOHOL OF BOTH |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 10.**

11. Have you ever had any gaming-related application, license, permit, registration, certification, or other authorization restricted, suspended, rejected, revoked, or denied by any governmental agency or gaming regulatory authority? Yes ☐ No ☐

    If you checked "Yes", complete the following chart:

| NAME AND ADDRESS OF GOVERNMENTAL AGENCY OR GAMING REGULATORY AUTHORITY | TYPE OF APPLICATION, LICENSE, PERMIT, REGISTRATION, CERTIFICATION, OR OTHER AUTHORIZATION | TYPE OF ACTION (RESTRICTION, SUSPENSION, REJECTION,REVOCATION, OR DENIAL) | DATE AND DURATION OF RESTRICTION, REJECTION, SUSPENSION, REVOCATION, OR DENIAL | CAUSE(S) OF RESTRICTION, SUSPENSION, REJECTION, REVOCATION, OR DENIAL |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 11.**

Initials/Date:_____



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12. Have you ever been fined by, penalized by, or entered into any settlement with any governmental agency or gaming regulatory authority regarding a gaming-related matter? Yes ☐ No ☐

If you checked "Yes", complete the following chart:

| NAME AND ADDRESS OF GOVERNMENTAL AGENCY OR GAMING REGULATORY AUTHORITY | DATE OF FINE, PENALTY, OR SETTLEMENT | TERMS OF THE FINE, PENALTY, OR SETTLEMENT | CAUSE(S) OF FINE, PENALTY, OR SETTLEMENT |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 12.**

## EDUCATIONAL DATA

13. Beginning with secondary school (high school) and/or training school provide the information listed below with respect to each school, college, graduate, or post graduate school you have attended.

| DATES | | NAME AND ADDRESS OF SCHOOL, TRAINING PROGRAM, ETC. | DESCRIPTION OF EDUCATION PROGRAM | LIST ANY DEGREE OR CERTIFICATION ATTAINED |
|---|---|---|---|---|
| FROM (MO\YR) | TO (MO\YR) | | | |
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 13.**

## MILITARY HISTORY

14. Have you ever served in the US Military or reserves of the United States? Yes ☐ No ☐

*If you checked no, please continue to Question 17*

If you checked "Yes", provide the following information:

Branch of Service: _____ Service Serial #: _____ Highest Rank Held: _____

Period(s) of Active Service:

From _____ To _____

From _____ To _____

15. Date and type of discharge or separation (Honorable, Dishonorable, Honorable Conditions, Medical, etc.) from Military Service(s):

Date of each discharge/separation: _____

Type of discharge(s): _____

Attach a copy of your the military long-form DD214. If unavailable, attach a copy of a letter to the appropriate branch of the military requesting a copy of your military long-form DD214. If in the reserves, please attach a copy of your discharge papers. Label any of the following as **attachment to question 15.**

16. Have you ever been tried by military court martial or have you had charges filed against you under Article 15 of the Uniform Code of Military Justice (summary court, deck court, captain's mast, company punishment, etc.)? Yes ☐ No ☐

If you checked "Yes", submit a detailed description of the (1) nature of the charge or arrest; (2) date and location of the charge or arrest; (3) name of the military organization filing the charges; (4) disposition (convicted, dismissed, pleading, etc.); and (5) sentence (if applicable), labeled as **attachment to question 16.**

Initials/Date: _____

17. Do you have any ownership interest, financial interest, or financial investment **(other than through passive investing*)** in any business entity applying to, or presently licensed by, the Commonwealth? Yes ☐ No ☐

If you checked "Yes", complete the following chart:

| NAME AND ADDRESS OF BUSINESS ENTITY | NATURE AND AMOUNT OF YOUR INTEREST | % OF OWNERSHIP IN THE BUSINESS ENTITY |
|---|---|---|
| | | |
| | | |
| | | |

*Passive investing means any investment by the applicant by means of a mutual fund in which the applicant has no control of the investments or investment decisions.

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 17.**

## FINANCIAL JUDGMENTS

18. A. Are you a party to **any currently pending** lawsuit? (Include matrimonial matters, negligence matters, auto accident matters, contract matters, collection matters, debt matters, foreclosure matters, etc.) Yes ☐ No ☐

B. Have you had any financial liens or judgments filed against you **in the last ten years**? (Include federal tax liens, state tax liens, unpaid motor vehicle charges, unemployment judgments, defaulted student loans, delinquent child support obligations, welfare judgments, bankruptcy or insolvency findings, etc.) Yes ☐ No ☐

If you checked yes to either question, complete the following chart:

| DATE FILED | JURISDICTION | DOCKET NUMBER | OTHER PARTIES TO THE LAWSUIT | NATURE OF THE LAWSUIT | DISPOSITION (IF APPLICABLE) | DATE OF DISPOSITION (IF APPLICABLE) |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 18.**

19. Have you filed a petition for any type of bankruptcy or insolvency or been adjudicated bankrupt or insolvent under any bankruptcy or insolvency law **in the last ten years**? Yes ☐ No ☐

If you checked "Yes", attach to this application, **labeled as attachment to question 19,** a copy of the bankruptcy petition and discharge (if available).

20. Have your wages, earnings, or other income been subject to garnishment, attachment, charging order, voluntary wage execution, or the like **in the last ten years**? Yes ☐ No ☐

If you checked "Yes", complete the following chart:

| DATE FILED | DOCKET NUMBER | NAME AND ADDRESS OF THE COURT | NATURE OF OBLIGATION | AMOUNT OF OBLIGATION | NAME AND ADDRESS OF OBLIGATION HOLDER |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
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**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 20.**

Initials/Date:_____

## ANTITRUST, TRADE REGULATION AND SECURITY AGREEMENTS - STATUTORY AND REGULATORY VIOLATIONS

21. A. Have you ever had a judgment, order, consent decree or consent order pertaining to a violation, alleged violation of the federal antitrust trade regulation or securities laws, or similar laws of any state, province, or country entered against you?
Yes ☐ No ☐

B. In the past 10 years, have you had a judgment, order, consent decree or consent order pertaining to a violation, or alleged violation of any state or federal statute, regulation, or code that resulted in a penalty or fine of $50,000 or more entered against you? Yes ☐ No ☐

If you checked "YES" to either question, provide the following information for each judgment, order, consent decree, or consent order:

| DATE OF OFFENSE | NATURE OF OFFENSE | TITLE OF CASE AND DOCKET NUMBER | NAME AND ADDRESS OF COURT OR AGENCY | NATURE OF JUDGMENT, DECREE OR ORDER | DATE ENTERED |
|---|---|---|---|---|---|
| | | | | | |
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**Note:** Should you require additional space, attach a separate sheet in the same format and label it **attachment to question 21.**

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Initials/Date:_____

## CIVIL, CRIMINAL AND INVESTIGATORY PROCEEDINGS

22. The next question asks about any arrests, charges or offenses you may have committed. Prior to answering this question, carefully review the definitions and instructions which follow:

**DEFINITIONS**: For purposes of this question:

A. **Arrest** means being taken into custody by any police or other law enforcement authority.
B. **Charge** includes any indictment, complaint, information or other notice of the alleged commission of any "offense."
C. **Conviction** includes the finding of guilty of any "offense" upon a trial or a plea of guilty. An adjudication of delinquency shall not be considered a conviction. Such a finding may, however, be considered for purposes of determining the suitability of an application.
D. **Crime or Offense** includes all felonies and misdemeanors.
E. **Disposition** the way the case was resolved: guilty, not guilty, continued without a finding, dismissed, pending,

**INSTRUCTIONS**:

A. Please note, this is not an application for employment. Accordingly, you must answer all questions completely and may not omit information. Answer "yes" and provide all information to the best of your ability **EVEN IF**:

1. You did not commit the offense charged;
2. The charges were dismissed or subsequently downgraded to a lesser charge;
3. You completed a diversionary program or the equivalent thereof;
4. You were not convicted;
5. You did not serve any time in prison or jail;
6. The charges or offenses happened a long time ago.

B. Answer "no" **IF**:

1. You have never been arrested or charged with any crime or offense.
2. Records of criminal appearances, criminal dispositions, and/or any information concerning acts of delinquency that have been sealed.

Have you ever been arrested, charged and/or convicted of **any crime or offense in any jurisdiction (including Massachusetts)?**

Yes ☐ No ☐

If you checked "Yes", complete the following chart:

| NATURE OF CHARGE OR OFFENSE | DATE OF CHARGE OR OFFENSE | NAME AND ADDRESS OF LAW ENFORCEMENT OR COURT INVOLVED | DISPOSITION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format to this page.

**NOTE**

A. The Bureau or Commission shall revoke a registration as a gaming service employee registrant if the individual has been convicted of a felony or other crime involving embezzlement, theft, fraud or perjury; submitted an application for a license under M.G.L. c.23K, §30 and 205 CMR 134.00 that contains false or misleading information; committed prior acts which have not be prosecuted or in which the applicant was not convicted but form a pattern of misconduct that makes the applicant unsuitable.

B. In determining whether an applicant for registration is suitable for purposes of being issued a gaming service employee registration, the Bureau may evaluate and consider the overall reputation of the applicant including, without limitation: the integrity, honesty, good character and reputation of the applicant.

C. The holder of a gaming service employee registration may appeal a decision made by the Bureau based upon a disqualifying prior conviction in accordance with 134.11(2) on the basis that they wish to demonstrate rehabilitation only if the conviction occurred before the 10 year period immediately preceding application for registration.

Initials/Date:_____

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## STATEMENT OF TRUTH and CONSENT

### Statement of Truth

I, _____, hereby state under the pains and penalties of perjury that:
(Print Name)

1. The information contained herein and accompanies this application is true and accurate to the best of my knowledge and understanding.
2. I personally supplied and/or reviewed the information contained in this form.
3. I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this application form.
4. Any document accompanying this application that is not an original document is a true copy of the original document.
5. I am aware that if any of the foregoing statements made by me are false or misleading this application may be denied.

### Consent

I, _____, hereby consent to fingerprinting and photographing as authorized by 205 CMR 134.07.

I understand if I have questions regarding this form, I should ask an employee of Licensing.

_____
(Signature)

_____
(Print Name)

_____
(Date)

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# RELEASE AUTHORIZATION

To: Law Enforcement Agencies, Courts, Probation Departments, Military Organizations, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, All Gaming Regulatory Agencies, and All Governmental Agencies – federal, state and local, without exception, both foreign and domestic (the "issuing entity").

I, _____ authorize the
(Print Name)
Massachusetts Gaming Commission (Commission) and Investigations and Enforcement Bureau (Bureau) to conduct a full investigation into my background and activities.

I acknowledge that the Commission and/or Bureau may contract or may have contracted with third parties for the purpose of conducting due diligence suitability investigations on behalf of the Commission and/or Bureau in connection with my application filed with the Commission.

I authorize the release of any and all information pertaining to me, documentary or otherwise, as requested by any employee or agent of the Commission or Bureau, provided that he or she certifies to you that I have an application pending before the Commission or that I am presently a licensee or person required to be qualified.

I release any issuing entity, the Commission, the Bureau and their agents, representatives and employees, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result because of compliance with this authorization for release of information.

I acknowledge that this authorization shall supersede and replace any prior release authorization executed by me for the Commission and/or Bureau.

**This release shall be valid from the date of signature and, once issued, for the duration of the 3 year license.**

A photocopy of this authorization will be considered as effective and valid as the original.

_____
(Signature of Applicant)

_____
(Print Name)

_____
(Date)

On this _____ day of _____ 20_____, before me, the undersigned notary public, personally appeared _____ (name of document signer), proved to me through satisfactory evidence of identification, which was _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he)(she) signed it voluntarily for its stated purpose.

_____
(Signature of Notary)

(Notary Stamp)

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## Authorization to Obtain Tax Information from the Department of Revenue

**To Whom it May Concern:** *I hereby authorize any investigator of the Massachusetts State Police or the Massachusetts Gaming Commission or their designee(s) to receive information from the Massachusetts Department of Revenue regarding any non-compliance with the tax laws for the years 2011-2015; and to ascertain whether any outstanding liability to the Commonwealth or other taxing authorities exists; and to ascertain whether a child support obligation exists. The attorneys-in-fact are authorized, subject to revocation, to receive this information on behalf of the taxpayer. Said confidential information may be released by the attorney-in-fact to the state office, board or other authority to which I am seeking appointment. The authorization is good for one hundred and eighty days from signing and shall thereupon automatically be terminated. I acknowledge that, if the Department of Revenue determines that I am in non- compliance with the tax and/or child support laws of the Commonwealth, I shall be subject to appropriate enforcement action to facilitate the assessment and/or collection of tax liabilities or child support obligations prior to appointment.*

Have you filed a Massachusetts income tax return for the following tax years?

***You must answer Yes or No for each year listed below:***

2011 _____; 2012 _____; 2013 _____; 2014 _____; 2015 _____;

**Important:** If you answered No for any of the years listed above, complete A, B, or C below and specify for which year(s) the relevant statement applies.

A. I was a legal resident of Massachusetts, but my Massachusetts gross income was less than $8,000.00 for the tax year(s): _____

B. I was a nonresident of Massachusetts and I did not receive sufficient Massachusetts- source income to require filing a Massachusetts income tax return for the above tax year(s). List other states and years of filing: _____
_____

C. Other Reason: _____

Have you filed a joint tax return in any of the years 2011-2015?

