



NOTICE OF MEETING AND AGENDA

Pursuant to the Massachusetts Open Meeting Law, G.L. c. 30A, §§ 18-25, and Chapter 107 of the Session Acts of 2022, notice is hereby given of a public meeting of the **Massachusetts Gaming Commission**. The meeting will take place:

Thursday | October 6, 2022 | 10:00 a.m.
VIA REMOTE ACCESS: 1-646-741-5292
MEETING ID/ PARTICIPANT CODE: 112 810 4737

Please note that the Commission will conduct this public meeting remotely utilizing collaboration technology. Use of this technology is intended to ensure an adequate, alternative means of public access to the Commission's deliberations for any interested member of the public. If there is any technical problem with the Commission's remote connection, an alternative conference line will be noticed immediately on www.massgaming.com.

All documents and presentations related to this agenda will be available for your review on the morning of the meeting date by visiting our website and clicking on the News header, under the Meeting Archives drop-down.

PUBLIC MEETING - #396

1. Call to Order
2. Approval of the Meeting Minutes **VOTE**
 - a. June 9, 2022
3. Legal Division- Todd Grossman, General Counsel; Caitlin Monahan, Deputy General Counsel
 - a. Racing Application Update (10/1 Deadline for Submissions)
 - b. Tentative Hearings and Meetings Schedule
4. Finance and Legal Divisions- Derek Lennon, Chief Financial Officer; Todd Grossman, General Counsel
 - a. Daily Fantasy Sports Tax Discussion related to (amended MGL c. 12, §11M ½; MGL c. 23N, §3 and §14(a)(iii) – Karen Wells, Executive Director
 - b. DRAFT 205 CMR 240: Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts Tax Remittance and Reporting, and Small Business Impact Statement – for possible emergency adoption and to begin the promulgation process – Todd Grossman, General Counsel **VOTE**



Massachusetts Gaming Commission

5. Sports Wagering Application - Karen Wells, Executive Director
 - a. DRAFT 205 CMR 211: Category 1, Category 2, and Category 3 Sports Wagering Operator License Applications, and Small Business Impact Statement – for possible emergency adoption and to begin the promulgation process – Carrie Torrisi, Deputy General Counsel **VOTE**
 - b. Presentation of Sports Wagering Operator Draft Application Form - Karen Wells, Executive Director; Loretta Lillios, Director of IEB; Jaclynn Knecht, Finance Office Accountant/Assistant to the Chief Financial & Accounting Officer; Derek Lennon, Chief Financial and Accounting Officer; Todd Grossman, General Counsel; Jordan Maynard, Commissioner **VOTE**
 - c. Presentation of Sports Wagering Scoring Process- Karen Wells, Executive Director; Loretta Lillios, Director of IEB; Jaclynn Knecht, Finance Office Accountant/Assistant to the Chief Financial & Accounting Officer; Derek Lennon, Chief Financial and Accounting Officer; Todd Grossman, General Counsel; Jordan Maynard, Commissioner **VOTE**
6. Discussion of Simultaneous vs. Staggered Launch Dates – Sterl Carpenter, Regulatory Compliance Manager; Karen Wells, Executive Director **VOTE**
7. Vendor Licensing Process - Loretta Lillios, Director of Investigations and Enforcement Bureau
 - a. DRAFT 205 CMR 234: Sports Wagering Vendors, and Small Business Impact Statement – for possible emergency adoption and to begin the promulgation process – Caitlin Monahan, Deputy General Counsel **VOTE**
 - b. DRAFT 205 CMR 202: Sports Wagering Authority and Definitions, and Small Business Impact Statement – for possible emergency adoption and to begin the promulgation process – Caitlin Monahan, Deputy General Counsel **VOTE**
8. Sports Wagering Implementation Timeline Discussion – Karen Wells, Executive Director
 - a. Potential Launch Dates **VOTE**
 - i. Retail
 - ii. Online/Mobile
 - b. Overview of Regulations Needed - Todd Grossman, General Counsel
9. Update on Finance Progress – Derek Lennon, Chief Financial Officer
10. Commissioner Updates



11. Other Business - Reserved for matters the Chair did not reasonably anticipate at the time of posting.

I certify that this Notice was posted as “Massachusetts Gaming Commission Meeting” at www.massgaming.com and emailed to regs@sec.state.ma.us. Posted to Website: October 4, 2022 | 9:30 a.m.

October 3, 2022

Cathy Judd-Stein

Cathy Judd-Stein, Chair

*This meeting is open to all interested individuals for viewing.
If there are any questions pertaining to accessibility and/or further assistance is needed, please email
crystal.beauchemin@massgaming.gov.*



Massachusetts Gaming Commission



Massachusetts Gaming Commission Meeting Minutes

Date/Time: June 9, 2022, 10:00 a.m.

Place: Massachusetts Gaming Commission
VIA CONFERENCE CALL NUMBER: 1-646-741-5292
PARTICIPANT CODE: 112 032 0629

The Commission conducted this public meeting remotely utilizing collaboration technology. Use of this technology was intended to ensure an adequate, alternative means of public access to the Commission's deliberations for any interested member of the public.

Commissioners Present:

Chair Cathy Judd-Stein
Commissioner Eileen M. O'Brien
Commissioner Bradford R. Hill
Commissioner Nakisha L. Skinner

1. [Call to Order](#) (0:14)

Chair Judd-Stein called the 382nd public meeting of the Massachusetts Gaming Commission ("Commission") to order. Roll call attendance was conducted, and all four commissioners were present.

2. [Approval of Meeting Minutes](#) (2:55)

a. December 16, 2021

Commissioner Hill moved to approve the minutes from December 16, 2021, subject to any necessary corrections for typographical errors or other non-material matters. Commissioner O'Brien seconded.

Roll call vote:

Commissioner O'Brien: Aye.

Commissioner Hill: Aye.

Commissioner Skinner: Abstain.

Chair Judd-Stein: Aye.

The motion passed 3-0, with one abstention.

3. [Administrative Update](#) (4:24)

a. On-site Casino Updates

Executive Director Karen Wells introduced Bruce Band, Assistant Director of Investigations & Enforcement Bureau (“IEB”) and Gaming Agents Division Chief, to provide an update on the gaming establishments. Assistant Director Band reported that MGM Springfield is hosting Free-Music Fridays in their plaza every Friday this summer until September 2nd. Assistant Director Band added that on June 13th, table games at MGM Springfield will be offered 24 hours per day, and 7 days per week. Assistant Director Band then reported on activity at Encore Boston Harbor (“EBH”), explaining that they will offer watch parties for the 2022 NBA Playoffs in their sports bar. He noted that there were no upcoming events at Plainridge Park Casino (“PPC”) to report. The Commission thanked Assistant Director Band for his update.

4. [Research and Responsible Gaming](#) (18:17)

a. Gaming Advertising White Paper Update

Mark Vander Linden, Director of Research and Responsible Gaming, presented the second draft of the white paper, *Responsible Gaming Considerations for Gambling Advertising*. The first draft was presented at the March 14th public meeting and posted to the Commission’s website for public comment. Director Vander Linden noted that the updated document clarified the terms “gaming” and “gambling,” which were used interchangeably throughout the report. Director Vander Linden introduced Long Banh, Program Manager, to present changes that were made to Section 3 of the white paper, which detailed regulations from other U.S. jurisdictions and elsewhere. Mr. Banh noted that the regulations regarding advertising marketing, communications to high-risk players, and underage or self-excluded persons were added into the document. An additional regulation was added concerning how gambling inducements, bonuses and marketing materials must not mislead players, or misrepresent products.

Director Vander Linden explained that language was also added within Section 4 of the document to recommend and delineate which measures should be promulgated into regulations, and which measures – specifically those that are difficult to monitor or measure – may be better suited for inclusion in the Commission’s Responsible Gaming Framework. Mr. Banh stated that another addition to the white paper was a recommendation that materials detailing how to report false or misleading advertising be available in various languages, so more individuals can file a complaint if there is a violation. The report was included in the Meeting Packet, on pages 9 through 32.

Commissioner Skinner sought clarification from Director Vander Linden regarding what changes were made in response to the public comments received regarding the white paper. Director Vander Linden responded that he would review the white paper and delineate the changes that were made based on public comments separate and apart from the other edits that were made within the document and provide Commissioners with an update shortly after the meeting.

Chair Judd-Stein clarified to her fellow Commissioners that the Commission would not be voting on the report in its current form. Director Vander Linden confirmed this point, stating that after today's discussion, the document would shift from draft form to permanent status. He added that revisions may be made after additional findings are incorporated from the study. Chair Judd-Stein added that the Commission would review the final document and determine what practices should be implemented, and how the practices can be modified based upon a review of other jurisdictions. Chair Judd-Stein thanked Director Vander Linden, Mr. Banh and Ms. Flores-Pajot for their research and work on the white paper.

5. Legal Division

a. Suitability Decisions (38:30)

General Counsel Todd Grossman provided an update on the suitability decisions before the Commission. General Counsel Grossman explained that the Commission held five adjudicatory proceedings on May 24th relative to the suitability of four individuals and one entity qualifier. Specifically, the Commission considered the suitability of Joseph Levin, Barry Diller, Kenya Evans, and the entity IAC/InterActiveCorp ("IAC") as qualifiers for Blue Tarp ReDevelopment, LLC, the Region B Category 1 gaming licensee. The Commission also held suitability proceedings for Gregory Brower as a qualifier to Wynn MA, LLC, the Region A Category 1 gaming licensee. General Counsel Grossman noted that each matter was considered individually by Commissioners at separate hearings, and the Commission deliberated over each matter separately, as well. Written decisions commemorating the Commission's findings were issued to each party. The decisions were included on pages 33 through 53 of the meeting packet.

General Counsel Grossman explained that the Commission had issued a positive determination of suitability to each of the five petitioners.

Commissioner O'Brien asked General Counsel Grossman to highlight the distinction in the Diller matter versus the matters for Ms. Evans and Mr. Levin. General Counsel Grossman explained that Mr. Diller and the entity IAC were issued positive determinations of suitability, though there was a condition attached to each decision. The condition came about due to an ongoing investigation being conducted by the Securities and Exchange Commission ("SEC") and the Department of Justice ("DOJ") of which the IEB was made aware. General Counsel Grossman explained the condition attached to Mr. Diller and IAC's grant of suitability, which was that they report any material information related to the progression of either the SEC or DOJ investigations to the IEB within 48 hours of receipt of such information. General Counsel Grossman noted that such notification would allow the IEB and the Commission to remain apprised of those proceedings and allow the Commission to take any action, if necessary, in the future.

Chair Judd-Stein added that the Commission would emphasize that suitability is an ongoing process, and that disclosure is an ongoing obligation for individuals and entities deemed suitable by the Commission. Chief Enforcement Counsel Hall confirmed that the IEB would continue to monitor the investigations of Mr. Diller and IAC's cases. Chair Judd-Stein thanked Ms. Hall, the

financial investigators, the officers withing the Gaming Enforcement Unit, and all the members of the IEB for their vigilance in these matters.

6. [Community Affairs Division](#) (45:20)

a. Community Mitigation Fund Applications: Public Safety, Specific Impact

Joe Delaney, Chief of the Community Affairs Division, presented the 2022 Community Mitigation Public Safety and Specific Impact Applications for review. The applications were included on pages 54 through 61 of the meeting packets.

i. Town of Foxborough

Chief Delaney provided an overview of the Town of Foxborough’s Public Safety Application and explained that their request for \$188,110 was predominantly for police training and the purchase of two unmarked, specialty vehicles. Chief Delaney explained that the review team recommended partial funding of this request in the amount of \$71,400. Chief Delaney explained that the Review Team did not recommend funding the two unmarked vehicles as the Review Team was not convinced that providing additional vehicles would be proportional to the impact identified and that the previous grants awarded by the Commission adequately addressed this issue.

Chair Judd-Stein stated that she would be interested to hear, at a later time, where the police units are accessing these funds for training, the number of officers that are participating, and the outcomes of the training. Chair Judd-Stein added that the Commission was committed to public safety funding for equipment but would like to see the training as an offset and a component in future applications. Chief Delaney explained that the Division of Community Affairs does track who receives trainings as it reported when grant recipients submit their quarterly reports.

ii. Town of Longmeadow

Chief Delaney provided a short overview of the grant requested by the Town of Longmeadow. He explained that Town requested \$85,900 to install cameras at the intersection of Longmeadow Street (Route 5) and Forest Glen Road, as well as funds for police training on de-escalation and implicit bias. Chief Delaney stated that the Review Team recommended awarding the full amount of the grant because it would help the community to address safety and traffic-related issues in the area, and the Review Team guidelines identified the training costs as eligible for funding.

iii. Southeastern MA Regional 911 District (“SEMRECC”)

Chief Delaney provided an overview of the application submitted by the Southeastern MA Regional 911 District Public Safety Application. He explained they requested \$80,000 to purchase, program, and maintain a cache of portable radios to aid in emergency communications during an incident- , specifically during an incident at or in proximity to PPC. Chief Delaney noted that the Review Team did not recommend the application for funding because the

application was speculative in nature. He explained that the Review Team's guidelines state that the funds may not be used on the mitigation of impacts that are projected, or predicted, but are not occurring. Chief Delaney added that there was no evidence that an event has ever occurred at PPC which would require such action on SEMRECC's part. The Executive Office of Public Safety and Security ("EOPSS") shared the Review Team's concern.

iv. City of West Springfield

Chief Delaney presented the City of West Springfield's request for \$200,000 for additional Police, Fire and EMS personnel to increase staffing to address the impact on municipal services resulting from the opening of the MGM Casino in Springfield. Chief Delaney noted that the Review Team recommended awarding the full amount of the request based on the evidence in the One Year Look Back Study attributing the impact on the call of municipal services to MGM Springfield.

v. Specific Impact Request: Hampden DA's Office

Chief Delaney provided a short overview of the specific impact grant requested by the Hampden District Attorney's Office, and explained they requested \$75,000 for personnel to mitigate the additional burdens in caseloads that are created directly and indirectly by the influx of people in the downtown area due to the casino presence. Chief Delaney added that the Review Team recommended awarding the full amount of the request because the Review Team guidelines identified the costs incurred by the District Attorney's Office as eligible for funding from the Community Mitigation Fund.

Chair Judd-Stein commented that Chief Delaney, Mary Thurlow, Senior Program Manager, and Lily Wallace, Program Assistant, did a great job preparing and presenting the Community Mitigation Fund applications.

vi. Specific Impact Request: City of Springfield

Chief Delaney provided a short overview of the specific impact grant requested by the City of Springfield, and explained they requested \$300,000 to advance the site feasibility and design for a new mixed-use parking garage to help the Springfield Parking Authority ("SPA") to recover revenues that were lost due to the construction of the MGM parking garage. Chief Delaney noted that the Review Team recommended awarding the full amount of the request.

Chair Judd-Stein inquired whether \$300,000 was the full amount needed for the site feasibility, or whether the city would be using other funds. Chief Delaney responded that \$300,000 was the full cost to hire a developer, bid on the contracts, and the attorney's costs associated with the site feasibility, but the city may request additional funds in the future, as the design progresses.

vii. Specific Impact Request: Springfield Fire Department

Chief Delaney provided a short overview of the specific impact grant requested by the City of Springfield Fire Department. The Department requested \$41,300 for the purchase of new

extraction tools (“jaws of life”) for the fire response unit that primarily responds to the MGM Casino area. Chief Delaney stated that the Review Team recommended awarding the full amount of the request.

viii. Specific Impact Request: Springfield Police Department

Chief Delaney provided a short overview of the specific impact grant requested by the City of Springfield Police Department. The Department requested \$33,300 for IT upgrades to connect the Metro Office Substation to the Gaming Enforcement Unit office, for upgrades to the Metro Office Substation, and equipment maintenance. Chief Delaney added that the Review Team recommended awarding partial funding in the amount of \$16,000 for the IT connectivity between the Springfield Police Department and the Gaming Enforcement Unit. The Review Team did not recommend funding of the Metro Substation modifications and equipment maintenance costs.

Commissioner Hill moved that the Commission approve the applications from the following applicants for funding from the Community Mitigation Fund for the purposes described in the submitted applications and materials included in the Commissioners’ Packet and for the reasons described therein and discussed at the meeting today.

- Town of Foxborough- \$71,400;
- Town of Longmeadow- two grants: \$54,700 and \$31,200 totaling \$85,900;
- City of West Springfield- \$200,000;
- Hampden District Attorney’s Office- \$75,000;
- City of Springfield- \$300,000;
- City of Springfield (Fire department)- \$41,300; and
- City of Springfield (Police department)- \$16,000.

Commissioner Hill further moved that the Commission staff be authorized to execute a grant instrument commemorating these awards in accordance with 205 CMR 153.04. Commissioner O’Brien seconded.

Roll call vote:

Commissioner O’Brien: Aye.

Commissioner Hill: Aye.

Commissioner Skinner: Aye.

Chair Judd-Stein: Aye.

The motion passed unanimously 4-0.

Commissioner O’Brien moved that the Commission deny the application for funding from the Community Mitigation Fund for the two unmarked police vehicles submitted by the Town of Foxborough for the reasons described in the memorandum in the Commissioners’ Packet and discussed at the meeting today. Commissioner Skinner seconded.

Roll call vote:

Commissioner O'Brien: Aye.

Commissioner Hill: Aye.

Commissioner Skinner: Aye.

Chair Judd-Stein: Aye.

The motion passed unanimously 4-0.

Commissioner O'Brien further moved that the Commission deny the application for funding from the Community Mitigation Fund to purchase, program, and maintain a cache of portable radios submitted by the Southeastern MA Regional 911 District for the reasons described in the memorandum in the Commissioners' Packet and discussed at the meeting today. Commissioner Skinner seconded.

Roll call vote:

Commissioner O'Brien: Aye.

Commissioner Hill: Aye.

Commissioner Skinner: Aye.

Chair Judd-Stein: Aye.

The motion passed unanimously 4-0.

7. [Finance Division](#) (1:20:44)

a. FY23 Budget Overview

Derek Lennon, Chief Financial Officer, presented the Commission's initial Fiscal Year 2023 Budget, which includes funding for the Commission's 104 full-time employees ("FTEs") and four contract employees. The budget was included on pages 62 through 127 of the meeting packets and provided to Commissioners in advance of the meeting.

Chair Judd-Stein inquired about the indirect cost analysis within the racing budget. Chief Lennon explained that the indirect costs were the same in 2020 fiscal year. Chief Lennon added that the budget would be posted on the Commission's website for public comment, followed by discussion at a future meeting with a vote. Chair Judd-Stein thanked Chief Lennon and the entire Finance Division for their work on the budget.

8. [Commissioner Updates](#) (1:42:48)

a. Legislative Update

Chief Administrative Officer to the Chair and Special Projects Manager Crystal Beauchemin provided an update on the Commission's support of the bill, H.4817 to extend live horseracing and simulcasting, issued on May 31st. Ms. Beauchemin explained that the Commission's position was that the bill should be expedited, as the Massachusetts Legislature adjourns on July 31, 2022. The bill proposes to extend live horseracing and simulcasting a full year through 2023.

Director of Racing Dr. Alexandra Lightbown added that a primary concern for expediting the bill for approval was the number of jobs at stake for trainers, groomers, owners, drivers, and associated racing staff if the session adjourns before the bill is passed. Chair Judd-Stein thanked the Legislature for their diligence.

9. [Lease Update](#) (1:47:20)

a. Executive Session

Chair Judd-Stein read the following language into the record on behalf of the Commission, “the Commission anticipates that it will meet in executive session in accordance with G.L. c. 30A, §21(a)(6) to consider the lease of real property, specifically, the Commission’s office space at 101 Federal Street in Boston, as discussion at an open meeting may have a detrimental effect on the negotiating position of the Commission.”

Commissioner O’Brien moved to enter executive session for the reasons articulated on the record by Chair Judd-Stein. The motion was seconded by Commissioner Skinner.

Roll call vote:

Commissioner O’Brien: Aye.

Commissioner Hill: Aye.

Commissioner Skinner: Aye.

Chair Judd-Stein: Aye.

The motion passed unanimously 4-0.

Commissioners entered executive session. The public session of the Commission meeting did not reconvene at the conclusion of the executive session.

List of Documents and Other Items Used

1. Notice of Meeting and Agenda, dated June 6, 2022
2. Meeting Minutes, December 16, 2021, Open Meeting
3. [Meeting Packet](#) from the June 9, 2022, Open Meeting

TO: Chair Cathy Judd-Stein; Commissioners Eileen O'Brien, Brad Hill, Nakisha Skinner and Jordan Maynard
FROM: Crystal Beauchemin, Chief Administrative Officer to the Chair and Special Projects Manager; Alex Lightbown, Director Racing and Chief Veterinarian
CC: Karen Wells
DATE: October 3, 2022
RE: Racing Application Proposed Hearing Schedule Update

On October 1, 2022 the Massachusetts Gaming Commission received two applications to hold or conduct live racing meets in 2023; from Plainville Gaming and Redevelopment, LLC (Plainridge Park Casino in Plainville, MA) and Commonwealth Equine and Agricultural Center (Great Meadowbrook Farm in Hardwick, MA.)

As you may recall, the statute requires us to make decisions on these applications by November 15.

MGL c. 128A, §2: Such application shall be filed with the commission on or before the first day of October of the calendar year preceding the calendar year for which application requests a license to be issued under this chapter; and the commission shall grant or dismiss such application not later than the fifteenth day of November next following;

As such, we have reserved dates for the applicable hearings for public comment, applicant testimony and adjudicatory hearing and deliberations. Those dates include:

Oct. 17
Oct. 18
Oct. 28
Oct. 31
Nov. 1
Nov. 3

As soon as dates and locations can be confirmed, we'll finalize the schedule and properly notice the hearings and meetings.

MASSACHUSETTS GAMING COMMISSION

To: Chair Judd-Stein and Commissioners Hill, Maynard, O'Brien, and Skinner
From: Derek Lennon and Douglas O'Donnell
Date: 10/6/2022
Re: Regulation for Taxation of Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts

Summary:

Staff is recommending a regulation for the process of filing and collecting taxes related to sports wagering activities and fantasy contests in the Commonwealth. M.G.L. c. 23N section 14 sets the tax rates at:

- 15% of an operator's adjusted gross sports wagering receipts from in-person wagering,
- 20% of an operator's adjusted gross sports wagering receipts from mobile applications and other digital platforms, and
- 15% of an operator's adjusted gross fantasy wagering receipts as defined in section 11M½ of c. 12.

Taxes are collected by the Commission monthly. Operator's are required to file a return on or before the fifteenth of each month demonstrating the adjusted gross sports wagering and/or adjusted gross fantasy wagering receipts for the prior month and simultaneously remit by electronic funds transfer the tax amount due.

205 CMR 240:00: ADJUSTED GROSS SPORTS WAGERING AND ADJUSTED GROSS FANTASY WAGERING RECEIPTS TAX REMITTANCE AND REPORTING

240.01: DESCRIPTION OF TAX

240.02: COMPUTATION OF ADJUSTED GROSS SPORTS WAGERING AND ADJUSTED GROSS FANTASY WAGERING RECEIPTS

240.03: REMITTANCE

240.04: EXAMINATION OF ACCOUNTS AND RECORDS FOR VERIFICATION OF ADJUSTED GROSS SPORTS WAGERING AND ADJUSTED GROSS FANTASY WAGERING RECEIPTS

240.01: Description of Tax

Pursuant to M.G.L. c. 23N, § 14, the following excise taxes relative to sports wagering and fantasy contests shall be calculated daily and remitted to the Commission on a monthly basis:

- (1) a monthly tax of 15% of the Operator's Adjusted Gross Sports Wagering Receipts from the operation of in-person sports wagering, computed in accordance with 205 CMR 240.02;
- (2) a monthly tax of 20% of the Operator's Adjusted Gross Sports Wagering Receipts from the operation of sports wagering through mobile applications and other digital platforms approved by the Commission, computed in accordance with 205 CMR 240.02; and
- (3) a monthly tax of 15% of the Adjusted Gross Fantasy Wagering Receipts of a person or entity that offers fantasy contests pursuant to M.G.L. c. 12, § 11M½, computed in accordance with 205 CMR 240.02. Any person engaged in offering fantasy contests shall register with the Commission on a form approved and prescribed by the Commission.

240.02: Computation of Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts

(1) Sports Wagering: In accordance with M.G.L. c. 23N, § 3, Adjusted Gross Sports Wagering Receipts shall be the total gross receipts from sports wagering less the sum of: (i) the total of all winnings paid to participants; and (ii) all excise taxes paid pursuant to federal law; provided, however, that the total of all winnings paid to participants shall not include the cash equivalent of any merchandise or thing of value awarded as a prize.

(a) Adjusted Gross Sports Wagering Receipts shall be calculated daily and in accordance with the Operator's approved system of internal controls.

(b) Any amount that an Operator is unable to collect pursuant to any credit issued to a patron to take part in sports wagering in accordance with 205 CMR, *et seq.* shall be deemed an amount actually received for purposes of calculating gross sports wagering receipts.

(c) Adjusted Gross Sports Wagering Receipts shall not include any amount received by an Operator from credit extended or collected by the Operator for purposes other than sports wagering.

(d) The accrual method of accounting shall be used for the purposes of calculating the amount of the tax owed.

(2) Fantasy Contests: In accordance with M.G.L. c. 23N, § 3, Adjusted Gross Fantasy Wagering Receipts shall be the total gross receipts from fantasy contests as defined in section 11M ½ of chapter 12, less only the total of all cash prizes paid to participants in the fantasy contests; provided, however, that the total of all cash prizes paid to participants shall not include the cash equivalent of any merchandise or thing of value awarded as a prize.

(a) Adjusted Gross Fantasy Wagering Receipts shall be calculated daily and in accordance with the person or entity offering fantasy contests' approved system of internal controls.

(b) Any amount that a person or entity offering fantasy contests is unable to collect pursuant to any credit issued to a patron to take part in fantasy contests in accordance with 205 CMR, *et seq.* shall be deemed an amount actually received for purposes of calculating gross fantasy wagering receipts.

(c) Adjusted Gross Fantasy Wagering Receipts shall not include any amount received by a person or entity offering fantasy contests from credit extended or collected by the person or entity for purposes other than fantasy contests.

(d) The accrual method of accounting shall be used for the purposes of calculating the amount of the tax owed.

240.03: Remittance

(1) The excise taxes set out in 205 CMR 240.01 shall be due and payable to the Commission in monthly installments on or before 5:00 P.M. on the fifteenth calendar day following the calendar month in which the Adjusted Gross Sports Wagering Receipts or Adjusted Gross Fantasy Wagering Receipts were received by the Operator or person or entity offering fantasy contests, in accordance with 205 CMR 240.01.

(2) On or before the fifteenth calendar day of each month a monthly remittance report shall be filed with the Commission in a form prescribed by the Commission setting forth the following:

- a) the total gross sports wagering receipts and Adjusted Gross Sports Wagering Receipts from the operation of sports wagering during that month;
- b) the tax amount for which an Operator is liable;
- c) the total gross fantasy wagering receipts and Adjusted Gross Fantasy Wagering Receipts from the offering of fantasy contests, as defined in section 11M ½ of chapter 12, during that month;
- d) the tax amount for which a person or entity that offers fantasy contests, as defined in said section 11M ½ of said chapter 12, is liable; and

- e) any additional information necessary for the computation and collection of the tax on Adjusted Gross Sports Wagering Receipts and Adjusted Gross Fantasy Wagering receipts required by the Commission.

(3) The tax shall be due and remitted by electronic funds transfer simultaneously with the filing of the remittance report.

(4) When a monthly total for Adjusted Gross Sports Wagering or Adjusted Gross Fantasy Wagering Receipts is negative, the Operator or person or entity that offers fantasy contests may carry over the negative amounts to returns filed in subsequent months provided that sufficient documentation, as determined by the Commission, is submitted in support of the offset.

240.04: Examination of Accounts and Records for Verification of Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts

(1) The Commission or its designee may perform audits of the books and records of an Operator or person or entity offering fantasy contests, at such times and intervals as it deems appropriate, in order to verify the tax amount reported and remitted for Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts.

(2) The Operator or person or entity offering fantasy contests shall permit duly authorized representatives of the Commission to examine the accounts and records for the purpose of verifying Adjusted Gross Sports Wagering and Adjusted Fantasy Wagering Receipts. In the event that any records or documents deemed pertinent by a Commission examiner are in the possession of another person or entity, the Operator or person or entity offering fantasy contests shall be responsible for making those records or documents available to the Commission examiner within the time period provided by the Commission.

(3) The Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering tax verification process may incorporate audit work performed by an Operator's or person or entity offering fantasy contests' internal audit department or its independent accountant or auditor provided that:

- (a) Such audit work is conducted in accordance with minimum standard internal audit procedures which have been submitted to and approved by the Commission including, at a minimum, a detailed description of the audit tests to be performed;

- (b) The Operator or person or entity offering fantasy contests submits to the Commission by January 31st of each year an audit plan specifying the scheduled audit dates for verification of Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts that upcoming calendar year; and

- (c) The Operator or person or entity offering fantasy contests submits to the Commission no later than March 15th of each year, copies of all internal audit reports and any other reports directly relating to the reporting of Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts for the preceding tax year.

(4) The Commission shall notify the Operator or person or entity offering fantasy contests of any Adjusted Gross Sports Wagering or Adjusted Gross Fantasy Wagering Receipt tax deficiencies disclosed during the verification process. Any additional amounts due by the Operator or person or entity offering fantasy contests shall be remitted within 15 days of completion of the audit, except that in the event the Operator or person or entity offering fantasy contests disagrees with the Commission's audit results, the time for payment shall be extended for an additional thirty (30) days during which time the Operator or person or entity offering fantasy contests shall be provided an opportunity to respond to the Commission's audit results.



SMALL BUSINESS IMPACT STATEMENT

The Massachusetts Gaming Commission (“Commission”) hereby files this Small Business Impact Statement in accordance with G.L. c. 30A, §2 relative to the proposed adoption of **205 CMR 240: Adjusted Gross Sports Wagering and Adjusted Gross Fantasy Wagering Receipts Tax Remittance and Reporting**.

This regulation was developed as part of the process of promulgating regulations governing sports wagering in the Commonwealth, and is primarily governed by G.L. c. 23N, §4.

The adoption of 205 CMR 240 applies to Sports Wagering Operators, persons or entities that offer fantasy contests, and the Commission. Accordingly, this regulation is unlikely to have an impact on small businesses. Under G.L. c.30A, §2, the Commission offers the following responses to the statutory questions:

1. Estimate of the number of small businesses subject to the proposed regulation:

It is unknown at this time how many small businesses may be subject to this regulation.

2. State the projected reporting, recordkeeping, and other administrative costs required for compliance with the proposed regulation:

There are no projected reporting, recordkeeping, or other administrative costs required for small businesses to comply with this regulation.

3. State the appropriateness of performance standards versus design standards:

The standards set forth are finance-related requirements, akin to performance standards.

4. Identify regulations of the promulgating agency, or of another agency or department of the Commonwealth, which may duplicate or conflict with the proposed regulation:

There are no conflicting regulations in 205 CMR, and the Commission is unaware of any conflicting or duplicating regulations of any other agency or department of the Commonwealth.

5. State whether the proposed regulation is likely to deter or encourage the formation of new businesses in the Commonwealth:



Massachusetts Gaming Commission

This amendment is unlikely to have any impact on the formation of new businesses in the Commonwealth.