**Yes** ☐ **No** ☐

*If **Yes**, please list name, Social Security number, and years filed jointly:*

_____

**I understand that by signing my name, address, and Social Security Number, under penalty of perjury, I am authorizing the Massachusetts Department of Revenue to release the information listed above to the persons listed above.**

Signature: _____ Date: ____/____/_____

Social Security Number: _____-_____-_____

Current Address:

_____

Spouse's Signature (if applicable): _____ Date: ____/____/_____

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## CERTIFICATION OF FILING AND PAYMENT OF FEDERAL AND STATE TAXES (GAMING EMPLOYEES)

*The Massachusetts Gaming Commission requires that the Applicant submit this Certification in accordance with M.G.L. c. 23K, §§ 12, 30 and 205 CMR 112, 134.10.*

As an applicant for a gaming employee license, I do hereby certify that (check all boxes that apply):

1. ☐ I have filed all Federal and State tax returns required during the 5 years preceding my application; AND

2. ☐ I have not been notified of any unpaid U.S. Federal or State tax assessment for which liability remains unsatisfied, unless the assessment is the subject of an installment agreement or offer in compromise that has been approved by the Internal Revenue Service or state Department of Revenue, and I am not in default.

**OR**

3. ☐ I did not file U.S. Federal tax returns. Please explain why, including the non-U.S. jurisdiction where you filed tax returns.

_____ _____

Signature of Applicant Date

_____

Printed Name of Applicant

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# GAMING SERVICE EMPLOYEE REGISTRATION FORM

## APPLICANT:_____

### PLEASE NOTE

- This application should be completed only after you have received an offer of employment from a Massachusetts casino.
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- The fee for a Gaming Service Employee registration is $75. This fee may be initially paid by the casino and recovered by way of deduction from the applicant's paycheck.
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  *Si usted no puede entender este formulario completamente en Inglés, es su responsabilidad obtener los metodos necesarios de traducción.*

### IMPORTANT INSTRUCTIONS FOR COMPLETING THIS APPLICATION

- Please **read each question** carefully prior to answering.
- **Answer every question completely and honestly**. Do not omit information and be sure not to leave any question blank.
- This is **not an employment application** and the Massachusetts State Police will be conducting your background review to determine your suitability for registration.
- Throughout this form, if you have nothing to disclose or if a question does not apply to you, please check "**|| N/A ☐ ||**" where available.
- Ensure that **all attachments required for this application are labeled** with the correct title and attachment numbers and are attached to the application filed with the Commission.
- **Initial and date** each page where indicated.
- All entries on this form, except signatures, must be **typed or printed in block lettering** using dark ink. If the application is not legible, it will not be accepted.
  *(Note: the Commission will not accept your application if it is illegible or if you have modified any of the questions or pre-printed information on this application.)*
- Sign and notarize the **Release Authorization** form included with this application.
- **Retain a completed copy** of this application for your own records.

Initials/Date:_____

## FINGERPRINTING & BACKGROUND INVESTIGATION

- Along with a completed application, you will be **required to be fingerprinted** so the Commission may initiate a criminal record check to determine your suitability for a Gaming Service Employee registration.
- You will be **notified by your employer or the Commission of the location, time, and date** so that you may be fingerprinted and your photo taken.
- You will be required to provide **proof of identification** when you are being fingerprinted. Acceptable proof of identity includes:

1. A current and valid United States passport; ***OR*** a Certificate of United States Citizenship, or a Certificate of Naturalization; ***OR*** a current and valid identification card issued by the USCIS containing a photograph or fingerprints and identifying information such as name, date of birth, sex, height, color of eyes and address;

***OR***

2. A certified copy of a birth certificate issued by a state, county or municipal authority in the United States bearing an official seal, **AND any one of the following authentic documents**:

   a. A current and valid driver's license containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   b. A current and valid identification card issued to persons who serve in the United States military or their dependents by the United States Department of Defense containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   c. A current and valid student identification card containing a photograph, an expiration date, the seal or logo of the issuing institution, and the signature of the card holder; or

   d. A current and valid identification card issued by a Federal, state or local government agency containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address.

3. A current and valid foreign passport with an employment authorization issued by the USCIS, **AND any one of the following authentic documents:**

   a. A current and valid driver's license containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   b. A current and valid student identification card containing a photograph, an expiration date, seal or logo of the issuing institution, and the signature of the card holder; or

   c. A current and valid identification card issued to persons who serve in the United States military or their dependents by the United States Department of Defense containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   d. A current and valid identification card issued by a Federal, state or local government agency containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address.

## IMPORTANT INFORMATION

- The Massachusetts Public Records Law (Law), http://www.sec.state.ma.us/pre/preidx.htm found in Chapter 66, Section 10 of the Massachusetts General Laws, applies to records made or received by a Massachusetts governmental entity. Unless the requested records fall under an exemption to the Law, the responsive documents must be made available to the requester. A list of exemptions may be found in Chapter 4, Section 7(26) of the Massachusetts General Laws.

***If you have any questions regarding this application, please contact the Commission's Division of Licensing at 617.979.8400 or EmployeeLicensing.MGC@state.ma.us.***

Initials/Date:_____

**GAMING SERVICE EMPLOYEE REGISTRATION APPLICATION**

**PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED. FAILURE TO ANSWER ANY QUESTION ON THIS APPLICATION COMPLETELY AND TRUTHFULLY MAY RESULT IN THE DENIAL OF YOUR REGISTRATION APPLICATION**

## REASON FOR FILING APPLICATION

1. Employer (CHOOSE ONE):

☐ MGM Springfield ☐ Plainridge Park Casino ☐ Wynn Boston Harbor

_____
JOB / POSITION

## CONTACT AND IDENTIFYING INFORMATION

_____
NAME: LAST (INCLUDE SR., JR., ETC., IF APPLICABLE) FIRST MIDDLE

HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME OR NAMES? YES ☐ NO ☐ IF YES, LIST THE ADDITIONAL NAMES BELOW AND SPECIFY DATES OF USE FOR EACH. (INCLUDE MAIDEN NAME, ALIASES, NICKNAMES, OR ANY OTHER NAME) _____

_____

_____
MAILING ADDRESS: NUMBER AND STREET APT# CITY STATE ZIP CODE

_____
HOME ADDRESS: IF DIFFERENT THAN MAILING ADDRESS APT# CITY STATE ZIP CODE

_____
TELEPHONE NUMBER EMAIL ADDRESS

SOCIAL SECURITY NUMBER _____ - _____ - _____ DATE OF BIRTH: _____
(MM/DD/YYYY)

DRIVER'S LICENSE/STATE ID _____ || N/A ☐ ||
DATE ISSUED LICENSE NUMBER JURISDICTION ISSUED

## CITIZENSHIP

2. Are you a citizen of the United States? Yes ☐ No ☐

PLACE OF BIRTH: _____
CITY/TOWN STATE/PROVINCE COUNTRY

3. If you answered "No" to question 2, please indicate:
   A. Your country of citizenship: _____
   B. Your place of birth: _____
      CITY COUNTRY
   C. Your port of entry to the United States: _____

Initials/Date: _____



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D. Name and address of your sponsor upon your arrival:

_____

_____

4. If you are not a United States citizen, but you are authorized to be employed in the United States, please provide your USCIS "A" number or other USCIS authorization number in the space provided below. Additionally, please attach a copy of your USCIS identification card and/or any other USCIS document that conditions or restricts your employment labeled as **attachment to question 4**.

USCIS "A" number: _____

## DESCRIPTIVE INFORMATION

| HAIR COLOR | EYE COLOR | SEX | RACE |
|---|---|---|---|
| ☐ BLACK ☐ BROWN | ☐ BLACK ☐ BROWN | ☐ MALE | ☐ AMERICAN INDIAN / ALASKAN NATIVE ☐ HISPANIC |
| ☐ BLONDE ☐ RED | ☐ HAZEL ☐ BLUE | ☐ FEMALE | ☐ BLACK / AFRICAN AMERICAN ☐ WHITE |
| ☐ GRAY ☐ WHITE | ☐ GRAY ☐ GREEN | | ☐ ASIAN / PACIFIC ISLANDER |
| ☐ BALD | | | ☐ OTHER _____ |
| HEIGHT: _____ FT _____IN | | WEIGHT: _____ LBS | |

## RESIDENCE DATA

5. Beginning with your current residence and working backward provide the following information with respect to each place where you have lived (including residences while attending college or while in the military) during the past five (5) years.

| DATES (MONTH / YEAR) | | ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, AND ZIP CODE) | TELEPHONE NUMBER |
|---|---|---|---|
| FROM: | TO: | | |
| | **PRESENT** | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 5.**

6. List any other residence that you have had in other states or countries since the age of 18. || N/A ☐ ||

| DATES (MONTH / YEAR) | | ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, AND ZIP CODE) | TELEPHONE NUMBER |
|---|---|---|---|
| FROM: | TO: | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 6.**

Initials/Date:_____

## EMPLOYMENT HISTORY

7. List the last three (3) jobs you have had beginning with the most recent and working backwards. Note with an asterisk (*) any gaming related employment.

| N/A | DATES (MONTH / YEAR) | | NAME, MAILING ADDRESS AND PHONE NUMBER(S) OF EMPLOYER(S) | JOB TITLE | NAME OF SUPERVISOR | REASON FOR LEAVING |
|---|---|---|---|---|---|---|
| | FROM: | TO: | | | | |
| ☐ | | | | | | |
| ☐ | | | | | | |
| ☐ | | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 7.**

8. Regarding the jobs listed in question 7:

   (a). Were you ever discharged, suspended or asked to resign? Yes ☐ No ☐

   (b). During the last 10 year period, were you charged with any infraction in relation to any employment which was the subject of any disciplinary action? Yes ☐ No ☐

   If you checked "Yes" to either question, provide a detailed explanation on a separate sheet labeled as **attachment to question 8.**

9. Have you ever had any license, permit or certification denied, suspended or revoked by a governmental agency in Massachusetts or anywhere else? (Do not include driver's license) Yes ☐ No ☐

   If you answered "Yes", provide a detailed explanation including the type of license, date of action and reason for action on a separate sheet labeled as **attachment to question 9.**

## LICENSING HISTORY

10. Have you ever applied to the Massachusetts Gaming Commission for any license, permit, approval or registration? Yes ☐ No ☐

    If you checked "Yes", complete the following chart:

| TYPE OF LICENSE, PERMIT, APPROVAL OR REGISTRATION PREVIOUSLY APPLIED FOR | DATE APPLICATION WAS FILED | DISPOSITION (GRANTED, PENDING OR DENIED) | IF ISSUED, GIVE APPROPRIATE LICENSE NUMBERS |
|---|---|---|---|
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 10.**

11. Have you ever held or applied in any jurisdiction for a license, permit, approval, registration or other authorization required to participate in a lawful gambling operation (including casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.)? Yes ☐ No ☐

    If you checked "Yes", complete the following chart:

| TYPE OF GAMING OPERATION | POSITION SOUGHT OR HELD | DATE OF APPLICATION | NAME AND ADDRESS OF LICENSING AGENCY (INCLUDING COUNTRY, STATE, COUNTY AND MUNICIPALITY | DISPOSITION (GRANTED,DENIED OR PENDING) | IF ISSUED,GIVE LICENSE NUMBER(S) |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 11.**

12. Have you ever been suspended, discharged, asked to resign or resigned by mutual agreement from any gaming related job? Yes ☐ No ☐

    If you checked "Yes", provide a detailed explanation on a separate sheet and attach it to this application, labeled as **attachment to question 12.**

Initials/Date:_____



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## MILITARY HISTORY

13. Have you ever served in the US Military or reserves of the United States? Yes ☐ No ☐

*If you checked no, please continue to Question 16*

If you checked "Yes", provide the following information:

Branch of Service: _____ Service Serial #: _____ Highest Rank Held: _____

Period(s) of Active Service:

From _____ To _____

From _____ To _____

14. Date and type of discharge or separation (Honorable, Dishonorable, Honorable Conditions, Medical, etc.) from Military Service(s):

Date of each discharge/separation: _____

Type of discharge(s): _____

Attach a copy of your military long-form (DD214). If unavailable, attach a copy of a letter to the appropriate branch of the military requesting a copy of your military long-form DD214. If in the reserves, please attach a copy of your discharge papers. Label any of the following as **attachment to question 14.**

15. Have you ever been tried by military court martial or have you had charges filed against you under Article 15 of the Uniform Code of Military Justice (summary court, deck court, captain's mast, company punishment, etc.)? Yes ☐ No ☐

If you checked "Yes", give details of the charge(s) and their disposition(s). On a separate sheet of paper, wherein you describe the (1) nature of the charge or arrest; (2) date and location of the charge or arrest; (3) name of the military organization filing the charges; (4) disposition (convicted, dismissed, pleading, etc.); and (5) sentence (if applicable), and attach it to this application, labeled as **attachment to question 15.**

## FINANCIAL JUDGMENTS

16. Have you ever had governmental financial liens or judgments, including state tax liens, unpaid motor vehicle charges, delinquent child support obligations, defaulted students loans, unemployment judgments, unpaid motor vehicle surcharges, welfare judgments, etc., filed against you? Yes ☐ No ☐

If you checked "Yes", complete the following chart:

| DATE FILED | DOCKET/CASE NUMBER | NAME AND ADDRESS OF COURT | NATURE OF OBLIGATION | NAME AND ADDRESS OF RECIPIENT |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 16.**

Initials/Date: _____

## CIVIL, CRIMINAL AND INVESTIGATORY PROCEEDINGS

The next question asks about any arrests, charges or offenses you may have committed. Prior to answering this question, carefully review the definitions and instructions which follow:

**DEFINITIONS**: For purposes of this question:

A. **Arrest** means being taken into custody by any police or other law enforcement authority.
B. **Charge** includes any indictment, complaint, information or other notice of the alleged commission of any "offense."
C. **Conviction** includes the finding of guilty of any "offense" upon a trial or a plea of guilty. An adjudication of delinquency shall not be considered a conviction. Such a finding may, however, be considered for purposes of determining the suitability of an application.
D. **Crime or Offense** includes all felonies and misdemeanors.
E. **Disposition** the way the case was resolved: guilty, not guilty, continued without a finding, dismissed, pending,

**INSTRUCTIONS**:

A. Please note, this is not an application for employment. Accordingly, you must answer all questions completely and may not omit information. Answer "yes" and provide all information to the best of your ability **EVEN IF**:

1. You did not commit the offense charged;
2. The charges were dismissed or subsequently downgraded to a lesser charge;
3. You completed a diversionary program or the equivalent thereof;
4. You were not convicted;
5. You did not serve any time in prison or jail;
6. The charges or offenses happened a long time ago.

B. Answer "no" **IF**:

1. You have never been arrested or charged with any crime or offense.
2. Records of criminal appearances, criminal dispositions, and/or any information concerning acts of delinquency that have been sealed.

17. Have you ever been arrested, charged and/or convicted of **any crime or offense in any jurisdiction (including Massachusetts)?** Yes ☐ No ☐

If you checked "Yes", complete the following chart:

| NATURE OF CHARGE OR OFFENSE | DATE OF CHARGE OR OFFENSE | NAME AND ADDRESS OF LAW ENFORCEMENT OR COURT INVOLVED | DISPOSITION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 17.**

**NOTE**

A. The Bureau or Commission shall revoke a registration as a gaming service employee registrant if the individual has been convicted of a felony or other crime involving embezzlement, theft, fraud or perjury; submitted an application for a license under M.G.L. c.23K, §30 and 205 CMR 134.00 that contains false or misleading information; committed prior acts which have not been prosecuted or in which the applicant was not convicted but form a pattern of misconduct that makes the applicant unsuitable.

B. In determining whether an applicant for registration is suitable for purposes of being issued a gaming service employee registration, the Bureau may evaluate and consider the overall reputation of the applicant including, without limitation: the integrity, honesty, good character and reputation of the applicant.

C. The holder of a gaming service employee registration may appeal a decision made by the Bureau based upon a disqualifying prior conviction in accordance with 134.11(2) on the basis that they wish to demonstrate rehabilitation only if the conviction occurred before the 10 year period immediately preceding application for registration.

Initials/Date:_____

## STATEMENT OF TRUTH and CONSENT

### Statement of Truth

I, _____, hereby state under the pains and penalties of perjury that:
(Print Name)

1. The information contained herein and accompanies this application is true and accurate to the best of my knowledge and understanding.
2. I personally supplied and/or reviewed the information contained in this form.
3. I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this application form.
4. Any document accompanying this application that is not an original document is a true copy of the original document.
5. I am aware that if any of the foregoing statements made by me are false or misleading this application may be denied.

### Consent

I, _____, hereby consent to fingerprinting and photographing as authorized by 205 CMR 134.07.

I understand if I have questions regarding this form, I should ask an employee of the Commission's Department of Licensing.

_____
(Signature)

_____
(Print Name)

_____
(Date)

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# RELEASE AUTHORIZATION

To: Law Enforcement Agencies, Courts, Probation Departments, Military Organizations, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, All Gaming Regulatory Agencies, and All Governmental Agencies – federal, state and local, without exception, both foreign and domestic (the "issuing entity").

I, _____, authorize the
(Print Name)
Massachusetts Gaming Commission (Commission) and Investigations and Enforcement Bureau (Bureau) to conduct a full investigation into my background and activities.

I acknowledge that the Commission and/or Bureau may contract or may have contracted with third parties for the purpose of conducting due diligence suitability investigations on behalf of the Commission and/or Bureau in connection with my application filed with the Commission.

I authorize the release of any and all information pertaining to me, documentary or otherwise, as requested by any employee or agent of the Commission or Bureau, provided that he or she certifies to you that I have an application pending before the Commission or that I am presently a licensee or person required to be qualified.

I release any issuing entity, the Commission, the Bureau and their agents, representatives and employees, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result because of compliance with this authorization for release of information.

I acknowledge that this authorization shall supersede and replace any prior release authorization executed by me for the Commission and/or Bureau.

**This release shall be valid from the date of signature and, once issued, for the duration of the 5 year license.**

A photocopy of this authorization will be considered as effective and valid as the original.

_____
(Signature of Applicant)

_____
(Print Name)

_____
(Date)

On this _____ day of _____ 20_____, before me, the undersigned notary public, personally appeared _____ (name of document signer), proved to me through satisfactory evidence of identification, which was _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

_____
(Signature of Notary) (Notary Stamp)

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# KEY GAMING EMPLOYEE – STANDARD LICENSE APPLICATION FORM

## APPLICANT:_____

### PLEASE NOTE

- This application should be completed only after you have received an offer of employment from a Massachusetts casino.
- Make sure you are filling out the correct form (**Key Gaming Employee - Standard License**) associated with your job offer.
- The fee for a Key Gaming Employee License is $1000, which shall be credited to the total fee. In the event that investigative costs incurred by the Commission exceed the upfront application fee, the Commission may, upon written notice, charge an additional fee to cover the actual costs of investigation at hourly rates established by the Commission. This fee may be initially paid by the casino and recovered by way of deduction from the applicant's paycheck.
- If you are unable to understand this form fully in English, it is your responsibility to acquire adequate means of translation.

  *Si usted no puede entender este formulario completamente en Inglés, es su responsabilidad obtener los metodos necesarios de traducción.*

### IMPORTANT INSTRUCTIONS FOR COMPLETING THIS APPLICATION

- Please **read each question** carefully prior to answering.
- **Answer every question completely and honestly**. Do not omit information and be sure not to leave any question blank.
- This is **not an employment application** and the Massachusetts State Police will be conducting your background review to determine your suitability for licensure.
- Throughout this form, if you have nothing to disclose or if a question does not apply to you, please check **"|| N/A ☐ ||"** where available.
- Ensure that **all attachments required for this application are labeled** with the correct title and attachment numbers and are attached to the application filed with the Commission.
- **Initial and date** each page where indicated.
- All entries on this form, except signatures, must be **typed or printed in block lettering** using dark ink. If the application is not legible, it will not be accepted.
  *(Note: the Commission will not accept your application if it is illegible or if you have modified any of the questions or pre-printed information on this application.)*
- Sign and notarize the **Release Authorization** form included with this application.
- **Retain a completed copy** of this application for your own records.

Initials/Date:_____

## FINGERPRINTING & BACKGROUND INVESTIGATION

- Along with a completed application, you will be **required to be fingerprinted** so the Commission may initiate a criminal record check to determine your suitability for a Gaming Employee license.
- You will be **notified by your employer or the Commission of the location, time, and date** so that you may be fingerprinted and your photo taken.
- You will be required to provide **proof of identification** when you are being fingerprinted. Acceptable proof of identity includes:

1. A current and valid United States passport; ***OR*** a Certificate of United States Citizenship, or a Certificate of Naturalization; ***OR*** a current and valid identification card issued by the USCIS containing a photograph or fingerprints and identifying information such as name, date of birth, sex, height, color of eyes and address;

***OR***

2. A certified copy of a birth certificate issued by a state, county or municipal authority in the United States bearing an official seal, **AND any one of the following authentic documents**:

   a. A current and valid driver's license containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   b. A current and valid identification card issued to persons who serve in the United States military or their dependents by the United States Department of Defense containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   c. A current and valid student identification card containing a photograph, an expiration date, the seal or logo of the issuing institution, and the signature of the card holder; or

   d. A current and valid identification card issued by a Federal, state or local government agency containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address.

3. A current and valid foreign passport with an employment authorization issued by the USCIS, **AND any one of the following authentic documents:**

   a. A current and valid driver's license containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   b. A current and valid student identification card containing a photograph, an expiration date, seal or logo of the issuing institution, and the signature of the card holder; or

   c. A current and valid identification card issued to persons who serve in the United States military or their dependents by the United States Department of Defense containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address; or

   d. A current and valid identification card issued by a Federal, state or local government agency containing a photograph or identifying information such as name, date of birth, sex, height, color of eyes and address.

## IMPORTANT INFORMATION

- The Massachusetts Public Records Law (Law), http://www.sec.state.ma.us/pre/preidx.htm found in Chapter 66, Section 10 of the Massachusetts General Laws, applies to records made or received by a Massachusetts governmental entity. Unless the requested records fall under an exemption to the Law, the responsive documents must be made available to the requester. A list of exemptions may be found in Chapter 4, Section 7(26) of the Massachusetts General Laws.

***If you have any questions regarding this application, please contact the Commission's Division of Licensing at 617.979.8400 or EmployeeLicensing.MGC@state.ma.us.***

Initials/Date:_____

**KEY GAMING EMPLOYEE – STANDARD LICENSE APPLICATION**

**PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED. FAILURE TO ANSWER ANY QUESTION ON THIS APPLICATION COMPLETELY AND TRUTHFULLY MAY RESULT IN THE DENIAL OF YOUR LICENSE APPLICATION.**

## REASON FOR FILING APPLICATION

1. Employer (CHOOSE ONE):

☐ MGM Springfield ☐ Plainridge Park Casino ☐ Wynn Boston Harbor

_____
JOB / POSITION

## CONTACT AND IDENTIFYING INFORMATION

_____
NAME: LAST (INCLUDE SR., JR., ETC., IF APPLICABLE) FIRST MIDDLE

HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME OR NAMES? YES ☐ NO ☐ IF YES, LIST THE ADDITIONAL NAMES BELOW AND SPECIFY DATES OF USE FOR EACH. (INCLUDE MAIDEN NAME, ALIASES, NICKNAMES, OR ANY OTHER NAME) _____

_____

_____
MAILING ADDRESS: NUMBER AND STREET APT# CITY STATE ZIP CODE

_____
HOME ADDRESS: IF DIFFERENT THAN MAILING ADDRESS APT# CITY STATE ZIP CODE

_____
TELEPHONE NUMBER EMAIL ADDRESS

SOCIAL SECURITY NUMBER _____ - _____ - _____ DATE OF BIRTH: _____
(MM/DD/YYYY)

DRIVER'S LICENSE/STATE ID _____ || N/A ☐ ||
DATE ISSUED LICENSE NUMBER JURISDICTION ISSUED

## CITIZENSHIP

2. Are you a citizen of the United States? Yes ☐ No ☐

PLACE OF BIRTH: _____
CITY/TOWN STATE/PROVINCE COUNTRY

3. If you answered "No" to question 2, please indicate:
   A. Your country of citizenship: _____
   B. Your place of birth: _____
      CITY COUNTRY
   C. Your port of entry to the United States: _____
   D. Name and address of your sponsor upon your arrival:

_____

_____

Initials/Date: _____

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4. If you are not a United States citizen, but you are a legally authorized permanent resident alien or you are authorized to be employed in the United States, please provide your USCIS "A" number or other USCIS authorization number in the space provided below, and attach to this form a copy of your USCIS identification card and/or any other USCIS document that conditions or restricts your employment labeled as **attachment to question 4**.

USCIS "A" number: _____

## DESCRIPTIVE INFORMATION

| HAIR COLOR | EYE COLOR | SEX | RACE |
|---|---|---|---|
| ☐ BLACK ☐ BROWN | ☐ BLACK ☐ BROWN | ☐ MALE | ☐ AMERICAN INDIAN / ALASKAN NATIVE ☐ HISPANIC |
| ☐ BLONDE ☐ RED | ☐ HAZEL ☐ BLUE | ☐ FEMALE | ☐ BLACK / AFRICAN AMERICAN ☐ WHITE |
| ☐ GRAY ☐ WHITE | ☐ GRAY ☐ GREEN | | ☐ ASIAN / PACIFIC ISLANDER |
| ☐ BALD | | | ☐ OTHER _____ |
| HEIGHT: _____ FT _____IN | | WEIGHT: _____ LBS | |

## MARITAL STATUS

5. Check off your current marital status:

☐Single ☐Married ☐Civil Union ☐Legally Separated ☐Divorced ☐Widow/Widower

Provide the name of your current spouse: _____ || N/A ☐ ||

| WHEN AND WHERE | NAME OF SPOUSE OR CIVIL UNION PARTNER AND FORMER SPOUSE(S) OR CIVIL UNION PARTNER(S) (INCLUDE MAIDEN NAME, IF APPLICABLE) | DATE OF BIRTH | IF ANNULLED, SEPARATED OR DIVORCED, INDICATE DATE AND JURISDICTION WHERE SUCH ACTION WAS TAKEN | PRESENT ADDRESSES OF SPOUSE OR CIVIL UNION PARTNER AND/OR FORMER SPOUSE(S) OR CIVIL UNION PARTNER(S) (NO., STREET, APT.,STATE, COUNTRY, ZIP CODE, IF KNOWN) |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 5.**

## RESIDENCE DATA

6. Beginning with your current residence and working backward provide the following information with respect to each place where you have lived (including residences while attending college or while in the military) during the past 10 years.

| DATES (MONTH / YEAR) | | ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, AND ZIP CODE) | TELEPHONE NUMBER |
|---|---|---|---|
| FROM: | TO: | | |
| | | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 6.**

Initials/Date:_____

7. List any other residence that you have had in other states or countries since the age of 18. || N/A ☐ ||

| DATES (MONTH / YEAR) | | ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, AND ZIP CODE) | TELEPHONE NUMBER |
|---|---|---|---|
| FROM: | TO: | | |
| | | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 7.**