Massachusetts Gaming Commission
By:

/s/ Caitlin Monahan
Caitlin Monahan
Deputy General Counsel

Dated: October 3, 2022

DRAFT



Massachusetts Gaming Commission



Sports Wagering Operator & Vendor Scope of Licensing – Initial Survey

SPORTS WAGERING LICENSE INFORMATION			
Seeking to apply as:	Category 1 Operator	Category 2 Operator	
	Category 3 Operator	Vendor to Operator	

APPLICANT INFORMATION & DESCRIPTION	
Company Name:	
D/B/A or Trade Name(s):	
Corporate HQ Address: <i>(Also include the address of any operation/s in Massachusetts)</i>	
Point-of-Contact for Licensing Process: <i>(Include NAME, POSITION, ADDRESS, PHONE, EMAIL)</i>	
Description of Business:	
Goods/Services you expect to provide in Massachusetts:	

APPLICANT ORGANIZATIONAL INFORMATION	
Applicant Company Type:	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Sole Proprietorship</div> <div style="width: 33%;"><input type="checkbox"/> LLC</div> <div style="width: 33%;"><input type="checkbox"/> Cooperative</div> <div style="width: 33%;"><input type="checkbox"/> C-Corporation</div> <div style="width: 33%;"><input type="checkbox"/> S-Corporation</div> <div style="width: 33%;"><input type="checkbox"/> Partnership</div> <div style="width: 33%;"><input type="checkbox"/> SEC Registrant</div> <div style="width: 33%;"><input type="checkbox"/> Other</div> </div>
Publicly Traded? :	<input type="checkbox"/> No Yes <i>(if "Yes", Stock exchange symbol and exchange)</i>
Applicant Financial Statements Type:	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Audited</div> <div style="width: 33%;"><input type="checkbox"/> Reviewed</div> <div style="width: 33%;"><input type="checkbox"/> Consolidated</div> <div style="width: 33%;"><input type="checkbox"/> Internally Compiled</div> <div style="width: 33%;"><input type="checkbox"/> Externally Compiled</div> <div style="width: 33%;"><input type="checkbox"/> Supplemental</div> <div style="width: 33%;"><input type="checkbox"/> Other</div> </div>



Sports Wagering Operator & Vendor Scope of Licensing – Initial Survey

Applicant Tax Returns:	Stand-Alone	Consolidated <i>(with)</i>
Management Structure: <i>(Do you have any of the following?)</i>	Compliance Committee	Audit Committee
	Compliance Plan	Other(s)

ATTACHMENTS

PLEASE SUBMIT THE FOLLOWING INFORMATION

- ☐ **TABLE of ORGANIZATION** including parent companies and subsidiaries (note any companies that are publicly traded and are sports wagering-related).
- ☐ **TABLE of OWNERSHIP INTERESTS** showing all ownership interests, including parent companies and subsidiaries showing the corporate structure with entity names and ownership percentages.
- ☐ **FUNCTIONAL TABLE of ORGANIZATION** including the executive team and Board of Directors with individual names and titles, and percentage of ownership interest, if applicable.
- ☐ **CONTROL** – List (1) individuals and entities who own 10 percent or more of the applicant; (2) individuals and entities who have the ability to control the activities of the applicant; and (3) any executive, employee or agent having the power to exercise significant influence over decisions concerning the applicant's sports wagering operations in Massachusetts.
- ☐ **INSTITUTIONAL INVESTORS** – Provide a list of these investors along with their percentage of ownership.
- ☐ **LICENSING HISTORY** – List the last 3 jurisdictions in which licensed for sports wagering operations, including the type of license that was obtained.
- ☐ **LICENSEE ASSOCIATION** – List any Gaming Licensee(s), Sports Wagering Operator Licensee(s) or Applicant(s) for a Sports Wagering Operator License with whom you have an agreement to conduct business or are in the process of negotiating an agreement.
- ☐ **ON-SITE PERSONNEL (for Vendor only)** – If you expect to have any personnel on-site at a Massachusetts casino, please indicate the approximate number and a brief description of their duties.



Legal Division

TO: Cathy Judd-Stein, Chair
Eileen O'Brien, Commissioner
Brad Hill, Commissioner
Nakisha Skinner, Commissioner
Jordan Maynard, Commissioner

FROM: Carrie Torrisi, Deputy General Counsel
Mina S. Makaraious, Anderson & Krieger LLP
Lon F. Povich, Anderson & Krieger, LLP

DATE: September 30, 2022

RE: 205 CMR 211: Sports Wagering Operator Application Regulation

Enclosed is a proposed draft of 205 CMR 211: Category 1, Category 2, and Category 3 Sports Wagering Operator License Applications. This regulation outlines the requirements that must be met by an applicant to submit an application for a sports wagering operator license, including the type of information that will be required on the application form and required fees. In addition, the regulation authorizes the Commission to extend the filing deadline for applications under certain circumstances.



Massachusetts Gaming Commission

205 CMR 211: CATEGORY 1, CATEGORY 2, AND CATEGORY 3 SPORTS WAGERING
LICENSE APPLICATIONS

211.01: Applications

- (1) An Applicant for a Category 1 Sports Wagering License, Category 2 Sports Wagering License, or Category 3 Sports Wagering License must submit a fully executed original application to the Commission using the applicable application form issued by the Commission by the deadline established by the Commission. Each application shall be submitted in accordance with the instructions included in the application form. The Commission shall have no obligation to accept or review an incomplete application or an application submitted after the established deadline.
 - a. An Applicant shall be required to submit to the Commission a fully executed Operator and Vendor Scope of Licensing – Initial Survey using the applicable form issued by the Commission by the deadline established by the Commission. Failure to submit such Survey shall result in the Commission deeming the Applicant's application incomplete and administratively closed.
- (2) An application for a Category 1 Sports Wagering License, Category 2 Sports Wagering License, or Category 3 Sports Wagering License shall include, but not be limited to, the following information:
 - (a) Background information related to the Applicant;
 - (b) The Applicant's experience and expertise related to Sports Wagering;
 - (c) The economic impact to the Commonwealth if the Applicant is awarded a License;
 - (d) The Applicant's proposed measures related to responsible gaming;
 - (e) The technology that the Applicant intends to use in its operation;
 - (f) The suitability of the Applicant and its qualifiers; and
 - (g) Attestation forms verifying the authenticity of the information submitted in the application.
- (3) The application forms shall include language permitting Applicants for Category 1 Sports Wagering Licenses, Category 2 Sports Wagering Licenses, and Tethered Category 3 License applicants to refer the Bureau and Commission to prior application forms submitted to the Commission by the Applicant or previous information otherwise obtained by the Bureau or Commission regarding the Applicant.
- (4) Fees. All application fees required pursuant to G.L. c. 23N shall be submitted to the Commission in a format prescribed on the application form issued by the Commission.
- (5) An Applicant shall have an affirmative obligation to abide by every statement made in its application to the Commission, including all evaluation criteria and eligibility requirements. A misrepresentation or omission made with respect to an application may be grounds for denial of the application or revocation of any license granted by the Commission.

- (6) An Applicant shall have a continuing duty to disclose any changes in the information submitted to the Commission.
- (7) Public Records. The application form issued by the Commission may include information regarding how certain materials submitted in the course of the application may be withheld from public disclosure pursuant to G.L. c. 66, § 10.
- (8) Extension of Time for Filing. The Commission may, in its discretion, extend the time for filing a complete application to enable an Applicant to cure a deficiency in its application, provided that the application was submitted and the applicable fee was paid before the established deadline, or to provide reasonable additional time for filing in cases where extraordinary circumstances prevented a timely filing.



SMALL BUSINESS IMPACT STATEMENT

The Massachusetts Gaming Commission (“Commission”) hereby files this Small Business Impact Statement in accordance with G.L. c. 30A, §2 relative to the proposed adoption of **205 CMR 211: Category 1, Category 2, and Category 3 Sports Wagering Operator License Applications**.

This regulation was developed as part of the process of promulgating regulations governing sports wagering in the Commonwealth, and is primarily governed by G.L. c. 23N, §4.

The adoption of 205 CMR 211 applies to potential sports wagering operators and the Commission. Accordingly, this regulation is unlikely to have an impact on small businesses. Under G.L. c.30A, §2, the Commission offers the following responses to the statutory questions:

1. Estimate of the number of small businesses subject to the proposed regulation:

This regulation is unlikely to have an impact on small businesses.

2. State the projected reporting, recordkeeping, and other administrative costs required for compliance with the proposed regulation:

There are no projected reporting, recordkeeping, or other administrative costs required for small businesses to comply with this regulation.

3. State the appropriateness of performance standards versus design standards:

No standards are set forth in this regulation.

4. Identify regulations of the promulgating agency, or of another agency or department of the Commonwealth, which may duplicate or conflict with the proposed regulation:

There are no conflicting regulations in 205 CMR, and the Commission is unaware of any conflicting or duplicating regulations of any other agency or department of the Commonwealth.

5. State whether the proposed regulation is likely to deter or encourage the formation of new businesses in the Commonwealth:



Massachusetts Gaming Commission

This amendment is unlikely to have any impact on the formation of new businesses in the Commonwealth.

Massachusetts Gaming Commission
By:

/s/ Carrie Torrisi
Carrie Torrisi
Deputy General Counsel

Dated: September 30, 2022



Massachusetts Gaming Commission

APPLICATION FOR CATEGORY 1, 2, & 3 SPORTS WAGERING OPERATOR LICENSE



APPLICANT NAME: _____

Applicant: _____

INSTRUCTIONS

DRAFT

Applicant: _____

General Information

This *Application For Category 1, 2, & 3 Sports Wagering Operator License* form (the form itself “Application Form”, and along with all attachments “application”) was designed by the Massachusetts Gaming Commission (“Commission”) as a vehicle for each applicant to demonstrate that it has thought broadly and creatively about creating a sports wagering operation in Massachusetts that will provide a significant and lasting benefit to the Commonwealth of Massachusetts and will deliver an overall experience that both offers an exceptional sports wagering experience and includes significant responsible gaming and consumer protection measures.

The application must be completed in accordance with these instructions. In accordance, any discrepancies may be taken into consideration by the Commission when evaluating the application.

To the extent that an applicant is a newly formed entity or to date has been a largely non-operational entity, any information required to be provided relative to past performance or general practice shall, at a minimum, be provided in relation to the primary controlling and/or operating entity of the proposed sports wagering operator and/or its significant business units.

If an applicant is unable to comply with or respond to any part of the application, it may apply for a waiver or variance from the Commission in accordance with **205 CMR 102.03(4)** in advance of the filing deadline.

All communications, including general questions and application inquiries, should be directed to the Executive Director or Commission staff.

How to submit a general question and/or application inquiry:

1. Please go to { **insert link to inquiry template on MGC website** }
2. Complete all of the required fields and click “Submit.”

A Commission representative will respond to each inquiry in a timely manner. ***At no time during the application process should any applicant, agent of the applicant, qualifier, or another associated individual, contact a Commissioner directly.***

This Application Form does not constitute an offer of any nature or kind to any applicant or its agents. The Commission is under no obligation to issue a license to any of the applicants. By submitting an Application, the applicant is deemed to agree to all of the terms of this process.

To the extent that anything contained in this application is inconsistent with any other guidance or policy-related document issued by the Commission in the past, this application shall control. To the extent that anything contained in this application is inconsistent with any provision of 205 CMR or G.L. c.23N, the governing law shall control.

Terms used in the application shall be given their most logical, plain meaning in the context of the application. The Commission reserves the right to amend or clarify this application at any time prior to the deadline for the submission of applications.

For each Application, all of the Commission’s costs and expenses of the administrative proceedings pursuant shall be borne by the applicant. All such costs and expenses shall be assessed to the applicant and collected by the Commission.

The Commission will utilize its website, www.massgaming.com, to provide notices of hearings, a notice of amendment or clarification of the Application Form, general updates, and general information relative to the application process.

Applicant: _____

Non-Refundable Processing Fee

Pursuant to G.L. c. 23N, § 7(a), an applicant for an operator license shall pay to the commission a nonrefundable processing fee of \$200,000 for the costs associated with the processing of the application and investigation of the applicant; provided, however, that if the costs of the investigation exceed the initial application fee, the applicant shall pay the additional amount to the commission not more than 30 days after notification of insufficient fees or the application shall be rejected.

The \$200,000 fee that must accompany this application may be submitted in the following manner:

{ insert instructions for payment of the non-refundable processing fee }

Applicant: _____

Completing the Application

The application is divided into seven primary sections, each section containing questions relating to that section. The applicant should answer each question fully. While a cross-reference to other sections within the application may be included as part of an answer to a particular question, a cross-reference may not serve as the entire answer to any particular question. Please make sure to include the name of the applicant in the provided space at the top of the page for each question. If the answering of any question requires an attachment, please see below.

Attachments: Where an applicant may wish to attach a document in response or to supplement its written response, or another exhibit of any nature, it may attach such documents and/or exhibits as set forth in the instructions for “[Electronic Application Format](#).” All attachments must be named and listed for the corresponding question. If the same attachment is responsive to multiple questions within the application, a copy of the attachment should be attached to each question, not just cross-referenced.

Every question must be answered completely. If a question or portion thereof is not applicable, enter “N/A” into the appropriate space on the application.

Applicants for Category 1 Sports Wagering Licenses, Category 2 Sports Wagering Licenses, may refer the Bureau and Commission to prior application forms submitted to the Commission by the Applicant or previous information otherwise obtained by the Bureau or Commission regarding the Applicant.

Applicant: _____

Submission of Materials

The Application must be submitted by the application deadline. The deadline for **Category 1 & 2 applicants is {DATE} at 2 p.m.** The deadline for **Category 3 applicants is {DATE} at 2 p.m.** The Commission shall have no obligation to accept or review an application submitted after the established deadline.

How to Submit an MGC Sports Wagering Operator License Application

Entities interested in applying for a Sports Wagering Operators License must request a link to the MGC Secure File Transfer Site prior to submitting their application form and any additional documents. This link will allow for the secure and confidential upload and storage of all application materials.

How to Request a Link to the MGC Secure File Transfer Site:

*Please Note: All link requests must be received no later than one (1) week prior to the application deadline
{date to be established}*

1. Please visit {insert a hyperlink to Secure Link Request Form on the MGC website}
2. Complete all of the required forms and click “Submit”

A Commission representative will provide the requested link and additional instructions on how to upload the application materials securely via email. The information will be sent in two emails, with the link being in the first email and the password sent separately in the second email, for security purposes.

Applicant: _____

Electronic Application Format

When the electronic version of the application materials is submitted via the MGC Secure File Transfer Site and uploaded to the Commission's server, the applicant must abide by the following:

- (a) The applicant must submit this original completed Application Form that has not been printed, signed, and scanned, but with all answers electronically filled in, all attachments identified, and all necessary boxes checked. This version is being required so that it may be searched electronically by the Commission during the evaluation process. This document must be in PDF format.
- (b) The applicant must also submit this completed Application Form with all answers electronically filled in, all attachments identified, all necessary boxes checked, and all required signatures affixed. This version is identical to the document described in (a) above, but it should also be printed, signed, and scanned. This scanned document must be in PDF format.
- (c) The applicant must submit each attachment as its own electronic file. No electronic file should contain more than one document. Each attachment should be in PDF format unless otherwise required. The file names of all of the attachments must be named strictly in accordance with the following rules:
 - The first portion of the filename must contain the section number and subsection of the question followed by a hyphen, then and the attachment number for that particular question with a leading zero for numbers under 10 (e.g. "B1-b-##").
 - The file name should then contain the descriptive name of the attachment, in at most 20 characters.
 - The name of the attachment must not contain the name of the applicant.
 - The final portion of the filename should be the extension, such as ".pdf" or ".xls".
 - The file name should correspond to the list of attachments on the Application Form.
 - If the Applicant believes the attachment to be confidential, in whole or in part (i.e.- exempt from disclosure under the Public Records Law), then the filename must have the word "CONFIDENTIAL" in all capital letters placed directly before the file extension. Failure to include this label may result in the public release of the document. (See section [C. Public Records](#)).

Although a PDF version of each attachment is required, in certain cases providing an alternative file format may be helpful to the Commission in reaching its decision. For example, where the applicant is required to submit tables of calculations, such as a revenue projection, it should be submitted in spreadsheet format so that the Commission may numerically analyze this information. The applicant may also, although not required, provide other documents such as videos, interactive documents, or physical models. These types of documents do not readily lend themselves to conversion into PDF format. For these documents, the applicant should provide both the document in original format, and a PDF file describing the existence of such a document within the applicant's application materials. The file name of the alternate format, if it is in fact a computer-readable file, and the filename of the PDF format of the attachment should be identical, excluding the file extension.

No electronically submitted document to the Commission may be password protected. The individual documents should not be encrypted separately.

Any attachments containing a table of calculations, such as a revenue projection, should be included in the electronic submission in a spreadsheet format, preferably Microsoft Excel ".xls" files.

Applicant: _____

The following is an example of select files of a properly organized application:

B2-a-01 Additional Sports Wagering Licensure Information.pdf

B2-a-02 Additional Sports Wagering Jurisdiction Information.pdf

C2-a-01 Revenue Projections CONFIDENTIAL.pdf

C2-b-01 Revenue Projections CONFIDENTIAL.xls

Application.pdf

Signed Application.pdf

DRAFT

Applicant: _____

Public Records

Pursuant to G.L. c. 23N, §6(i), “[a]pplications for operator licenses shall be public records” Applicants should be mindful of this prior to submission of an Application. However, the law also provides “that trade secrets, competitively-sensitive or other proprietary information provided in the course of an application for an operator license under [chapter 23N], the disclosure of which would place the applicant at a competitive disadvantage, may be withheld from disclosure under [the Massachusetts public records law].”

To help inform applicants of the Commission’s intentions, a guide has been attached at the end of the Application advising which answers and attachments submitted with this form will be considered to presumptively meet the exception to the public records law and withheld from public disclosure. There is also space for an applicant to request exempt treatment of a specific document identified in the Application. **FAILURE TO FOLLOW THE INSTRUCTIONS PROVIDED IN THE GUIDE MAY RESULT IN PUBLIC RELEASE OF THE DOCUMENTS.**

Please note, though the Commission will use its best efforts to protect any information it deems subject to an exemption, final appeals are adjudicated by the [Secretary of the Commonwealth](#) in accordance with G.L. c.66, §10.

Applicant: _____

Checklist

Complete this checklist prior to submitting any materials to the Commission.

- ☐ The applicant has answered all of the questions in this Application Form that it was required to respond to
- ☐ Any question requiring an attachment has the attachment noted on the Application Form
- ☐ The applicant properly named all the files
- ☐ The applicant has properly organized all of the attachments
- ☐ No files have been password protected
- ☐ The applicant has signed all required pages of this application
- ☐ The applicant has completed the Public Records section of this application
- ☐ The applicant has paid the \$200,000.00 non-refundable processing fee
- ☐ The applicant will update the Commission if there are any changes to the information presented in the Application or any of the attachments.

Applicant: _____

SECTION A: GENERAL INFORMATION**A.1 APPLICANT NAME**_____
Name**A.2 CATEGORY OF LICENSE APPLYING FOR (check one)**

- ☐ **Category 1** (In-Person Wagering at a Gaming Establishment)
☐ **Category 2** (In-Person Wagering at a Live Horse Racing or Simulcasting Facility)
☐ **Category 3** (Mobile Sports Wagering)

A.3 IF APPLYING FOR CATEGORY 3 (MOBILE SPORTS WAGERING) LICENSE, IS THIS APPLICATION TETHERED TO A CATEGORY 1 OR CATEGORY 2 APPLICATION (check one)

- ☐ **No** (*Independent Application*)
☐ **Yes, Tethered to Category 1 or Category 2 Applicant** (*applicant name*):

A.4 STATE IN WHICH THE BUSINESS ENTITY IS INCORPORATED, ORGANIZED, FORMED, OR REGISTERED_____
State**A.5 IDENTIFY THE APPLICANT'S TYPE OF BUSINESS (check one)**

- | | | |
|---|---|--|
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Partnership | <input type="checkbox"/> Other (<i>please describe</i>):
_____ |
| <input type="checkbox"/> C-Corporation | <input type="checkbox"/> Limited Partnership | |
| <input type="checkbox"/> S-Corporation | <input type="checkbox"/> Trust | |
| <input type="checkbox"/> Sole Proprietorship | | |

A.7 FEDERAL TAX ID NUMBER_____
Federal Tax ID Number**A.6 APPLICANT LOCATION INFORMATION**_____
Number and Street Address_____
City, State, & Zip Code_____
Phone Number_____
Email Address_____
Website

Applicant: _____

A.7 APPLICANT PRINCIPAL PLACE OF BUSINESS INFORMATION_____
Number and Street Address_____
City, State, & Zip Code_____
Phone Number_____
Email Address**A.7 PRIMARY CONTACT FOR THIS APPLICATION**_____
Name_____
Title_____
Email Address_____
Phone Number**SECTION B: SPORTS WAGERING EXPERIENCE & EXPERTISE****B.1 APPLICANT'S ABILITY TO OFFER SPORTS WAGERING IN THE COMMONWEALTH**

Provide a thorough description of the applicant's ability to offer sports wagering in the Commonwealth. This summary should include:

- a. Background in sports wagering
- b. Experience and licensure in other jurisdictions with sports wagering
- c. Plans to offer the platform in coordination with other applicants or person
- d. Any intention of limiting participation in any allowable sports events

B.2 SPORTS WAGERING EXPERIENCE - DESCRIPTION OF SPORTS WAGERING OPERATION
(Category 1 & 2 Applicants Only)

Provide a thorough description of the sports wagering operation proposed for the Commonwealth. This description should include:

- a. Description of the customer experience, including options, promotions, and offers
- b. Overview of wagering activity
- c. Estimated volume of wagering activity (*annually*)
- d. Estimated market share within each jurisdiction

B.3 SPORTS WAGERING EXPERIENCE - DESCRIPTION OF SPORTS WAGERING PLATFORM
(Category 3 Applicants Only)

Provide a thorough description of the sports wagering platform to be operated in the Commonwealth. This narrative should include:

- e. Description of the customer experience, including options, promotions, and offers
- f. Overview of wagering activity
- g. Estimated volume of wagering activity (*annually*)
- h. Jurisdictions where the platform is currently licensed and operating
- i. Current integration in use with other wagering operators
- j. The number of user accounts maintained
- k. Estimated market share within each jurisdiction

Applicant: _____

B.4 SPORTS WAGERING EXPERTISE – TECHNICAL FEATURES & OPERATION OF PLATFORM
(Category 3 Applicants Only)

Provide a thorough description of the applicant's expertise in sports wagering and how it would be applicable in the Commonwealth. This summary should include:

- a. Overview of technical standards, features, and operation of the platform
- b. List of all current certifications or approvals from certified independent test labs and jurisdictions
- c. Plan for continuous support, maintenance, and change management of the platform
- d. Outline the features of the platform designed to support the customers
- e. Sample wagering menu the Operator intends to offer, *pending approval from the Commission*
- f. Description of Operator's proposed ability to commence mobile sports wagering on the platform
- g. How the Operator intends to prevent wagering by prohibited persons, including underage persons, problem gamblers, employees, etc.
- h. Outline any technology to be used or features offered that the applicant believes sets their platform apart from those of (potential) other applicants

SECTION C: ECONOMIC IMPACT ON THE COMMONWEALTH

C.1 EMPLOYMENT OPPORTUNITIES WITHIN THE COMMONWEALTH

Provide a thorough description of the employment opportunities that will be offered if the applicant is approved for licensure by the Commission. Please include:

- a. The number of current full-time and part-time employees within the Commonwealth
- b. The number of current work locations within the Commonwealth
- c. The number of proposed full-time and part-time positions that will be created within the Commonwealth
- d. The title, job description, salary, and benefits information for each of the proposed positions
- e. The training that will be required and made available for all proposed positions
- f. The number of proposed work locations that will be created within the Commonwealth
- g. Description of plans for workforce development opportunities for Applicant's staff within the Commonwealth
- h. Outline the strategy for focusing on job opportunities and training in areas and demographics with high unemployment and/or underemployment

C.2 PROJECTED REVENUE

Provide studies and projections for gross sports wagering revenue for each of the first five years of wagering operations on a best, average, and worst, case basis. The studies and information provided should include:

- a. Projected figures for sports wagering revenue and methodology used to arrive at these projections
- b. Projected figures for any non-sports wagering revenue and methodology used to arrive at these projections
- c. Projected figures for all tax revenue to the Commonwealth and methodology used to arrive at these projections
- d. Profitability of sports wagering operation (in-person & mobile) in other jurisdictions where the applicant is licensed
- e. History of operating performance versus revenue projections for the last five years for other jurisdictions where the platform is licensed – *includes documentation outlining the applicant's record of success or failure in meeting the performance objectives*
- f. Description of methods to ensure that revenues are maximized within the Commonwealth
- g. Description of plans to compete with other nearby jurisdictions and to market to Massachusetts patrons

C.3 CONSTRUCTION – GAMING ESTABLISHMENTS (for Category 1 Applicants Only)

Provide a thorough description of the location of the proposed sports wagering operation. This should include:

- a. A detailed timeline of construction

Applicant: _____

- b. Proposed location within the gaming establishment, including plans for the construction of a new section within the gaming floor and/or any potential additions to the facility
- c. Approximate square footage of the sports wagering area
- d. Secure location for storing funds issued by a cage, to be used in the operation, including all security measures and procedures
- e. Proposed security and surveillance of the sports wagering area and operation
- f. Reasonable measures the applicant will take to ensure the safety and security of all employees and patrons of any sports wagering related events
- g. Accessibility of patrons to the proposed sports wagering area, including all means of entry and exit, including handicapped access, and the volume of traffic that can be sustained
- h. Number and location(s) of ticket window(s)
- i. Number and location(s) of wagering kiosk(s)
- j. Location and display format for all wagers, available to the public
- k. Location of posting of house rules
- l. *If applicable* – description regarding any proposal of providing food, beverages, and other concessions to patrons

C.4 CONSTRUCTION – LIVE HORSE RACING/SIMULCASTING FACILITY (Category 2 Applicants Only)

Provide a thorough description of the location of the proposed sports wagering operation. This should include:

- a. Location of proposed sports wagering operation (*address*)
- b. A detailed timeline of construction
- c. Proposed location of sports wagering area within the facility, including plans for the construction of a new section and/or any potential additions to the facility
- d. Approximate square footage of the sports wagering area
- e. Secure location for storing funds issued by a cage, to be used in the operation, including all security measures and procedures
- f. Proposed security and surveillance of the sports wagering area and operation
- g. Reasonable measures the applicant will take to ensure the safety and security of all employees and patrons of any sports wagering related events
- h. Accessibility of patrons to the proposed sports wagering area, including all means of entry and exit, including handicapped access, and the volume of traffic that can be sustained
- i. Number and location(s) of ticket window(s)
- j. Number and location(s) of wagering kiosk(s)
- k. Location and display format for all wagers, available to the public
- l. Location of posting of house rules
- m. *If applicable* – description regarding any proposal of providing food, beverages, and other concessions to patrons

Capital Investment

In accordance with G.L. c.23N, §3, Category 2 licensees shall make a capital investment of not less than \$7,500,000.00 within 3 years after receiving a sports wagering license, which the applicant must agree to expend.

Please provide a thorough description, including:

- n. How the applicant proposes to realize the required capital investment
- o. The financial commitments and guarantees the applicant is prepared to provide the Commission
- p. How the applicant will ensure that the project is completed, the license conditions are fulfilled, and sufficient working capital is available to allow operation in the promised fashion
- q. Any mitigation measures the applicant will take to reduce any impact on the local community

Applicant: _____

C.5 COMMUNITY ENGAGEMENT

Provide a thorough description of how the Applicant will contribute to economic & business development, tourism & community relations, and the promotion of charitable causes in the Commonwealth. Including:

- a. Creating partnerships for any community, economic development, and tourism opportunities with local or regional entities including but not limited to the Massachusetts Office of Business Development, Chambers of Commerce, Regional Tourism Councils, and the Massachusetts Marketing Partnership
- b. Promoting local businesses, including restaurants, hotels, and retail outlets
- c. Cross-marketing with live entertainment venues and/or attractions
- d. Supporting any community enhancements being incorporated at the local level
- e. Highlighting unique business and marketing strategies to draw new revenues from new customers

SECTION D: DIVERSITY, EQUITY, & INCLUSION**D.1 DIVERSITY, EQUITY, & INCLUSION – WORKFORCE**

Provide a thorough description of the applicant's willingness to foster racial, ethnic, and gender diversity, equity, and inclusion, within their workforce, both at the corporate level and the proposed entity within the Commonwealth. The information must include:

- a. Applicant's current diversity, equity, and inclusion team – *please include the name and title of those individuals currently identified as part of the diversity, equity, and inclusion staff/team, as well as a copy of their location on the applicant's organizational chart*
- b. Applicant's workforce diversity, equity, and inclusion policy
- c. Workforce demographics, demonstrating the applicant's current workforce diversity
- d. Efforts to be made to cultivate workforce diversity, equity, and inclusion by identifying, recruiting, and hiring minorities, women, persons with disabilities, and veterans
- e. Memberships and/or intentions for joining any local, regional, state, and/or national organizations committed to the development and promotion of diversity, equity, and inclusion initiatives

D.2 DIVERSITY, EQUITY, & INCLUSION - SUPPLIER SPEND

Provide a thorough description of the Applicant's overall and specific goals, applicable to the total dollar amount of contracts, for the utilization of:

- a. Minority-owned business enterprises
- b. Women-owned business enterprises
- c. Veteran-owned business enterprises

Please include how each of these enterprise groups will participate as:

- Contractors in the design and/or building of the sports wagering platform
- Vendors in the execution, maintenance, and/or support of the sports wagering platform
- Vendors in the provision of goods and services

D.3 DIVERSITY, EQUITY, & INCLUSION – CORPORATE INITIATIVES

Provide a thorough description of the Applicant's commitment to diversity, equity, and inclusion initiatives in the Commonwealth. This should include how the Applicant intends to:

- a. Create partnerships with local or regional entities, including but not limited to programs, non-profit organizations, agencies, and/or corporate partners, dedicated to establishing a more welcoming and inclusive experience for all patrons, users, and employees in the Commonwealth

Applicant: _____

SECTION E: RESPONSIBLE GAMING**E.1 RESPONSIBLE GAMING POLICIES**

Referencing the following documents:

- [MGC Responsible Gaming Framework](#)
- [Applying Principles of the Massachusetts Responsible Gaming Framework to Sports Wagering Policy & Practice](#)
- [GameSense Logic Model](#)
- [Responsible Gaming Considerations for Gambling Advertising](#)

Provide a proposed responsible gaming plan draft that, at a minimum, incorporates policies and tactics for the following key strategies:

- a. Commitment to corporate social responsibility
- b. Support positive play
- c. Promote public health and safety
- d. Ensure responsible advertising and marketing
- e. Manage high-risk financial transactions
- f. Engage the community
- g. Commitment to improvement and reporting

E.2 ADVERTISING & PROMOTIONAL PLANS

Provide a thorough description of the Applicant's ability to demonstrate the advertising, marketing, and promotional efforts to be made in the Commonwealth. Information should include:

- a. Estimated marketing budget in the Commonwealth
- b. Promotion and player loyalty programs
- c. Advertising plans – *must include information for any third-party marketing firm applicant plans to partner with for advertising in the Commonwealth*
- d. Appropriate marketing measures that reach the target audience, and not underage or vulnerable populations
- e. Player acquisition models – *specify minimum age to participate*
- f. Plans to incorporate responsible gaming and problem gambling information
- g. Strategies for converting those customers wagering via unlicensed or illegal means to wagering legally in the Commonwealth
- h. Examples of marketing, advertising, and promotional materials/activities recently used in other jurisdictions

E.3 HISTORY OF DEMONSTRATED COMMITMENT

Provide a thorough description of the policies and procedures that the applicant has adopted to:

- a. Promote responsible gaming within the gaming establishment or mobile application and in the community
- b. Assist patrons and users that are experiencing gambling-related harm
- c. Cooperate and support any government or regulatory agencies to promote responsible gaming and/or mitigate gambling-related harm
- d. List any membership or partnership with an agency or organization whose mission is in whole, or part, dedicated to responsible gaming or problem gambling
- e. List any fines, violations, citations, and/or corrective action required by the applicant in response to insufficient or improper policies, procedures, operations, advertising/marketing, and/or any other business-related to sports wagering or other gambling enterprises

Applicant: _____

SECTION F: TECHNOLOGY**F.1 GEOFENCING**

Provide a thorough description of how the applicant will ensure that authorized users, placing online sports wagers on their platform, are geographically located in the Commonwealth of Massachusetts. This information must include:

- a. Which geolocation system(s) will be utilized to reasonably detect the physical location of an authorized user attempting to place a wager on the platform
- b. How the system will:
 1. Accurately detect the physical location of an authorized user attempting to access or place a wager on the platform through accurate location data sources (Wi-Fi, GSM, GPS)
 2. Block or deny unauthorized attempts to access the platform, or place a wager, from outside of the Commonwealth
 3. Update the IP address and physical location if they change while the user is active on the platform
 4. Identify attempts to circumvent the requirement to be physically located in the Commonwealth
- c. How the applicant will log information received from the system
- d. How the applicant will report the information received from the system to the Commission

F.2 KNOW YOUR CUSTOMER

Provide a thorough description of how the Applicant will ensure the verification of information provided by users opening a new account on the platform.