## EMPLOYMENT AND LICENSING DATA

8. In the chart below, provide the information regarding your employment for the past 10 years or from age 18, whichever is less. Begin with your present job and work backwards. Give dates of any unemployment between jobs in proper sequence. Include all part-time and full-time employment and any military service. Note by means of an asterisk (*) any gaming-related employment (such as casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.)

| DATES | | NAME, MAILING ADDRESS AND PHONE NUMBER OF EMPLOYER(S) | TITLE/POSITION HELD AND DESCRIPTION OF DUTIES | NAME OF SUPERVISOR | REASON FOR LEAVING |
|---|---|---|---|---|---|
| FROM: (MO\YR) | TO: (MO\YR) | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 8.**

9. With regard to the previously listed employment:

(a). Were you ever discharged, suspended or asked to resign from employment? Yes ☐ No ☐

(b). During the last 10 year period, were you charged with any infraction in relation to any employment which was the subject of any disciplinary action? Yes ☐ No ☐

If you checked yes to either question, complete the following chart as to each time you were discharged, suspended, asked to resign or disciplined:

| DATE | NAME AND ADDRESS OF EMPLOYER | NAME OF SUPERVISOR | REASON FOR DISCHARGE, SUSPENSION, RESIGNATION OR DISCIPLINARY ACTION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 9.**

10. Have you ever applied in Massachusetts or in any other jurisdiction for a license, permit, registration or other authorization to participate in a lawful gambling operation (including casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.)? Yes ☐ No ☐

Initials/Date:_____

DRAFT

If you checked yes, complete the following chart:

| NAME & ADDRESS OF LICENSING AGENCY (INCLUDING COUNTRY, STATE, COUNTY OR MUNICIPALITY | TYPE OF LICENSE, PERMIT, APPROVAL OR REGISTRATION | DATE OF APPLICATION | DISPOSITION (GRANTED, DENIED OR PENDING) | LICENSE, PERMIT. APPROVAL OR REGISTRATION NUMBER |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, please attach a separate sheet of paper in the same format and label it **attachment to question 10.**

11. Have you ever had any license, permit or certification denied, suspended or revoked by a governmental agency in Massachusetts or anywhere else? (Do not include driver's license) Yes ☐ No ☐

If you checked yes, complete the following chart:

| TYPE OF LICENSE, PERMIT OR CERTIFICATE | NAME & ADDRESS OF GOVERNMENTAL AGENCY | DATE OF DENIAL, SUSPENSION OR REVOCATION | REASON(S) FOR DENIAL SUSPENSION OR REVOCATION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, please attach a separate sheet of paper in the same format and label it **attachment to question 11.**

## EDUCATIONAL DATA

12. Beginning with secondary school (high school), provide the information listed below with respect to each school, college, graduate or post graduate school you have attended.

| DATES | | NAME AND ADDRESS OF SCHOOL, TRAINING PROGRAM, ETC. | DESCRIPTION OF EDUCATION PROGRAM | LIST ANY DEGREE OR CERTIFICATION ATTAINED |
|---|---|---|---|---|
| FROM (MO\YR) | TO (MO\YR) | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 12.**

## MILITARY SERVICE DATA

*13.* Have you ever served in the US Military or reserves of the United States? Yes ☐ No ☐

***If you checked no, please continue to Question 16***

If you checked yes, provide the following information:

Branch of Service: _____ Service Serial #: _____ Highest Rank Held: _____

Initials/Date: _____

Period(s) of Active Service:

From _____ To _____

From _____ To _____

From _____ To _____

14. Date and type of discharge or separation (Honorable, Dishonorable, Honorable Conditions, Medical, etc.) from Military Service(s):

Date of each discharge/separation: _____

Type of discharge(s): _____

Attach a copy of your military record (DD214 Long Form). If unavailable, attach a copy of a letter to the appropriate branch of the military requesting a copy of your DD214 Long Form. If in the reserves, please attach a copy of your discharge papers. Label any of the following as **attachment to question 14.**

15. Have you ever been tried by military court martial or have you had charges filed against you under Article 15 of the Uniform Code of Military Justice (summary court, deck court, captain's mast, company punishment, etc.)? Yes ☐ No ☐

If you checked yes, give details of the charge(s) and their disposition(s). On a separate sheet of paper, wherein you describe the (1) nature of the charge or arrest; (2) date and location of the charge or arrest; (3) name of the military organization filing the charges; (4) disposition (convicted, dismissed, pleading, etc.); and (5) sentence (if applicable), and attach it to this application, labeled as **attachment to question 15.**

## OWNERSHIP OR FINANCIAL INTEREST

16. In the past twenty years or since the age of 18, whichever is less or in which you served as an officer or director has any business entity in which you held a 5% or greater ownership interest (other than ownership of stock in a publicly traded corporation) been adjudicated bankrupt or filed a petition for any type of bankruptcy or insolvency under any bankruptcy or insolvency law? Yes ☐ No ☐

If you checked yes, complete the following chart:

| DATE FILED | DOCKET NUMBER | NAME & ADDRESS OF COURT | NAME & ADDRESS OF FILING PARTY | NAME & ADDRESS OF TRUSTEE |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 16.**

17. List any businesses in which you have held an ownership interest for the past 10 years, or since the age of 18, whichever is less. (Do **not** include publicly traded corporations in which you own stock.)

| DATES | | NAME(S) & ADDRESS(ES) OF BUSINESS(ES) | CURRENT STATUS OF BUSINESS | % INTEREST HELD BY YOU | NAME(S) OF OTHER OWNER(S) | ADDRESS(ES) OF OTHER OWNER(S) |
|---|---|---|---|---|---|---|
| FROM: (MO\YR) | TO: (MO\YR) | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 17.**

Initials/Date: _____

## FINANCIAL DATA

18. State when you filed your last Federal tax returns and the tax period it covered.
Date Filed:_____ Period Covered: _____

Submit copies for the past 5 years of your Federal tax returns, including extensions and label as **attachment to question 18.**

19. Have you or has your spouse or any of your children, while dependent, filed any insurance claims in excess of $100,000 within the past 10 years? Yes ☐ No ☐

If you checked yes, complete the following chart:

| DATE OF CLAIM | NATURE OF CLAIM | NAME AND ADDRESS OF INSURANCE CARRIER | DISPOSITION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, please attach a separate sheet of paper in the same format and label it **attachment to question 19.**

20. During the last 5 years, have you, your spouse or dependent children given or received any gift or gifts, whether tangible or intangible, which either individually or in the aggregate exceeded $10,000 in value in any one year period? Yes ☐ No ☐

If you checked yes, complete the following chart as to each gift:

| NAME OF THE DONOR OR DONEE | DATE GIFT GIVEN/RECEIVED | DESCRIPTION OF GIFT | APPROXIMATE VALUE |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 20.**

21. In the past 5 years or since the age of 18, whichever is less, have you received any referral or finder's fee in excess of $10,000? Yes ☐ No ☐

If you checked yes, complete the following chart:

| NAME AND ADDRESS OF ALL PARTIES INVOLVED | NATURE OF GOODS OR SERVICES PROVIDED | AMOUNT RECEIVED | DATE RECEIVED |
|---|---|---|---|
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 21.**

22. a) Do you have any bank accounts or safe deposit boxes in your name? Yes ☐ No ☐

b) Do you have access to the funds in any other safe deposit boxes? Yes ☐ No ☐

If you checked yes to either question, complete the following chart:

| NAME AND ADDRESS OF BANK | NAME(S) IN WHICH ACCOUNT(S) OR SAFE DEPOSIT BOX(ES) HELD | TYPE OF ACCOUNT (SAVINGS, CHECKING, ETC.) | SAFE DEPOSIT BOX NO. |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 22.**

Initials/Date:_____

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## FINANCIAL JUDGEMENTS

23. In the past 10 years, have you been a party to a lawsuit? (Include matrimonial matters, negligence matters, auto accident matters, contract matters, collection matters, debt matters, etc.). Yes ☐ No ☐

If you checked yes, complete the following chart:

| DATE FILED | NAME & ADDRESS OF COURT | DOCKET NUMBER | OTHER PARTIES TO SUIT | NATURE OF SUIT | DISPOSITION | DATE OF DISPOSITION |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 23.**

24. In the past 10 years or since the age of 18, whichever is less, have you personally been adjudicated bankrupt or filed a petition for any type of bankruptcy or insolvency? Yes ☐ No ☐

If you checked yes, complete the following chart:

| DATE FILED | DOCKET NUMBER | NAME AND ADDRESS OF COURT | NAME & ADDRESS OF TRUSTEE |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 24.**

25. Have your wages, earnings or other income been subject to garnishment, attachment, charging order, voluntary wage execution or the like during the past ten year period? Yes ☐ No ☐

If you checked yes, complete the following chart:

| DATE FILED | DOCKET NUMBER | NAME & ADDRESS OF COURT | NATURE OF OBLIGATION | AMOUNT OF OBLIGATION | NAME & ADDRESS OF HOLDER OF OBLIGATION |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 25.**

## ANTITRUST, TRADE REGULATION AND SECURITY AGREEMENTS - STATUTORY AND REGULATORY VIOLATIONS

26. a) Have you ever had a judgment, order, consent decree or consent order pertaining to a violation or an alleged violation of the federal antitrust, trade regulation, securities laws, or similar laws of any state, province, or country entered against you? Yes ☐ No ☐

b) In the past 10 years, have you had a judgment, order, consent decree, or consent order pertaining to a violation or an alleged violation of any state or federal statute, regulation or code that resulted in a penalty or fine of $50,000 or more entered against you? Yes ☐ No ☐

Initials/Date:_____

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If you checked "YES" to either question, provide the following information for each judgment, order, consent decree, or consent order:

| DATE OF OFFENSE | NATURE OF OFFENSE | TITLE OF CASE AND DOCKET NUMBER | NAME AND ADDRESS OF COURT OR AGENCY | NATURE OF JUDGMENT, DECREE OR ORDER | DATE ENTERED |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
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**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 26 A or B.**

## CIVIL, CRIMINAL AND INVESTIGATORY PROCEEDINGS

The next question asks about any arrests, charges or offenses you may have committed. Prior to answering this question, carefully review the definitions and instructions which follow:

**DEFINITIONS**: For purposes of this question:

A. **Arrest** means being taken into custody by any police or other law enforcement authority.
B. **Charge** includes any indictment, complaint, information or other notice of the alleged commission of any "offense."
C. **Conviction** includes the finding of guilty of any "offense" upon a trial or a plea of guilty. An adjudication of delinquency shall not be considered a conviction. Such a finding may, however, be considered for purposes of determining the suitability of an applicant.
D. **Crime or Offense** includes all felonies and misdemeanors.
E. **Disposition** the way the case was resolved: guilty, not guilty, continued without a finding, dismissed, pending, etc.

**INSTRUCTIONS**: A. Please note, this is not an application for employment. Accordingly, you must answer all questions completely and may not omit information. Answer "**YES**" and provide all information to the best of your ability **EVEN IF**:

1. You did not commit the offense charged;
2. The charges were dismissed or subsequently downgraded to a lesser charge;
3. You completed a diversionary program or the equivalent thereof;
4. You were not convicted;
5. You did not serve any time in prison or jail;
6. The charges or offenses happened a long time ago.

B. Answer "no" **IF**:

1. You have never been arrested or charged with any crime or offense.
2. Records of criminal appearances, criminal dispositions, and/or any information concerning acts of delinquency that have been sealed.

27. Have you ever been arrested, charged and/or convicted of **any crime or offense in any jurisdiction (including Massachusetts)?** Yes ☐ No ☐

If you checked yes, complete the following chart:

| NATURE OF CHARGE OR OFFENSE | DATE OF CHARGE OR OFFENSE | NAME AND ADDRESS OF LAW ENFORCEMENT OR COURT INVOLVED | DISPOSITION |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 27.**

Initials/Date:_____

**NOTE:** A. The Bureau or Commission shall deny or revoke a key gaming employee license if the individual has been convicted of a felony or other crime involving embezzlement, theft, fraud or perjury; submitted an application for a license under M.G.L. c. 23K, §30 and 205 CMR 134.00 that contains false or misleading information; committed prior acts which have not be prosecuted or in which the applicant was not convicted but form a pattern of misconduct that makes the applicant unsuitable.

B. In determining whether an applicant for licensure is suitable for purposes of being issued a key gaming employee license, the Bureau may evaluate and consider the overall reputation of the applicant including, without limitation: the integrity, honesty, good character and reputation of the applicant.

C. The applicant for a key gaming employee license may not appeal a decision made by the Bureau to the Commission in accordance with 205 CMR 134.09 (1)(a) that was based upon a disqualifying prior conviction in accordance with 205 CMR 134.10(3)(a) on the basis that the applicant wishes to demonstrate rehabilitation.

28. Have you ever been called to testify before, been the subject of an investigation conducted by, or requested to take a polygraph exam by any governmental agency, court, committee, grand jury or investigatory body (municipal, state, county, provincial, federal, national, etc.) other than in response to a traffic summons? Yes ☐ No ☐

If you checked yes, complete the following chart:

| NAME AND ADDRESS OF COURT OR OTHER AGENCY | NATURE OF PROCEEDING OR INVESTIGATION | WAS TESTIMONY GIVEN? | DATE WHICH TESTIMONY WAS GIVEN |
|---|---|---|---|
| | | | |
| | | | |
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| | | | |

**Note:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 28.**

DRAFT

Initials/Date:_____

## NET WORTH STATEMENT – ASSETS AND LIABILITIES

**NOTE:** Complete the financial statements on pages 29 through 45 and copy the totals in the appropriate space below. If you require additional space for the schedule questions, please attach a separate sheet of paper using the same format and label it the **appropriate schedule heading and attachment to corresponding numerical question**.

29. Please list all assets, tangible and intangible, in which a direct or indirect interest is held by you, your spouse or your dependent children. For each line item, list both the cost of the asset and the present market values as of the date of this statement unless this cannot reasonably be done, in which case any special valuation date should be noted in the column provided. Detail each line entry on the appropriate schedule.

| **ASSETS** | COST AT DATE ACQUIRED OR PURCHASED (A) | CURRENT MARKET VALUE (B) | SPECIAL VALUATION DATE, IF ANY |
|---|---|---|---|
| 1. CASH IN BANK (SCHEDULE A) | $ | $ | $ |
| 2. LOANS, NOTES AND OTHER RECEIVABLES (SCHEDULE B) | $ | $ | $ |
| 3. SECURITIES (SCHEDULE C) | $ | $ | $ |
| 4. REAL ESTATE INTERESTS (SCHEDULE D) | $ | $ | $ |
| 5. CASH VALUE LIFE INSURANCE (SCHEDULE E) | $ | $ | $ |
| 6. CASH VALUE PENSION/ RETIREMENT FUNDS (SCHEDULE F) | $ | $ | $ |
| 7. VEHICLES (SCHEDULE G) | $ | $ | $ |
| 8. OTHER ASSETS (SCHEDULE H) | $ | $ | $ |
| 9. FURNITURE AND CLOTHING (REASONABLE ESTIMATE) | $ | $ | $ |
| **TOTAL ASSETS** | | $ | $ |

DRAFT

Initials/Date:_____

30. Please list all liabilities of you, your spouse and your dependent children. Enter the amount as of the date of this statement. Detail each line entry on the appropriate schedule.

| **LIABILITY** | ORIGINAL AMOUNT OF LIABILITY (C) | AMOUNT OUTSTANDING (D) |
|---|---|---|
| 10. NOTES PAYABLE (SCHEDULE I) | $ | $ |
| 11. LOANS AND OTHER PAYABLES (SCHEDULE J) | $ | $ |
| 12. TAXES PAYABLE (SCHEDULE K) | $ | $ |
| 13. MORTGAGES OR LIENS ON REAL ESTATE (SCHEDULE L) | $ | $ |
| 14. LOANS AGAINST INSURANCE/PENSIONS (SCHEDULE M) | $ | $ |
| 15. OTHER INDEBTEDNESS (SCHEDULE N) | $ | $ |
| **TOTAL LIABILITIES** | | |
| **NET WORTH**<br>TOTAL ASSETS<br>(FROM COLUMN B) LESS<br>TOTAL LIABILITIES<br>(FROM COLUMN D) | | $ |
| 16. CONTINGENT LIABILITIES (SCHEDULE O) | $ | $ |

Date of Statement _____

Please provide the name, address, email address and phone number of the person completing this statement if it is completed by someone other than you.

Name _____

Address _____

_____

Telephone _____

Email address _____

Initials/Date:_____

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## SCHEDULE "A" – CASH IN BANK

31. List below all bank accounts (checking, savings, time deposits, certificates of deposit, money market funds, etc.) foreign and domestic, maintained by you, your spouse or dependent children. Identify with an asterisk (*) any check writing accounts held with brokerage houses, insurance companies, etc. || N/A ☐ ||

| NAME AND ADDRESS OF INSTITUTION | NAME OF PERSON(S) AND TAX IDENTIFICATION NUMBER(S) APPEARING ON ACCOUNT | ACCOUNT NUMBER | INTEREST RATE % | GENERAL NATURE OF ACCOUNT | DATE OF BALANCE | **BALANCE** |
|---|---|---|---|---|---|---|
| | | | | | | |
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| | | | | | | |
| | | | | | | **$** |

**TOTAL CURRENT BALANCE** (ENTER THIS FIGURE IN ITEM 1, COLUMN B ON PAGE 12.)

## SCHEDULE "B" – LOANS, NOTES AND OTHER RECEIVABLES

32. List below all loans, notes and other receivables held by you, your spouse or dependent children. || N/A ☐ ||

| NAME AND ADDRESS OF DEBTOR | INTEREST RATE % | **ORIGINAL LOAN AMOUNT** | ORIGINAL DATE OF LOAN | TOTAL PAYMENTS | DATE DUE | NATURE OF SECURITY, IF ANY, INDICATE IF UNSECURED | **CURRENT BALANCE** |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | **$** | | | | | **$** |

**TOTAL ORIGINAL LOAN AMOUNT** (ENTER THIS FIGURE IN ITEM 2, COLUMN A ON PAGE 12.)

**TOTAL CURRENT BALANCE** (ENTER THIS FIGURE IN ITEM 2, COLUMN B ON PAGE 12.)

Initials/Date:_____

## SCHEDULE "C" - SECURITIES

33. List below all stocks, bonds, mutual funds, commodity accounts, options, warrants, etc., held or controlled by you, your spouse or dependent children. Whenever interest exists through a mutual fund or holding company, the individual stocks or bonds held by such mutual fund or holding company need not to be listed; whenever such interest exists through a beneficial interest in a trust, the securities held in such trust shall be listed if you, your spouse or dependent children have knowledge of what securities are so held. INDICATE PUBLICLY TRADED SECURITIES BY AN ASTERISK (*). || N/A ☐ ||

| NUMBER OF SECURITIES OR ACCOUNTS HELD | TYPE OF SECURITY | NAME OF ISSUING COMPANY OR GOVERNMENT AGENCY | MARKET VALUE AT TIME OF ACQUISITION | DATE OF AND PRICE AT PURCHASE | % OF OWNERSHIP IF GREATER THAN 5% | REGISTERED OWNER | DATE OF VALUATION | **CURRENT MARKET VALUE** |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | **$** |
| | | | | **TOTAL PURCHASE PRICE** (ENTER THIS FIGURE IN ITEM 3, COLUMN A ON PAGE 12.) | | | | **TOTAL CURRENCY MARKET VALUE** (ENTER THIS FIGURE IN ITEM 3, COLUMN B ON PAGE 12.) |

## SCHEDULE "D" – REAL ESTATE INTERESTS

34. Indicate below the location, size, general nature, acquisition date and other information requested regarding any real property in which any direct, indirect, vested or contingent interest is held by you, your spouse or dependent children, along with the names of all individuals or entities who share a direct, indirect, vested or contingent interest therein. || N/A ☐ ||

| ADDRESS PARCEL LOT NUMBER | LOT SIZE/ SQUARE FOOTAGE OF BUILDING | TYPE OF PROPERTY | DATE ACQUIRED | INDIVIDUALS OR ENTITIES SHARING INTEREST (INCLUDE % OF OWNERSHIP FOR EACH) | **PURCHASE PRICE OF % OWNED** | MONTHLY RENTAL INCOME, IF ANY | **ESTIMATED MARKET VALUE OF % OWNED** |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | **$** | | **$** |
| | | | | | **TOTAL PURCHASE PRICE** (ENTER THIS IN ITEM 4, COLUMN A ON PAGE 12.) | | **TOTAL CURRENT MARKET VALUE** (ENTER THIS FIGURE IN ITEM 4, COLUMN B ON PAGE 12.) |

Initials/Date:_____

## SCHEDULE "E" – CASH VALUE – LIFE INSURANCE

35. Indicate below the information requested with regard to the cash value of all life insurance policies held by you, your spouse or your dependent children. || N/A ☐ ||

| DATE PURCHASED | INSURANCE CARRIER | POLICY NUMBER | BENEFICIARY(IES) | FACE VALUE | ANNUAL PREMIUM PAYMENTS | **CASH SURRENDER VALUE** |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | **$** |
| | | | | | | **TOTAL CASH SURRENDER VALUE** (ENTER THIS FIGURE IN ITEM 5, COLUMN B ON PAGE 12.) |

## SCHEDULE "F" – CASH VALUE – PENSION/RETIREMENT FUNDS

36. Indicate below the information requested with regard to the cash value of all pension funds held by you or your spouse. Include IRA, 401K and KEOGH plans. || N/A ☐ ||

| TYPE OF FUND | TYPE OF SECURITIES HELD | EMPLOYER/ INSTITUTION | ACCOUNT NUMBER, IF ANY | **CUMULATIVE EMPLOYEE CONTRIBUTION** | CUMULATIVE EMPLOYER CONTRIBUTION | **CURRENT CASH VALUE** |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | **$** | | **$** |
| | | | | **TOTAL CUMULATIVE EMPLOYEE CONTRIBUTION** (ENTER THIS FIGURE IN ITEM 6, COLUMN A ON PAGE 12.) | | **TOTAL CURRENT CASH VALUE** (ENTER THIS FIGURE IN ITEM 6, COLUMN B ON PAGE 12.) |

Initials/Date:_____

## SCHEDULE "G" – VEHICLES

37. Indicate below the information requested with regard to all vehicles owned or leased by you, your spouse, or your dependent children. || N/A ☐ ||

| TYPE OF VEHICLE | SPECIFY IF OWNED OR LEASED* | DATE OF PURCHASE/ LEASE | MODEL YEAR | MAKE/ MODEL OF VEHICLE | **COST**** | **IF OWNED, CURRENT MARKET VALUE** |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | **$** | **$** |
| *If leased, specify in this column the length of the lease, total lease costs, down payments, monthly payments and number of payments over the life of the lease.<br>**If leased, enter the sum of the down payment plus monthly payments to date as the total cost | | | | | **TOTAL COST(S) OF VEHICLES** (ENTER THIS FIGURE IN ITEM 7, COLUMN A ON PAGE 12.) | **TOTAL CURRENT MARKET VALUE OF VEHICLES** (ENTER THIS FIGURE IN ITEM 7, COUMN B ON PAGE 12.) |

## SCHEDULE H" – OTHER ASSETS

38. List below the information requested with regard to all other assets held by you, your spouse or your dependent children. Include such things as sole proprietorships, partnership interest, joint ventures, art collections, coin collections, antiques, etc. || N/A ☐ ||

| NATURE OF ASSET | DATE OF ACQUISITION | **COST** | % OF OWNERSHIP INTEREST | DATE OF VALUATION | **CURRENT MARKET VALUE** |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | **$** | | | **$** |
| | | **TOTAL COST(S) OF OTHER ASSETS** (ENTER THIS FIGURE IN ITEM 8, COLUMN A, ON PAGE 12.) | | | **TOTAL CURRENT MARKET VALUE OF OTHER ASSETS** (ENTER THIS FIGURE IN ITEM 8, COLUMN B ON PAGE 12.) |

Initials/Date:_____

## SCHEDULE "I" – NOTES PAYABLE

39. List below the information requested with regard to all notes payable for which you, your spouse or dependent children are obligated. || N/A ☐ ||

| NAME & ADDRESS OF CREDITOR | ACCOUNT NUMBER IF ANY | DATE INCURRED | DUE DATE | INTEREST RATE (%) | AMOUNT OF PERIODIC PAYMENT\ PAY PERIOD | **ORIGINAL AMOUNT OF NOTE** | NATURE OF SECURITY, IF ANY | TOTAL PAYMENTS | **OUTSTANDING AMOUNT OF LIABILITY** |
|---|---|---|---|---|---|---|---|---|---|
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| | | | | | | **$** | | | **$** |
| | | | | | | **TOTAL ORIGINAL AMOUNT OF NOTES PAYABLE** (ENTER THIS FIGURE IN ITEM 10, COLUMN C ON PAGE 13.) | | | **TOTAL AMOUNT OF OUTSTANDING NOTES PAYABLE** (ENTER THIS FIGURE IN ITEM 10, COLUMN D ON PAGE 13.) |

## SCHEDULE "J" – LOANS AND OTHER PAYABLES

40. List below the information requested with regard to all accounts payable (include lines of credit, installment loans, revolving charge accounts and any other accounts) for which you, your spouse or your dependent children are obligated. || N/A ☐ ||

| NAME & ADDRESS OF CREDITOR | ACCOUNT NUMBER, IF ANY | DATE OPENED OR INCURRED | DUE DATE | INTEREST RATE (%) | NATURE OF ACCOUNT | **ORIGINAL AMOUNT OF LIABILITY** | NATURE OF SECURITY, IF ANY | TOTAL PAYMENTS | **CURRENT AMOUNT OUTSTANDING** |
|---|---|---|---|---|---|---|---|---|---|
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| | | | | | | **$** | | | **$** |
| | | | | | | **TOTAL ORIGINAL AMOUNT OF LIABILITY** (ENTER THIS FIGURE IN ITEM 11, COLUMN C ON PAGE 13.) | | | **TOTAL AMOUNT OF OUSTANDING LOANS AND OTHER PAYABLES** (ENTER THIS FIGURE IN ITEM 11, COLUMN D ON PAGE 13.) |

Initials/Date:_____

## SCHEDULE "K" – TAXES PAYABLE

41. List below the information requested with regard to all taxes payable for which you, your spouse, or your dependent children are obligated. Only real estate and income taxes need to be included. || N/A ☐ ||

| TAXING AUTHORITY | NATURE OF TAX | **DATE AND AMOUNT OF ORIGINAL OBLIGATION** | FINES, PENALTIES AND INTEREST IF ANY | **TOTAL AMOUNT DUE** |
|---|---|---|---|---|
| | | | | |
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| | | | | |
| | | | | |
| | | **$** | | **$** |
| | | **TOTAL ORIGINAL TAX OBLIGATION(S)** (ENTER THIS FIGURE IN ITEM 12, COLUMN C ON PAGE 13.) | | **TOTAL AMOUNT OF TAXES PAYABLE** (ENTER THIS FIGURE IN ITEM 12, COLUMN D ON PAGE 13.) |