1. Ensure the integrity of the user's account information
2. Ensure the integrity of a user's device if it indicates tampering or suspicious activity
3. Notify the applicant of potential risks or fraudulent activity

F.3 TECHNOLOGICAL EXPERTISE AND RELIABILITY

Provide a thorough description of how the Applicant will ensure the security, sustainability, and reliability of the following items:

- a. Wager acceptance
- b. Systems for monitoring structured wagers, real-time data feed, and any unusual or suspicious wagering activity
- c. Description, location, and periodic testing of servers
- d. Security of servers, applications, and communications networks
- e. Security of patron personal and wagering information
- f. Integrity monitoring and reporting, including any current affiliations related to integrity monitoring

SECTION G: SUITABILITY**G.1 SUITABILITY – CORPORATE INTEGRITY**

Applicants must also complete and submit the following documents, before any suitability investigations or background checks will commence:

- [Massachusetts Gaming Commission Business Entity Disclosure Form](#)
- a. Joint Venture Agreements for the implementation of a sports wagering operation:
 1. Other Applicants
 2. Businesses
 3. Contractors
 4. Vendors

Applicant: _____

G.2 SUITABILITY - INDIVIDUAL QUALIFIER INTEGRITY

Any Key Persons or Employees associated with an applicant must also complete and submit the following documents, before any suitability investigations or background checks will commence:

- [Massachusetts Gaming Commission Multi-Jurisdictional Personal History Disclosure Form](#)
- [Massachusetts Gaming Commission Supplemental Form](#)

G.3 FINANCIAL STABILITY & INTEGRITY

Please provide the following documents, for the last five (5) fiscal years and through the date of the application:

- a. Documentation demonstrating the financing structure and plan for the proposal, including all sources of capital. *Please include current capital commitments, as well as plan and timing for meeting future capital needs*
- b. A detailed budget of the proposal cost, including any construction, design, legal and professional, consulting, and all other developmental fees. *Also identify all other pre-launch costs, including training, marketing, and initial startup capital*
- c. An analysis, including best, worst, and average case scenarios, that demonstrates the applicant's plan and capacity for accommodating steep downturns in revenues, and provides examples of those plans and strategies that have been successful in other jurisdictions
- d. What are the Applicant's annual liquidity, leverage, and profitability ratios, including current ratio, debt-to-equity ratio, and gross/net margin ratios?
- e. Information pertaining to contracts, loan agreements, and/or commitments that the applicant has breached or defaulted on during the last ten years. *Provide information for any lawsuit, administrative proceeding, or another proceeding that occurred as a result of the breach or default*
- f. A description of any administrative or judicial proceeding, during the last ten years, in which the applicant or any entity that owns 5%, or greater share, was found to have violated a statute or regulation governing its operation
- g. Any bankruptcy filings made, or proceedings commenced, for any entities owned or controlled by the applicant and any entity owning a 5% or greater share of the applicant
- h. Any financing amounts or ownership interests that are anticipated to come from minorities, women, and/or disadvantaged businesses. *If the applicant, or any portion of the applicant, is a public company, it is not necessary to list shareholders*
- i. Examples and/or narratives that substantiate the applicant's understanding of and experience with Internal Controls.

Applicant: _____

SIGNATURE FORMS

DRAFT

Applicant: _____

VERIFICATION AND AUTHENTICATION

The applicant, _____, hereby authorizes the Commission, the Executive Director of the Commission, the Investigations and Enforcement Bureau, and/or their respective designees to take all necessary and reasonable steps to verify and authenticate any information or materials submitted in conjunction with this application and agrees to fully cooperate in such an inquiry. Further, the applicant is aware that if any of the responses to any question in this application are determined to be false, or if they are misleading, the application may be denied. The applicant acknowledges its continuing duty to provide updated information and/or promptly notify the Commission of any changes to the information or materials, of which it becomes aware or should be aware, that were provided in response to any question in this application.

Name of Authorized Individual

Signature of Authorized Individual

Position with Applicant

Date

DRAFT

Applicant: _____

ATTESTATION

I, _____, on behalf of _____ hereby swear or affirm under the pains and penalties of perjury that the information contained in this Application form and all materials accompanying said form are true and accurate to the best of my knowledge and understanding; that I have reviewed the information contained in the Application form for accuracy; that I read and understand the questions and responses on the Application form; that any document accompanying this Application that is not an original document is a true copy of the original document; that I have read and understood all applicable provisions of 205 CMR and G.L. c.23N; that the applicant agrees to all terms, conditions, and obligations made applicable to all applicants for a sports wagering operator license; that in the event that the applicant is awarded an operator license it agrees to all obligations, terms, and conditions imposed upon a successful applicant; and that I am authorized to submit this application on behalf of the applicant.

Name of Authorized Individual

Signature of Authorized Individual

Position with Applicant

Date

Applicant: _____

WAIVER OF LIABILITY

_____ hereby holds the Commonwealth of Massachusetts and its instrumentalities and agents, including but not limited to the Massachusetts Gaming Commission and its agents, representatives and employees harmless, both individually and collectively, from any and all claims of liability for damages of whatever kind, resulting at any time from any disclosure or publication of information acquired during the application process or the use of any information provided in furtherance of this application.

Name of Authorized Individual

Signature of Authorized Individual

Position with Applicant

Date

DRAFT



MEMORANDUM

TO: Chair Cathy Judd-Stein
Eileen O'Brien, Commissioner
Bradford Hill, Commissioner
Nakisha Skinner, Commissioner
Jordan Maynard, Commissioner

FROM: Loretta Lillios, IEB Director

RE: 10/6/2022 Public Meeting - Determination of Application Forms for Sports Wagering Operator Licenses

DATE: September 28, 2022

Issue:

Determination of Application Forms for Suitability for category 1, category 2, and category 3 operator licenses under G.L. c. 23N.

IEB Recommendation:

The IEB recommends that the Commission determine to utilize the following Application Forms for Suitability for applicants seeking category 1, category 2, and category 3 sports wagering operator licenses:

- Business Entity Disclosure (“BED”) Form for Gaming Licensee (for the Applicant company and each of its entity Qualifiers)
- Multi Jurisdictional Personal History Disclosure Form (“MJPHD”) (for each of the Applicant’s Individual Qualifiers)
- Massachusetts Supplemental Form (for each of the Applicant’s Individual Qualifiers)

Reasons for IEB Recommendation:

- The recommended forms align with the forms used for the applicants for gaming licenses and their qualifiers under G.L. c. 23K.
- The recommended forms are widely used in the gaming and sports wagering industry and provide investigators with a comprehensive set of relevant responses and documents for suitability review.
- The use of the recommended forms are expected to allow for efficiencies in the application submission process, the administrative completeness review process, and in the investigation process.

Action Requested: Commission VOTE to utilize the above-identified Application Forms for suitability for category 1, category 2, and category 3 operator licenses.

MASSACHUSETTS GAMING COMMISSION



BUSINESS ENTITY DISCLOSURE FORM

ENTITY:_____

BUSINESS ENTITY DISCLOSURE FORM**NAME OF ENTITY***

(DO NOT ABBREVIATE)

*Name as it appears on the certificate of incorporation, charter, by-laws or other official document.

D/B/A OR TRADE NAME(S)

PERSON TO BE CONTACTED IN REFERENCE TO THIS APPLICATION

Name

Title

E-Mail Address

Telephone: (Area code) Number

FAX Number

THE PRINCIPAL BUSINESS ADDRESS OF THE ENTITY

Street Location (Number/Street)

City

State

Zip

Country

Telephone: (Area Code) Number

FAX Number

Mailing address (if different)

City

State

Zip

Web Site (URL)

Check the appropriate box:

<input type="checkbox"/>	This form is being submitted as an initial application for a gaming license.
<input type="checkbox"/>	This form is being submitted as an application for the renewal of a gaming license. The current gaming facility license expires on: _____
<input type="checkbox"/>	The above named entity holds stock in _____, which is an applicant for an initial gaming license or renewal.
<input type="checkbox"/>	Other. Explain: _____

ITEM 1. FORMATION

A. Provide the date and place of formation.

Date: _____

Place of formation: _____

B. Persons Forming the Entity

Use Attachment 1B to provide the following information for each incorporator of the corporation:

NAME	LAST KNOWN ADDRESS	OCCUPATION(S)	DATE OF BIRTH
------	--------------------	---------------	---------------

ITEM 2. OTHER NAMES AND ADDRESSES OF THE ENTITY

- A. List all other names under which the entity has done business and give the approximate time periods during which these names were being used.

- B. Use Attachment 2B to provide the following information about all other addresses presently used by the entity and all addresses from which the entity is presently doing business.

NUMBER AND STREET	CITY	STATE	ZIP
-------------------	------	-------	-----

- C. Use Attachment 2C to provide the following information on all addresses, other than those listed in Item 2B, which the entity held or from which it was conducting business during the last ten year period, and give the approximate time periods during which such addresses were held.

NUMBER AND STREET	CITY	STATE	ZIP	DATES	
				FROM	TO:

ITEM 3. DESCRIPTION OF PRESENT BUSINESS

Provide as Attachment 3 a description of the business done and intended to be done by the entity and its parent, holding, subsidiary and intermediary entities and the general development of such business during the past five years, or such shorter period as the entity or its parent, subsidiary and intermediary entities may have been engaged in business. The description shall include information on matters such as the following:

- A. Competitive conditions in the industry or industries involved and the competitive position of the entity, if known.
- B. The principal products produced and services rendered by the entity and its parent, intermediary and subsidiary entities, the principal markets for said products or services and the methods of distribution.
- C. The sources and availability of raw materials essential to the business of the entity.
- D. The importance to the business and the duration and effect of, all material patents, trademarks, licenses, franchises and concessions held.
- E. In describing developments, provide information such as the following: the nature and results of any bankruptcy, receivership or similar proceedings with respect to the entity or its parent, intermediary or subsidiary entities; the nature and results of any other material reorganization, readjustment or succession of the entity or any of its subsidiaries; the acquisition or disposition of any material amount of assets otherwise than in the ordinary course of business; and any material changes in the mode of conducting the business.

ITEM 4. DESCRIPTION OF FORMER BUSINESS

Provide as Attachment 4 a description of any former business, not listed in response to Item 3, which the entity or any parent, intermediary or subsidiary company engaged in during the last ten year period and the reasons for the cessation of such business. Also indicate the approximate time period during which each such business was conducted.

ITEM 5. DIRECTORS AND TRUSTEES

Use Attachment 5 to provide the following information for each director and trustee of the corporation. (NOTE: Each director and trustee of the entity must complete a PHD-MA and PHD-MA-SUPP.)

NAME AND HOME ADDRESS	BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		OCCUPATION OR TITLE, POSITION OR ASSOCIATION WITH THE CORPORATION	DATE OF BIRTH
		FROM:	TO:		

ITEM 6. FORMER DIRECTORS AND TRUSTEES

Use Attachment 6 to provide the following information for each person, not listed in response to item 5, who held the position of director or trustee of the entity during the last ten years:

NAME AND HOME ADDRESS	OCCUPATION & BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		DATE OF BIRTH	REASON FOR LEAVING
		FROM:	TO:		

ITEM 7. OFFICERS

Use Attachment 7 to provide the following information for each officer of the entity. Officers include all persons serving as president, secretary, treasurer, chairman of the board, vice-president, general/corporate counsel or any such other officers as may be prescribed by the entity's governing documents. (NOTE: A PHD-MA and PHD-MA-SUPP must be completed by every person noted below. In addition, the Commission may, in its discretion, order additional persons associated with the entity to file such a form if it appears that such persons should be qualified in order to effectuate the purposes of Chapter 23K.)

NAME AND HOME ADDRESS	TITLE	DATES OFFICE HELD		BUSINESS ADDRESS	DATE OF BIRTH
		FROM:	TO:		

ITEM 8. FORMER OFFICERS

Use Attachment 8 to provide the following information for each person, not listed in response to item 7, who was an officer of the entity during the last ten year period. Officers include all persons serving as president, secretary, treasurer, chairman of the board, vice-president or any such other offices as may be prescribed by the entity's governing documents.

NAME AND LAST KNOWN HOME ADDRESS	OFFICE HELD	DATES OFFICE HELD		PRESENT OCCUPATION & BUSINESS ADDRESS	DATE OF BIRTH
		FROM:	TO:		

ITEM 9. COMPENSATION OF OFFICERS AND DIRECTORS

Use Attachment 9 to provide the following information regarding the amount of total annual compensation received during the last calendar year and the amount to be received during the subsequent calendar year by each director, trustee and officer of the entity, whether such compensation is in the form of salary, wages, commissions, fees, stock options, bonuses or otherwise.

NAME	COMPENSATION LAST CALENDAR YEAR	COMPENSATION SUBSEQUENT CALENDAR YEAR	FORM OF COMPENSATION
------	------------------------------------	---	----------------------

ITEM 10. COMPENSATION OVER \$250,000

Use Attachment 10 to provide the following information for each person, other than those listed in response to Item 9, who currently receives, or who reasonably can be expected to receive within one calendar year from the date of this form, compensation as described in Item 9 that exceeds \$250,000 per year.

NAME	DATE OF BIRTH	BUSINESS ADDRESS	POSITION AND LENGTH OF TIME EMPLOYED WITH THE ENTITY	AMOUNT OF COMPENSATION
------	---------------	------------------	---	---------------------------

ITEM 11. BONUS, PROFIT SHARING, PENSION, RETIREMENT, DEFERRED COMPENSATION & SIMILAR PLANS

Provide as Attachment 11 a description of all bonus, profit sharing, pension, retirement, deferred compensation and similar plans in existence or to be created by the entity. This description shall include, but not be limited to:

1. the title or name of the plan;
2. the identity and address of the trustee of the plan or the person administering such plan;
3. the material features of the plan;
4. the methods of financing the plan;
5. the identity of each class of person who is or will participate in the plan;
6. the approximate number of persons in each such class;
7. the amounts distributed under the plan to each class of persons during the last fiscal year if the plan was in effect during that time.

ITEM 12. STOCK/OWNERSHIP DESCRIPTION

Describe the nature, type, number of authorized and issued shares, terms, conditions, rights and privileges of all classes of voting, non-voting and other stock issued, or to be issued, or other similar indicia of ownership by the entity including the number of shares of each class of stock authorized or to be authorized and the number of shares of each class of stock outstanding (i.e., not held by or on behalf of the issuer) or other similar information applicable to other indicia of ownership as of this date.

If the rights of holders of any class of stock or other indicia of ownership may be modified otherwise than by a vote of a majority or more of the outstanding shares so affected, voting as a class, so state and explain briefly.

ITEM 13. VOTING OWNERS

Use Attachment 13 to provide the following information for each person or entity holding of record or having a beneficial interest in any voting stock or other indicia of ownership issued by the entity. This information must be provided as of a date no more than 60 days prior to the date of this application. (NOTE: If the entity submitting this form is an applicant for a gaming license, or is a non-public holding or intermediary entity of such an applicant, then a completed PHD-MA and PHD-MA-SUPP or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the voting ownership of the entity unless the Commission has granted a waiver of the qualification requirements as to such person or entity. If the entity submitting this form is a publicly traded holding company of an applicant for a gaming license, then a completed PHD-MA and PHD-MA-SUPP or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the voting ownership of the entity unless the Commission has granted a waiver of the qualification requirement as to such persons or entity.)

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF OWNERSHIP HELD	NUMBER OF SHARES HELD	% OF OUTSTANDING VOTING RIGHTS HELD
-----------------------	---------------	----------------------------	--------------------------	--

ITEM 14. NON-VOTING OWNERS

Use Attachment 14 to provide the following information for each person or entity holding of record or having a beneficial interest in any non-voting indicia of ownership issued by the entity. This information must be provided as of a date no more than sixty (60) days prior to the date of this application. (NOTE: If the entity submitting this form is an applicant for a gaming license, or is a non-public holding or intermediary entity of such an applicant, then a completed PHD-MA and PHD-MA-SUPP or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the non-voting ownership of the entity unless the Commission has granted a waiver of the qualification requirements as to such person or entity. If the entity submitting this form is a publicly traded holding company of an applicant for a gaming license, then a completed PHD-MA and PHD-MA-SUPP or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the non-voting ownership of the entity unless the Commission has granted a waiver of the qualification requirement as to such persons or entity.)

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF NON-VOTING OWNERSHIP INTERESTS HELD	NUMBER OF OWNERSHIP INTERESTS HELD	% OF OUTSTANDING NON-VOTING RIGHTS HELD
-----------------------	---------------	--	------------------------------------	---

ITEM 15. DESCRIPTION OF LONG TERM DEBT

Provide as Attachment 15 a description of the nature, type, terms, covenants, conditions and priorities of all outstanding bonds, loans, mortgages, trust deeds, notes, debentures or other forms of indebtedness issued or executed (including loans made by owners), or to be issued or executed, by the entity, which mature more than one year from the date of issuance or which, by their terms, are renewable for a period of more than one year from the date of issuance (OR, in the space below provide a specific cross-reference to the applicable document(s) filed with this application that contain(s) all of the requested information.)

ITEM 16. HOLDERS OF LONG TERM DEBT

Use Attachment 16 to provide the following information for each person or entity holding any outstanding bonds, loans, mortgages, trust deeds, notes, debentures or other forms of indebtedness executed or issued by the entity, which mature more than one year from the date of issuance or which, by their terms, are renewable for a period of more than one year from the date of issuance. (NOTE: Some or all of the persons or entities listed below may be required by either the Commission or Investigations and Enforcement Bureau to submit a completed PHD-MA or PHD-MA-SUPP or Business Entity Disclosure Form, as the case may be.)

NAME AND ADDRESS	DATE OF BIRTH	TYPE AND CLASS OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)
------------------	---------------	--	--

ITEM 17. OTHER INDEBTEDNESS AND SECURITY DEVICES

Provide as Attachment 17 a description of the nature, type, terms, conditions and covenants of all outstanding loans, mortgages, trust deeds, pledges, lines of credit, or other evidence of indebtedness or security devices utilized by the entity other than those described in response to Items 15 and 16 (OR, in the space below provide a specific cross-reference to the

applicable document(s) filed with this application that contain(s) all of the requested information.)

ITEM 18. HOLDERS OF OTHER INDEBTEDNESS

Use Attachment 18 to provide the following information with respect to each holder of any outstanding loan, mortgage, trust deed, pledge or other evidence of indebtedness or security device described in response to Item 17. (NOTE: Some or all of the persons listed in response to this item may be required by the Commission or Investigations and Enforcement Bureau to submit a completed PHD-MA and PHD-MA-SUPP or Business Entity Disclosure Form, as the case may be.)

NAME AND ADDRESS	DATE OF BIRTH	TYPE OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)
------------------	---------------	------------------------------	--

ITEM 19. SECURITIES OPTIONS

- A. Provide as Attachment 19A a detailed description of any options existing or to be created with respect to securities issued by the entity which description shall include, but not be limited to the title and amount of securities subject to option, the year or years during which the options were or will be granted, the conditions under which the options were or will be granted, the consideration for granting the option and the year or years during which, and the terms under which, optionees became or will become, entitled to exercise the options, and when such options expire (OR include as Attachment 19A copies of any outstanding option plans or proxy statements that provide the requested information.) (NOTE: For the purpose of this application, option shall mean right, warrant or option to subscribe to or purchase any securities or other form of ownership issued by the entity.)
- B. Use Attachment 19B to provide the following information regarding all persons holding the options described in Item 19A.

NAME	BENEFICIAL OWNER'S ADDRESS	OPTIONS HELD	MARKET VALUE AT ISSUANCE
------	----------------------------	--------------	-----------------------------

ITEM 20. FINANCIAL INSTITUTIONS

Use Attachment 20 to provide the following information with respect to each bank, savings and loan association or other financial institution, whether domestic or foreign, in which the entity has or has had an account over the last ten year period regardless of whether such account was held in the name of the entity, a nominee of the entity or was otherwise under the direct or indirect control of the entity.

NAME AND ADDRESS	TYPE OF ACCOUNT(S)	ACCOUNT NUMBER(S)	TIME PERIOD ACCOUNT HELD	
			FROM:	TO:

ITEM 21. CONTRACTS AND SUPPLIERS

Use Attachment 21 to provide the following information with respect to all persons with whom the entity has contracts or agreements of \$250,000 or more in value or from whom the entity has received \$250,000 or more in goods or services in the past six months.

Employment contracts need only be listed if, by their terms, they exceed one year in duration.

ITEM 22. OTHER OWNERSHIP INTERESTS HELD BY THE ENTITY

Use Attachment 22 to provide the following information about each entity in which the entity holds stock:

NAME AND ADDRESS OF ENTITY	TYPE OF OWNERSHIP HELD	PURCHASE PRICE PER INTEREST	NUMBER OF OWNERSHIP INTERESTS HELD	% OF OWNERSHIP IF MORE THAN 5%
----------------------------	------------------------	-----------------------------	------------------------------------	--------------------------------

ITEM 23. INSIDER TRANSACTIONS

Use Attachment 23 to provide the following information for each change that occurred within the last five (5) years preceding this application in the beneficial ownership of the equity of the entity on the part of any person who is indirectly or directly a beneficial owner of more than ten per cent (10%) of any class of interest in the entity or who is or was within that

period a director or officer of the entity. [Include changes resulting from (a) gift, (b) purchase, (c) sale, (d) exercise of an option to purchase, (e) exercise of an option to sell, (f) grant or receipt of a put or (g) grant or receipt of a call.]

DATE OF TRANSACTION	NATURE OF TRANSACTION	PARTIES TO TRANSACTION (INCLUDE POSITIONS)	NUMBER OF OWNERSHIP INTERESTS INVOLVED
---------------------	-----------------------	---	--

ITEM 24. CRIMINAL HISTORY

The next question asks about any charges or offenses the entity or any of its directors, trustees or officers may have committed or had filed against them. Prior to answering this question, carefully review the definitions and instructions that follow.

DEFINITIONS: For purposes of this question:

- A. "Charge" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- B. "Offense" includes all felonies, crimes, high misdemeanors, disorderly persons offenses, and petty disorderly offenses.

INSTRUCTIONS: 1. Answer "yes" and provide all information to the best of your ability EVEN IF:

- A. The entity, its directors, trustees, or officers did not commit the offense charged;
- B. The charges were dismissed;
- C. The entity, its directors, trustees, or officers were not convicted; or
- D. The charges or offenses happened a long time ago.

2. Answer "no" IF:

- A. The records relating to the charges have been expunged or sealed by court order; **AND**
- B. Attached to this application is a copy of the expungement or sealing order labeled as Attachment 24.

Has the entity or any of its subsidiaries, directors, trustees or officers ever been indicted, charged with or convicted of a criminal or disorderly persons offense or been a party to or named as an unindicted co-conspirator in any criminal proceeding in this commonwealth or any other jurisdiction?

_____ Yes _____ No

If yes, use Attachment 24A to provide the following information for each indictment, charge or conviction:

NAME OF CASE AND DOCKET NUMBER	NATURE OF CHARGE OR COMPLAINT	DATE OF CHARGE OR COMPLAINT	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITION (ACQUITTED, CONVICTED, DISMISSED, ETC.)	SENTENCE
-----------------------------------	----------------------------------	-----------------------------------	--	---	----------

ITEM 25. TESTIMONY, INVESTIGATIONS OR POLYGRAPHS

Has the entity, any of its subsidiaries, directors, trustees or officers 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 minor traffic related offenses?

_____ Yes _____ No

If yes, use Attachment 25 to provide the following information about any such testimony, investigation or polygraph exam:

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS OR INVESTIGATION	WAS TESTIMONY GIVEN?	DATE ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION
--	---	-------------------------	--------------------------------------	--

ITEM 26. TESTIMONY, INVESTIGATIONS OR POLYGRAPH REFUSALS

Has the entity, or any of its subsidiaries, directors, trustees or officers ever refused to testify before, to answer a question asked by, or to take a polygraph exam administered by any governmental agency, court, committee, grand jury or investigatory body (municipal, state, county, provincial, federal, national, etc.)?

_____ Yes _____ No

If yes, use Attachment 26 to provide the following information about any such testimony, investigation or polygraph refusal:

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS/ INVESTIGATION	DATE OF PROCEEDINGS/ INVESTIGATION	CIVIL OR CRIMINAL CONTEMPT CITATION? (SPECIFY)	DISPOSITION OF CONTEMPT CITATION
---	--------------------------------------	------------------------------------	--	----------------------------------

ITEM 27. EXISTING LITIGATION

Provide as Attachment 27 a description of all existing civil litigation to which the entity, its parent or any subsidiary is presently a party whether in this commonwealth or in another jurisdiction. Do not include any litigation in which the damages may not reasonably be expected to exceed \$100,000, or litigation in which damages may be expected to exceed \$100,000, but which involve claims against the entity which are fully and completely covered under an insurance policy held by the entity with a licensed insurance carrier. This description must include the title and docket number of the litigation, the name and location of the court before which it is pending, the identity of all parties to the litigation and the general nature of all claims being made.

ITEM 28. ANTITRUST, TRADE REGULATION & SECURITIES JUDGMENTS; STATUTORY AND REGULATORY VIOLATIONS

- A. Has the entity 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
- B. In the past ten years, has the entity had a judgment, order, consent decree or consent order pertaining to any state or federal statute, regulation or code that resulted in a fine or penalty of \$50,000 or more entered against it?
- _____ Yes _____ No

If yes to either question, use Attachment 28 to 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
-----------------	-------------------	---------------------------------	-------------------------------------	-------------------------------------	--------------

ITEM 29. BANKRUPTCY OR INSOLVENCY PROCEEDINGS & APPOINTED RECEIVER, AGENT OR TRUSTEE

- A. Has the entity, its parent or any intermediary entities had any petition under any provision of the Federal Bankruptcy Code or under any state insolvency law filed by or against it in the last ten year period?
 _____ Yes _____ No
- B. Has the entity, its parent or any intermediary company sought relief under any provision of the Federal Bankruptcy Code or under any state insolvency law in the last ten year period?
 _____ Yes _____ No

If yes to either question, use Attachment 29A to provide the following information for each bankruptcy or insolvency proceeding:

DATE PETITION FILED OR RELIEF	TITLE OF CASE AND DOCKET NUMBER	NAME AND ADDRESS OF COURT OR AGENCY	NATURE OF JUDGMENT OR RELIEF	DATE ENTERED
-------------------------------	---------------------------------	-------------------------------------	------------------------------	--------------

ITEM 29. BANKRUPTCY OR INSOLVENCY PROCEEDINGS & APPOINTED RECEIVER, AGENT OR TRUSTEE**(Cont.)**

- C. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last ten year period by a court for the business or property of the entity or its parent, holding, intermediary or subsidiary entities?

_____ Yes _____ No

If yes to any of the above questions, use Attachment 29C to provide the following information for each proceeding:

NAME OF PERSON APPOINTED	DATE APPOINTED	COURT	REASON FOR APPOINTMENT
--------------------------	----------------	-------	------------------------

ITEM 30. LICENSES

- A. During the last ten year period, has the entity, its parent or any subsidiary ever had any license or certificate issued by a government agency in this commonwealth or any other jurisdiction, denied, suspended or revoked?

_____ Yes _____ No

If yes, use Attachment 30A to provide the following information for each license or certificate denied, suspended or revoked:

TYPE OF LICENSE OR CERTIFICATE	NAME AND LOCATION OF GOVERNMENTAL AGENCY	ACTION TAKEN	DATE	REASON FOR ACTION TAKEN
--------------------------------	--	--------------	------	-------------------------

- B. Has the entity, its parent or any subsidiary ever applied in any jurisdiction for a license, permit or other authorization to participate in lawful gambling operations (including casino gaming, horse racing, dog racing, parimutuel operation, lottery, sports betting, etc.)?

_____ Yes _____ No

If yes, use Attachment 30B to provide the following information about each license, permit or other authorization applied for:

NAME AND ADDRESS OF LICENSING AGENCY	DATE OF APPLICATION	DISPOSITION (GRANTED, DENIED, PENDING)	TYPE OF GAMBLING ACTIVITY	IF ISSUED, GIVE APPROPRIATE LICENSE, PERMIT OR OTHER SUCH NUMBER AND THE EXPIRATION DATE
---	------------------------	--	------------------------------	---

ITEM 31. CONTRIBUTIONS AND DISBURSEMENTS OF ENTITY

- A. During the last ten year period, has the entity, its parent or any subsidiary, director, officer, or employee or any third party acting for or on behalf of the entity made any bribes or kickbacks or made any payments alleged to have been bribes or kickbacks to any employee, company or organization to obtain favorable treatment?
 _____ Yes _____ No
- B. During the last ten year period, has the entity, its parent or any subsidiary, director, officer or employee or any third party acting for or on behalf of the entity made any bribes or kickbacks or made any payments alleged to have been bribes or kickbacks to any government official, domestic or foreign, to obtain favorable treatment?
 _____ Yes _____ No
- C. During the last ten year period, has the entity, its parent company, any subsidiary or related entity or individual donated or loaned funds for the purpose of opposing or supporting any government, political party, candidate or committee, either domestic or foreign?
 _____ Yes _____ No
- D. During the last ten year period, has the entity, its parent company, any subsidiary or related entity or individual donated or loaned property or any other thing of value for the purpose of opposing or supporting any government, political party, candidate or committee, either domestic or foreign?
 _____ Yes _____ No
- E. During the last ten year period, did the entity, its parent or any subsidiary, make any loans, donations or other disbursements to directors, officers or employees for the purpose of reimbursing such individuals for political contributions, either foreign or domestic?
 _____ Yes _____ No

F. During the last ten year period, has the entity, its parent or any subsidiary maintained any bank account, domestic or foreign, not reflected on the entity's books or records?

_____ Yes _____ No

G. During the last ten year period, has the entity, its parent or any subsidiary maintained any numbered account or any account in the name of a nominee for the entity?

_____ Yes _____ No

H. List the names and addresses of any present or former directors, officers, employees or third parties who would have knowledge or information concerning the questions affirmatively answered under this item.

ITEM 32. FINANCIAL STATEMENTS

- A. Provide as Attachment 32A an audited financial statement which shall include but not be limited to an income statement, balance sheet, statement of sources and application of funds and all notes to such statements and related financial schedules, for the last fiscal year prepared in accordance with Regulation S-X under the Securities Act of 1933, the Securities Exchange Act of 1934, the Public Utility Holding Company Act of 1935, and the Investment Company Act of 1940.
- B. Provide as Attachment 32B copies of all financial statements prepared in the last five years with respect to the entity and any exceptions taken to such statements by the independent auditor retained by the entity, and the management response thereto.

ITEM 33. ANNUAL REPORTS

- A. Provide as Attachment 33A a copy of all annual reports of the entity that were submitted to shareholders or other persons during the last five years.
- B. In addition to the information required in Item 33A, an entity that is a registrant under the Securities Act of 1933 or the Securities Exchange Act of 1934 is to submit a copy of all annual reports prepared on Form 10K pursuant to Sections 13 or 15(d) of the Securities Exchange Act of 1934 and filed within the last five years. Identify these as Attachment 33B.

ITEM 34. QUARTERLY REPORTS

Provide as Attachment 34 a copy of the last quarterly unaudited financial statements prepared by or for the entity. If the entity is a registrant with the Securities Exchange Commission (SEC), a copy of the Form 10Q last filed with the SEC may be provided in response to this item.

ITEM 35. INTERIM REPORTS

Provide as Attachment 35 a copy of any current report prepared due to the occurrence of any of the following events: change in control of the entity, acquisition or disposition of assets, bankruptcy or receivership proceedings, changes in the entity's certifying accountant or other material events. If the entity is a registrant with the SEC, a copy of the most recent Form 8K filed with the SEC may be provided in response to this item.

ITEM 36. PROXY AND INFORMATION STATEMENT

Provide as Attachment 36 a copy of the last definitive Proxy or Information Statement filed pursuant to Section 14 of the Securities Exchange Act of 1934.

ITEM 37. REGISTRATION STATEMENT

Provide as Attachment 37 a copy of all Registration Statements filed in the last five years pursuant to the Securities Act of 1933.

ITEM 38. REPORTS OF ACCOUNTANTS

Provide as Attachment 38 a copy of all reports and correspondence, other than those previously included in this application, submitted in the last five years by independent auditors for the entity which pertain to the issuance of financial statements, managerial advisory services, or internal control recommendations. Include the name, address and telephone number of the current outside auditor(s).

ITEM 39. ARTICLES OF INCORPORATION, CHARTER, BY-LAWS

Provide as Attachment 39 a certified copy of the Articles of Incorporation, Charter and By-Laws of the entity, or, if entity is in other than corporate form, all governing documents, with all amendments and proposed amendments to date.

ITEM 40. ORGANIZATIONAL CHART

- A. Provide as Attachment 40A a current ownership organizational chart of the entity, its parent entity and each subsidiary of the entity.
- B. Provide as Attachment 40B a functional table of organization for the entity filing this Business Entity Disclosure Form including position descriptions and the names of persons holding such positions.

ITEM 41. TAX RETURNS

Provide as Attachment 41 a copy of all federal IRS tax returns filed by the entity within the past 5 years, including, but not limited to, all 1120 Forms (U.S. Corporate Income Tax Return) and 941 Forms (Employer's Quarterly Federal Tax Return).

ITEM 42 BUSINESS ENTITY DISCLOSURE FORM – ATTACHMENTS

On the following chart indicate with a checkmark which attachments are included with this application. If an attachment is not applicable, indicate N/A. Please note that attachment numbers with an asterisk (*) are attachments you are to provide or create and do not contain corresponding charts.

ATTACHMENT NUMBER	ATTACHMENT DESCRIPTION	√ IF ATTACHED N/A IF NOT APPLICABLE
1B	Persons Forming the Entity	
2B	Other names and addresses of the entity (Presently used)	
2C	Other names and addresses of the entity (Past 10 years)	
3*	Description of business done and intended to be done	
4*	Description of any former business engaged in during the last 10 years and the reason for cessation of the business	
5	Directors and trustees	
6	Former directors and trustees	
7	Officers	
8	Former officers	
9	Compensation of officers and directors	
10	Compensation over \$250,000	
11*	Description of all bonus, profit sharing, pension, retirement, deferred compensation and similar plans	
13	Voting owners	
14	Non-voting owners	
15*	Description of long term debt	
16	Holders of long term debt	
17*	Other indebtedness and security devices	
18	Holders of other indebtedness	
19A*	Securities options - description	
19B	Persons holding securities options	
20	Financial institutions	
21	Contracts and suppliers	
22	Other ownership interests held by the entity	
23	Insider transactions	

ITEM 42 BUSINESS ENTITY DISCLOSURE FORM – ATTACHMENTS (Cont.)

ATTACHMENT NUMBER	ATTACHMENT DESCRIPTION	√ IF ATTACHED N/A IF NOT APPLICABLE
24*	Expungement or sealing orders	
24A	Criminal history	
25	Testimony, investigations or polygraphs	
26	Testimony, investigations or polygraph refusals	
27*	Existing Litigation	
28	Antitrust, trade regulations and securities judgments; statutory and regulatory violations	
29A	Bankruptcy or insolvency proceedings & appointed receiver, agent or trustee (Bankruptcy or insolvency)	
29C	Bankruptcy or insolvency proceedings & appointed receiver, agent or trustee (Appointed receiver, agent or trustee)	
30A	Licenses (Government)	
30B	Licenses (Other gaming)	
32A*	Audited financial statement for the last fiscal year	
32B*	Financial statements for the last five years	
33A*	Annual reports for the last five years	
33B*	Annual reports prepared on the SEC's form 10K for the last five years	
34*	A copy of the last quarterly unaudited financial statement	
35*	Copy(ies) of any interim reports	
36*	A copy of the last definitive Proxy or information statement (SEC)	
37*	A copy of all registration statements for the last five years filed in accordance with the Securities Act of 1933	
38*	Copies of all other reports prepared in the last five years by independent auditors of the entity	
39*	Certified copies of the Articles of Incorporation, Charter and By-laws, and all amendments and proposed amendments	
40A*	Current ownership table of organization	
40B*	Functional table of organization for entity filing this form, job descriptions and names of employees	
41*	Copies of 1120 forms and 941 forms filed with the IRS in the last five years	

ITEM 43. AFFIDAVITS AND SIGNATURES

Pursuant to the regulations of the Commission, 205 C.M.R. 111.02(2), this form must be sworn to or affirmed, signed and dated before a person legally competent to take an oath or affirmation who shall himself or herself date the signature of the affiant and indicate the basis of his or her authority to take oaths and affirmations.

The documents on pages 22 through 25 are to be signed in accordance with these regulations. The documents are:

AFFIDAVIT

RELEASE AUTHORIZATION

CONSENT TO INSPECTIONS, SEARCHES AND
SEIZURES

WAIVER OF LIABILITY

The President or any officer of the entity authorized to affirm may complete the affidavit. The remaining documents are to be signed by the President or any officer of the entity authorized to affirm and sign the documents.

AFFIDAVIT

STATE OF _____:

SS:

COUNTY OF _____:

I, _____, the _____ of
(Name) (TITLE/POSITION)
 the entity identified below, being duly sworn according to law, on my oath, depose and say
 that I make this statement on behalf of the entity, and that the above statements are true
 and correct to the best of my knowledge and belief, and that this statement is executed
 with the knowledge that any misrepresentation or failure to reveal information may be
 deemed sufficient cause for the refusal to issue, or the revocation of, a license. Further,
 that I am voluntarily submitting this statement and understand that misleading statements
 may subject me to criminal or other sanctions or punishment.

 NAME OF ENTITY

By _____
 Signature

 Title

 Date

 Accountant Preparing Form, if any

 Date

 Attorney Preparing Form, if any

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 who signed the preceding or attached document in my presence, and who swore or
 affirmed to me that the contents of the document are truthful and accurate to the best of (his)(her)
 knowledge and belief.

 Notary Public

My Commission Expires: _____

RELEASE AUTHORIZATION

To All Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, and all Governmental Agencies – federal, state and local, without exception, both foreign and domestic.

On behalf of _____,
(NAME OF ENTITY)

I, _____ have
(NAME OF PRESIDENT OR OFFICER)

authorized the Massachusetts Gaming Commission, its Investigations and Enforcement Bureau and its agents and representatives to conduct a full investigation into the background of said entity.

Therefore, you are hereby authorized to release any and all information pertaining to the said entity, documentary or otherwise, as requested by any employee, agent or representative of the Massachusetts Gaming Commission and its Investigations and Enforcement Bureau provided that he or she certifies to you that said entity has an application pending before the Massachusetts Gaming Commission or that said entity is presently a licensee or registrant required to be qualified under the provisions of Chapter 23K of the laws of the Commonwealth of Massachusetts.

This authorization shall supersede and countermand any prior request or authorization to the contrary.

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

_____ DATE	_____ SIGNATURE
---------------	--------------------

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.

Notary Public
My Commission Expires: _____

CONSENT TO INSPECTIONS, SEARCHES AND SEIZURES

On behalf of _____,
(NAME OF ENTITY)
 I, _____, hereby consent to all inspections, searches and
(NAME OF PRESIDENT OR OFFICER)
 seizures and the supplying of handwriting exemplars as authorized by Chapter 23K of the laws of the Commonwealth of Massachusetts and by the rules and regulations of the Massachusetts Gaming Commission.

The said entity is aware of its right secured by the Constitution of the United States and by the Constitution of the Commonwealth of Massachusetts not to consent to such inspections, searches and seizures and I expressly waive and forego that right on behalf of said entity.

 DATE

 SIGNATURE

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.

 Notary Public
 My Commission Expires: _____

WAIVER OF LIABILITY

On behalf of _____,
(NAME OF ENTITY)

I, _____,
(NAME OF PRESIDENT OR OFFICER)

hereby waive liability as to the Commonwealth of Massachusetts and its instrumentalities and agents, for any damages resulting to the said entity from any disclosure or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during the licensing process or during any inquiries, investigations or hearings.

 DATE

 SIGNATURE

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.

 Notary Public
 My Commission Expires: _____

ATTACHMENT 1B PERSONS FORMING THE ENTITY

NAME	LAST KNOWN ADDRESS	OCCUPATION(S)	DATE OF BIRTH

ATTACHMENT 2B OTHER NAMES AND ADDRESSES OF THE ENTITY (Presently Used)

NUMBER AND STREET	CITY	STATE	ZIP

ATTACHMENT 2C OTHER NAMES AND ADDRESSES OF THE ENTITY (Past 10 years)

NUMBER AND STREET	CITY	STATE	ZIP	DATES	
				FROM:	TO:

ATTACHMENT 5 DIRECTORS AND TRUSTEES

NAME AND HOME ADDRESS	BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		OCCUPATION OR TITLE, POSITION OR ASSOCIATION WITH THE ENTITY	DATE OF BIRTH
		FROM:	TO:		

ATTACHMENT 6 FORMER DIRECTORS AND TRUSTEES

NAME AND HOME ADDRESS	OCCUPATION & BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		DATE OF BIRTH	REASON FOR LEAVING
		FROM:	TO:		

ATTACHMENT 7 OFFICERS

NAME AND HOME ADDRESS	TITLE	DATES OFFICE HELD		BUSINESS ADDRESS	DATE OF BIRTH
		FROM:	TO:		

ATTACHMENT 8 FORMER OFFICERS

NAME AND LAST KNOWN HOME ADDRESS	OFFICE HELD	DATES OFFICE HELD		PRESENT OCCUPATION & BUSINESS ADDRESS	DATE OF BIRTH
		FROM:	TO:		

ATTACHMENT 9 COMPENSATION OF OFFICERS AND DIRECTORS

NAME	COMPENSATION LAST CALENDAR YEAR	COMPENSATION SUBSEQUENT CALENDAR YEAR	FORM OF COMPENSATION

ATTACHMENT 10 COMPENSATION OVER \$250,000

NAME	DATE OF BIRTH	BUSINESS ADDRESS	POSITION AND LENGTH OF TIME EMPLOYED WITH THE ENTITY	AMOUNT OF COMPENSATION

ATTACHMENT 13 VOTING OWNERS

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF VOTING OWNERSHIP HELD	NUMBER OF SHARES HELD	% OF OUTSTANDING VOTING STOCK HELD

ATTACHMENT 14 NON-VOTING OWNERS

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF NON-VOTING OWNERSHIP HELD	NUMBER OF NON-VOTING OWNERSHIP INTERESTS HELD	% OF OUTSTANDING NON-VOTING OWNERSHIP INTEREST HELD

ATTACHMENT 16 HOLDERS OF LONG TERM DEBT

NAME AND ADDRESS	DATE OF BIRTH	TYPE AND CLASS OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)

ATTACHMENT 18 HOLDERS OF OTHER INDEBTEDNESS

NAME AND ADDRESS	DATE OF BIRTH	TYPE OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)

ATTACHMENT 19B SECURITIES OPTIONS

NAME	BENEFICIAL OWNER’S ADDRESS	OPTIONS HELD	MARKET VALUE AT ISSUANCE

ATTACHMENT 20 **FINANCIAL INSTITUTIONS**

NAME AND ADDRESS	TYPE OF ACCOUNT(S)	ACCOUNT NUMBER(S)	TIME PERIOD ACCOUNT HELD	
			FROM:	TO:

ATTACHMENT 21 **CONTRACTS AND SUPPLIERS**

NAME	ADDRESS	NATURE OF CONTRACT OR GOODS OR SERVICES SUPPLIED

ATTACHMENT 22 OTHER OWNERSHIP INTERESTS HELD BY THE ENTITY

NAME AND ADDRESS OF COMPANY	TYPE OF INTEREST HELD	PURCHASE PRICE PER INTEREST	NUMBER OF INTERESTS HELD	% OF OWNERSHIP IF MORE THAN 5%

ATTACHMENT 23 **INSIDER TRANSACTIONS**

DATE OF TRANSACTION	NATURE OF TRANSACTION	PARTIES TO TRANSACTION (INCLUDE POSITIONS)	NUMBER OF INTERESTS INVOLVED

ATTACHMENT 24A CRIMINAL HISTORY

NAME OF CASE AND DOCKET NUMBER	NATURE OF CHARGE OR COMPLAINT	DATE OF CHARGE OR COMPLAINT	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITION (ACQUITTED, CONVICTED, DISMISSED, ETC.)	SENTENCE

ATTACHMENT 25 TESTIMONY, INVESTIGATIONS OR POLYGRAPHS

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS OR INVESTIGATION	WAS TESTIMONY GIVEN?	DATE ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION

ATTACHMENT 26 TESTIMONY, INVESTIGATION OR POLYGRAPH REFUSALS

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PRECEEDINGS OR INVESTIGATION	DATE OF PROCEEDINGS OR INVESTIGATION	CIVIL OR CRIMINAL CONTEMPT CITATION? (SPECIFY)	DISPOSITION OF CONTEMPT CITATION

ATTACHMENT 28

ANTITRUST, TRADE REGULATION AND SECURITIES JUDGMENTS; STATUTORY AND REGULATORY VIOLATIONS

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

ATTACHMENT 29A BANKRUPTCY OR INSOLVENCY PROCEEDINGS & APPOINTED RECEIVER, AGENT OR TRUSTEE

DATE PETITION FILED OR RELIEF SOUGHT	TITLE OF CASE AND DOCKET NUMBER	NAME AND ADDRESS OF COURT OR AGENCY	NATURE OF JUDGMENT OR RELIEF	DATE ENTERED

ATTACHMENT 29C BANKRUPTCY OR INSOLVENCY PROCEEDINGS & APPOINTED RECEIVER, AGENT OR TRUSTEE

NAME OF PERSON APPOINTED	DATE APPOINTED	COURT	REASON FOR APPOINTMENT

ATTACHMENT 30A LICENSES(Government)

TYPE OF LICENSE OR CERTIFICATE	NAME AND LOCATION OF GOVERNMENTAL AGENCY	ACTION TAKEN	DATE	REASON FOR ACTION TAKEN

ATTACHMENT 30B LICENSES (Other gambling)

NAME AND ADDRESS OF LICENSING AGENCY	DATE OF APPLICATION	DISPOSITION (GRANTED, DENIED, PENDING)	TYPE OF GAMBLING ACTIVITY	IF ISSUED, GIVE APPROPRIATE LICENSE, PERMIT OR OTHER SUCH NUMBER AND EXPIRATION DATE



MASSACHUSETTS SUPPLEMENTAL FORM

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 forms associated with your position (**Key Gaming Employee - Executive License**).
- 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** ☐ **I**" 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.)

- **Retain a completed copy** of this application for your own records.

**After submitting, you will have access to your completed application through your online LMS account.
Please keep your LMS username and password secure.**

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 Key Gaming Employee - Executive 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 REAL ID driver's license; 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 Standard 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.

OR

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 Standard 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: _____

MASSACHUSETTS SUPPLEMENTAL FORM FOR KEY GAMING EMPLOYEE - EXECUTIVES

PLEASE PROVIDE 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.

IDENTIFYING AND DESCRIPTIVE 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)

HAIR COLOR

- ☐ BLACK ☐ BROWN
- ☐ BLONDE ☐ RED
- ☐ GRAY ☐ WHITE
- ☐ BALD

EYE COLOR

- ☐ BLACK ☐ BROWN
- ☐ HAZEL ☐ BLUE
- ☐ GRAY ☐ GREEN

HEIGHT: _____ FT _____ IN

WEIGHT: _____ LBS

CITIZENSHIP

1. If you are not a citizen of the United States, please indicate: || N/A ☐ ||
- 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:

FINANCIAL INTERESTS

2. Do you have any ownership interest, financial interest or financial investment in any business which is applying to, or presently licensed by, the Massachusetts Gaming Commission?

Yes ☐ No ☐

If you checked yes, complete the following chart:

NAME OF BUSINESS	NATURE AND AMOUNT OF YOUR INTEREST / INVESTMENT	% OF OWNERSHIP IN THE BUSINESS	GAMING AGENCY

Note: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

Initials/Date: _____

3. During the last ten year period, have you held a 5% or greater interest in or been a director, officer or principal employee of any business that:
- A. Has held a foreign bank account or has had authority to control disbursements from a foreign bank account? Yes ☐ No ☐
- B. Has maintained a bank account, or other account, whether domestic or foreign, which was not reflected on the books or records of the business? Yes ☐ No ☐
- C. Has maintained a domestic or foreign numbered bank account or other bank account in a name other than the name of the business? Yes ☐ No ☐
- D. Has donated or loaned corporate funds or corporate property for the use or benefit of, or for the purpose of opposing, any government, political party, candidate or committee either domestic or foreign? Yes ☐ No ☐
- E. Has compensated any of its directors, officers or employees for time and expenses incurred in performing services for the benefit of or in opposition to any government or political party either domestic or foreign? Yes ☐ No ☐
- F. Has made any loans, donations or other disbursements to its directors, officers or employees for the purpose of making political contributions or reimbursing such individuals for political contributions? Yes ☐ No ☐
4. State when you filed your last Federal Income Tax Return 1040, to what IRS Center was it sent, and the tax period it covered.

Date Filed: _____ Period Covered: _____

IRS Location: _____

Has your Federal Income Tax Return ever been audited or adjusted? Yes ☐ No ☐

If you checked "Yes", for what tax year(s)? _____

5. Have you ever failed to file required Federal or State Income Tax Returns? Yes ☐ No ☐

If you checked "Yes", for what year(s)? _____

6. Have you or your spouse filed any type of tax return, statement or form in any jurisdiction outside the United States within the last ten years? Yes ☐ No ☐

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

TAX YEAR(S) FILED	COUNTRY FILED	AMOUNT OF TAX

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

7. (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, unemployment judgments, defaulted student loans, delinquent child support obligations, 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

Initials/Date: _____

8. 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

Note: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

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

9. (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 ☐

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

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

Note: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

Initials/Date: _____

SETTLEMENTS, ALLEGATIONS, AND ADDITIONAL DISCLOSURES

10. Have you ever reached a settlement or had a settlement reached by another person or entity, on your behalf, prior to or in the absence of litigation or criminal charges being filed?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

NOTE: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

11. Have you ever reached a settlement or had a settlement reached by another person or entity, on behalf of a company with which you were/are affiliated, prior to or in the absence of litigation or criminal charges being filed?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

NOTE: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

12. Have you participated in any type of sexual harassment, sexual misconduct, or unlawful discrimination?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

NOTE: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

Initials/Date: _____

13. Have any allegations of sexual harassment, sexual misconduct, or unlawful discrimination been made concerning your behavior (including by employees and/or subordinates)?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

NOTE: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

14. In the interest of full disclosure and your obligation to be forthcoming in your application, is there any other information which might reflect adversely in an evaluation of your honesty, integrity, or good character, or otherwise impact a determination on your suitability for gaming licensure/qualification?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

NOTE: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

Initials/Date: _____

QUESTION NUMBER	ANSWER
4	5/2000 – 5/2002, 123 Main St. Apt. 12a, Anytown PA 12345, 555-555-1212

Initials/Date: _____

MULTI JURISDICTIONAL

PERSONAL HISTORY DISCLOSURE FORM

MULTI JURISDICTIONAL PERSONAL HISTORY DISCLOSURE FORM

This application is designed to allow applicants for casino/gaming qualification to complete one form that is acceptable to several jurisdictions. The questions contained in this form have been designed to satisfy the variety of filing and informational requirements of the different jurisdictions that have agreed to accept this form as an application for qualification.

Each jurisdiction accepting this form may require unique information and documentation that is not requested in this standardized form. Prior to completing this form, you should contact the appropriate agency in the jurisdictions where you are seeking qualification, licensure or approval and obtain copies of any documentation or forms that are supplemental to this standardized form. In addition, copies of this multi jurisdictional form and all supplemental forms used by the jurisdictions accepting this form may be found on the Internet at www.iagr.org

APPLICATION INSTRUCTIONS

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM.

I. COMPLETING THIS FORM:

- a. You must make accurate statements and include all material facts. Any misrepresentation, or the failure to provide requested information, may result in the denial of your application.
- b. Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply to you, indicate "Does Not Apply" in response to that question. If there is nothing to disclose in response to a particular question, indicate "None" in response to that question. Failure to provide a response to every question could result in the rejection of your application.
- c. All entries on this form, except initials and signatures, must be typed or printed in block lettering using dark ink. If your application is not legible, it will not be accepted.
- d. You must use blue ink to personally initial, date and identify the gaming agency to which your application is being submitted in the space provided on the bottom of each page of the form.
- e. If the space available is insufficient to respond to a question, you are to supply the required information on an attachment page and clearly identify which question you are answering. The blank page on page 65 may be used to provide this additional information. You must use blue ink to personally initial, date and identify the gaming agency to which your application is being submitted at the bottom of each of these attachment pages.
- f. If you make any modification to the pre-printed questions or information contained in this form, your application will be rejected. Once your application is accepted, it becomes the property of the gaming agency with which it has been filed and will not be returned.

Initials _____ Gaming Agency _____ Date _____

Page 2

II. BE SURE TO:

- a. Attach a recent (within the past six months) color photograph of yourself in the space provided on page 5.
- b. Sign the Statement of Truth form on page 66 in the presence of a notary public, justice of the peace, commissioner for declarations or other person legally authorized to notarize your signature.
- c. Check to ensure that you have placed your initials, the date, and identified the gaming agency to which you are applying, on the bottom of each page of this form in the space provided and on any attachment pages.

III. BEFORE YOU SUBMIT THIS FORM TO THE GAMING AGENCY TO WHICH YOU ARE APPLYING, BE SURE THAT:

- a. You have reviewed the particular gaming agency's filing instructions for the type of license, approval or qualification that you are seeking.
- b. You have included all required attachments listed in this form.
- c. The Statement of Truth form is notarized on the original application.
- d. Every question has been answered completely.
- e. You retain a completed copy of your application package for your own records.
- f. You have completed any ancillary forms for the individual jurisdictions.

IV. TIPS FOR COMPLETING THIS FORM:

- a. Keep a blank copy of the form. When you need to update information, you can use the appropriate pages from the blank form to provide the information.
- b. Once all questions have been answered, make sufficient copies for all jurisdictions where you will file your application. Note that you should do this BEFORE the form is signed, dated and notarized. Since each jurisdiction must receive an application containing original signatures, it is advisable to make copies before signing the form.
- c. Keep an unsigned copy of your completed application. Should you need to file with another jurisdiction at some point in the future, you can then update the information rather than complete the form all over again.
- d. Be sure to use blue ink where you sign, initial, date and identify the gaming agency where you are filing your application. Using blue ink will make it clear to the jurisdiction where you are filing that your application is to be considered an original and not a photocopy.

MULTI JURISDICTIONAL PERSONAL HISTORY DISCLOSURE FORM

**PLEASE PRINT OR TYPE THE ANSWERS TO THE
FOLLOWING QUESTIONS IN THE SPACES PROVIDED**

PERSONAL DATA

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

FIRST

MIDDLE

MAILING ADDRESS/POSTAL ADDRESS:

NUMBER AND STREET

APT #/FLAT #

CITY/TOWN

STATE/PROVINCE

ZIP/POSTAL CODE

HOME ADDRESS: (IF DIFFERENT THAN MAILING ADDRESS/POSTAL ADDRESS)

NUMBER AND STREET

APT #/FLAT #

CITY/TOWN

STATE/PROVINCE

ZIP/POSTAL CODE

PRESENT BUSINESS ADDRESS:

NUMBER AND STREET

APT #/FLAT #

CITY/TOWN

STATE/PROVINCE

ZIP/POSTAL CODE

HOME TELEPHONE NUMBER:

(AREA CODE)

(NUMBER)

CURRENT BUSINESS TELEPHONE NO. AT PLACE OF EMPLOYMENT:

(AREA CODE)

(NUMBER)

(EXTENSION)

FAX NUMBER:

(AREA CODE)

(NUMBER)

DATE OF BIRTH: (MO)(DAY)(YEAR)

E-MAIL ADDRESS (OPTIONAL):

HAVE YOU 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, OTHER NAME CHANGES, LEGAL OR OTHERWISE.)

SEX

COLOR OF EYES

COLOR OF HAIR

HEIGHT

____ FT ____ IN/ ____ CM

WEIGHT

____ LBS/ ____ KG

DO YOU HAVE ANY SCARS, TATTOOS, OR OTHER DISTINGUISHING MARKS AND/OR CHARACTERISTICS? IF SO, PLEASE DESCRIBE.

Initials _____ Gaming Agency _____ Date _____

Page 4

IMPORTANT

**FAILURE TO ANSWER ANY QUESTION ON THIS
FORM COMPLETELY AND TRUTHFULLY WILL
RESULT IN DENIAL OF YOUR APPLICATION.**

AFFIX A COLOR PHOTOGRAPH
HERE THAT WAS TAKEN WITHIN
THE PAST SIX MONTHS.

PRINT YOUR NAME ON THE FRONT
BOTTOM BORDER OF THE
PHOTOGRAPH BEFORE
ATTACHING IT.

Initials_____ Gaming Agency_____ Date_____

Page 5

1. Of what country are you a citizen? _____

A. Please indicate:

1. Date of birth: _____
DAY MONTH YEAR

2. Place of birth: _____
CITY/TOWN STATE/PROVINCE COUNTRY

3. Country of birth: _____

2. Have you ever been issued a passport? Yes ☐ No ☐

If yes, provide the following information about your passport(s):

PASSPORT NUMBER	COUNTRY OF ISSUE	PLACE ISSUED	DATE ISSUED	EXPIRATION DATE

RESIDENCE DATA

3. Beginning with your current residence(s) and working backward, provide the following information with respect to each place where you have lived (including residences while attending college or while in military service) during the past fifteen (15) years or since the age of 18, whichever is less.

DATES		ADDRESS (NO., STREET, APT#/FLAT#, CITY/TOWN, STATE/PROVINCE, COUNTRY & ZIP/POSTAL CODE)	OWN OR RENT	NAME, ADDRESS & TELEPHONE NO. OF LANDLORD OR MORTGAGE/BOND HOLDER, IF KNOWN
FROM: (MO/YR)	TO: (MO/YR)			

Packet Page 118

How many times have you been married? _____

Provide the information below regarding your current marriage and spouse:

Home Address: _____ Telephone Number: _____
 STREET CITY/TOWN STATE/PROVINCE ZIP/POSTAL CODE AREA CODE NUMBER

Provide the information below regarding your previous marriages:
(Do **NOT** include current spouse.)

NAME OF FORMER SPOUSE(S) (INCLUDE MAIDEN NAME, IF APPLICABLE)	DATE AND PLACE OF MARRIAGE	DATE OF BIRTH	IF ANNULLED, SEPARATED OR DIVORCED,, INDICATE DATE AND JURISDICTION WHERE SUCH ACTION WAS TAKEN	DOCKET/CASE # OF DIVORCE ACTION (IF KNOWN)	PRESENT ADDRESSES OF FORMER SPOUSE(S) (NO., STREET, APT#/FLAT#, CITY/TOWN, STATE/PROVINCE, COUNTRY, ZIP/POSTAL CODE)

Page 8

5. a. In the chart below, list the names of all your children, step-children and adopted children and the amount of support, if dependent. Also list all other persons who you are supporting or contributing to the support of, and provide the amount of support.

NAME	DATE OF BIRTH	BIRTH PLACE	ADDRESS (NO., STREET, APT., CITY, STATE, COUNTRY, ZIP CODE)	AMT. OF SUPPORT (IF A DEPENDENT)

5. b. Please mark the appropriate response regarding your child support obligations:

- ☐ I am not subject to a court order for the support of a child.
- ☐ I am subject to a court order for the support of one or more children and am in compliance with a plan approved by the public agency/court enforcing the order for the repayment of the amount owed pursuant to the order (indicate amount in 5a. above); or
- ☐ I am subject to a court order for the support of one or more children and am NOT in compliance with the order or a plan approved by the public agency/court enforcing the order for the repayment of the amount owed pursuant to the order.

Identify the public agency/court responsible for enforcing the child support order:

Name _____

Address _____

Contact Person _____

Initials _____ Gaming Agency _____ Date _____

Page 9

6. List names, residence addresses, dates of birth, and most recent occupations of parents, parents-in-law, former parents-in-law, or legal guardians, living or deceased. If retired or deceased, list last address and occupation

NAME (INCLUDE MAIDEN)	DATE OF BIRTH	ADDRESS (NO. , STREET, APT#/FLAT#, CITY/TOVILL, STATE/PROVINCE, COUNTRY, ZIP/POSTAL CODE)	PHONE NUMBER	OCCUPATION
Father:				
Mother:				
Father-in-law:				
Mother-in-law:				
Former Parents-in-law*:				

*For former parents-in-law only provide names.

Initials. _____ Gaming Agency _____ Date. _____

7. List names, dates of birth, home addresses and phone numbers, and the most recent occupations of brothers and sisters and of their respective spouses:

NAME (INCLUDE MAIDEN)	DATE OF BIRTH	ADDRESS (NO. STREET, APT#/FLAT#, CITY/TOWN/STATE, ZIP/POSTAL CODE)	PHONE NUMBER	OCCUPATION
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				
Sibling:				
Spouse:				

Initials. _____ Gaming Agency _____ Date. _____

MILITARY SERVICE DATA

8. Have you ever served in a military organization of any country or have you been an active or inactive member of a reserve force of any country?

Yes ☐ No ☐

If yes, provide the following information:

Country of Service: _____

Branch of Service: _____ Service Serial #: _____

Highest Rank Held: _____

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

From: _____ To: _____

9. 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 records* labeled as Exhibit 9M. If unavailable, attach a copy of a letter to the appropriate branch of the military requesting a copy of your military records* labeled as an Exhibit 9M. If in reserves, please attach a copy of your discharge papers.

10. Have you ever been tried by military court martial or have you had charges** filed against you?

Yes ☐ No ☐

If yes, complete the following chart:

NATURE OF CHARGE OR ARREST	DATE AND LOCATION OF CHARGE OR ARREST	NAME OF MILITARY ORGANIZATION FILING CHARGES	DISPOSITION (CONVICTED, ACQUITTED, DISMISSED, PLEADING, ETC.)	SENTENCE

*In the United States, a military record is called a DD214. If you have served in the U.S. military, you should provide a copy of this record. If your military service was in another country, you should provide a copy of whatever official documentation was provided to you at the time of your discharge.

** Charges filed against you by the military authorities in any country would fall under the Code of Military Justice applicable to that jurisdiction. In the United States, this means any charges filed against you under Article 15 of the Uniform Code of Military Justice (summary court, deck court, captain's mast, company punishment, etc.)