## SCHEDULE "L" – MORTGAGES OR LIENS PAYABLE ON REAL ESTATE

42. List below the information requested with regard to all mortgages or liens payable on real estate for which you, your spouse or your dependent children are obligated. || N/A ☐ ||

| NAME & ADDRESS OF MORTGAGEE OR LIEN HOLDER | ACCOUNT NUMBER | DATE INCURRED | **ORIGINAL AMOUNT OF LIABILITY** | DESCRIPTION/ ADDRESS OF REAL ESTATE | TERM OF MORTGAGE\ INTEREST RATE (%) | AMOUNT OF PERIODIC PAYMENT\ PAY PERIOD | **CURRENT MORTGAGE BALANCE** |
|---|---|---|---|---|---|---|---|
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| | | | **$** | | | | **$** |
| | | | **TOTAL ORIGINAL MORTGAGES OR LIENS PAYABLE ON REAL ESTATE** (ENTER THIS FIGURE IN ITEM 13, COLUMN C ON PAGE 13.) | | | | **TOTAL MORTGAGES OR LIENS PAYABLE ON REAL ESTATE** (ENTER THIS FIGURE IN ITEM 13, COLUMN D ON PAGE 13.) |

Initials/Date:_____

## SCHEDULE "M" – LOANS AGAINST INSURANCE/PENSION PLANS

43. List below the information requested with regard to all loans against life insurance policies, pension plans, 401K plans, etc., taken by you, your spouse or your dependent children. || N/A ☐ ||

| INSURANCE CARRIER/ PENSION PLAN | PURPOSE OF LOAN | **ORIGINAL AMOUNT OF LOAN** | INTEREST RATE (%) | DATE OF LOAN | PERIODIC PAYMENT AMOUNT/ PAY PERIOD | **CURRENT LOAN BALANCE** |
|---|---|---|---|---|---|---|
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| | | **$** | | | | **$** |
| | | **TOTAL ORIGINAL LIABILITY INSURANCE/PENSION LOANS** (ENTER THIS FIGURE IN ITEM 14, COLUMN C ON PAGE 13.) | | | | **TOTAL AMOUNT OUTSTANDING INSURANCE/PENSION LOANS** (ENTER THIS FIGURE IN ITEM 14, COLUMN D ON PAGE 13.) |

## SCHEDULE "N" – ANY OTHER INDEBTEDNESS

44. List below the information requested with regard to any other indebtedness for which you, your spouse or your dependent children are obligated. || N/A ☐ ||

| NAME & ADDRESS OF CREDITOR | INTEREST RATE (%) | DESCRIPTION OF LIABILITY, TYPE OF OBLIGATION AND NATURE OF SECURITY, IF ANY | DUE DATE | AMOUNT OF PERIODIC PAYMENT/ PAY PERIOD | **ORIGINAL AMOUNT OF LIABILITY** | **OUTSTANDING AMOUNT OF INDEBTEDNESS** |
|---|---|---|---|---|---|---|
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| | | | | | **$** | **$** |
| | | | | | **TOTAL ORIGINAL AMOUNT OTHER INDEBTEDNESS** (ENTER THIS FIGURE IN ITEM 15, COLUMN C ON PAGE 13.) | **TOTAL AMOUNT OUTSTANDING OTHER INDEBTEDNESS** (ENTER THIS FIGURE IN ITEM 15, COLUMN D ON PAGE 13.) |

Initials/Date:_____

## SCHEDULE "O" – CONTINGENT LIABILITIES

45. List below the information requested with regard to all contingent liabilities for which you, your spouse or your dependent children are obligated. || N/A ☐ ||

| NAME & ADDRESS OF CONTINGENT CREDITOR | DATE INCURRED | ACCOUNT NUMBER | PRIMARY DEBTOR | DESCRIPTION OF OBLIGATION INCLUDING NATURE OF SECURITY, IF ANY | **ORIGINAL AMOUNT OF CONTINGENT OBLIGATION** | **CURRENT AMOUNT OF CONTINGENT OBLIGATION** |
|---|---|---|---|---|---|---|
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| | | | | | **$** | **$** |
| | | | | | **TOTAL ORIGINAL CONTINGENT LIABILITIES** (ENTER THIS FIGURE IN ITEM 16, COLUMN C ON PAGE 13.) | **TOTAL AMOUNT OF OUTSTANDING CONTINGENT LIABILITIES** (ENTER THIS FIGURE IN ITEM 16, COLUMN D ON PAGE 13.) |

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Initials/Date:_____

## STATEMENT OF TRUTH and CONSENT

### Statement of Truth

I, _____, hereby state under the pains and penalties of perjury that:
(Print Name)

1. The information contained herein and accompanies this application is true and accurate to the best of my knowledge and understanding.
2. I personally supplied and/or reviewed the information contained in this form.
3. I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this application form.
4. Any document accompanying this application that is not an original document is a true copy of the original document.
5. I am aware that if any of the foregoing statements made by me are false or misleading this application may be denied.

### Consent

I, _____, hereby consent to fingerprinting and photographing as authorized by 205 CMR 134.07.

I understand if I have questions regarding this form, I should ask an employee of Licensing.

_____
(Signature)

_____
(Print Name)

_____
(Date)

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# RELEASE AUTHORIZATION

To Law Enforcement Agencies, Courts, Probation Departments, Military Organizations, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, All Gaming Regulatory Agencies, and All Governmental Agencies – federal, state and local, without exception, both foreign and domestic (the "issuing entity").

I, _____ authorize the
(Print Name)
Massachusetts Gaming Commission (Commission) and Investigations and Enforcement Bureau (Bureau) to conduct a full investigation into my background and activities.

I acknowledge that the Commission and/or Bureau may contract or may have contracted with third parties for the purpose of conducting due diligence suitability investigations on behalf of the Commission and/or Bureau in connection with my application filed with the Commission.

I authorize the release of any and all information pertaining to me, documentary or otherwise, as requested by any employee or agent of the Commission or Bureau, provided that he or she certifies to you that I have an application pending before the Commission or that I am presently a licensee or person required to be qualified.

I release any issuing entity, the Commission, the Bureau and their agents, representatives and employees, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result because of compliance with this authorization for release of information.

I acknowledge that this authorization shall supersede and replace any prior release authorization executed by me for the Commission and/or Bureau.

**This release shall be valid from the date of signature and, once issued, for the term of the license (3 years).**

A photocopy of this authorization will be considered as effective and valid as the original.

_____
(Signature of Applicant)

_____
(Print Name)

_____
(Date)

On this _____ day of _____ 20_____, before me, the undersigned notary public, personally appeared _____ (name of document signer), proved to me through satisfactory evidence of identification, which was _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

_____
(Signature of Notary) (Notary Stamp)

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## Authorization to Obtain Tax Information from the Department of Revenue

**To Whom it May Concern:** *I hereby authorize any investigator of the Massachusetts State Police or the Massachusetts Gaming Commission or their designee(s) to receive information from the Massachusetts Department of Revenue regarding any non-compliance with the tax laws for the years 2011 - 2015; and to ascertain whether any outstanding liability to the Commonwealth or other taxing authorities exists; and to ascertain whether a child support obligation exists. The attorneys-in-fact are authorized, subject to revocation, to receive this information on behalf of the taxpayer. Said confidential information may be released by the attorney-in-fact to the state office, board or other authority to which I am seeking appointment. The authorization is good for one hundred and eighty days from signing and shall thereupon automatically be terminated. I acknowledge that, if the Department of Revenue determines that I am in non-compliance with the tax and/or child support laws of the Commonwealth, I shall be subject to appropriate enforcement action to facilitate the assessment and/or collection of tax liabilities or child support obligations prior to appointment.*

Have you filed a Massachusetts income tax return for the following tax years?
*Answer Yes or No for each year:*

2011____; 2012____; 2013____; 2014____; 2015____;

**Important:** If you answered No for any of the years listed above, complete A, B, or C below and specify for which year(s) the relevant statement applies.

A. I was a legal resident of Massachusetts, but my Massachusetts gross income was less than $8,000.00 for the tax year(s): _____

B. I was a nonresident of Massachusetts and I did not receive sufficient Massachusetts-source income to require filing a Massachusetts income tax return for the above tax year(s). List other states and years of filing: _____

_____

C. Other Reason: _____

Have you filed a joint tax return in any of the years 2011 - 2015? (please indicate)

**Yes** ☐ **No** ☐

*If **Yes**, please list name, Social Security number, and years filed jointly:*

_____

**I understand that by signing my name, address, and Social Security Number, under penalty of perjury, I am authorizing the Massachusetts Department of Revenue to release the information listed above to the persons listed above.**

Signature: _____ Date: ____/____/____

Social Security Number: ____-____-____

Current Address:

_____

Spouse's Signature (if applicable): _____ Date: ____/____/____

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# NON-GAMING VENDOR REGISTRATION FORM

## APPLICANT: _____

### PLEASE NOTE

- This application should be completed only after you have entered into a business relationship with a Massachusetts casino.
- The business relationship must be demonstrated by obtaining the "Statement of Casino's Business Relationship with Non-Gaming Vendor" form from a Massachusetts casino and submitting it along with this application.
- The fee for a Non-Gaming Vendor registration is $100. (***Application fees are nonrefundable.***)
- If you are unable to understand this form fully in English, it is your responsibility to acquire adequate means of translation.

  *Si usted no puede entender este formulario completamente en Inglés, es su responsabilidad obtener los metodos necesarios de traducción.*

### COMPLETING THIS APPLICATION

- Please **read each question** carefully prior to answering.
- **Answer every question** completely and honestly and be sure not to leave any question blank.
- Throughout this form, if you have nothing to disclose or if a question does not apply to you, please check "**|| N/A ☐ ||**" where available.
- Ensure that **all attachments required for this application are labeled** with the correct title and attachment numbers and are attached to the application filed with the Commission.
- **Initial and date** each page where indicated.
- All entries on this form, except signatures, must be **typed or printed in block lettering** using dark ink. If the application is not legible, it will not be accepted.
  *(Note: the Commission will not accept your application if it is illegible or if you have modified any of the questions or pre-printed information on this application.)*
- Sign and notarize the **Release Authorization** form included with this application.
- **Retain a completed copy** of this application for your own records.
- All authorizations, waivers, acknowledgment, and releases must be **signed by the applicant or its designated representative** or signatory.

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## SUBMITTING THIS APPLICATION

Please submit completed applications to:

**Massachusetts Gaming Commission**
**Division of Licensing**
**101 Federal Street, 12th Floor**
**Boston, MA 02110**

**AFTER SUBMISSION:**

Upon receipt of an application for a Non-Gaming Vendor Registration, the Division of Licensing shall conduct an administrative review. The Division of Licensing may return the application to the applicant for corrections or request clarification before deeming it complete.

Once your application has been reviewed and deemed complete by the MGC Division of Licensing, you will receive an approval email along with a certificate of registration from the Division of Licensing containing your Vendor Registration number.

Additionally, the application will be forwarded to the Investigations and Enforcement Bureau (Bureau) for a background investigation of the vendor. During the background investigation, the Bureau in its discretion may require one or more officers or employees to be fingerprinted for the purpose of conducting a criminal background investigation.

***If you have any questions regarding this form, please contact the Commission's Division of Licensing at 617.979.8400 or VendorLicensing.MGC@state.ma.us.***

## IMPORTANT INFORMATION

- The Massachusetts Public Records Law (Law), http://www.sec.state.ma.us/pre/preidx.htm found in Chapter 66, Section 10 of the Massachusetts General Laws, applies to records made or received by a Massachusetts governmental entity. Unless the requested records fall under an exemption to the Law, the responsive documents must be made available to the requester. A list of exemptions may be found in Chapter 4, Section 7(26) of the Massachusetts General Laws.

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**PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED**
**IF ITEMS ARE NOT APPLICABLE, INDICATE "NONE" OR "NOT APPLICABLE"**
**DO NOT LEAVE ANY QUESTIONS UNANSWERED**

## NAME OF BUSINESS

Name of Business (Do Not Abbreviate)

Name as Appears on the Certificate of Incorporation, Charter, By-Laws, Partnership Agreement or Other Official Documents

Type of Goods or Services You Plan to Provide to the Gaming Establishment

## PERSON TO BE CONTACTED IN REFERENCE TO THIS FORM

Name and Title

Contact Telephone Number (include extension if applicable)

E-mail Address

## REQUIRED ATTACHMENTS

Please submit copies of the following documents with your application:

☐ Statement of Business Relationship (To be obtained from the MA casino with which you will be doing business.)