Initials _____ Gaming Agency _____ Date _____

EDUCATIONAL DATA

11. 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	GRADUATED YES OR NO
FROM: (MO/YR)	TO: (MO/YR)				

OFFICES AND POSITIONS

12. List all offices, trusteeships, directorships or fiduciary positions (including non-profit charitable entities and family trusts) held by you with any firm, corporation, association, partnership or other business entity during the last ten year period. Begin with the most recent and work backward.

DATES		TITLE OF OFFICE OR POSITION HELD	NAME AND ADDRESS OF FIRM, CORPORATION, ASSOCIATION, PARTNERSHIP OR OTHER BUSINESS ENTITY	COMPENSATION RECEIVED
FROM: (MO/YR)	TO: (MO/YR)			

Initials_____ Gaming Agency_____ Date_____

12. (Cont.)

DATES		TITLE OF OFFICE OR POSITION HELD	NAME AND ADDRESS OF FIRM, CORPORATION, ASSOCIATION, PARTNERSHIP OR OTHER BUSINESS ENTITY	COMPENSATION RECEIVED
FROM: (MO/YR)	TO: (MO/YR)			

13. List all government positions and offices, whether salaried or unsalaried, held by you during the last ten year period. Begin with the most recent and work backward.

DATES		TITLE OF OFFICE OR POSITION HELD	NAME AND ADDRESS OF GOVERNMENT AGENCY/ORGANIZATION
FROM: (MO/YR)	TO: (MO/YR)		

Initials_____ Gaming Agency_____ Date_____

EMPLOYMENT AND LICENSING DATA

14. Have you ever been employed by a casino or gaming/gambling related company* in any jurisdiction? Yes ☐ No ☐

*Casino or gaming/gambling related company includes any form or type of casino, gaming/gambling related operation, any manufacturer of gaming/gambling equipment, junket enterprise, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, Internet gaming, etc.

NAME OF GAMING/GAMBLING GAMING RELATED COMPANY AND COUNTRY/STATE WHERE YOU WERE EMPLOYED	NAME, MAILING ADDRESS AND TELEPHONE NUMBER OF EMPLOYER(S)	DATES		TITLE/POSITION HELD AND DESCRIPTION OF DUTIES	NAME OF SUPERVISOR	REASON FOR LEAVING
		FROM (MO/YR)	TO (MO/YR)			

Initials _____ Gaming Agency _____ Date _____

[illegible]

Initials_____ Gaming Agency_____ Date_____

15. (Cont.)

DATES		NAME, MAILING ADDRESS, AND TELEPHONE NUMBER OF EMPLOYER(S)	TITLE/POSITION HELD AND DESCRIPTION OF DUTIES	NAME OF SUPERVISOR	REASON FOR LEAVING/ COMPENSATION AT DEPARTURE
FROM: (MO/YR)	TO: (MO/YR)				

If additional space is needed, please provide an attachment.

Initials, _____ Gaming Agency _____ Date, _____

16. 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 ten year period, were you ever charged with any infraction in relation to any employment which was the subject of any disciplinary action? Yes ☐ No ☐

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

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

Initials_____ Gaming Agency_____ Date_____

17. List any and all compensated employment, of whatever nature, held by your spouse during the past twelve month period. Back to Page 130
 spouse's current employer. Begin with your

DATES		NAME, ADDRESS AND TELEPHONE NUMBER OF EMPLOYER	TITLE/ POSITION HELD
FROM: (MO/YR)	TO: (MO/YR)		

18. To the best of your knowledge, have you or has your spouse served as a trustee or other fiduciary officer in any capacity during the last twelve month period?

Yes ☐ No ☐

If yes, complete the following chart:

DATES		CAPACITY	NATURE OF TRUST OR OTHER FUND	INCOME RECEIVED	FOR WHOM HELD
FROM: (MO/YR)	TO: (MO/YR)				

Initials _____ Gaming Agency _____ Date _____

Page 20

19. a. Have you or your spouse ever sought and been denied a position as a trustee or other fiduciary officer? Yes ☐ No ☐ Packet Page 131

b. Have you or your spouse ever been suspended or removed from a position as a trustee or other fiduciary officer? Yes ☐ No ☐

If yes to either question, complete the following chart:

DATE	CAPACITY	NATURE OF TRUST OR OTHER OFFICE	REASON FOR DENIAL, SUSPENSION OR REMOVAL

20. Have you or has your spouse ever made application for, or held, any **NON-GAMING** professional or occupational license, permit or certification, in any jurisdiction, including but not limited to the following: real estate broker or salesman, accountant, attorney, medical, boxing promoter, manager or matchmaker, race horse owner, trainer or manager, jockey, race dog owner, securities dealer, contractor, pilot, insurance, or any other type of professional license. (Do not include alcoholic beverage or driver's license). You must answer "YES" to this question if you ever applied and your application was granted, denied, returned to you by the licensing agency for any reason, withdrawn or is currently pending.

Yes ☐ No ☐

If yes, complete the following chart:

NAME ON LICENSE	TYPE OF LICENSE	DATES		NAME AND ADDRESS OF LICENSING AGENCY/ORGANIZATION	DISPOSITION OF THE APPLICATION
		FROM: (MO/YR)	TO: (MO/YR)		

Initials _____ Gaming Agency _____ Date _____

Page 21

21. Have any of the licenses, permits or certifications applied for, or held by you or your spouse, as identified in the previous question ever been denied, suspended, revoked or subject to any conditions in any jurisdiction?

Yes ☐ No ☐

If yes, complete the following chart as to each denial, suspension, revocation or conditions:

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

22. Has any entity in which you, or your spouse, is/was a director, officer, partner or an owner of a 5% or greater interest ever had any license, permit or certificate issued by a governmental agency in any jurisdiction denied, suspended, revoked, or subject to any conditions?

Yes ☐ No ☐

If yes, complete the following chart as to each denial, suspension or revocation:

NAME OF ENTITY	POSITION HELD BY YOU OR YOUR SPOUSE	TYPE OF LICENSE, PERMIT OR CERTIFICATE	TYPE OF ACTION TAKEN	NAME AND ADDRESS OF GOVERNMENT AGENCY/ORGANIZATION TAKING ACTION	DATE OF ACTION	REASON(S) FOR ACTION

Initials _____ Gaming Agency _____ Date _____

23. List any group, firm, partnership, corporation or any other businesses in which you have held an ownership interest of 5% or more for the past twenty years, or since the age of 18, whichever is less. (Do *not* include publicly traded corporations in which you owned stock.)

DATES		NAME(S) & ADDRESS(ES) OF BUSINESS(ES)	CURRENT STATUS OF BUSINESS(ES)	%INTEREST HELD BY YOU	NAME(S) OF OTHER OWNERS	ADDRESS(ES) OF OTHER OWNERS	STATE/PROVINCE AND COUNTRY OF ORGANIZATION OR INCORPORATION
FROM: (MO/YR)	TO: (MO/YR)						

Initials. _____ Gaming Agency _____ Date. _____

24. Have you or has your spouse ever made application for, or held, a license, permit, registration, finding of suitability, qualification or other authorization to participate in any form or type of casino, gaming/gambling related operation (including any manufacturer of gaming/gambling equipment, junket operation, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, Internet gaming, etc.) or alcoholic beverage operation in any jurisdiction? You must answer "YES" to this question if you ever applied and your application was granted, denied, returned to you by the gaming agency for any reason, withdrawn or is currently pending.

Yes ☐ No ☐

If yes, complete the following chart:

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

Initials _____ Gaming Agency _____ Date _____

25. For each casino, gaming/gambling related or alcoholic beverage operation application, license, permit, registration, finding of suitability, qualification or other authorization identified in the previous question, were you or your spouse ever called to appear to testify, or otherwise participate in a hearing or proceeding, before the licensing agency or commission to which you were applying?

Yes ☐ No ☐

If yes, complete the following chart:

NAME AND ADDRESS OF LICENSING AGENCY OR COMMISSION	DATE OF APPEARANCE(S)	NATURE OF HEARING	WAS TESTIMONY GIVEN?

Initials_____ Gaming Agency_____ Date_____

26. To the best of your knowledge, in the past twenty years or since the age of 18, whichever is less, have you held a direct or indirect financial or ownership interest in any group, firm, corporation, partnership or other business entity that has applied to any licensing agency in any jurisdiction for any license, permit, registration, finding of suitability, or qualification in connection with any form or type of a casino, gaming/gambling related operation (including any manufacturer of gaming/gambling equipment, junket operation, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, Internet gaming, etc.), or alcoholic beverage operation? (Do not include publicly traded corporations or entities in which you held less than 1% of the stock.)

Yes ☐ No ☐

If yes, complete the following chart:

NAME AND ADDRESS OF BUSINESS ENTITY	NATURE OF YOUR INTEREST	DATE OF APPLICATION	NAME & ADDRESS OF LICENSING AGENCY TO WHICH APPLICATION WAS MADE	TYPE OF LICENSE APPLIED FOR	DISPOSITION OF APPLICATION

Initials _____ Gaming Agency _____ Date _____

27. a. Are any members of your family (spouse, parents, grandparents, children, grandchildren, siblings, uncles, aunts, nephews, nieces, fathers-in-law, mothers-in-law, sons-in-law, daughters-in-law, brothers-in-law and sisters-in-law whether by whole or half blood, by marriage, adoption or natural relationship) associated with or employed in any form or type of casino or gaming/gambling related operation as defined in question 26 in any jurisdiction?

Yes ☐ No ☐

b. Do you or any members of your family (spouse, parents, grandparents, children, grandchildren, siblings, uncles, aunts, nephews, nieces, fathers-in-law, mothers-in-law, sons-in-law, daughters-in-law, brothers-in-law and sisters-in-law whether by whole or half blood, by marriage, adoption or natural relationship) have an ownership interest in any alcoholic beverage entity in any jurisdiction?

Yes ☐ No ☐

If yes to either question, complete the following chart:

NAME OF PERSON	RELATIONSHIP	NAME OF GAMING/GAMBLING OR ALCOHOLIC BEVERAGE BUSINESS AND ADDRESS	BUSINESS TELEPHONE

Initials_____ Gaming Agency_____ Date_____

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

DEFINITIONS: For purposes of this question:

- A. "Arrest" includes any detaining, holding, or taking into custody by any police or other law enforcement authorities to answer for the alleged performance of any "offense."
- B. "Charge" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- C. "Offense" includes all felonies, crimes, high misdemeanors, misdemeanors, disorderly persons offenses, petty disorderly offenses, driving while intoxicated/impaired motor vehicle offenses and violations of probation or any other court order. Juvenile offenses that occurred within the most recent 10 year period are also included within the definition of "offenses."

INSTRUCTIONS: 1. Answer "YES" and provide all information to the best of your ability EVEN IF:

- A. You did not commit the offense charged;
 - B. The charges were dismissed or subsequently downgraded to a lesser charge;
 - C. You completed a Pretrial Intervention (PTI) or equivalent diversionary program in other jurisdictions;
 - D. You were not convicted;
 - E. You did not serve any time in prison or jail; or
 - F. The charges or offenses happened a long time ago.
2. Answer "NO" IF any records relating to a charge, an arrest or conviction have been expunged or otherwise officially sealed by a court or government agency*.

* Some jurisdictions permit the gaming agency to obtain information about the expungement or sealing order as part of the licensing process. You should confer with the gaming agency to which you are applying to determine the applicable law.

IMPORTANT

The gaming agency will make inquiries to establish whether the applicant has had any involvement with law enforcement agencies.

Failure to disclose any such involvement will be taken into account in assessing your character, honesty and integrity.

Initials _____ Gaming Agency _____ Date _____

Page 28

28. Have you ever been arrested or charged with any crime or offense in any jurisdiction?

Yes ☐ No ☐

If yes, complete the following chart:

NATURE OF CHARGE OR OFFENSE/ LOCATION OF WHERE INCIDENT OCCURRED	DATE OF CHARGE OR OFFENSE	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITION (CONVICTED, ACQUITTED, DISMISSED, PENDING, PARDONED, ETC.)	SENTENCE

29. To the best of your knowledge, has a criminal indictment, information or complaint ever been filed or returned against you, but for which you were not arrested or in which you were named as an unindicted party or unindicted co-conspirator in any criminal proceeding in any jurisdiction?

Yes ☐ No ☐

If yes, complete the following chart:

NAME AND ADDRESS OF GOVERNMENTAL AGENCY/ORGANIZATION INVOLVED	NATURE OF PROCEEDING	DATE

30. Have you ever been the subject of an investigation conducted by any governmental agency/organization, court, commission, committee, grand jury or investigatory body (local, state, county, provincial, federal, national, etc.) other than in response to a traffic summons?

Yes ☐ No ☐

If yes, complete the following chart:

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDING OR INVESTIGATION	WAS TESTIMONY GIVEN?	DATE ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION

Initials _____ Gaming Agency _____ Date _____

Page 30

31. a. Have you ever been called to testify before, or otherwise been questioned, interviewed, deposed, or requested to take a polygraph examination by any governmental agency/organization, court, commission, committee, grand jury or investigative body (local, state, county, provincial, federal, national, etc.) in any jurisdiction other than in response to a traffic summons?

Yes ☐ No ☐

b. Have you ever been subpoenaed to appear or testify before a federal, national, state, county grand jury, or other criminal investigatory agency or body, or any board or commission, or any civil, criminal or administrative proceeding or hearing?

Yes ☐ No ☐

If yes to either question, complete the following chart:

NAME AND ADDRESS OF COURT OR OTHER AGENCY/ORGANIZATION	NATURE OF PROCEEDING OR INVESTIGATION	WAS TESTIMONY GIVEN?	DATE ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION

32. Have you ever received a pardon, or has any government agency/organization agreed to dismiss, suspend or defer any criminal investigation or prosecution against you for any criminal offense?

Yes ☐ No ☐

If yes, complete the following chart:

DATE OF PARDON, DISMISSAL, SUSPENSION, OR DEFERAL	TYPE OF ACTION TAKEN	NAME AND ADDRESS OF GOVERNMENT AGENCY/ORGANIZATION GRANTING PARDON, DISMISSAL SUSPENSION OR DEFERAL

Initials _____ Gaming Agency _____ Date _____

Page 31

33. Has your spouse or any of your children, step-children or adopted children ever been arrested or charged with any crime or offense (as defined at the beginning of this section) in any jurisdiction? Packet Page 112

Yes ☐ No ☐

If yes, complete the following chart:

NAME OF PERSON	RELATIONSHIP	NATURE OF CHARGE OR OFFENSE	DATE OF CHARGE OR OFFENSE	NAME & ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITION (CONVICTED, ACQUITTED, DISMISSED, PENDING, PARDONED, ETC.)	SENTENCE

Initials _____ Gaming Agency _____ Date _____

34. In the past fifteen (15) years, have you as an individual, member of a partnership, or owner, director, or officer of a corporation, ever been a party to a lawsuit, as either a plaintiff or defendant or an arbitration as either a claimant or defendant? (Include matrimonial matters, negligence matters, auto accident matters, contract matters, collection matters, debt matters, bankruptcies, etc.)

Yes ☐ No ☐

If yes, complete the following chart:

DATE FILED	NAME & ADDRESS OF COURT	DOCKET/CASE NUMBER	OTHER PARTIES TO SUIT	NATURE OF SUIT	DISPOSITION	DATE OF DISPOSITION

Initials_____ Gaming Agency_____ Date_____

Page 33

35. In the past fifteen (15) years, has any general partnership, business venture, sole proprietorship or closely held corporation, which you were associated with as an owner, officer, director or partner, been a party to a lawsuit, arbitration or bankruptcy?

Yes No

If yes, complete the following chart:

NAME OF ENTITY	TYPE OF ENTITY	APPROXIMATE DATE(S) OF LAWSUIT/ARBITRATION/BANKRUPTCY	WHERE ACTION FILED (CITY/TOWN, STATE/PROVINCE, COUNTY)

Initials. _____ Gaming Agency _____ Date. _____

36. In the past ten years, have you been cited or charged with, or formally accused of, any violation of a statute, regulation or code of any local, state, county, municipal, provincial, federal or national government other than a criminal, disorderly persons, petty disorderly person or motor vehicle violation?

Yes ☐ No ☐

If yes, complete the following chart:

GOVERNMENTAL AGENCY/ORGANIZATION	NATURE OF CHARGE	DATE	DISPOSITION

Initials_____ Gaming Agency_____ Date_____

37. Have you ever been barred or otherwise excluded, for any reason, other than for the denial, suspension or revocation of a license or registration, from any form or type of casino or gaming/gambling related operation in any jurisdiction? (Check "YES" even if the disbarment or exclusion is no longer in effect or has been lifted.)

Yes ☐ No ☐

If yes, complete the following chart:

GAMING/GAMBLING AGENCY	DATE OF EXCLUSION	REASON FOR EXCLUSION

VEHICLE OPERATOR DATA

38. In the chart below, list all current motor vehicle operator licenses (automobiles, motorcycles, airplanes, boats, recreational vehicles, etc.) issued to you in any jurisdiction:

DATE LAST ISSUED	LICENSE NUMBER	TYPE OF LICENSE	JURISDICTION ISSUING LICENSE	EXPIRATION DATE OF LICENSE

Initials _____ Gaming Agency _____ Date _____

FINANCIAL DATA

39. Have any individual, local, city, county, provincial, state, Federal, national, or any other governmental liens/debts been filed against you as an individual, sole proprietor, member of a partnership, or owner of a corporation in any jurisdiction?

Yes ☐ No ☐

If yes, complete the following chart:

NATURE OF LIEN/DEBT	WHEN FILED	WHERE FILED	CURRENT STATUS

40. Have you personally ever been adjudicated bankrupt or filed a petition for any type of bankruptcy, insolvency or liquidation under any bankruptcy or insolvency law in any jurisdiction?

Yes ☐ No ☐

If yes, complete the following chart:

DATE FILED	DOCKET/CASE NUMBER	NAME AND ADDRESS OF COURT	NAME AND ADDRESS OF TRUSTEE

41. In the past twenty years or since the age of 18, whichever is less, has any business entity in which you held a 5% or greater ownership interest, or in which you served as an officer or director been adjudicated bankrupt or filed a petition for any type of bankruptcy or insolvency under any bankruptcy or insolvency law?

Yes ☐ No ☐

If yes, complete the following chart:

DATE FILED	DOCKET/CASE NUMBER	NAME AND ADDRESS OF COURT	NAME AND ADDRESS OF FILING PARTY	NAME AND ADDRESS OF TRUSTEE

42. Have you as an individual, member of a partnership, or owner, director or officer of a corporation ever been in a business entity that has been in liquidation, receivership or been placed under some form of governmental administration or monitoring?

Yes ☐ No ☐

If yes, complete the following chart:

NAME AND ADDRESS OF BUSINESS ENTITY	YOUR RELATIONSHIP TO BUSINESS ENTITY	DATE PLACED UNDER LIQUIDATION, RECEIVERSHIP, ETC.	REASON PLACED UNDER LIQUIDATION, RECEIVERSHIP, ETC.	PRESENT STATUS

43. 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 yes, complete the following chart:

DATE FILED	DOCKET/CASE NUMBER	NAME AND ADDRESS OF COURT	NATURE OF OBLIGATION	AMOUNT OF OBLIGATION	NAME AND ADDRESS OF HOLDER OF OBLIGATION

Initials_____ Gaming Agency_____ Date_____

Page 39

44. In the past ten years, have you ever had any property, real or personal, repossessed by a finance company in any jurisdiction? Packet Page 150

Yes ☐ No ☐

If yes, complete the following chart:

TYPE OF PROPERTY	DATE REPOSSESSED	NAME AND ADDRESS OF COMPANY REPOSSESSING PROPERTY	REASON FOR REPOSSESSION

45. During the last ten year period, have you been:

- a. An executor(trix), administrator or other fiduciary of any estate;
- b. A beneficiary or legatee under a will or received anything of value under an intestacy statute; or
- c. A settlor/grantor, beneficiary or trustee of any trust?

Yes ☐ No ☐

If yes, complete the following chart as to each estate and trust:

NAME AND LOCATION OF ESTATE/TRUST	POSITION/ INTEREST HELD	DATE(S) ON WHICH POSITIONS WERE HELD OR INTEREST WAS RECEIVED	AMOUNT OF COMPENSATION OR NATURE AND VALUE OF BENEFIT GRANTED/RECEIVED

Initials _____ Gaming Agency _____ Date _____

Page 40

46. Do you own, hold, or have an interest in any assets in a trust in any jurisdiction? (You may exclude those assets disclosed in your answer to question 45).

Yes ☐ No ☐

If yes, complete the following chart:

DESCRIPTION OF TRUST	LOCATION OF TRUST	NAME OF TRUSTEE(S)	NAMES OF OTHER(S) WITH INTERESTS IN TRUST

47. Do you hold, manage or control in trust, or otherwise, any assets or liabilities for another person or entity in any jurisdiction? (You may exclude those assets or liabilities disclosed in your answer to question 45).

Yes ☐ No ☐

If yes, complete the following chart:

DESCRIPTION OF TRUST	LOCATION OF TRUST	NAMES OF OTHER(S) WITH INTEREST IN TRUST

48. a. Please state your country of residence _____
- b. During the last ten year period have you had any right of ownership in, control over or interest in any bank account(s), which are located outside the country of residence identified in a. above?

Yes ☐ No ☐

If yes, complete the following chart:

DATES		NAME AND ADDRESS OF INSTITUTION HOLDING ACCOUNT	ACCOUNT NUMBER	NAME AND ADDRESS OF EACH PERSON/ENTITY APPEARING ON THE ACCOUNT	PRESENT AMOUNT HELD/ AMOUNT HELD BEFORE CLOSING
FROM: (MO/YR)	TO: (MO/YR)				

- c. Do you own, manage or control any assets, or are you responsible for any liabilities, located outside the country of residence as identified in a. above (excluding any foreign bank accounts identified in b. above)?
- Yes ☐ No ☐

If yes, complete the following chart:

DESCRIPTION OF ASSET/LIABILITY	LOCATION OF ASSET/LIABILITY

49. During the last ten year period, have you or has your spouse or any of your children, while dependent, received a loan in excess of \$25,000USD?
(If you are applying in a jurisdiction other than the United States, the amount you are required to report is the equivalent to \$25,000USD in the national currency of the jurisdiction where you will be filing this application.)
- Yes ☐ No ☐

If yes, complete the following chart:

DATE RECEIVED LOAN	NAME AND ADDRESS OF LENDER	NAME OF BORROWER AND ALL CO-SIGNERS	ORIGINAL AMOUNT OF LOAN	INTEREST RATE (%)	TERMINATION DATE OF LOAN

50. During the last ten year period, have you or has your spouse or any of your children, while dependent, made any loan in excess of \$10,000USD? (If you are applying in a jurisdiction other than the United States, the amount you are required to report is the equivalent of \$10,000USD in the national currency of the jurisdiction where you will be filing this application.) Packet Page 154

Yes ☐ No ☐

If yes, complete the following chart:

DATE OF LOAN	NAME AND ADDRESS OF BORROWER	ALL CO-PARTIES TO LOAN	NAME OF LENDER	ORIGINAL AMOUNT OF LOAN	INTEREST RATE (%)	TERMINATION DATE OF LOAN	SECURITY PLEDGED

51. Have you individually ever exchanged currency in an amount of more than \$10,000USD within the past ten years? (If you are applying in a jurisdiction other than the United States, the amount you are required to report is the equivalent of \$10,000USD in the national currency of the jurisdiction where you will be filing this application.)

Yes ☐ No ☐

If yes, complete the following chart:

DATE AND AMOUNT OF EXCHANGE	LOCATION WHERE EXCHANGE MADE	REASON FOR EXCHANGE	DID YOU FILL OUT OR FILE ANY GOVERNMENTAL REPORTING DOCUMENT

52. Do you maintain a brokerage or margin account with any securities or commodities dealer?

Yes ☐ No ☐

If yes, complete the following chart:

TYPE OF ACCOUNT	NAME AND ADDRESS OF DEALER	AMOUNT OF MARGIN

53. Have you or has your spouse or children, while dependent, filed any claims in excess of \$100,000USD under any fire, theft, automobile or insurance policy within the past ten year period? (If you are applying in a jurisdiction other than the United States, the amount you are required to report is the equivalent of \$100,000USD in the national currency of the jurisdiction where you will be filing this application.)

Yes ☐ No ☐

If yes, complete the following chart:

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

Initials_____ Gaming Agency_____ Date_____

54. During the last five year period, 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 \$10,000USD in value in any one year period? (If you are applying in a jurisdiction other than the United States, the amount you are required to report is the equivalent of \$10,000USD in the national currency of the jurisdiction where you will be filing this application.)

Yes ☐ No ☐

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

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

55. a. Do you have any safe deposit boxes in your name in any jurisdiction?

Yes ☐ No ☐

b. Do you have access to the funds in any other safe deposit boxes in any jurisdiction?

Yes ☐ No ☐

If yes to either question, complete the following chart:

NAME AND ADDRESS OF BANK OR OTHER INSTITUTION/BUSINESS WHERE LOCATED	NAME(S) IN WHICH ACCOUNT(S) OR SAFE DEPOSIT BOX(ES) HELD	TYPE OF ACCOUNT, (SAVINGS, CHECKING, SAFE DEPOSIT, ETC.)	ACCOUNT NO. OR SAFE DEPOSIT BOX NO.

56. In the past ten years, or since the age of 18, whichever is less, have you received any referral or finder's fee in excess of \$10,000USD
 (If you are applying in a jurisdiction other than the United States, the amount you are required to report is the equivalent of \$10,000USD. In the national currency of the jurisdiction ~~Packet~~ Page 157 you will be filing this application.)

Yes ☐ No ☐

If yes, complete the following chart:

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

57. Have you, in the past ten years or since the age of 18, whichever is less, given a guarantee, co-signed or otherwise insured payment of a loan, debt or other financial obligation in any jurisdiction?

Yes ☐ No ☐

If yes, complete the following chart:

NATURE OF OBLIGATION (PERSONAL GUARANTEE, ETC.)	DATE OBLIGATION MADE	NAME(S) OF PERSON RESPONSIBLE FOR OBLIGATION	STATUS OF UNDERLYING OBLIGATION

Initials_____ Gaming Agency_____ Date_____

NET WORTH STATEMENT -- ASSETS AND LIABILITIES

Packet Page 158

NOTE: Complete the financial statements on pages 49 through 63 and copy the totals in the appropriate space below.

58. 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.

ASSET	COST AT DATE ACQUIRED OR PURCHASED (A)	CURRENT MARKET VALUE (B)	SPECIAL VALUATION DATE, IF ANY
1. Cash			
a) On Hand		a)	
b) In bank (Schedule A)		b)	b)
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. Furniture and Clothing (Reasonable Estimate)			
8. Vehicles (Schedule G)			
9. Other (Schedule H)			
TOTAL ASSETS			

59. 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		
Total Assets (From Column B) less Total Liabilities (From Column D)		
16. Contingent Liabilities (Schedule O)		

Date of Statement _____

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

Name _____
Address _____
Phone _____

Initials _____ Gaming Agency _____ Date _____

Page 48

SCHEDULE "A" - CASH IN BANK

Packet Page 159

60. 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
						\$ _____
						TOTAL CURRENT BALANCE (Enter this figure in item 1b, column B on page 48.)

Initials _____ Gaming Agency _____ Date _____

SCHEDULE "B" – LOANS, NOTES AND OTHER RECEIVABLES

Packet Page 160

61. List below all loans, notes and other receivables held by you, your spouse or dependent children.

// N/A ~~XXX~~

CHECK IF HELD BY SPOUSE OR DEPENDENT CHILD	NAME AND ADDRESS OF DEBTOR	INTEREST RATE (%)	ORIGINAL LOAN AMOUNT	ORIGINAL DATE OF LOAN/NOTE RECEIVABLE	TOTAL PAY-MENTS	DATE DUE	NATURE OF ADVANCE AND NATURE OF SECURITY, IF ANY (INDICATE IF UNSECURED)	CURRENT BALANCE
			\$ _____					\$ _____
			TOTAL ORIGINAL LOAN AMOUNT(S) (Enter this figure in items 2, column A on page 48.)					TOTAL CURRENT BALANCE (Enter this figure in items 2, column B on page 48.)

Initials _____ Gaming Agency _____ Date _____

Page 50

SCHEDULE "C" - SECURITIES

Packet Page 161

62. Provide the information in the table below for all stocks, bonds, mutual funds, commodity accounts, options, warrants, etc., held or controlled by you, your spouse or dependent children in any jurisdiction. 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 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 ~~AAA~~

CHECK IF HELD BY SPOUSE OR DEPENDENT CHILD	NUMBER OF SECURITIES OR CONTRACTS HELD	TYPE OF SECURITY	NAME OF ISSUING COMPANY OR GOVERNMENT AGENCY/ORGANIZATION	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
					\$ _____				\$ _____
					TOTAL PURCHASE PRICE (Enter this figure in item 3, column A on page 48.)				
						TOTAL CURRENT MARKET VALUE (Enter this figure in item 3, column B on page 48.)			

Initials _____ Gaming Agency _____ Date _____

Page 51

SCHEDULE "D" - REAL ESTATE INTERESTS

Packet Page 162

63. Indicate below the location, size, general nature, acquisition date and other information requested regarding any real property in any jurisdiction 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 ~~AAA~~

CHECK IF HELD BY SPOUSE OR DEPENDENT CHILD	ADDRESS PARCEL/LOT NUMBER	LOT SIZE/ STAND NO./ SQUARE FOOTAGE OF BUILDING	TYPE OF PROPERTY	DATE ACQUIRED/ DOWN PAYMENT	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 figure in item 4, column A on page 48.)	TOTAL CURRENT MARKET VALUE (Enter this figure in item 4, column B on page 48.)	

Initials _____ Gaming Agency _____ Date _____

SCHEDULE "E" - CASH VALUE - LIFE INSURANCE

Packet Page 163

64. 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 ~~AAA~~

CHECK IF HELD BY SPOUSE OR DEPENDENT CHILD	DATE PURCHASED	INSURANCE CARRIER POLICY NUMBER	BENEFICIARY(IES)	FACE VALUE	ANNUAL PREMIUM PAYMENTS	CASH SURRENDER VALUE	EFFECTIVE DATE OF CASH SURRENDER VALUE
						\$ _____	
						TOTAL CASH SURRENDER VALUE (Enter this figure in item 5, column B on page 48.)	

Initials _____ Gaming Agency _____ Date _____

Page 53

SCHEDULE "F" - CASH VALUE - PENSION/RETIREMENT FUNDS

Packet Page 164

65. Indicate below the information requested with regard to the cash value of all retirement/investment/pension funds* held by you or your spouse.

// N/A ~~AAA~~

CHECK IF HELD BY SPOUSE	TYPE OF FUND	TYPE OF SECURITIES HELD AND ACCOUNT NUMBER, IF ANY	EMPLOYER/ INSTITUTION	CUMULATIVE EMPLOYEE CONTRIBUTION	CUMULATIVE EMPLOYER CONTRIBUTION	CURRENT CASH VALUE	EFFECTIVE DATE OF CASH VALUE
				\$ _____		\$ _____	
				TOTAL CUMULATIVE EMPLOYEE CONTRIBUTION (Enter this figure in item 6, column A on page 48.)			TOTAL CURRENT CASH VALUE (Enter this figure in item 6, column B on page 48.)

*If you are filing this application in the United States, the information is to include IRA, 401K and KEOGH plans.

Initials _____ Gaming Agency _____ Date _____

Page 54

SCHEDULE "G" - VEHICLES

66. Indicate below the information requested with regard to all vehicles owned or leased by you, your spouse, or your dependent children.

// N/A ~~///~~

CHECK IF HELD BY SPOUSE OR DEPENDENT CHILD	TYPE OF VEHICLE	SPECIFY IF OWNED OR LEASED*	DATE OF PURCHASE/ LEASE	MODEL YEAR	MAKE/ MODEL OF VEHICLE	COST**	IF OWNED, CURRENT MARKET VALUE
						\$ _____	\$ _____
<p>*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.</p> <p>**If leased, enter the sum of the down payment plus monthly payments to date as the total cost.</p>						<p>TOTAL COST OF VEHICLES (Enter this figure in Item 8, column A on page 48.)</p>	<p>TOTAL CURRENT CASH VALUE (Enter this figure in Item 8, Column B on page 48.)</p>

Initials _____ Gaming Agency _____ Date _____

SCHEDULE "H" - OTHER ASSETS

Packet Page 166

67. List below the information requested regarding all other assets, including any business investments in which any direct, indirect, vested or contingent is held by you, your spouse or your dependent children. Business interests should include, but not be limited to, joint ventures, partnerships, sole proprietorships, corporations and LLCs. Other assets should include, but not be limited to, art collections, coin collections, and antiques.

// N/A ~~XXX~~

CHECK IF HELD BY SPOUSE OR DEPENDENT CHILD	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 9, column A on page 48.)				TOTAL CURRENT MARKET VALUE OF OTHER ASSETS (Enter this figure in item 9, column B on page 48.)

Initials _____ Gaming Agency _____ Date _____

SCHEDULE "I" - NOTES PAYABLE

Packet Page 167

68. List below the information requested with regard to all notes payable for which you, your spouse or dependent children are obligated.

// N/A ~~XXX~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	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
							\$ _____			\$ _____
							TOTAL ORIGINAL AMOUNT OF NOTES PAYABLE (Enter this figure in item 10, column C on page 48.)			

SCHEDULE "J" - LOANS AND OTHER PAYABLES

Packet Page 168

69. 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 ~~AM~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	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	
							\$ _____			\$ _____	
							TOTAL ORIGINAL AMOUNT OF LIABILITY (Enter this figure in item 11, column C on page 48.)				TOTAL AMOUNT OF OUTSTANDING LOANS AND OTHER PAYABLES (Enter this figure in item 11, column D on page 48.)

Initials _____ Gaming Agency _____ Date _____

SCHEDULE “K” - TAXES PAYABLE

70. 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 ~~AAA~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	TAXING AUTHORITY	NATURE OF TAX	DATE AND AMOUNT OF ORIGINAL OBLIGATION	FINES, PENALTIES AND INTEREST, IF ANY	TOTAL AMOUNT DUE
			\$ _____		\$ _____
			TOTAL ORIGINAL TAX OBLIGATION(S) (Enter this figure in item 12, column C on page 48.)		
					TOTAL AMOUNT OF TAXES PAYABLE (Enter this figure in item 12, column D on page 48.)

SCHEDULE "L" - MORTGAGES OR LIENS PAYABLE ON REAL ESTATE

Packet Page 170

71. List below the information requested with regard to all mortgages or liens due and owing on real estate for which you, your spouse or your dependent children are obligated.

// N/A ~~AAA~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	NAME AND 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	
				\$ _____				\$ _____	
				TOTAL ORIGINAL MORTGAGES OR LIENS PAYABLE ON REAL ESTATE (Enter this figure in item 13, column C on page 48.)					TOTAL MORTGAGES OR LIENS PAYABLE ON REAL ESTATE (Enter this figure in item 13, column D on page 48.)

Initials _____ Gaming Agency _____ Date _____

Page 60

SCHEDULE "M" - LOANS AGAINST INSURANCE/PENSION PLANS

Packet Page 171

72. List below the information requested with regard to all loans against life insurance policies, pension plans, etc., taken by you, your spouse or your dependent children.

// N/A ~~AAA~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	INSURANCE CARRIER/ PENSION PLAN	PURPOSE OF LOAN	ORIGINAL AMOUNT OF LOAN	INTEREST RATE (%)	DATE OF LOAN	PERIODIC PAYMENT AMOUNT/ PAY PERIOD	CURRENT LOAN BALANCE
			\$ _____				\$ _____
			TOTAL ORIGINAL LIABILITY INSURANCE/ PENSION LOANS (Enter this figure in item 14, column C on page 48.)				TOTAL AMOUNT OUTSTANDING INSURANCE/PENSION LOANS (Enter this figure in item 14, column D on page 48.)

Initials _____ Gaming Agency _____ Date _____

Page 61

SCHEDULE "N" - ANY OTHER INDEBTEDNESS

Packet Page 172

73. List below the information requested with regard to any other indebtedness for which you, your spouse or your dependent children are obligated.

// N/A ~~///~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	NAME AND 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
						\$ _____	\$ _____
						TOTAL ORIGINAL AMOUNT OTHER INDEBTEDNESS (Enter this figure in item 15, column C on page 48.)	TOTAL AMOUNT OUTSTANDING OTHER INDEBTEDNESS (Enter this figure in item 15, column D on page 48.)

Initials _____ Gaming Agency _____ Date _____

Page 62

SCHEDULE "O" - CONTINGENT LIABILITIES

Packet Page 173

74. List below the information requested with regard to all contingent liabilities for which you, your spouse or your dependent children are obligated.

// N/A ~~///~~

CHECK IF OWED BY SPOUSE OR DEPENDENT CHILD	NAME AND 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
						\$ _____	\$ _____
						TOTAL ORIGINAL CONTINGENT LIABILITIES (Enter this figure in item 16, column C on page 48.)	TOTAL AMOUNT OF OUTSTANDING CONTINGENT LIABILITIES (Enter this figure in item 16, column D on page 48.)

Initials _____ Gaming Agency _____ Date _____

75. Provide the names and other information requested of three (3) references over the age of 18 who have known you for at least one year and can attest to your good character and reputation. No person can be a reference who is a member of your family. (Spouse, parents, grandparents, children, grandchildren, siblings, uncles, aunts, nephews, nieces, fathers-in-law, mothers-in-law, sons-in-law, daughters-in-law, brothers-in-law and sisters-in-law whether by whole or half blood, by marriage, adoption or natural relationship.)

REFERENCE ONE

Name _____ Business Address _____
 Address _____

 Telephone No. _____ Occupation _____
 How long have you known the reference?

REFERENCE TWO

Name _____ Business Address _____
 Address _____

 Telephone No. _____ Occupation _____
 How long have you known the reference?

REFERENCE THREE

Name _____ Business Address _____
 Address _____

 Telephone No. _____ Occupation _____
 How long have you known the reference?

76. As indicated in the instructions on page 2 of this form, this page is to be used by you for any questions which require additional space to answer. The number of the question must be stated immediately prior to your answer. If additional pages are needed, photocopy this page or add paper of similar size and identify these pages with corresponding numbers and letters. **You must use blue ink to personally initial, date and identify the gaming agency to which your application is being submitted at the bottom of any new page added.**

IDENTIFY ALL ANSWERS BY ORIGINAL QUESTION NUMBERS

USE ADDITIONAL PAGES IF NECESSARY

STATEMENT OF TRUTH

STATE/PROVINCE OF _____:

SS:

COUNTY/DISTRICT OF _____:

_____, being duly sworn according to law deposes and says:

1. I am the applicant who is submitting this application form.
2. I personally supplied 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 Multi-Jurisdictional Casino/Gaming License Personal History Disclosure Form that is not an original document is a true copy of the original document.
5. I swear (or affirm) that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATED: _____ (LEGAL SIGNATURE)
(Signature of Applicant)

Subscribed and sworn to
 before me this _____ day
 of _____,

 NOTARY PUBLIC, JUSTICE OF THE PEACE/
 COMMISSIONER FOR DECLARATIONS OR OTHER
 PERSON AUTHORIZED TO TAKE DECLARATIONS

 STATE/PROVINCE, COUNTRY



MASSACHUSETTS GAMING COMMISSION

To: Chair Judd-Stein and Commissioners Hill, Maynard, O'Brien, and Skinner
From: Karen Wells
Date: October 6, 2022
Re: Scoring for Competitive Category 3 Applications

Overview:

Section 6 of c. 23N allows the Commission to issue up to seven (7) category 3 licenses that are not connected to a category 1 or category 2 licensee. For purposes of this memorandum, we will refer to those licenses as untethered category 3 licenses.

This memorandum is focused on the competitive application process for the 7 open category 3 untethered licenses. However, the Commission may choose to do the same process or a shortened process for the category 1, category 2, and category 3 tethered licenses.

Competitive Application Review:

MGL c. 23N section 6(b) paragraph 3, requires any entity offering sports wagering through a mobile application or other digital platform to obtain a category 3 sports wagering license. The Commission is allowed to "issue no more than 7 category 3 licenses that are not connected to a category 1 or category 2 license." These 7 licenses require a competitive application and review process. The Commission has established 6 criteria for questions and review of the potential licensees. The criteria are:

- Financial Stability
- Economic Impact
- Diversity and Inclusion
- Information Technology Platform
- Responsible Gaming
- Prior Experience and Background

This is a competitive application process for a license and is not a procurement. However, establishing review criteria and a structured application process similar to those used in a procurement process is good business practice, as it provides a clear system for comparing applicants and awarding the competitive licenses.

Scorecards:

The Commission should establish a scorecard prior to receiving or opening any applications. As there are many kinds of scorecards, the main issues to consider when developing a scorecard are the following:



Massachusetts Gaming Commission

Weight of reviewed categories: The Commission has chosen six (6) general categories for applicants to provide background information, for scoring and eligibility criteria. The Commission could choose to weigh all 6 evenly (16.7% of the overall score) or could choose to weigh each section differently.

Scoring system: There are many scoring systems a few examples that are pertinent to applications are the following:

- pass/fail,
- points system,
- somewhat meets/meets/somewhat exceeds/exceeds
- combination of pass/fail and points
- combination of points and somewhat meets/meets/somewhat exceeds and exceeds

Pass/Fail: A pass/fail system is usually used when licenses are not competitive. The minimum criterion for licensure is established and an applicant either meets the criteria, and is awarded a license, or does not meet the criteria, and is denied an application with ways to remedy the situation. For the competitive license process, a completely pass/fail system may not be appropriate, however, for background suitability a pass/fail system would be appropriate.

Points System: A points system is generally used when you are buying something that is a commodity and there are multiple options of a very similar item available. It usually takes into consideration the price of an item, the warranty, how long the vendor has been in business and their track record for dealing with defects, etc. While a points system would be feasible in scoring these recommendations, it does limit the scoring to just the written responses, and the license is not just a commodity. A straight point scoring system makes it very clear who the top 7 applicants would be but requires a great deal of time on establishing the scorecard, as well as a very strict adherence to scoring guidelines and justifications, for each score.

Somewhat Meets/Meets/Somewhat Exceeds/Exceeds: A somewhat meets/meets/somewhat exceeds/exceeds, scoring system is a scoring system generally used with a services or time and materials type application. This system would require the Commission to establish a scorecard that sets the minimum expectations of licensees. This system lends itself best to determining best value and allows the reviewers to provide detailed explanations as to why one score is a somewhat exceeds or exceeds to differentiate. It would not lend itself greatly to a process with 20+ applicants.

Combination Approach: A combination approach would utilize all three of the scoring systems. For example, the pass/fail system could be used for a minimum threshold of financial and background suitability. A licensee either meets the minimum standards or does not and the Commission does not review any of the competitive application information unless they have met minimum suitability standards. Of the remaining candidates, financial and background suitability could be utilized as one of the scoring criteria in a competitive manner. The Commission could then use a combination system that grades the applicants on a somewhat



meets/meets/somewhat exceeds/exceeds scoring criteria with a point system associated with each of the established criteria.

For example:

- Somewhat meets: 1-50
- Meets: 51-70 points
- Somewhat Exceeds: 71-85 points
- Exceeds 86-100 points

This system will allow for the Commissioners to clearly lay out if an applicant meets our standards, and then through a consensus scoring discussion give a point scoring along with explanations as to why the score was determined and would only require concise explanations of why an applicant received a particular score.

Due Diligence, Question and Answer, and Oral Presentations:

Once the Commission has done its initial review of applications and determined the top tier of applicants it has the option to either award the untethered category 3 licenses or do a form of due diligence. The due diligence can either be a written question and answer process for clarification on anything in the written submission, it can be a scheduled oral presentation by the top tier of licensees, or it can be a combination of the two. While this additional step is not always needed, the Commission may reserve its right to take this step if there is a large pool of applicants and the top tier of licensees is greater than seven. This would allow the Commission to dive deeper into top rated responses and get clarifications to help differentiate between the offerings to the Commonwealth from sports wagering operators.



Massachusetts Gaming Commission



TO: Chair Cathy Judd-Stein
 Commissioner Bradford R. Hill
 Commissioner Jordan Maynard
 Commissioner Eileen O'Brien
 Commissioner Nakisha Skinner

FROM: Sterl Carpenter – Regulatory Compliance Manager

CC: Karen Wells – Executive Director

DATE: October 6, 2022

RE: Simultaneous or staggered launch of sports wagering in other US States and temporary licensure in other jurisdictions.

Introduction:

On September 22, 2022, the MGC heard from prospective untethered licensees as well as the current possible 6 tethered providers on two proposed questions from the commission. The opinions given by the prospective licensees all appeared to be on par with their current business position in the market. This memo is to further assist the commission in their decision making on these two items.

During the statement of *FanDuel's Cory Fox*, he listed that the states of Arizona, Colorado, Kansas, Michigan, and New York all had 'Universal' start dates. I believe Mr. Fox was just answering the question of all online operators having the same start date. The states of Michigan and New York had in-person wagering prior to standing-up online wagering. In fact, several states have stood-up retail prior to online (*all green states in the map below except Tennessee*).

On the question answered by *Hard Rock Digital's Danielle Boyd*, Tennessee only has online operators. There are no retail locations in Tennessee. When comparing West Virginia to Tennessee, the 'Universal' start date Ms. Boyd stated, only spoke to online operators having the same start date.

State Information:

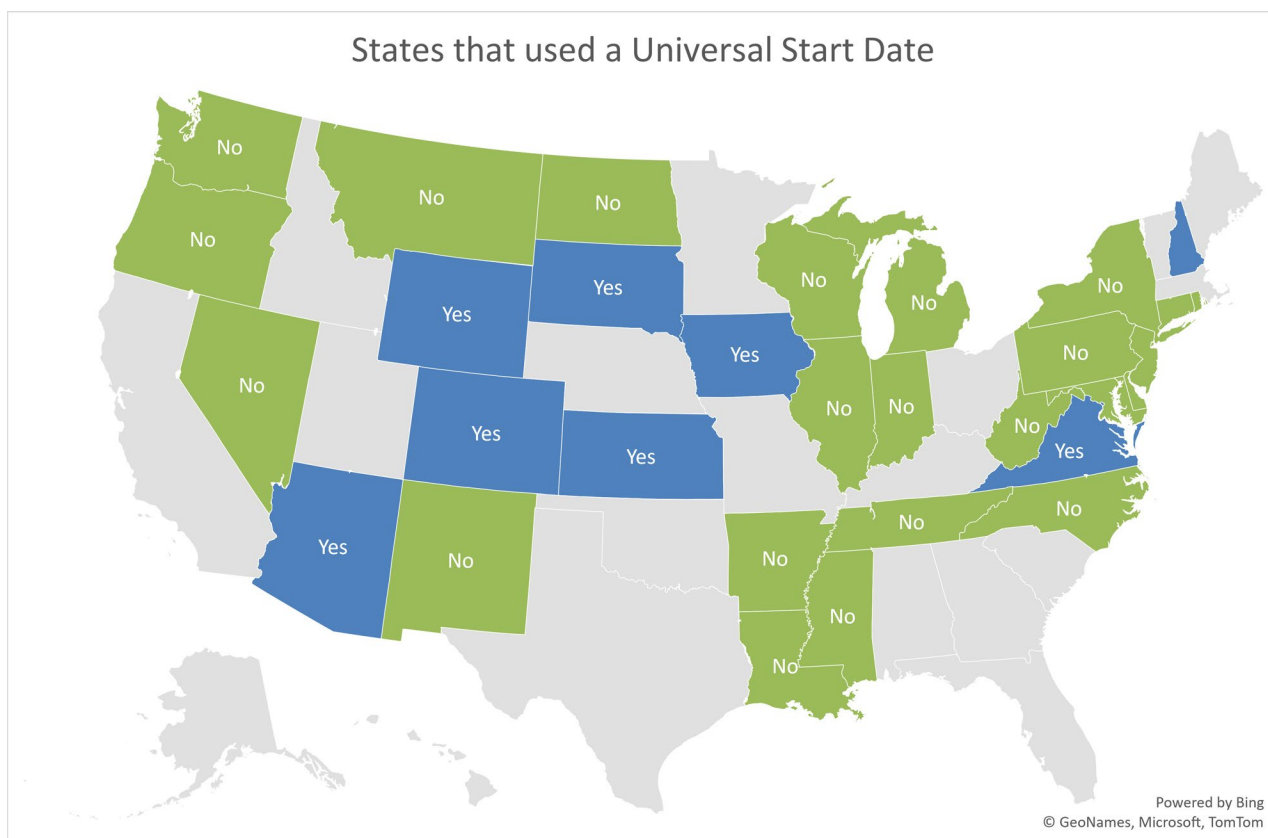
The following section is a gathering of information from the following 28 states and districts. Three states not included are North Carolina, New Mexico, and Wisconsin (due to



Massachusetts Gaming Commission

having limited tribal casino operations). States in **blue** fall under a 'Universal' start date where both retail and mobile were started at the same time. *(The following information is also available in excel form if needed for ease of comparison.)*

ii. *What is your position on a staggered launch vs. a simultaneous launch of the different categories of sports wagering operators? (retail vs. mobile, tethered mobile vs. untethered mobile.) Any experience from other jurisdictions and reasoning behind your position should be included in your answer.*



Arizona –

Universal start date

Date leg. passed: 4-15-2021

First Wager accepted: 9-9-2021

First Online wager (if different):

Time between leg-wager: 5 months

Arkansas –

Date leg. passed: Retail: 11/6/2018 Online: 2/28/2022



Massachusetts Gaming Commission

First Wager accepted: 7-1-2019
 First Online wager (if different): 3-6-2022
 Time between leg-wager: 9 months

Colorado -

Universal start date

Date leg. passed: 11-5-2019
 First Wager accepted: 5-1-2020
 First Online wager (if different):
 Time between leg-wager: 6 months

Connecticut -

Date leg. passed: 5-27-2021
 First Wager accepted: 9-30-2021
 First Online wager (if different): 10-12-2021
 Time between leg-wager: 4 months

Delaware -

Date leg. passed: 5-14-2018
 First Wager accepted: 6-5-2018
 First Online wager (if different): (not live)
 Time between leg-wager: 1 month

Illinois -

Date leg. passed: 6-28-2019
 First Wager accepted: 3-9-2020
 First Online wager (if different): 6-18-2020
 Time between leg-wager: 9 months

Indiana -

Date leg. passed: 5-13-2019
 First Wager accepted: 9-1-2019
 First Online wager (if different): 10-3-2019
 Time between leg-wager: 4 months

Iowa -

Universal start date

Date leg. passed: 5-13-2019
 First Wager accepted: 8-15-2019
 First Online wager (if different):
 Time between leg-wager: 3 months



Massachusetts Gaming Commission

Kansas -

Universal start date

Date leg. passed: 5-12-2022
First Wager accepted: 9-1-22
First Online wager (if different):
Time between leg-wager: 4 months

Louisiana -

Date leg. passed: 6-21-21
First Wager accepted: 10-6-21
First Online wager (if different): 1-28-22
Time between leg-wager: 4 months

Maryland -

Date leg. passed: 5-18-2021
First Wager accepted: 12-9-2021
First Online wager (if different): **not live**
Time between leg-wager: 7 months

Michigan -

Date leg. passed: 12-20-2019
First Wager accepted: 3-11-2020
First Online wager (if different): 1-22-22
Time between leg-wager: 4 months

Mississippi -

Date leg. passed: 3-13-2017
First Wager accepted: 8-1-2018
First Online wager (if different): 2-2-2019(only on-premises of casino)
Time between leg-wager: 5 months

Montana -

Date leg. passed: 5-3-2019
First Wager accepted: 3-11-2020
First Online wager (if different): 5-2020
Time between leg-wager: 10 months

Nevada -

Date leg. passed: 1949
First Wager accepted: 1949
First Online wager (if different): 2013
Time between leg-wager: 0 months



Massachusetts Gaming Commission

New Hampshire –
Universal start date

Date leg. passed: 7-12-2019
First Wager accepted: 12-30-2019
First Online wager (if different):
Time between leg-wager: 5 months

New Jersey -

Date leg. passed: 6-11-2018
First Wager accepted: 6-14-2018
First Online wager (if different): 8-6-2018
Time between leg-wager: 3 days

New York -

Date leg. passed: 11-5-2013
First Wager accepted: 7-16-2019
First Online wager (if different): 1-8-2022
Time between leg-wager: 6 years 8 months

Oregon -

Date leg. passed: N/A
First Wager accepted: 8-27-2019
First Online wager (if different): 10-15-2019
Time between leg-wager: N/A

Pennsylvania -

Date leg. passed: 10-30-2017
First Wager accepted: 11-17-2018
First Online wager (if different): 5-31-2019
Time between leg-wager: 13 months

Rhode Island -

Date leg. passed: retail- 6-22-2018 online 3-25-2019
First Wager accepted: 11-26-2018
First Online wager (if different): 9-4-2019
Time between leg-wager: 5 months

South Dakota -

Date leg. passed: 3-18-2021
First Wager accepted: 9-9-2021
First Online wager (if different): (must be on premise)



Massachusetts Gaming Commission

Time between leg-wager: 6 months

Tennessee -

Date leg. passed: 5-24-2019

First Wager accepted: 11-1-2020

First Online wager (if different): Only online wagers allowed

Time between leg-wager: 1 year 6 months

Virginia -

Universal start date

Date leg. passed: 4-22-2020

First Wager accepted: 1-21-21

First Online wager (if different):

Time between leg-wager: 9 months

Washington DC -

Universal start date

Date leg. passed: 5-3-2019

First Wager accepted: 5-28-2020

First Online wager (if different):

Time between leg-wager: 1 year

Washington -

Date leg. passed: 3-25-2020

First Wager accepted: 9-9-2021

First Online wager (if different): **Not allowed**

Time between leg-wager: 6 months

West Virginia -

Date leg. passed: 3-9-18

First Wager accepted: 9-1-2018

First Online wager (if different): 12-27-2018

Time between leg-wager: 6 months

Wyoming -

Universal start date

Date leg. passed: 4-5-2021

First Wager accepted: 9-1-2021

First Online wager (if different):

Time between leg-wager: 5 months

Question on licensing requirements in other jurisdictions:



Massachusetts Gaming Commission

i. Assuming any Commission implementation of temporary licensure for untethered Category 3 operators would necessarily include technical testing, suitability, internal controls and other industry-standard requirements, and given the logistical complexities and consumer protection concerns outlined at the Commission meeting on September 15, 2022, would you have an interest in a temporary license and if so, do you have any suggestions on how to address consumer protection concerns in the event that a large number of licensees may be required to dismantle their operations within a short period of time?

The following is regarding the Massachusetts' legislation and its temporary license provision, brought up in the September 22, 2022, commission meeting. Penn Interactive's Josh Pearl stated the only jurisdiction he knew of a competitive process was Illinois. Mr. Pearl also stated the Massachusetts legislation's temporary licensure provision as a whole is unique.

Following this statement, MGC's research found Illinois, Maryland, and Virginia with a similar process of issuing a select number of operators. Illinois has as a competitive process that only allowed 7 master sports wagering licenses and 3 master sports wagering licenses to online sports wagering operators. Further information on these three jurisdictions is below.



Illinois

The following is a portion of the regulations from the Illinois Gaming Board on the subject of licensure.

(230 ILCS 45/25-40)

Sec. 25-40. Master sports wagering license issued to a sports facility.

(a) As used in this Section, "designee" means a master sports wagering licensee under Section 25-30, 25-35, or 25-45 or a management services provider licensee.

(b) A sports facility or a designee contracted to operate sports wagering at or within a 5-block radius of the sports facility may apply to the Board for a master sports wagering license. To the extent permitted by federal and State law, the Board shall actively seek to achieve racial, ethnic, and geographic diversity when issuing master sports wagering licenses to sports facilities or their designees and encourage minority-owned businesses, women-owned businesses, veteran-owned businesses, and businesses owned by persons with disabilities to apply for licensure. Additionally, the report published under subsection (m) of Section 25-45 shall impact the issuance of the master sports wagering license to the extent permitted by federal and State law.



Massachusetts Gaming Commission

For the purposes of this subsection (b), "minority-owned business", "women-owned business", and "business owned by persons with disabilities" have the meanings given to those terms in Section 2 of the Business Enterprise for Minorities, Women, and Persons with Disabilities Act.

(c) The Board may issue up to 7 master sports wagering licenses to sports facilities or their designees that meet the requirements for licensure as determined by rule by the Board. If more than 7 qualified applicants apply for a master sports wagering license under this Section, the licenses shall be granted in the order in which the applications were received. If a license is denied, revoked, or not renewed, the Board may begin a new application process and issue a license under this Section in the order in which the application was received.

(d) The initial license fee for a master sports wagering license for a sports facility is \$10,000,000. The master sports wagering license is valid for 4 years.

(e) The sports facility or its designee may renew the master sports wagering license for a period of 4 years by paying a \$1,000,000 renewal fee to the Board.

(f) A sports facility or its designee issued a master sports wagering license may conduct sports wagering at or within a 5-block radius of the sports facility.

(g) A sports facility or its designee issued a master sports wagering license may conduct sports wagering over the Internet within the sports facility or within a 5-block radius of the sports facility.

(h) The sports wagering offered by a sports facility or its designee over the Internet or through a mobile application shall be offered under the same brand as the sports facility is operating under, the brand the designee is operating under, or a combination thereof.

(i) Until issuance of the first license under Section 25-45 or March 5, 2022, whichever occurs first, an individual must register in person at a sports facility or the designee's facility to participate in sports wagering offered over the Internet or through a mobile application.

(Source: P.A. 101-31, eff. 6-28-19; 102-689, eff. 12-17-21.)

(230 ILCS 45/25-45)

Sec. 25-45. Master sports wagering license issued to an online sports wagering operator.

(a) The Board shall issue 3 master sports wagering licenses to online sports wagering operators for a nonrefundable license fee of \$20,000,000 pursuant to an open and competitive selection process. The master sports wagering license issued under this Section may be renewed every 4 years upon payment of a \$1,000,000 renewal fee. To the extent permitted by federal and State law, the Board shall actively seek to achieve racial, ethnic, and geographic diversity when issuing master sports wagering licenses under this Section and encourage minority-owned businesses, women-owned businesses, veteran-owned businesses, and businesses owned by persons with disabilities to apply for licensure.



Massachusetts Gaming Commission

For the purposes of this subsection (a), "minority-owned business", "women-owned business", and "business owned by persons with disabilities" have the meanings given to those terms in Section 2 of the Business Enterprise for Minorities, Women, and Persons with Disabilities Act.

(b) Applications for the initial competitive selection occurring after the effective date of this Act shall be received by the Board within 540 days after the first license is issued under this Act to qualify. The Board shall announce the winning bidders for the initial competitive selection within 630 days after the first license is issued under this Act, and this time frame may be extended at the discretion of the Board.

(c) The Board shall provide public notice of its intent to solicit applications for master sports wagering licenses under this Section by posting the notice, application instructions, and materials on its website for at least 30 calendar days before the applications are due. Failure by an applicant to submit all required information may result in the application being disqualified. The Board may notify an applicant that its application is incomplete and provide an opportunity to cure by rule. Application instructions shall include a brief overview of the selection process and how applications are scored.

(d) To be eligible for a master sports wagering license under this Section, an applicant must: (1) be at least 21 years of age; (2) not have been convicted of a felony offense or a violation of Article 28 of the Criminal Code of 1961 or the Criminal Code of 2012 or a similar statute of any other jurisdiction; (3) not have been convicted of a crime involving dishonesty or moral turpitude; (4) have demonstrated a level of skill or knowledge that the Board determines to be necessary in order to operate sports wagering; and (5) have met standards for the holding of a license as adopted by rules of the Board.

The Board may adopt rules to establish additional qualifications and requirements to preserve the integrity and security of sports wagering in this State and to promote and maintain a competitive sports wagering market. After the close of the application period, the Board shall determine whether the applications meet the mandatory minimum qualification criteria and conduct a comprehensive, fair, and impartial evaluation of all qualified applications.

(e) The Board shall open all qualified applications in a public forum and disclose the applicants' names. The Board shall summarize the terms of the proposals and make the summaries available to the public on its website.

(f) Not more than 90 days after the publication of the qualified applications, the Board shall identify the winning bidders. In granting the licenses, the Board may give favorable consideration to qualified applicants presenting plans that provide for economic development and community engagement. To the extent permitted by federal and State law, the Board may give favorable consideration to qualified applicants demonstrating commitment to diversity in the workplace.

(g) Upon selection of the winning bidders, the Board shall have a reasonable period of time to ensure compliance with all applicable statutory and regulatory criteria



Massachusetts Gaming Commission

before issuing the licenses. If the Board determines a winning bidder does not satisfy all applicable statutory and regulatory criteria, the Board shall select another bidder from the remaining qualified applicants.

(h) Nothing in this Section is intended to confer a property or other right, duty, privilege, or interest entitling an applicant to an administrative hearing upon denial of an application.

(i) Upon issuance of a master sports wagering license to a winning bidder, the information and plans provided in the application become a condition of the license. A master sports wagering licensee under this Section has a duty to disclose any material changes to the application. Failure to comply with the conditions or requirements in the application may subject the master sports wagering licensee under this Section to discipline, including, but not limited to, fines, suspension, and revocation of its license, pursuant to rules adopted by the Board.

(j) The Board shall disseminate information about the licensing process through media demonstrated to reach large numbers of business owners and entrepreneurs who are minorities, women, veterans, and persons with disabilities.

(k) The Department of Commerce and Economic Opportunity, in conjunction with the Board, shall conduct ongoing, thorough, and comprehensive outreach to businesses owned by minorities, women, veterans, and persons with disabilities about contracting and entrepreneurial opportunities in sports wagering. This outreach shall include, but not be limited to:

(1) cooperating and collaborating with other State boards, commissions, and agencies; public and private universities and community colleges; and local governments to target outreach efforts; and

(2) working with organizations serving minorities, women, and persons with disabilities to establish and conduct training for employment in sports wagering.

(l) The Board shall partner with the Department of Labor, the Department of Financial and Professional Regulation, and the Department of Commerce and Economic Opportunity to identify employment opportunities within the sports wagering industry for job seekers and dislocated workers.

(m) By March 1, 2020, the Board shall prepare a request for proposals to conduct a study of the online sports wagering industry and market to determine whether there is a compelling interest in implementing remedial measures, including the application of the Business Enterprise Program under the Business Enterprise for Minorities, Women, and Persons with Disabilities Act or a similar program to assist minorities, women, and persons with disabilities in the sports wagering industry.

As a part of the study, the Board shall evaluate race and gender-neutral programs or other methods that may be used to address the needs of minority and women applicants and minority-owned and women-owned businesses seeking to participate in the sports wagering industry. The Board shall submit to the General Assembly and publish on its website the results of this study by August 1, 2020.



Massachusetts Gaming Commission

If, as a result of the study conducted under this subsection (m), the Board finds that there is a compelling interest in implementing remedial measures, the Board may adopt rules, including emergency rules, to implement remedial measures, if necessary and to the extent permitted by State and federal law, based on the findings of the study conducted under this subsection (m).
(Source: P.A. 101-31, eff. 6-28-19.)

The Illinois' Gaming Board outlined a competitive selection process. ...To the extent permitted by federal and State law, the Board shall actively seek to achieve racial, ethnic, and geographic diversity when issuing master sports wagering licenses under this Section and encourage minority-owned businesses, women-owned businesses, veteran-owned businesses, and businesses owned by persons with disabilities to apply for licensure.