☐ Certificate of Incorporation (or Annual Report filed with Secretary of State)

☐ Certificate of Good Standing (Can be obtained from MA Department of Revenue at the link below:)
https://mtc.dor.state.ma.us/mtc/_/

## DESCRIPTION OF BUSINESS

1. Type of Organization (check one):
   ☐ Sole Proprietorship ☐ Partnership ☐ Limited Partnership ☐ C-Corporation ☐ LLC
   ☐ S-Corporation ☐ Trust ☐ Other, please describe _____
2. Business name as it appears on formation documents: _____
3. Place of Incorporation or Formation: _____
4. Date of Incorporation or Formation: _____
5. Provide below your business's Federal Identification Number (FID#).
   FID# _____ _____ - _____ _____ _____ _____ _____ _____ _____
   ☐ Check here if FID has been applied for
6. If sole proprietor, please provide your Social Security Number (SSN).
   SSN: _____ _____ _____ - _____ _____ - _____ _____ _____ _____

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## BUSINESS ADDRESS

7. PRINCIPAL ADDRESS

Address (Number and Street) City State Zip Code

Mailing Address – if different (P.O. Box, City, State, Zip Code)

Telephone Number Website (URL)

8. ADDRESS FROM WHICH THE APPLICANT IS OR WILL BE CONDUCTING BUSINESS WITH THE CASINO || N/A ☐ ||
*(Complete only if different than the above principal address)*

Address (Number and Street) City State Zip Code

Telephone Number Website (URL)

## CERTIFICATIONS

9. Is the applicant a minority-owned business that has been certified by either the Massachusetts Supplier Diversity Office or the Greater New England Minority Supplier Development Council, or both?

☐ Yes - Provide Letter of Verification or Certification Number _____
NOTE: If providing a Letter of Verification, please label as **attachment to question 9.**

☐ No

10. Is the applicant a woman-owned business that has been certified by either the Massachusetts Supplier Diversity Office, the Women's Business Enterprise or National Council, or both?

☐ Yes - Provide Letter of Verification or Certification Number _____
NOTE: If providing a Letter of Verification, please label as **attachment to question 10.**

☐ No

11. Is the applicant a "veteran-owned small business" or a "service-disabled veteran-owned small business", as defined by the Federal government and whose status can be verified via the "VetBiz.Gov database" or by the Division of Licensing through the submission of "Qualifier's DD214 form?

☐ Yes - Provide Letter of Verification, Qualifier's DD214, or Certification Number _____
NOTE: If providing a Letter of Verification, please label as **attachment to question 11.**

☐ No *(If you answer "No", proceed to Question 13.)*

12. If you have indicated that you are "veteran-owned small business", answer the following questions:

A. Have you ever served in the US Military or reserves of the United States?

Yes ☐ No ☐

If you checked "Yes", provide the following information:

Branch of Service: _____ Service Serial #: _____ Highest Rank Held: _____

Period(s) of Active Service: From _____ To _____

From _____ To _____

B. Date and type of discharge or separation (Honorable, Dishonorable, Honorable Conditions, Medical, etc.) from Military Service(s):

Date of each discharge/separation: _____ Type of discharge(s): _____

Attach a copy of your military record (DD214). If in the reserves, please attach a copy of your discharge papers. Label as **attachment to question 12.**



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## OWNERSHIP AND SALES REPRESENTATIVE OF THE BUSINESS AND SUBCONTRACTORS TO THE BUSINESS

13. Provide the names, addresses and percentage of ownership held by each entity or person directly owning more than five (5%) percent of this business. When listing individuals, also provide social security number and date of birth.

☐ No Entity or Person owns more than five (5%) percent.

| NAME | ADDRESS | SOCIAL SECURITY NUMBER | DATE OF BIRTH | % OF OWNERSHIP |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

**NOTE**: Should you require additional space, attach a separate sheet of paper in the format and label it **attachment to question 13.**

14. Provide the name, residence address, social security number, and the date of birth of any sales representatives or other person who solicit business from a gaming licensee or applicant or is that person's immediate supervisor. Also, provide the name, residence address, social security number, and the date of birth of any person authorized to sign any agreement with the gaming licensee or applicant on behalf of the vendor.

| NAME | MIDDLE INITIAL | LAST NAME | RESIDENCE ADDRESS | SOCIAL SECURITY NUMBER | DATE OF BIRTH |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |

**NOTE**: Should you require additional space, attach a separate sheet of paper in the format and label it **attachment to question 14.**

15. Identify in the table below all known and/or anticipated subcontractors that you will be contracting with to provide goods or services necessary to fulfill your contract with a gaming licensee.

|| N/A ☐ ||

| NAME OF SUBCONTRACTOR | ADDRESS | TYPES OF GOODS AND SERVICES | CONTRACT AMOUNT | SUBCONTRACTOR CONTACT PERSON IN REFERENCE TO THIS INFORMATION | TELEPHONE NUMBER |
|---|---|---|---|---|---|
| | | | | | |
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**NOTE:** Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 15.**

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## CRIMINAL HISTORY

The next question asks about any charges or offenses the entity may have committed. Prior to answering this question, carefully review the definitions and instructions which follow:

**DEFINITIONS**: For purposes of this question:

A. **Arrest** means being taken into custody by any police or other law enforcement authority.
B. **Charge** includes any indictment, complaint, information or other notice of the alleged commission of any "offense."
C. **Conviction** includes the finding of guilty of any "offense" upon a trial or a plea of guilty. An adjudication of delinquency shall not be considered a conviction. Such a finding may, however, be considered for purposes of determining the suitability of an applicant.
D. **Crime or Offense** includes all felonies and misdemeanors.
E. **Disposition** the way the case was resolved: guilty, not guilty, continued without a finding, dismissed, pending,

**INSTRUCTIONS**: You must answer all questions completely and may not omit information. Answer "yes" and provide all information to the best of your ability **EVEN IF**:

1. The entity did not commit the offense charged;
2. The entity were dismissed or subsequently downgraded to a lesser charge;
3. The entity completed a diversionary program or the equivalent thereof;
4. The entity was not convicted;
5. The charges or offenses happened a long time ago.

16. Has the entity or any of its subsidiaries ever been indicted, charged with or convicted of a criminal offense or been a party to or named as an unindicted co-conspirator in any criminal proceeding of **any crime or offense in any jurisdiction (including Massachusetts)?**

Yes ☐ No ☐ if you checked yes, complete the following chart:

| NATURE OF CHARGE OR OFFENSE | DATE OF CHARGE OR OFFENSE (MM/DD/YYYY) | NAME AND ADDRESS OF LAW ENFORCEMENT OR COURT INVOLVED | DISPOSITION |
|---|---|---|---|
| | | | |
| | | | |
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**NOTE**: Should you require additional space, attach a separate sheet of paper in the format and label it **attachment to question 16.**

## ANTITRUST, TRADE REGULATION AND SECURITIES AGREEMENTS; STATUTORY AND REGULATORY VIOLATIONS

17. Has the business ever had a judgment, order, consent decree or consent order pertaining to a violation, or alleged violation of the Federal antitrust, trade regulation or securities laws, or similar laws of any state, province or country entered against it?

☐ Yes ☐ No

18. In the past 10 years, has the business had a judgment, order, consent decree or consent order pertaining to a violation, or alleged violation, of any state or Federal statute, regulation or code that resulted in a penalty or fine of $50,000 or more entered against it?

☐ Yes ☐ No

If the answer to either question is "YES", provide the following information for each judgment, order, consent decree or consent order:

| DATE OF OFFENSE | NATURE OF OFFENSE | TITLE OF CASE AND DOCKET NUMBER | NAME AND ADDRESS OF COURT OR AGENCY | NATURE OF JUDGMENT, DECREE OR ORDER | DATE ENTERED |
|---|---|---|---|---|---|
| | | | | | |
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| | | | | | |

**NOTE**: Should you require additional space, attach a separate sheet of paper in the format and label it **attachment to question 18.**

Initials/Date_____

## STATEMENT OF TRUTH and ACKNOWLEDGMENT

### STATEMENT OF TRUTH

I, _____, hereby state under the pains and penalties of perjury that:
(Print Name)

1. The information contained herein and accompanies this application is true and accurate to the best of my knowledge and understanding.

2. I personally supplied and/or reviewed the information contained in this form.

3. I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this application form.

4. Any document accompanying this application that is not an original document is a true copy of the original document.

5. I am aware that if any of the foregoing statements made by me are false or misleading this application may be denied.

### ACKNOWLEDGMENT

The Massachusetts Gaming Commission may, at some time during the course of the term of the Non-Gaming Vendor's Registration, require one or more officers or employees of the business to submit fingerprints, as authorized by 205 CMR 134.13, for the purpose of conducting a criminal background check.

I, _____, as an officer and/or employee of the Non-Gaming Vendor, hereby acknowledge
(Print Name)
consent to a request for such fingerprinting may be required.

I understand that if I have questions regarding this form, I should ask an employee of the Massachusetts Gaming Commission – Division of Licensing.

_____
(Signature)

_____
(Print Name)

_____
(Date)

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## RELEASE AUTHORIZATION

To Law Enforcement Agencies, Courts, Probation Departments, Military Organizations, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, All Gaming Regulatory Agencies, and All Governmental Agencies – federal, state and local, without exception, both foreign and domestic (the "issuing entity").

On behalf of _____,
(Name of Vendor)

I, _____ authorize the
(Name of President, Officer, Partner, or Sole Proprietor)

Massachusetts Gaming Commission (Commission) and Investigations and Enforcement Bureau (Bureau) to conduct a full investigation into the background and activities of the said entity.

I acknowledge that the Commission and/or Bureau may contract or may have contracted with third parties for the purpose of conducting due diligence suitability investigations on behalf of the Commission and/or Bureau in connection with the application of said entity filed with the Commission.

I authorize the release of any and all information pertaining to the said entity, documentary or otherwise, as requested by any employee or agent of the Commission or Bureau, provided that he or she certifies to you that the said entity has an application pending before the Commission.

I release any issuing entity, the Commission, the Bureau and their agents, representatives and employees, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result because of compliance with this authorization for release of information.

I acknowledge that this authorization shall supersede and replace any prior release authorization executed by me for the Commission and/or Bureau.

**This release shall be valid from the date of signature and, once issued, for the duration of the 5 year license.**

A photocopy of this authorization will be considered as effective and valid as the original.

_____
(Signature of Applicant)

_____
(Type, Stamp or Print Name)

_____
(Date)

On this _____ day of _____ 20_____, before me, the undersigned notary public, personally appeared _____ (name of document signer), proved to me through satisfactory evidence of identification, which was _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

_____
(Signature of Notary) (Notary Stamp)

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205 CMR: MASSACHUSETTS GAMING COMMISSION
205 CMR 134.00: LICENSING AND REGISTRATION OF EMPLOYEES, VENDORS, JUNKET ENTERPRISES AND REPRESENTATIVES, AND LABOR ORGANIZATIONS

134.14: Administrative Closure of Applications for Registration or Licensure

(1) All applicants for a Key Gaming Employee License, a Gaming Employee License, a Gaming Vendor License, a Gaming Service Employee Registration or a Non-gaming Vendor Registration shall promptly respond to any request for information from the Division of Licensing and/or the Bureau. This obligation is in addition to the continuing duty set forth in 205 CMR 134.18(1).

(2) Failure of an applicant for a Key Gaming Employee License, a Gaming Employee License, a Gaming Vendor License, or a Gaming Service Employee Registration, or a Non-gaming Vendor Registration to respond to a request for information from the Division of Licensing and/or the Bureau within ~~14~~ 21 days of the request may result in the administrative closure of the application for registration or licensure and the corresponding administrative revocation of a registration or temporary license, if applicable.

~~(3) Failure of an applicant for a Gaming Vendor License or a Non-gaming Vendor Registration to respond to a request for information from the Division of Licensing and/or the Bureau within 30 days of the request may result in the administrative closure of that license application or registration.~~

~~(4)~~ (3) In the event that an application for registration or licensure is administratively closed for failure to provide requested information or to comply with the obligations set forth in either 205 CMR 134.14 or 205 CMR 134.18(1), the Division of Licensing will notify the applicant of the determination by writing which identifies the specific deficiencies in the application that served as the basis for the closure. ~~Additionally, the following conditions will apply:~~

~~a) Once an application for registration or licensure has been administratively closed it shall not be re-opened for a minimum of 30 days.~~

~~b) Any request to re-open an application for registration or licensure previously subject to administrative closure requires the applicant to provide all outstanding information as previously detailed in the administrative closure notification from the Division of Licensing. The submission of outstanding information is not a guarantee of licensure/registration. The Division of Licensing and/or the Bureau may in its discretion require a revised full application after considering the potential for stale information in the original application.~~

~~(5) An application that has been administratively closed for failure to maintain ongoing employment by a gaming licensee shall not be subject to the 30 day minimum closure period set forth in 205 CMR 134.14(4)(a) if the applicant provides new proof of employment from a gaming licensee in a manner prescribed by the Division of Licensing within 29 days of the notice of administrative closure.~~

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~~(6) Any request to re-open an application for registration or licensure previously subject to administrative closure requires the applicant to provide all outstanding information as previously detailed in the administrative closure notification from the Division of Licensing. The submission of outstanding information is not a guarantee of licensure/registration. The Division of Licensing and/or the Bureau may in its discretion require a revised full application after considering the potential for stale information in the original application.~~

(4) An applicant may submit a new application for a Key Gaming License, Gaming Employee License, Gaming Vendor License, Gaming Service Employee Registration, or Non-Gaming Vendor Registration after an application has been administratively closed in accordance with 205 CMR 134.14(3). In that event, the applicant shall submit a complete application including all outstanding information as previously detailed in the administrative closure notification from the Division of Licensing. The submission of outstanding information is not a guarantee of licensure/registration, but is a prerequisite for the application to be deemed administratively complete.

(5) An applicant whose application has been administratively closed for failure to maintain ongoing employment by a gaming licensee in accordance with 205 CMR 134.08(b) may submit a new application for licensure or registration provided the application is submitted with proof of a new offer of employment from a gaming licensee.