Furthermore, the temporary licensure part was used after the selection of candidates were filled. As of this memo, Illinois still has several operators under a provisional (Temporary Operating Permit) license.

Finally, Illinois stated that all possible approved entities applications would be handled in the order that they received them.



Maryland

Another jurisdiction that has a select number of licenses is Maryland. Although the limits are extremely high (30 Class B and 60 mobile), they set several standards that must be met to be considered for licensure. They also use reciprocity for vendors and operators licensing applications as long as they are in good standing in the other jurisdictions similar to Maryland. Maryland has a list of acceptable jurisdictions that are similar to their rules and regulations. Maryland passed legislation on May 18, 2021. As of this memo Maryland has yet to have their mobile licensees in operation.



Virginia

Virginia passed legislation on April 22, 2020, allowing for 12 mobile licenses to be awarded throughout the state. They placed a 'Universal' start date of January 21, 2021, for operations to start. The difference in Virginia is they are still in the process of opening



Massachusetts Gaming Commission

their land-based casinos throughout the Commonwealth. The approved sportsbooks currently include:

- *BetRivers* (has ties to the Rivers Casino brand, with plans to open in Portsmouth)
- *Caesars/William Hill* (Caesars Entertainment plans to open a casino in Danville)
- *Golden Nugget* (one of the half-dozen bidders vying to open a casino in Richmond)
- *Bally's Corp.* (casino operator out of Rhode Island, another Richmond bidder)
- *BetMGM* (has ties to the MGM Casino brand, which has not indicated it is planning to operate a Virginia casino)
- *Wynn* (operates casinos in Las Vegas, no public plans for Virginia casino)
- *FanDuel* (online only, though has a partnership with Washington Football Team)
- *DraftKings* (online only)

Virginia regulations state the following as it pertains to licensure:

2. The Director shall issue no fewer than four and no more than 12 permits pursuant to this section; however, if an insufficient number of applicants apply for the Director to satisfy the minimum, this provision shall not be interpreted to direct the Director to issue a permit to an unqualified applicant. A permit shall not count toward the minimum or maximum if it (i) is issued pursuant to subdivision 4 or 5 to a major league sports franchise or to the operator of a facility; (ii) is issued pursuant to subdivision 6 to an applicant that operates or intends to operate a casino gaming establishment; or (iii) is revoked, expires, or otherwise becomes not effective.

3. In issuing permits to operate sports betting platforms and sports betting facilities, the Director shall consider the following factors:

- a. The contents of the applicant's application as required by subsection B;*
- b. The extent to which the applicant demonstrates past experience, financial viability, compliance with applicable laws and regulations, and success with sports betting operations in other states;*
- c. The extent to which the applicant will be able to meet the duties of a permit holder, as specified in § 58.1-4034;*
- d. Whether the applicant has demonstrated to the Department that it has made serious, good-faith efforts to solicit and interview a reasonable number of investors that are minority individuals, as defined in § 2.2-1604;*
- e. The amount of adjusted gross revenue and associated tax revenue that an applicant is expected to generate;*



Massachusetts Gaming Commission

f. The effect of issuing an additional permit on the amount of gross revenue and associated tax revenue generated by all existing permit holders, considered in the aggregate; and

g. Any other factor the Director considers relevant.

4. In issuing permits to operate sports betting platforms prior to July 1, 2025, the Director shall give substantial and preferred consideration to any applicant that is a major league sports franchise headquartered in the Commonwealth that remitted personal state income tax withholdings based on taxable wages in the Commonwealth in excess of \$200 million for the 2019 taxable year. Any permit holder granted a permit pursuant to this subdivision shall receive substantial and preferred consideration of its first, second, and third applications for renewal pursuant to the provisions of § 58.1-4033; however, such permit holder shall not receive substantial and preferred consideration of its fourth and subsequent applications for renewal. Any permit granted pursuant to this subdivision shall expire if the permit holder ceases to maintain its headquarters in the Commonwealth.

5. In issuing permits to operate sports betting platforms prior to July 1, 2025, the Director shall give substantial and preferred consideration to any applicant that is a major league sports franchise that plays five or more regular season games per year at a facility in the Commonwealth or that is the operator of a facility in the Commonwealth where a major league sports franchise plays five or more regular season games per year; however, the Director shall give such substantial and preferred consideration only if the applicant (i) is headquartered in the Commonwealth, (ii) has an annualized payroll for taxable wages in the Commonwealth that is in excess of \$10 million over the 90-day period prior to the application date, and (iii) the total number of individuals working at the facility in the Commonwealth where the major league sports franchise plays five or more regular season games is in excess of 100.

6. If casino gaming is authorized under the laws of the Commonwealth, then in issuing permits to operate sports betting platforms and sports betting facilities, the Director shall give substantial and preferred consideration to any applicant that (i) has made or intends to make a capital investment of at least \$300 million in a casino gaming establishment, including the value of the real property upon which such establishment is located and all furnishings, fixtures, and other improvements; (ii) has had its name submitted as a preferred casino gaming operator to the Department by an eligible host city; and (iii) has been certified by the Department to proceed to a local referendum on whether casino gaming will be allowed in the locality in which the applicant intends to operate a casino gaming establishment.

7. In issuing permits to operate sports betting platforms prior to July 1, 2025, the Director shall give substantial and preferred consideration to any applicant that demonstrates in its application (i) a description of any equity interest owned by minority individuals or minority-owned businesses, (ii) a detailed plan to achieve increased minority equity investment, (iii) a description of all efforts made to seek equity investment from minority individuals or minority-owned businesses, or (iv) a plan detailing efforts made to solicit participation of minority individuals or minority-owned businesses in the applicant's purchase of goods and services



Massachusetts Gaming Commission

related to the sports betting platform or to provide assistance to a historically disadvantaged community or historically black colleges and universities located within the Commonwealth. As used in this subdivision, "historically black colleges and universities," "minority individual," and "minority-owned business" mean the same as those terms are defined in § 2.2-1604.

8. In a manner as may be required by Board regulation, any entity that applies pursuant to subdivision 4, 5, 6, or 7 may demonstrate compliance with the requirements of an application, the duties of a permit holder, and any other provision of this article through the use of a partner, subcontractor, or other affiliate of the applicant.

E. The Director shall make a determination on an initial application for a sports betting permit within 90 days of receipt. The Director's action shall be final unless appealed in accordance with § 58.1-4007.

F. The following shall be grounds for denial of a permit or renewal of a permit:

- 1. The Director reasonably believes the applicant will be unable to satisfy the duties of a permit holder as described in subsection A of § 58.1-4034;*
- 2. The Director reasonably believes that the applicant or its directors lack good character, honesty, or integrity;*
- 3. The Director reasonably believes that the applicant's prior activities, criminal record, reputation, or associations are likely to (i) pose a threat to the public interest, (ii) impede the regulation of sports betting, or (iii) promote unfair or illegal activities in the conduct of sports betting;*
- 4. The applicant or its directors knowingly make a false statement of material fact or deliberately fail to disclose information requested by the Director;*
- 5. The applicant or its directors knowingly fail to comply with the provisions of this article or any requirements of the Director;*
- 6. The applicant or its directors were convicted of a felony, a crime of moral turpitude, or any criminal offense involving dishonesty or breach of trust within the 10 years prior to the submission date of the permit application;*
- 7. The applicant's license, registration, or permit to conduct a sports betting operation issued by any other jurisdiction has been suspended or revoked;*
- 8. The applicant defaults in payment of any obligation or debt due to the Commonwealth; or*
- 9. The applicant's application is incomplete.*

Conclusion:



Massachusetts Gaming Commission

Throughout the United States, each state has its own unique stamp on how they are handling Sports Wagering. There are states that have select operators (tribal, casinos, racetracks), select regions in their state where online is allowed and not allowed (Louisiana), unlimited operators (Ohio), but none where temporary licenses can be issued to more than the number of permanent ones that would be allowed by statute.



Massachusetts Gaming Commission

101 Federal Street, 12th Floor, Boston, Massachusetts 02110 | TEL 617.979.8400 | FAX 617.725.0258 | www.massgaming.com



COVER MEMORANDUM

TO: Chair Cathy Judd-Stein
Eileen O'Brien, Commissioner
Bradford Hill, Commissioner
Nakisha Skinner, Commissioner
Jordan Maynard, Commissioner

FROM: Loretta Lillios, IEB Director

RE: 10/6/2022 Public Meeting – Regulations for Sports Wagering Vendor Licensing and Registration

DATE: September 28, 2022

Issue:

Adoption of Vendor Licensing and Registration Regulations for Sports Wagering

IEB Recommendation:

The IEB recommends that the Commission make a determination whether to require licensure and registration of vendors to sports wagering operators. If so, the IEB requests that the Commission consider the proposed draft Sports Wagering Vendor regulation. The attached Memorandum summarizes the proposed regulation and points out key differences between the proposed regulation and the vendor licensing and registration requirements in the gaming context.

Action Requested:

Commission determination whether to require licensure and/or registration of vendors to sports wagering operators, and if so, Commission VOTE to approve by emergency promulgation regulations governing the licensure and registration of such vendors.



TO: Cathy Judd-Stein, Chair
 Bradley Hill, Commissioner
 Jordan Maynard, Commissioner
 Eileen O'Brien, Commissioner
 Nakisha Skinner, Commissioner

FROM: Loretta Lillios, IEB Director
 Heather Hall, Chief Enforcement Counsel/Assistant
 Director, IEB
 Mina Makarious, Partner, Anderson & Kreiger LLP
 Caitlin Monahan, Deputy General Counsel

CC: Karen Wells, Executive Director

DATE: September 28, 2022

RE: Proposed Sports Wagering Vendor Licensing

Enclosed for the Commission's review is a proposed set of regulations, 205 CMR 234.00, governing the licensing of sports wagering vendors. In addition, we have included a proposed form of 205 CMR 202.00 containing a statement of the authority for regulating sports wagering in general and certain definitions necessary for 205 CMR 234 and other pending regulations. This latter regulation will continue to be updated as other regulations are added.

The proposed 205 CMR 234 is modeled on the vendor licensing provisions in 205 CMR 134, which govern the licensing and registration of employees, vendors, junket enterprises and representatives, and labor organizations who work in and with gaming enterprises regulated by the Commission. The two sets of regulations, however, have some key differences:

- The scope of the proposed 205 CMR 234 is narrower than the scope of 205 CMR 134. The Commission may decide to prioritize sports wagering vendor licensing in order to ensure adequate background review of vendors to sports wagering operators that may be considering applying for licensure in Massachusetts. Further licensing of operator employees is likely to be added in the future but is outside the scope of these regulations. Other categories of regulation (e.g., junket enterprises) may not be necessary at all given that sports wagering is more likely to predominantly be conducted online rather than in person.
- The scheme for gaming vendor regulation in 205 CMR 134 divides gaming establishment vendors into three categories: gaming vendor-primary, gaming vendor-secondary, and non-gaming vendor. Gaming-vendors primary and secondary must be



Massachusetts Gaming Commission

licensed by the Commission but are subject to differing levels of review based on the level of their activity in connection with the gaming establishment. 205 CMR 134.04(1); 205 CMR 134.10. Non-gaming vendors, which include everything from linen providers to food purveyors to vending machine providers need only “register” with the Commission. 205 CMR 134.04(2); 205 CMR 134.10.

In the sports-wagering context, there is less need for differentiating “primary” from “secondary” sports wagering vendors, or for the registration of *all* non-sports wagering vendors, because, as noted above, much of the wagering activity occurs online. Accordingly, we propose the following framework for the purposes of licensure under 205 CMR 234.01(1):

- Sports wagering vendors: these vendors are directly, and routinely, involved in the sports wagering operations and must be licensed by the Commission.
- Non-sports wagering vendors: these vendors are not directly involved in sports wagering operations and do not typically need to be licensed or registered.
 - To ensure that operators do not misidentify a vendor as a non-sports wagering vendor that is directly involved in sports wagering, sports wagering operators must identify *all* vendors, including non-sports wagering vendors during the licensing process. 205 CMR 234.01(1)(b).
 - The Division of Licensing may require that certain non-sports wagering vendors register as “Sports Wagering Registrants” under 205 CMR 234.01(2). A set of criteria, including the amount of business the vendor conducts and the centrality of the operations to the overall Sports Wagering Operations are also identified.
- Subcontractors to a vendor do not need to be licensed. 205 CMR 234.01(c). This is consistent with the treatment of subcontractors in 205 CMR 134.04. However, like non-sports wagering vendors, they may be required to register.
- Entities licensed as gaming vendors pursuant to 205 CMR 134 need not be re-licensed under 205 CMR 234.

Aside from these key differences, the proposed 205 CMR 234 provides for vendor licensing in line with the process under 205 CMR 134:

- **Qualifiers.** Vendor qualifications are reviewed both at the entity level and through individual “qualifiers,” individuals and entities who control the vendor. 205 CMR 134.04(4); 234.01(4). The Bureau retains latitude in both cases to identify qualifiers, subject to a right of internal review by the Commission. 205 CMR 134.04(4), (4)(e), (8); 205 CMR 234.01(4), (5), (7).



Massachusetts Gaming Commission

- **Forms.** The Bureau is instructed to create application forms for vendors and qualifiers with substantively identical information. 205 CMR 134.07; 205 CMR 234.02. The sports wagering application process also requires the submittal of fingerprints in accordance with the gaming vendor licensing process. 205 CMR 134.07; 205 CMR 234.02(5).
- **Submittal of Applications.** The process for submitting applications and fees for sports wagering are identical to the process for submitting gaming vendor applications and fees. 205 CMR 134.08; 134.15; 205 CMR 234.03.
- **Review of Applications.** The process for Bureau investigation and review and Bureau and Division of Licensing approval of vendor applications is also the same in both cases. 205 CMR 134.09; 205 CMR 234.04. The review and approval also proceeds under the same substantive standards. 205 CMR 134.10; 205 CMR 234.05 (for sports wagering vendors); 205 CMR 234.06 (for non-sports wagering vendors required to register as sports wagering registrants).
- **Temporary Licensing.** The proposed 205 CMR 234.07 lays out two options for a process by which operators can seek temporary approval of vendors as necessary to begin otherwise permitted operations. The first option largely mirrors 205 CMR 134.12 and would require the Bureau to conduct at least a preliminary review of potential temporary vendor licensees. The second option, which may pose more risk but could be completed more quickly, relies on an attestation process by which applicants would certify as to their qualifications under the pains and penalties of perjury.
- **Administrative Closure.** Both sets of regulations provide for administrative closure for non-cooperative or non-responsive applicants. 205 CMR 134.14; 205 CMR 234.08.
- **Term and Renewal.** The proposed regulations provide for the same term (three years) for vendor licenses, and are subject to the same renewal provisions. 205 CMR 134.15, 134.17, 205 CR 234.09.
- **Duties to Cooperate.** Applicants and licensees are bound to the same duties to cooperate with the Commission and the Bureau under both sets of regulations. 205 CMR 134.18; 205 CMR 234.10.

Disciplinary Action. The grounds and process for disciplinary action against vendor licensees is the same under both regulations. 205 CMR 134.19; 205 CMR 234.11. Likewise, both regulations contain prohibitions on reapplying for licensure after revocation. 205 CMR 134.20; 205 CMR 234.12.



Massachusetts Gaming Commission

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

SPORTS WAGERING VENDORS

234.01	Vendors
234.02	Forms; Fingerprinting
234.03	Submission by Applicants; Fees
234.04	Investigation, Determination, and Appeals for Sports Wagering Vendors
234.05	Affirmative License Standards for Sports Wagering Vendors
234.06	Affirmative Registration Standards for Sports Wagering Registrants
234.07	Temporary Licenses for Sports Wagering Vendors
234.08	Administrative Closure of Applications for Sports Wagering Vendor Licensure
234.09	Term of Sports Wagering Vendor License; Renewal
234.10	Duties of Applicants and Licensees
234.11	Disciplinary Action
234.12	Application following Denial or Revocation

234.01 Vendors

- (1) Requirement for Licensure or Registration.
 - (a) Unless otherwise licensed as a gaming vendor pursuant to 205 CMR 134.00, no Person shall conduct business with a Sports Wagering Operator as a Sports Wagering Vendor unless such Person has been licensed as a Sports Wagering Vendor. A Person shall be considered to be conducting business upon commencement of performance of a contract or provision of a good or service.
 - (b) Except as provided in 205 CMR 234.01(2), a Non-Sports Wagering Vendor shall not be required to obtain a Sports Wagering Vendor License or to register as a Sports Wagering Registrant under this 205 CMR 234. As part of its license application process, a prospective Operator shall be required to identify all of its known or anticipated vendors providing goods or services to whom the prospective Operator reasonably expects to pay an amount of \$10,000 or more within a 12-month period, including Non-Sports Wagering Vendors, and if licensed the Operator shall have a continuing duty to update the Bureau relative to the identification of any new vendors. The Bureau may, at its discretion, require the submission of additional information and documents from an Operator, prospective Operator, or a Non-Sports Wagering Vendor.
 - (c) Except as provided in 205 CMR 234.01(2), a Sports Wagering Subcontractor shall not be required to obtain a Sports Wagering Vendor License or to register as a Sports Wagering Registrant under this 205 CMR 234. As part of its application process, a prospective Sports Wagering Vendor shall be required to identify all of its known or anticipated Sports Wagering Subcontractors providing goods or services to whom the vendor

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

reasonably expects to pay an amount of \$10,000 or more within a 12-month period, and if licensed the vendor shall have a continuing duty to update the Bureau relative to the identification of any new Subcontractors. The Bureau may, at its discretion, require the submission of additional information and documents from a Sports Wagering Subcontractor or a Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License including, but not limited to, the Sports Wagering Subcontractor Information Form as provided in 205 CMR 234.02(3).

(2) Designation for Registration.

- (a) Notwithstanding any other provision of this Section 205 CMR 234, the Division of Licensing may, after consultation with the Bureau, designate a Non-Sports Wagering Vendor or a Sports Wagering Subcontractor a Sports Wagering Registrant, regardless of the types of goods or services being provided by that vendor.
- (b) In making the determination whether to designate a vendor or a Subcontractor a Sports Wagering Registrant, the Bureau may consider the following factors, without limitation:
 - (i) whether the total dollar amount by which the vendor's or Subcontractor's business with an Operator exceeds \$250,000 in gross sales within a 12 month period, or \$100,000 in gross sales within a three month period; or
 - (ii) the relative value of the vendor or Subcontractor's business with the Operator compared to the Operator's overall disbursements to vendors;
 - (iii) whether the goods or services are limited to the pre-operating phase of the Operator's business in the Commonwealth;
 - (iv) the duration of the contract;
 - (v) whether the vendor will be providing goods or services at an on-site facility of the Operator;
 - (vi) the number of Sports Wagering Subcontractors involved in the performance of the vendor's contract with the Operator;
 - (vii) the number of employees employed by the vendor;
 - (viii) whether the vendor is licensed, registered or certified and regulated by another Governmental Authority;

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (ix) the nature of the goods or services; and
 - (x) public safety considerations.
 - (c) If the Division of Licensing, after consultation with the Bureau, determines that the Non-Sports Wagering vendor or subcontractor should instead be registered as a Sports Wagering Registrant, it shall notify the vendor of that decision and of the vendor's obligation to register. Within 45 days of service of the notice, the vendor shall submit the applicable completed Registration Form-Sports Wagering Vendor as set forth in 205 CMR 234.02(1) for registration or file a written request to the Division of Licensing for reconsideration from the determination requiring filing of an application for registration. The Bureau may order any Person that fails to comply with such notice to cease conducting business with a Sports Wagering Vendor or an Operator immediately.
 - (d) Nothing herein shall be construed to limit the Commission's or the Bureau's ability to require a Person designated as a Non-Sports Wagering Vendor or Subcontractor by an Operator to be licensed as a Sports Wagering Vendor.
- (3) Exceptions.
- (a) For purposes of 205 CMR 234.01, Persons engaged in the following fields of commerce who provide goods or services to an Operator or an Applicant for a Sports Wagering Operator license and that do not otherwise qualify to be licensed or registered by the Commission as a Sports Wagering Vendor or Sports Wagering Registrant, shall not be required to obtain licensure or registration as a vendor:
 - (i) insurance companies and insurance agencies, other than Sports Wagering risk management vendors;
 - (ii) television, radio, newspaper, internet or other similar media used for advertising purposes;
 - (iii) Governmental Authorities or other governmental entities;
 - (iv) legal, accounting, lobbying and financial services entities;
 - (v) labor organizations, unions, or Affiliates registered in accordance with 205 CMR 134.00;
 - (vi) utility companies;
 - (vii) telecommunications companies;

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (viii) providers of training seminars, publications, subscriptions, conference registration or membership dues for professional associations intended to directly contribute to the work performance or professional development of an employee;
 - (ix) nonprofit charitable corporations or organizations, provided that no consideration is received for the contribution;
 - (x) court order or stipulation of settlement or for settlement of consumer losses or consumer refunds;
 - (xi) payments for freight charges to freight transporters selected by the vendor for delivering goods;
 - (xii) professional entertainers and/or celebrity appearances;
 - (xiii) any Person that, by submission of a written petition, can demonstrate to the Division of Licensing after consultation with the Bureau that licensure as a Sports Wagering vendor is not necessary to protect the public interest;
 - (xiv) upon submission of a written certification by an Operator, any Person providing goods or services not directly related to Sports Wagering to whom the Operator reasonably expects to pay an amount less than \$10,000 within a 12-month period.
 - (b) Any other Person, by submission of a written petition, may request a determination from the Bureau that despite meeting the definition of a Sports Wagering Vendor they need not be licensed or registered, or despite meeting the definition of a Sports Wagering Vendor should be a Sports Wagering Registrant and do not require a Sports Wagering License, on the grounds that they are not providing goods or services on a regular or continuing basis, that the goods or services they provide do not directly relate to Sports Wagering, or that they are otherwise licensed as a gaming vendor or non-gaming vendor.
- (4) Sports Wagering Vendor Qualifiers.
- (a) Persons designated as Sports Wagering vendor qualifiers must establish their qualifications in accordance with 205 CMR 234.05.
 - (b) Sports Wagering Vendors. The following Persons shall be designated as Sports Wagering Vendor qualifiers:
 - (i) If the prospective Sports Wagering Vendor is a sole proprietor: The owner.

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (ii) If the prospective Sports Wagering Vendor is a corporation:
 - (a) Each officer;
 - (b) Each inside director;
 - (c) Any Person owning more than 10% of the common stock of a company applying for licensure as a Sports Wagering Vendor, or a holding, intermediary or subsidiary company of such company and who has the ability to control the activities of the prospective vendor; and
 - (d) In the judgment of the Division of Licensing after consultation with the Bureau, any Person with significant and substantial responsibility for the Applicant's business under the jurisdiction of the Commission or having the power to exercise significant influence over decisions concerning the prospective vendor's operations in the Commonwealth.
- (iii) If the prospective Sports Wagering Vendor is a limited liability corporation:
 - (a) Each Member;
 - (b) Each transferee of a Member's interest;
 - (c) Each Manager; and
 - (d) In the judgment of the Division of Licensing after consultation with the Bureau, any Person with significant and substantial responsibility for the Applicant's business under the jurisdiction of the Commission or having the power to exercise significant influence over decisions concerning the prospective vendor's operations in the Commonwealth.
- (iv) If the prospective Sports Wagering Vendor is a limited partnership:
 - (a) Each General Partner;
 - (b) Each Limited Partner; and
 - (c) In the judgment of the Division of Licensing after consultation with the Bureau, any Person with significant and substantial responsibility for the Applicant's business

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

under the jurisdiction of the Commission or having the power to exercise significant influence over decisions concerning the prospective vendor's operations in the Commonwealth.

- (v) If the Sports Wagering Vendor is a partnership:
 - (a) Each Partner; and
 - (b) In the judgment of the Division of Licensing after consultation with the Bureau, any Person with significant and substantial responsibility for the Applicant's business under the jurisdiction of the Commission or having the power to exercise significant influence over decisions concerning the Sports Wagering Vendor's operations in the Commonwealth.
- (c) Other Qualifiers. The Division of Licensing, after consultation with the Bureau, may, at its discretion, require other Persons that have a business association of any kind with the Applicant for a Sports Wagering Vendor License to be subject to the qualification requirements as a qualifier. These Persons include, but are not limited to, an Affiliate or holding, intermediary or subsidiary company of the Applicant for a Sports Wagering Vendor License.
- (d) Internal Review of Determinations. An Applicant may ask for review of any determination made by the Bureau, in accordance with 205 CMR 234.01(4), to the Commission, by filing a petition on a form prescribed by the Commission. The Commission shall decide the question at a public meeting on the matter at which it may allow representatives of the petitioner and Bureau to testify.
- (5) Waiver. In addition to any other exception or exemption under 205 CMR 234.00, upon written petition, the Commission may waive the requirement to be qualified as a Sports Wagering Vendor qualifier for:
 - (a) Institutional investors holding up to 15% of the stock of the Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License, or holding, intermediary or subsidiary company thereof, upon a showing by the Person seeking the waiver that it purchased the securities for investment purposes only and does not have any intention to influence or affect the affairs or operations of the Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License or a holding, intermediary or subsidiary company thereof; provided, however, any institutional investor granted a waiver which subsequently determines to influence or affect the

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

affairs or operations of the Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License, or a holding, intermediary or subsidiary company thereof shall provide not less than 30 days' notice to the Commission of such intent and shall file an application and may be subject to the licensing requirements of 205 CMR 234.00 before taking any action that may influence or affect the affairs of the Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License or a holding, intermediary or subsidiary company. Any Person holding over 15% of a Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License, or a holding, intermediary or subsidiary company thereof, shall be required to apply for a license before doing business in the Commonwealth; or

- (b) Any Person who, in the opinion of the Bureau or the Commission, cannot exercise control or provide direction to a Sports Wagering Vendor or Applicant for a Sports Wagering Vendor License or a holding, intermediary or subsidiary company thereof.
- (6) Qualification of New Qualifiers for Sports Wagering Vendors.
- (a) No Person requiring qualification pursuant to 205 CMR 234.01(4) may perform any duties or exercise any powers relating to the position that said qualifier is seeking to assume for a Sports Wagering Vendor unless the Person notifies the Bureau in writing within 30 days of appointment to the position. Such notification shall be accompanied by the applicable business entity or personal disclosure form specified by the Bureau. Following such notification and submission of the completed Form, the Person may continue to perform duties and exercise powers relating to the position pending qualification.
 - (b) A Person with reason to believe that his or her new position with a Sports Wagering Vendor may require qualification pursuant to 205 CMR 234.01(4) shall notify the Bureau in writing within 30 days of appointment to the position. Such notification shall be accompanied by a summary of the responsibilities and/or features of the position. The Bureau shall determine whether the Person shall be designated a qualifier pursuant to 205 CMR 234.01(4)(b) and shall notify the Person of such designation in writing. Within 30 days of designation as a qualifier, the Person shall submit a completed personal disclosure form pursuant to 205 CMR 234.02(2). Following submission of the completed Form, the Person may continue to perform duties and exercise powers relating to the position pending qualification.
 - (c) The Bureau shall review the forms submitted by the new qualifier, as well as such other information that the Bureau may request, and, upon

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

completion of its investigation, shall make a determination and inform the Commission in accordance with 205 CMR 234.00 whether the new qualifier meets the standards for suitability.

- (d) Upon notification by the Bureau of a determination that reasonable cause exists to believe the qualifier may not ultimately be found suitable, a Sports Wagering Vendor shall promptly remove the qualifier from his or her position until such time as the Commission makes its final determination on suitability.
- (7) Internal Review of Determinations. An Applicant may ask for review of any determination made by the Bureau in accordance with 205 CMR 234.01(4)-(6) to the Commission, by filing a petition on a form prescribed by the Commission. The Commission shall decide the question at a public meeting on the matter at which it may allow representatives of the petitioner and Bureau to testify.

234.02 Forms; Fingerprinting

- (1) Sports Wagering Vendor License Application Form. Every Person applying for a Sports Wagering Vendor License shall be obligated to complete and submit a Sports Wagering Vendor Business Entity Disclosure Form to the Division of Licensing. Said forms shall be created by the Bureau, subject to the approval of the Commission. The Division of Licensing may make non-material changes to the forms. The license application forms for Sports Wagering vendors shall require, at a minimum, the following information:
 - (a) The name of the Applicant;
 - (b) The post office address and, if a corporation, the name of the state under the laws of which it was incorporated, the location of its principal place of business and the names and addresses of its directors and stockholders;
 - (c) The Applicant's criminal and arrest record;
 - (d) Any civil judgments obtained against the Applicant pertaining to antitrust or security regulation;
 - (e) The identity of every Person having a direct or indirect interest in the business and the nature of such interest; provided, however, that if the disclosed entity is a trust, the application shall disclose the names and addresses of all beneficiaries; provided further, that if the disclosed entity is a partnership, the application shall disclose the names and addresses of all partners, both general and limited; and provided further, that if the

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

disclosed entity is a limited liability company, the application shall disclose the names and addresses of all members;

- (f) An independent audit report of all financial activities and interests including, but not limited to, the disclosure of all contributions, donations, loans, loan forgiveness, or any other financial transactions to or from a gaming entity or Operator in the past three years; and
 - (g) Clear and convincing evidence of financial stability including, but not limited to, bank references, business and personal income and disbursement schedules, tax returns and other reports filed by governmental agencies, and business and personal accounting check records and ledgers.
- (2) Sports Wagering Registration Form. Every person seeking to register as a Sports Wagering Registrant shall be obligated to complete and submit a registration form to the Division of Licensing. The registration form shall be created by the Bureau and shall request the disclosure of any information deemed necessary by the Bureau, subject to the approval of the Commission. The Division of Licensing may make non-material changes to the form.
 - (3) Qualifiers. Every Person designated as a qualifier for a Sports Wagering Vendor under 205 CMR 234.01(4) shall be obligated to complete and submit a personal disclosure form to the Division of Licensing. Said forms for Sports Wagering Vendor qualifiers shall be created by the Bureau, subject to the approval of the Commission. The Division of Licensing may make non-material changes to the forms.
 - (4) Non-Sports Wagering Vendor and Sports Wagering Subcontractor Information Forms. A Non-Sports Wagering Vendor form to be completed by the Operator, and a Sports Wagering Subcontractor information form to be completed by Sports Wagering Vendors shall be created by the Bureau requesting any information as deemed necessary by the Bureau and submitted to the Division of Licensing. The Division of Licensing may make non-material changes to the form.
 - (5) Fingerprinting. Each Sports Wagering Vendor License qualifier shall be fingerprinted under the supervision of the Commission in accordance with the procedures in 205 CMR 134.13.

234.03 Submission by Applicants; Fees

- (1) An application, disclosure form or registration for the initial issuance of a Sports Wagering Vendor License shall include all of the following:

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (a) A completed Business Entity Disclosure Form-Sports Wagering Vendor, as applicable, as set forth in 205 CMR 234.02(1) and (2); and
 - (b) Proof of the vendor's business relationship with one or more Operators in the manner prescribed by the Division of Licensing.
- (2) A Sports Wagering Vendor, Sports Wagering Registrant or qualifier (individual) shall file all the applicable Sports Wagering Business Entity Disclosure Forms or Sports Wagering employee disclosure forms, or a Sports Wagering Registration Form.
- (3) A qualifier for a Sports Wagering Vendor License may, if authorized by the Bureau, instead file disclosure information including, but not limited to, for publicly traded companies, copies of securities filings and/or audited consolidated financial statements for a period as determined by the Bureau, in lieu of the form identified in 205 CMR 234.03(1)(a).
- (4) Except as otherwise provided for in 205 CMR 234.07, each Applicant shall file a complete application pursuant to 205 CMR 234.03(1) with the Division of Licensing in the manner prescribed by the Division of Licensing. The Division of Licensing shall not accept an incomplete application.
- (5) Fees.
 - (a) A non-refundable fee of \$15,000 for an initial application and \$5,000 for a renewal shall be paid at the time of application for licensure as a Sports Wagering Vendor.
 - (b) A non-refundable fee of \$5,000 for an initial application and \$5,000 for a renewal shall be paid at the time of application for registration as a Sports Wagering Registrant.
 - (c) Such fees shall be subject to the provisions of 205 CMR 134.15 regarding increases in application fees and manner of submittal of such fees.