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205 CMR: MASSACHUSETTS GAMING COMMISSION
205 CMR 143.00: GAMING DEVICES AND ELECTRONIC GAMING EQUIPMENT

143.01: Standards for Gaming Devices

(1) A gaming licensee and gaming device vendor shall comply with and the commission adopts and incorporates by reference *Gaming Laboratories International, LLC Standard GLI-11: Gaming Devices ~~in Casinos~~*, version ~~2.1~~ 3.0, released ~~August 25, 2011~~ September 21, 2016, subject to the following amendments:

(a) Delete section 1.1.1 and replace with the following: "The following sets forth the technical standards for electronic gaming devices as identified in 205 CMR 144.01(2).

(b) Delete section 1.1.2.

(c) Delete section 1.2.

(d) ~~Delete section 1.4.~~ Delete section 1.3.3 and replace with: "This GLI technical standard is adopted in whole subject to the modifications described in 205 CMR 143.01. The standard and modifications should at all times be read in conjunction with 205 CMR and the standards referenced in section 1.4.1 so as to create a harmonious regulatory framework."

(e) Add the following after section 2.3.2: "2.3.3 Game integrity. The gaming licensee shall develop and submit to the IEB and the commission's gaming lab for approval a preventive maintenance program for the care and upkeep of any such mechanical pieces or any physical moving parts and/or any physical parts of any slot machine, or player interaction devices, that may affect the outcome of any game to ensure the integrity of the outcomes. The IEB may require any such part to be replaced."

(f) Delete the last sentence of section 3.6.1 and replace with: "If a cryptographic RNG is used, it shall comply with section 3.6.2."

(g) Delete section 4.6.6.

(h) ~~(e)~~ Replace in section ~~3.4.1~~ 4.8.1 "seventy-five percent (75%)" with "eighty percent (80%)".

(i) ~~(f)~~ Add the following after the first paragraph of section ~~3.4.~~1 4.8.1: "The calculation of minimum payout percentage excludes the cash equivalent value of any merchandise or other thing of value that cannot be converted into cash by the gaming ~~establishment~~ licensee, but may include the acquisition cost to the gaming licensee of the merchandise or other thing of value. The calculation shall include the value of promotional gaming credit (i.e.- "free play")."

(j) Add the following after the first sentence in section 4.8.1(a): "If necessary to ensure the fairness of the game to patrons, the Commission may require a gaming vendor to submit a device for testing to determine whether it meets the requirements of section 4.8.1 when using average or counter-optimal methods of play in addition to, or in lieu of, an optimal method of play."

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(k) ~~(g)~~ Replace in section ~~3.4.~~1 4.8.1(b) "75%" with "80%".

(l) Add the following after section 4.8.1(b): "(c) Games of pure skill and/or games that do not utilize an RNG are not required to achieve a minimum theoretical payout percentage."

(m) ~~(h) Replace in section 3.10.1(f) "seventy-five percent (75%)" with "eighty percent (80%)".~~

(n) Delete section 4.16.1 and replace with the following: "For games of chance, the gaming device shall cease play, display an appropriate message, and require attendant intervention to resolve player payment for the payment of winnings of $1200 or more from a single *game cycle*. For a *game with skill*, the gaming device shall cease play, display an appropriate message, and require attendant intervention to resolve player payment for the payment of winnings of $1200 or more from a single *gaming session*. In determining whether winnings equal or exceed the $1,200 threshold, the amount of winnings shall not be reduced by the amount wagered. It is permissible to provide a mechanism to accrue taxable winnings to a separate meter, however, this meter must not support any direct wagers. See also M.G.L. c.62B, §2, 26 CFR §1.6041-10, and GLI-13, section 2.4.2."

(o) Add the following after the first paragraph of section 4.20.1: "For purposes of independent testing in accordance with 205 CMR 144.00, the gaming device manufacturer shall determine in the first instance, subject to the acceptance of the independent test laboratory, whether a gaming device qualifies as a *game with skill*, a game of pure chance, or a game of pure skill. Such determination shall be subject to review and reclassification by the commission."

(p) Replace in section 4.20.3 "75%" with "80%".

(q) Add the following to section 5.4.1(k): "provided, however, no slot machine intended for use at a gaming establishment in Massachusetts may accept debit cards, credit cards, or government-issued electronic benefits transfer cards for purposes of purchasing any form of gaming value;"

(r) Add the following in Glossary of Key Terms in the definition of *Player Interaction Device* after the term "camera systems": "smartphones, keypads, gamepads, audio sensors, motion sensors, image sensors, image displays, infrared emitters and detectors, accelerometers,".

(s) Delete section 4.4.1(v) and replace with the following: "Signage indicating that a "malfunction voids all pays" or some equivalent verbiage shall be clearly displayed and permanently affixed to the exterior of the slot machine and not be readily removable. For purposes of 205 CMR, a malfunction shall be an event in which a slot machine:

(1) In some way performs contrary to a rule or other language describing the performance or payout of the game exhibited on the exterior display of the slot machine or contained in the rules section of the slot machine; or

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(2) In some way performs contrary to the manufacturer design or operational specifications; or
(3) In some way performs contrary to the requirements of 205 CMR including the specifications contained in the certification for the slot machine issued in accordance with 205 CMR 144.00."

(2) For purposes of M.G.L. c. 23K and 205 CMR the term slot machine as defined by M.G.L. c. 23K, § 2 shall not include automatic amusement devices as defined by M.G.L. c. 140, § 177A(2). For clarification, as a general matter, the distinction between a slot machine and an automatic amusement device is that unlike an automatic amusement device a slot machine is capable of paying out a cash prize, and/or the value of the merchandise being offered is, over $1000.
(3) For purposes of M.G.L. c. 23K and 205 CMR a slot machine that has multiple gaming positions, as defined by M.G.L. c. 23K, § 2, shall be considered a single slot machine. Provided, however, a Category 2 licensee shall not have more than 1,500 gaming positions available for play at any one time.
(4) All slot machines and other electronic gaming devices shall be capable of providing the commission with a near real-time stream of data, other than personally identifiable information, in the communication format specified by the commission in 205 CMR 143.16(1) directly from each slot machine ~~of~~ or electronic gaming device. Such data shall be provided for purposes of computing and reconciling daily tax obligations as provided in 205 CMR, for purposes of investigating patron disputes filed in accordance with 205 CMR 134.19: *Disciplinary Action,* and for purposes of maintaining general oversight of a gaming establishment. The commission is not obligated to monitor or review the data on an ongoing basis. If communications between the slot machine and the commission's central monitoring system fails, the slot machine shall not continue to operate unless it records all required data from the applicable communication protocol since losing the connection, up to seven days, and send the data directly to the commission as soon as the connection is reestablished. If the connection is not reestablished within 24 hours due to a problem stemming from the gaming establishment's systems, then any slot machine affected shall cease operation until the connection is reestablished.

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138.56: Attendant Paid Jackpots and Credit Meter Payouts

The system of internal controls submitted by a gaming licensee in accordance with 205 CMR 138.02 shall include policies and procedures governing the payment of jackpots and credit meter payouts if and when the payment is not automatically disbursed from a slot machine or electronic gaming device in the form of a gaming voucher. Such procedure shall at a minimum address the provisions of 205 CMR 143.01(1)(n) and, if the gaming licensee elects to do so, incorporate provisions outlining the process to be followed for the aggregate reporting of slot machine winnings as allowed by 26 CFR §1.6041-10(g).

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205 CMR: MASSACHUSETTS GAMING COMMISSION
205 CMR 139.00: CONTINUING DISCLOSURE AND REPORTING OBLIGATIONS OF GAMING LICENSEES

139.04: Reports and Information to Be Filed with the Commission

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(15) Analysis reports which, by each slot machine/electronic gaming device, compare actual payout percentages by month to theoretical payout percentages as established in accordance with 205 CMR 143.01(1). See GLI 13, section 3.4.2(d).

(16) A daily meter-cash comparison report and export file, in a format prescribed by the commission, submitted after appropriate financial meter or accounting adjustments have been made, which contains the following information relative to each slot machine in use in the gaming establishment: the location of the slot machine, the state identification number, the venue identification number, the gross gaming revenue figure, the total cash in the bill validator stacker. See GLI 13, section 3.4.2(f).

(17) A daily gaming day summary report, in a format prescribed by the commission, submitted after appropriate financial meter or accounting adjustments have been made, which contains the following information relative to each slot machine in use in the gaming establishment: the location of the slot machine, the state identification number, the venue identification number, total cash wagered, total cash won, total promotional gaming credits played, the gross gaming revenue figure. See GLI 13, section 3.4.2(f).

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TO: Chairman Crosby, Commissioners Cameron, Macdonald, Stebbins, and Zuniga

FROM: Mark Vander Linden, Director of Research and Responsible Gaming

DATE: April 27, 2017

RE: Update on Research Deliverables

Until the end of the fiscal year (June 30th) there will be a significant effort by our research teams from UMASS Amherst, School of Public Health and Heath Sciences and Harvard Medical School, Cambridge Health Alliance, Division on Addiction to complete several deliverables as part of the FY2017 Gaming Research Agenda. Each of these reports and studies will contribute to our understanding of effective responsible gaming initiatives and more broadly, a comprehensive public health approach to mitigate the negative consequences and maximize the benefits of expanded gaming in Massachusetts.

Below is a summary of the reports and studies to be released as part of the FY2017 MGC Gaming Research Agenda.

**Massachusetts Gambling Impact Cohort (MAGIC)**

*UMASS Amherst, School of Public Health and Heath Sciences*

- MAGIC is a longitudinal study which will yield incidence rates and the course of problem gambling in Massachusetts meant to inform treatment and prevention initiatives.
- Three waves of data have been collected from a cohort of 3,100 adult Massachusetts residents including an over sample of at-risk and problem gamblers drawn from the SEIGMA general baseline population survey.
- **STATUS:** A final report on Wave 2 is expected to be released in June 2017. Data will be presented at the UMASS annual meeting in June 2017.

**Social and Economic Impacts of Gaming in Massachusetts (SEIGMA)**

*UMASS Amherst, School of Public Health and Heath Sciences*

- **Center for Health Information and Analysis (CHIA) Report**
  - Two analyses of CHIA data have been completed
    - The first analysis focuses on socio-demographic profile and co-occurring conditions prevalent among problem gamblers.
    - The second analysis focuses on problem gambling related healthcare services utilization and cost in MA.
  - **STATUS:** One manuscript has been submitted for publication in an academic journal. A second manuscript will be submitted for publication shortly. Data will be presented at the UMASS annual meeting in June 2017.

- **Patron Survey Report**
  - The Patron Survey is an essential component of the economic analysis that will clarify patron origin and expenditure.
  - The survey included questions about GameSense that are incorporated into the GameSense evaluation.
  - **STATUS:** A final report is expected in June 2017. Data will be presented at the UMASS annual meeting in June 2017.

- **Updated General Population Baseline Population Survey Report**
  - The analysis of this report was updated using revised weighting techniques, making findings more representative of the MA population.
  - **STATUS:** A final report is expected in July 2017.

- **Plainridge Park Casino New Employee Survey Report**
  - The New Employee Survey collects data from new employees hired in the first two years of operation at Plainridge Park Casino. Results will reflect the direct economic impacts of casino employees during operating phase.
  - **STATUS:** A final report is expected in May 2017.

- **Shiny Interactive Web Application**
  - Interactive web apps for relevant local and state level social, health, and economic measures designed to make the data more user-friendly.
  - ~~o~~ While data is being populated in the current format, a special team has been created to enhance the design and user experience.
  - **STATUS:** Exploring new methods and approaches for sharing data and information through Shiny and other avenues.

- **Plainridge Park Casino 12-month Operation Report**
  - A 12 month analysis of operator spending, patron spending, and government fiscal impacts.
  - **STATUS:** A final report is expected in June 2017. Data will be presented at the UMASS annual meeting in June 2017.

- **Impact of Gambling on Public Safety in Massachusetts Cities and Towns**
  *Christopher W. Bruce, Crime Analyst*
  - Provides a mid-year update on changes in crime and public safety data in the area surrounding Plainville, MA.
  - **STATUS:** Eighteen month interim report expected by of April 2017 to accompany previous -6 and -12 month reports.

**Evaluation of Key Responsible Gaming Initiatives**

*Harvard Medical School, Cambridge Health Alliance, Division on Addiction*

- **Voluntary Self-Exclusion (VSE)**
  - A longitudinal study of VSE Enrollees will provide information to improve the program and identify predictors of entry to the program.
  - Due to low enrollment, data collection has been extended to continue through November 2017.
  - **STATUS:** Interim report expected by June 2017.

- **GameSense Program**
  - Report on Wave II data that focuses on education and responsible gaming characteristics of patron interactions.
  - Report on PPC employee knowledge, use (personal and patron referral), and opinions about the GameSense program.
  - Report on GameSense questions asked during SEIGMA patron intercept study.
  - **STATUS:** Final Report is expected late summer 2017.

- **Play My Way**
  - Use player card data to report basic epidemiological information of player use. Provide information about the distributions of gambling metrics of player card gamblers who do and do not chose to participate in the program.
  - Conduct an online survey of Marquee Reward members about Play My Way to better understand their perception of the program.
  - **STATUS:** Data collection in progress with a report expected in July 2017.

**Study of Gambling Behavior Among Special Populations in Massachusetts**

In fiscal year 2017, the MGC expanded the research agenda to advance the knowledge regarding the introduction of casinos on at-risk population subgroups not reached by the initial general population baseline survey (BGPS). The five subgroups which were identified as requiring further examination include Massachusetts residents who are African American/Black, military veterans, immigrants, Asians and Hispanics.

The request for proposal (RFP) process yielded three applications. These applications are under review by the Gaming Research Advisory Committee, Research and Analysis Sub-committee. I expect to make a funding recommendation to the Commission at an upcoming public meeting.