234.04 Investigation, Determination, and Appeals for Sports Wagering Vendors and Sports Wagering Registrants

- (1) Upon receipt of an application for a Sports Wagering Vendor License or registration or a Sports Wagering vendor qualification, the Division of Licensing shall conduct a review of each for administrative completeness and then forward the application or submission to the Bureau which shall conduct an investigation of the Applicant. In the event an application or submission is deemed incomplete, the Division of Licensing may either request supplemental information from the Applicant or administratively close the application in

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

accordance with 205 CMR 234.08. For individuals, the investigation shall include obtaining and reviewing criminal offender record information from the Department of Criminal Justice Information Services (DCJIS) and exchanging fingerprint data and criminal history with the Massachusetts Department of State Police and the United States Federal Bureau of Investigation. The investigation shall be conducted for purposes of determining whether the Applicant is suitable to be issued a license or registration in accordance with 205 CMR 234.05 and 205 CMR 234.06.

- (2) In determining the weight to be afforded any information bearing on suitability in accordance with 205 CMR 234.05 or 205 CMR 234.06, the Division of Licensing, Bureau, or Commission, as applicable, shall consider: the relevance of the information to doing business with a Sports Wagering Operator in general, whether there is a pattern evident in the information, and whether the Applicant is likely to be involved in Sports Wagering related activity. Further, the information will be considered in the light most favorable to the Applicant, unless the information cannot be so viewed pursuant to M.G.L. c. 23K or M.G.L. c. 23N, or the information obtained does not otherwise support such view. For purposes of 205 CMR 234.00, 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. Sealed or expunged records of criminal or delinquency appearances, dispositions, and/or any information concerning such acts shall not be considered for purposes of making a suitability determination in accordance with 205 CMR 234.00, and M.G.L. c. 23N.
- (3) Sports Wagering Vendor License Decisions. Upon completion of the investigation, conducted in accordance with 205 CMR 234.04(1), the Bureau shall either approve or deny the application for a Sports Wagering Vendor License. If the Bureau approves the application for a Sports Wagering Vendor, the Bureau shall forward a written approval to the Division of Licensing which shall issue a license to the Applicant on behalf of the Commission. If the application is denied, the Bureau shall forward the determination of denial and reasons therefor to the Division of Licensing which shall issue a written decision to the Applicant explaining the reasons for the denial. The decision shall include an advisory to the Applicant that they may appeal the decision in accordance with 205 CMR 101.00. If the denial is based upon information contained in a Person's criminal record, the decision shall also include an advisory that the Person will be provided with a copy of their criminal record upon request and that they may challenge the accuracy of any relevant entry therein. The decision may be served *via* first class mail or email to the addresses provided by the Applicant on the application.

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (4) Sports Wagering Registration Decisions. The Division of Licensing shall issue a registration to the Applicant for Sports Wagering Registration on behalf of the Commission in accordance with 205 CMR 234.06. In the event that the Bureau determines, upon completion of the investigation conducted in accordance with 205 CMR 234.04(1), that the Applicant should be disqualified from holding a registration or is otherwise unsuitable in accordance with 205 CMR 234.06, it shall forward the results of the investigation to the Division of Licensing which shall issue a written notice to the Applicant denying or revoking the registration. The notice shall include an advisory to the Applicant that they shall immediately cease doing business with the gaming establishment and may request an appeal hearing in accordance with 205 CMR 101.00. If the denial is based upon the information contained in the person's criminal record, the decision shall also include an advisory that the person will be provided with a copy of their criminal record upon request and that they may challenge the accuracy of any relevant entry therein. The notice may be served *via* first class mail or *via* email to the addresses provided by the Applicant on the application.

234.05 Affirmative License Standards for Sports Wagering Vendors

- (1) An Applicant for a Sports Wagering Vendor License and any Sports Wagering Vendor qualifier shall establish individual qualifications by clear and convincing evidence.
- (2) In determining whether an Applicant for licensure is suitable for purposes of being issued a Sports Wagering Vendor License, being qualified as a Sports Wagering Vendor qualifier or for having a Sports Wagering Vendor License or qualification renewed, the Bureau shall evaluate and consider the overall reputation of the Applicant and qualifiers, if any, including, without limitation:
- (a) the integrity, honesty, good character and reputation of the Applicant and qualifiers;
 - (b) the financial stability, integrity, and background of the Applicant and qualifiers;
 - (c) whether the Applicant and its qualifiers have a history of compliance with gaming and Sports Wagering licensing requirements in other jurisdictions;
 - (d) whether the Applicant or any qualifier, at the time of application, is a defendant in litigation;
 - (e) whether the Applicant is disqualified from receiving a license under 205 CMR 234.05(3);

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (f) whether the Applicant or any qualifier has been convicted of a crime of moral turpitude;
 - (g) whether, and to what extent, the Applicant or any qualifier has associated with members of organized crime and other Persons of disreputable character;
 - (h) the extent to which the Applicant and qualifiers have cooperated with the Bureau in connection with the background investigation; and
 - (i) the integrity, honesty, and good character of any subcontractor.
- (3) The Bureau and Commission shall deny an application for a Sports Wagering Vendor License if the Applicant or a qualifier:
- (a) has been convicted of a felony or other crime involving embezzlement, theft, fraud or perjury; except that for such disqualifying convictions which occurred before the ten-year period immediately preceding submission of the application for licensure, the Bureau may, in its discretion, approve the issuance of a Sports Wagering Vendor License to an Applicant who affirmatively demonstrates rehabilitation in accordance with 205 CMR 234.05(4);
 - (b) submitted an application for a license under M.G.L. c. 23K, §§ 30, 31, 205 CMR 134.00, M.G.L. c. 23N or 205 CMR 234.00 that willfully, knowingly or intentionally contains materially false or misleading information;
 - (c) committed prior acts which have not been prosecuted or in which the Applicant was not convicted, but which form a pattern of misconduct that makes the Applicant unsuitable for a license; or
 - (d) 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.
- (4) Rehabilitation.
- (a) An Applicant may provide proof of rehabilitation from a criminal conviction as part of the application for licensure.
 - (b) In considering the rehabilitation of an Applicant the following shall be considered:
 - (i) the nature and duties of the position of the Applicant;

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (ii) the nature and seriousness of the offense or conduct;
 - (iii) the circumstances under which the offense or conduct occurred;
 - (iv) the date of the offense or conduct;
 - (v) the age of the Applicant when the offense or conduct was committed;
 - (vi) whether the offense or conduct was an isolated or repeated incident;
 - (vii) any social conditions which may have contributed to the offense or conduct; and
 - (viii) any evidence of rehabilitation, including recommendations and references of persons supervising the Applicant since the offense or conduct was committed.
- (c) A Sports Wagering Vendor License qualifier shall be at least 18 years of age at the time of application.

234.06 Affirmative Registration Standards for Sports Wagering Registrants

- (1) Upon submission of an administratively complete registration form as a Sports Wagering Registrant, the Division of Licensing shall issue the registration on behalf of the Commission. A registration may be denied or subsequently revoked if it is determined that the Applicant is disqualified in accordance with 205 CMR 234.06(2) or unsuitable for any criteria identified in 205 CMR 234.06(3).
- (2) The Bureau and Commission shall deny or revoke a registration if the person:
 - (a) has been convicted of a felony or other crime involving embezzlement, theft, fraud or perjury; except that for such disqualifying convictions which occurred before the ten-year period immediately preceding submission of the application for licensure, the Bureau may, in its discretion, approve the issuance of a registration to an Applicant who affirmatively demonstrates rehabilitation in accordance with 205 CMR 234.05(4);
 - (b) submitted a registration form under M.G.L. c. 23K, §§ 30, 31, 205 CMR 134.00, M.G.L. c. 23N or 205 CMR 234.00 that willfully, knowingly or intentionally contains materially false or misleading information;

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (c) committed prior acts which have not been prosecuted or in which the Applicant was not convicted, but which form a pattern of misconduct that makes the Applicant unsuitable for registration; or
 - (d) 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 approving a registration.
- (3) In determining whether an Applicant is suitable for purposes of being issued a registration or having a registration renewed, the Bureau may evaluate and consider the overall reputation of the Applicant including, without limitation:
 - (a) the integrity, honesty, good character and reputation of the Applicant;
 - (b) the financial stability, integrity, and background of the Applicant;
 - (c) whether the Applicant has a history of compliance with gaming licensing requirements in other jurisdictions;
 - (d) whether the Applicant, at the time of submission of the registration form, is a defendant in litigation;
 - (e) whether the Applicant is disqualified from receiving a registration under 205 CMR 234.06(2);
 - (f) whether the Applicant has been convicted of a crime of moral turpitude;
 - (g) whether, and to what extent, the Applicant has associated with members of organized crime and other persons of disreputable character;
 - (h) the extent to which the individual has cooperated with the Bureau in connection with the background investigation; and
 - (i) the integrity, honesty, and good character of any Subcontractor.
- (5) An Applicant for a registration shall be 18 years of age or older at the time of application.
- (6) The Bureau may deny an application for registration if it determines that the Applicant formed the Applicant entity for the sole purpose of circumventing the requirement to be licensed as a Sports Wagering Vendor.

234.07 Temporary Licenses for Sports Wagering Vendors

- (1) Notwithstanding any other provision of 205 CMR 234.00, upon petition to the Commission by an Operator, the Commission may issue a temporary Sports

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

Wagering Vendor License to an Applicant for a Sports Wagering Vendor License if:

- (a) the Applicant for a Sports Wagering Vendor License has filed a completed application with the Commission and has submitted all of the disclosure forms as required by the Division of Licensing. The Bureau may waive the requirement to submit application information for some or all of the Applicant's individual and entity qualifiers prior to issuance of a Temporary License;
- (b) the Operator certifies, and the Commission finds, that the issuance of a temporary Sports Wagering Vendor License is necessary for the operation of Sports Wagering and is not designed to circumvent the normal licensing procedures; and
- (c) the Operator certifies that, to the best of its reasonable knowledge and belief, the proposed temporary Sports Wagering Vendor meets the qualifications for licensure pursuant to 205 CMR 234.05 and that the Operator understands that it may be denied an Operator License if it has willfully, knowingly or intentionally provided false or misleading information regarding the proposed vendor.

[OPTION A]

- (2) A temporary Sports Wagering Vendor License shall issue, unless:
 - (a) A preliminary review of the Applicant shows that the Applicant is disqualified under one or more of the criteria listed in 205 CMR 234.05(3); or
 - (b) A preliminary review of the Applicant shows that the Applicant will be unable to establish his or her qualifications for licensure under the standards set forth in 205 CMR 234.05(1).

[OPTION B]

- (3) An Applicant for a Sports Wagering Vendor License shall demonstrate its suitability for temporary licensure upon certification by the Applicant under the pains and penalties of perjury that the Applicant entity:
 - (a) is not disqualified under one or more of the criteria listed in 205 CMR 234.05(3);
 - (b) is properly licensed or registered, and in good standing, to conduct the same operations in every other jurisdiction where it operates as a Sports Wagering Vendor or the equivalent; and

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (c) has disclosed any other information not previously disclosed of which it is aware or reasonably should be aware which would negatively impact a determination on the Applicant's suitability for a sports wagering vendor license.
- (4) If an Applicant for a temporary Sports Wagering Vendor License is licensed or registered in another jurisdiction within the United States with comparable license and registration requirements, as determined by the Bureau, and is in good standing in all jurisdictions in which it holds such a license or registration, the Commission may issue the vendor a temporary Sports Wagering Vendor License; provided, however, that the Commission shall reserve its rights to investigate the qualifications of an Applicant at any time.
- (5) Unless otherwise stated by the Commission, a temporary Sports Wagering Vendor License issued under this 205 CMR 234.07 shall expire upon issuance of a full Sports Wagering Vendor License or upon suspension or revocation of the temporary Sports Wagering Vendor License, and in any event no later than the term of the license as set forth in 205 CMR 234.09(1).

234.08 Administrative Closure of Applications for Sports Wagering Vendor Licensure or Registration

- (1) All Applicants for a Sports Wagering Vendor License or 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 234.10.
- (2) Failure of an Applicant for a Sports Wagering Vendor License or registration to respond to a request for information from the Division of Licensing and/or the Bureau within 21 days of the request may result in the administrative closure of the application for licensure or registration and the corresponding administrative revocation of a Sports Wagering Vendor license or registration, if applicable.
- (3) In the event that an application for licensure or a registration is administratively closed for failure to provide requested information or to comply with the obligations set forth in either 205 CMR 234.08(1) or 205 CMR 234.10, the Division of Licensing or the Bureau will notify the Applicant of the determination in writing and will identify the specific deficiencies in the application that served as the basis for the closure. Once an application for licensure or registration has been administratively closed, the Applicant is required to submit a new application in order to be considered for licensure or registration. In that event, the Applicant shall submit a complete application including all outstanding information as previously detailed by the Division of Licensing or the Bureau. The submission of outstanding information is not a

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

guarantee of licensure or registration, but is a prerequisite for the application to be deemed administratively complete.

234.09 Term of Sports Wagering Vendor License or Registration; Renewal

- (1) Term. Sports Wagering Vendor licenses and registrations and Sports Wagering vendor qualifications shall be for an initial term of three years. The initial term of a Sports Wagering Vendor License or registration shall expire and be renewable on the last day of the month on the third anniversary of the issuance date.
- (2) Renewal.
 - (a) At a minimum of 150 days prior to expiration, each Sports Wagering Vendor shall submit a new and updated application or registration in accordance with 205 CMR 234.00.
 - (b) If a vendor or qualifier has made timely and sufficient application for a renewal, the Applicant's existing license or registration shall not expire and the Applicant shall remain in good standing until the Bureau has issued a decision on the application or registration. If a renewal application or registration is received after the renewal date and the license or registration expires before the Commission issues a new license or registration, the Person shall not conduct business with an Operator until a new license or registration is issued.
 - (c) It shall be the responsibility of the vendor to ensure that their license or registration is current.

234.10 Duties of Applicants, Licensees, and Sports Wagering Registrants

All Sports Wagering Vendor Applicants, Sports Wagering Vendors, Sports Wagering Registrants and qualifiers, shall have the same duties and obligations required of gaming vendor Applicants, licensees, and registrants pursuant to 205 CMR 134.18.

234.11 Disciplinary Action

- (1) Grounds for Disciplinary Action. Any Sports Wagering Vendor License or registration issued under 205 CMR 234.00 may be conditioned, suspended, or revoked, or a civil administrative penalty assessed, if the Bureau finds that a vendor or qualifier has:
 - (a) been charged with or convicted of a crime while employed by an Operator and failed to report the charges or the conviction to the Commission; or

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 234.00
SPORTS WAGERING VENDOR LICENSING**

- (b) failed to comply with any provision of M.G.L. c. 23N or 205 CMR pertaining to licensees or registrants, including failure to act in conformance with an applicable provision of the Operator's system of internal controls.
- (2) Finding and Decision. If the Bureau finds that a Sports Wagering Vendor or Non-Sports Wagering Registrant has violated a provision of 205 CMR 234.11(1), it may issue a written notice of its intent to reprimand, suspend, or revoke said vendor's license or registration. Such notice shall be provided in writing and contain a factual basis and the reasoning in support the decision, including citation to the applicable statute(s) or regulation(s) that supports the action. It shall further advise the vendor of their right to a hearing and their responsibility to request a hearing in accordance with 205 CMR 234.11(4), if they so choose, and that failure to do so may result in the decision automatically being imposed. Mailing of the notice to the address on record with the Commission, or emailing the notice to the address provided to the Commission by the licensee or registrant shall be deemed satisfactory service of the notice. The Bureau may alternatively issue an order temporarily suspending a license or registration.
- (3) Civil Administrative Penalties. The Bureau may assess a civil administrative penalty on a Person in accordance with M.G.L. c. 23N, § 21(a) for a violation of 205 CMR 234.11(1).
- (4) Review of Decision. Any Person aggrieved by a decision made by the Bureau, in accordance with 205 CMR 234.11(2) or (3), may request review of said decision in accordance with 205 CMR 101.00. Failure to request such review may result in the decision automatically being imposed.

234.12 Application Following Denial or Revocation

No individual who has been denied a license or registration or has had their license or registration revoked pursuant to 205 CMR 234.11 may reapply for the same license or registration prior to two years from the date of denial or revocation. If an individual has appealed the denial or revocation of their license or registration, the two year period shall begin to run from the date that the denial or revocation is affirmed pursuant to 205 CMR 101.00 or otherwise pursuant to M.G.L. c. 30A.



SMALL BUSINESS IMPACT STATEMENT

The Massachusetts Gaming Commission (“Commission”) hereby files this Small Business Impact Statement in accordance with G.L. c. 30A, §2 relative to the proposed adoption of **205 CMR 234: Sports Wagering Vendors**.

This regulation was developed as part of the process of promulgating regulations governing sports wagering in the Commonwealth, and is primarily governed by G.L. c. 23N, §4.

The adoption of 205 CMR 234 applies to sports wagering vendors and the Commission. Accordingly, this regulation is unlikely to have an impact on small businesses. Under G.L. c.30A, §2, the Commission offers the following responses to the statutory questions:

1. Estimate of the number of small businesses subject to the proposed regulation:

It is unknown at this time how many small businesses may be subject to this regulation.

2. State the projected reporting, recordkeeping, and other administrative costs required for compliance with the proposed regulation:

There are no projected reporting, recordkeeping, or other administrative costs required for small businesses to comply with this regulation.

3. State the appropriateness of performance standards versus design standards:

The standards set forth are licensing requirements, akin to performance standards.

4. Identify regulations of the promulgating agency, or of another agency or department of the Commonwealth, which may duplicate or conflict with the proposed regulation:

There are no conflicting regulations in 205 CMR, and the Commission is unaware of any conflicting or duplicating regulations of any other agency or department of the Commonwealth.

5. State whether the proposed regulation is likely to deter or encourage the formation of new businesses in the Commonwealth:



Massachusetts Gaming Commission

This amendment is unlikely to have any impact on the formation of new businesses in the Commonwealth.

Massachusetts Gaming Commission
By:

/s/ Caitlin Monahan
Caitlin Monahan
Deputy General Counsel

Dated: September 29, 2022

DRAFT



Massachusetts Gaming Commission

**MASSACHUSETTS GAMING COMMISSION
PROPOSED REGULATIONS AT 205 CMR 202
SPORTS WAGERING AUTHORITY AND DEFINITIONS**

SPORTS WAGERING: AUTHORITY AND DEFINITIONS

202.01 Authority
202.02 Definitions

202.01 Authority

205 CMR 202.00, *et seq.* are issued pursuant to M.G.L. c. 23K, §§ 4(42) and 5 and M.G.L. c. 23N, §§ 4(a), 4(b) and 5, unless otherwise specified.

202.02 Definitions

As used in 205 CMR 202.00, *et seq.*, the following words and phrases shall have the following meanings, unless the context clearly requires otherwise:

Affiliate means as defined in M.G.L. c. 23N, § 3.

Applicant means as defined in M.G.L. c. 23N, § 3.

Category 1 Sports Wagering License means as defined in M.G.L. c. 23N, § 3.

Category 2 Sports Wagering License means as defined in M.G.L. c. 23N, § 3

Category 3 Sports Wagering License means as defined in M.G.L. c. 23N, § 3

Close Associate means as defined in M.G.L. c. 23N, § 3.

Commission means as defined in M.G.L. c. 23N, § 3.

Governmental Authority means as defined in M.G.L. c. 23N, § 3.

Non-Sports Wagering Vendor. A Person who offers to an Operator goods or services which are not directly related to Sports Wagering and who does not meet the definition of a Sports Wagering Vendor.

Occupational License means as defined in M.G.L. c. 23N, § 3.

Operator or Sports Wagering Operator means as defined in M.G.L. c. 23N, § 3.

Operator License means as defined in M.G.L. c. 23N, § 3.

Person means as defined in M.G.L. c. 23N, § 3.

Sports Wager means as defined in M.G.L. c. 23N, § 3.

Sports Wagering means as defined in M.G.L. c. 23N, § 3.

Sports Wagering License means a Category 1 Sports Wagering License, Category 2 Sports Wagering License, or Category 3 Sports Wagering License.

Sports Wagering Registrant. A Non-Sports Wagering Vendor or Subcontractor required to register with the Commission pursuant to 205 CMR 234.01(2).

Sports Wagering Subcontractor. A Person that contracts with a Sports Wagering Vendor or Sports Wagering Registrant to provide goods or services necessary to fulfill the licensed sports wagering vendor's contract with an Operator.

Sports Wagering Vendor. A Person that is not required to be licensed as an Operator or Sports Wagering Operator under M.G.L. c. 23N, or as a gaming vendor under M.G.L. c. 23K, who regularly provides goods or services to an Applicant for an Operator License or an Operator; which goods, software, or services directly relate to Sports Wagering operations, including but not limited to:

- a. Sports Wagering platform design, operation or maintenance;
- b. line and odds setting;
- c. Sports Wagering risk management;
- d. geolocation;
- e. customer verification;
- f. integrity monitoring;
- g. Sports Wagering kiosks;
- h. sportsbook data; or
- i. testing and certification.

Sports Wagering Vendor License. A license issued by the Commission pursuant to 205 CMR 234.00 that permits the licensee to act as a vendor to a Sports Wagering Operator.

Tethered Category 3 License. A Category 3 License connected to a Category 1 or Category 2 License pursuant to M.G.L. c. 23N, § 6.

Untethered Category 3 License. A Category 3 License not connected to a Category 1 or Category 2 License pursuant to M.G.L. c. 23N, § 6.

Wager means as defined in M.G.L. c. 23N, § 3.



SMALL BUSINESS IMPACT STATEMENT

The Massachusetts Gaming Commission (“Commission”) hereby files this Small Business Impact Statement in accordance with G.L. c. 30A, §2 relative to the proposed adoption of **205 CMR 202: Definitions**.

This regulation was developed as part of the process of promulgating regulations governing sports wagering in the Commonwealth, and is primarily governed by G.L. c. 23N, §4.

The adoption of 205 CMR 202 creates definitions that will be used throughout the sports wagering-related regulations. Accordingly, this regulation is unlikely to have an impact on small businesses. Under G.L. c.30A, §2, the Commission offers the following responses to the statutory questions:

1. Estimate of the number of small businesses subject to the proposed regulation:

It is unlikely that this regulation will have an impact on small businesses.

2. State the projected reporting, recordkeeping, and other administrative costs required for compliance with the proposed regulation:

There are no projected reporting, recordkeeping, or other administrative costs required for small businesses to comply with this regulation.

3. State the appropriateness of performance standards versus design standards:

This regulation does not set forth any standards.

4. Identify regulations of the promulgating agency, or of another agency or department of the Commonwealth, which may duplicate or conflict with the proposed regulation:

There are no conflicting regulations in 205 CMR, and the Commission is unaware of any conflicting or duplicating regulations of any other agency or department of the Commonwealth.

5. State whether the proposed regulation is likely to deter or encourage the formation of new businesses in the Commonwealth:



Massachusetts Gaming Commission

This amendment is unlikely to have any impact on the formation of new businesses in the Commonwealth.

Massachusetts Gaming Commission
By:

/s/ Caitlin Monahan
Caitlin Monahan
Deputy General Counsel

Dated: September 29, 2022

DRAFT



Massachusetts Gaming Commission

BUSINESS ENTITY DISCLOSURE FORM

GAMING VENDOR-PRIMARY



Applicant: _____

BUSINESS ENTITY DISCLOSURE FORM GAMING VENDOR - PRIMARY

APPLICATION INSTRUCTIONS

This application must be filed with the Massachusetts Gaming Commission (Commission) as part of the application for a Gaming Vendor – Primary License. Copies of this application are available on the internet at:

<http://massgaming.com/>. You may also request this application be mailed to you by calling the Commission's office at 617.979.8400.

No individual shall conduct business with a gaming licensee as a vendor to a gaming establishment unless such person has been licensed as a gaming vendor as defined by M.G.L. c. 23K, §2, in accordance with M.G.L. c. 23K, §31 and 205 CMR 134.04. A person shall be considered to be conducting business upon commencement of performance or a contract or a provision of a good or service.

These instructions are intended to provide basic information regarding an application for a Gaming Vendor - Primary. A subcontractor to a vendor shall not be required to obtain licensure or registration under 205 CMR 134.00. For purposes of 205 CMR 134.00 a subcontractor shall be considered a person that contracts with a licensed or registered vendor to provide goods or services necessary to fulfill the licensed or registered vendor's contract with a gaming licensee. As part of the application process, vendors shall be required to identify all of their known and/or anticipated subcontractors and shall have a continuing duty to update the Bureau relative to any new subcontractors.

1. COMPLETING A GAMING VENDOR LICENSE APPLICATION:

- A. This application form is to be completed by any person who wishes to do business with a gaming establishment and requires by regulation to be licensed as a gaming vendor - primary.
- B. Read each question carefully prior to answering. Answer every question completely and be sure not leave blank spaces. If a question does not apply to you, indicate "Does Not Apply" in response to that question. If there is nothing to disclose in response to a particular question, state "None" in response to that question.
Note: the Commission will not accept your application unless you provide a response to every question.
- C. 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.**
- D. If you need additional space to answer any question(s), supply the required information on an attachment page and clearly identify which question(s) you are answering.
- E. All requested attachments that apply to the applicant must be labeled with the specific attachment number and attached in order to the back of the application.
- F. All required documentation must be submitted at the time of filing this form. The applicant is under a continuing duty to notify the Commission within ten (10) days if there is a change of the information provided to the Commission.
- G. All authorizations and releases must be signed by the applicant or its designated representative or signatory.

2. BEFORE SUBMITTING THIS APPLICATION TO THE COMMISSION, THE APPLICANT SHOULD CHECK THAT:

- A. You have answered every question completely.

Initials/Date: _____

- B. You have initialed and dated each page of this application (except for the cover and signature pages) in the spaces provided.
- C. You have signed the Statement of Truth form included with this application.
- D. You have signed and had the Release Authorization forms included with this application notarized.
- E. 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.
- F. You retain a completed copy of this application for your own records.

3. FILING THE APPLICATION WITH THE COMMISSION:

- A. A complete application for a Gaming Vendor - Primary license consists of this application, all exhibits, and the application fee. Once your application is accepted, it becomes the property of the Commission and may not be withdrawn without the permission of the Commission.
- B. The fee for a Gaming Vendor - Primary is \$15,000, which shall be credited to the total fee. In the event that the costs incurred by the Commission in the course of investigating an applicant's background exceed the upfront application fees set forth above, the Commission may, upon written notice, charge an additional fee to cover the actual costs of investigation at hourly rates as established by the Commission.
- C. ***Application fees are nonrefundable.***

4. BACKGROUND INVESTIGATIONS:

- A. The Commission must obtain criminal records checks for each gaming vendor qualifier pursuant to 205 CMR 134.04(4).
- B. The following persons shall be designated as a gaming vendor qualifier and must establish their qualifications for licensure in accordance with 205 CMR 134.09 and 134.10: 1) if the gaming vendor applicant is a sole proprietor: the owner; 2) if the gaming vendor applicant is a corporation: each officer, each inside director and those outside directors serving on the audit or compliance committees; 3) any person owning more than 5 per cent of the common stock of a company applying for licensure as a gaming vendor as provided by 205 CMR 134.04(1)(a), or a holding, intermediary or subsidiary company of such company; 4) any person who will act as a sales representative or regularly engage in the solicitation of business from a licensed gaming establishment; 5) in the judgment of the Bureau in accordance with 205 CMR 134.04(3) any person with significant and substantial responsibility for the applicant's business in the Commonwealth; 6) if the applicant is a limited liability corporation: a) each member; b) each transferee of a member's interest; 7) if the applicant is a limited partnership: a) each general partner; b) each limited partner; and 8) if the applicant is a partnership: each partner.
- C. Vendor gaming qualifiers are required to be fingerprinted in order to initiate a criminal records check. If the vendor qualifier wishes to be fingerprinted by the Commission, please contact the Division of Licensing (617) 979-8400 to schedule an appointment for fingerprinting. If the vendor qualifier must be fingerprinted in another state, the vendor qualifier must request that the Commission mail out-of-state fingerprint cards and instructions to them.

5. DUTY TO UPDATE INFORMATION

- A. All gaming vendors and gaming vendor qualifiers shall have the continuing duty to provide any assistance or information required by the Commission or the Investigations and Enforcement Bureau (Bureau) and to cooperate in any inquiry or investigation conducted by the Commission or the Bureau. Refusal to answer or produce information, evidence, or testimony by an applicant or licensee may result in denial of the application, suspension, or revocation of the license.
- B. No applicant or licensee shall willfully withhold information from or knowingly give false or misleading information to the Commission or Bureau. If the Commission or Bureau determines that an applicant has willfully provided false or misleading information, such applicant shall not be eligible to receive a license under 205 CMR 134.00. A licensee who willfully provides false or misleading information may have its license conditioned, suspended, or revoked by the Commission.

Initials/Date: _____

C. To fulfill this continuing obligation, a gaming vendor applicant or licensee must:

1. Submit information about the change to the Commission **in writing no later than ten days** after the change occurs; and
2. In the notice to the Commission, include the name and license number (if applicable) of the applicant or licensee.

6. IMPORTANT NOTICES

- A. All notices regarding your application will be sent to the email address, business, or home address that you provide on this application. You must notify the Commission immediately of any personal information changes.
- B. If you have a business in Massachusetts or have ever conducted business in Massachusetts under the name of the company for which you are filing, you must submit a Certificate of Good Standing for that business and the link is provided below.

<https://mtc.dor.state.ma.us/mtc/> /

- C. The Bureau or Commission shall deny or revoke a gaming vendor license if the person 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, §31 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 reveal a pattern of misconduct that makes the applicant unsuitable.
- D. In determining whether an applicant for licensure is suitable for the purpose of being issued a gaming vendor license, the Bureau may evaluate and consider the overall reputation of the applicant including, the integrity, honesty, good character, and reputation of the applicant; and whether the applicant has been convicted of a crime of moral turpitude.
- E. An applicant for a gaming vendor qualifier license may appeal a decision made by the Bureau based upon a disqualifying prior conviction in accordance with 134.10(3)(a) on the basis that they wish to demonstrate rehabilitation only if the conviction occurred before the 10 year period immediately preceding the date of submission of the application for licensure or registration.
- F. The gaming vendor license shall be issued for an **initial term of 3 years**. The term of the vendor gaming license shall expire and be renewable on the last day of the month on the third anniversary of the issuance date. An application to renew a gaming vendor license shall be submitted at a minimum of 150 days prior to the expiration of the license. Gaming vendor license renewals shall be for a **term of 3 years**.
- G. Should you be 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 Ingles, es su responsabilidad de obtener los metodos necesarios de traduccion.
- H. 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.

Initials/Date: _____

**PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS
IN THE SPACES PROVIDED**

**IF ANY ITEMS ARE NOT APPLICABLE, INDICATE "NONE" OR "NOT APPLICABLE".
DO NOT LEAVE ANY QUESTIONS UNANSWERED.**

NAME OF APPLICANT

(as it appears on the certificate of incorporation, charter, by-laws, partnership agreement, operating agreement, or other official documents):

D/B/A OR TRADE NAME(S):

BUSINESS WEBSITE:

FEDERAL IDENTIFICATION NUMBER (FIN):

MASSACHUSETTS TAXPAYER NUMBER:

DUN & BRADSTREET NUMBER (DUNS):

SOCIAL SECURITY NUMBER (for individual proprietorship only):

Indicate the following by checking the appropriate box:

- ☐ This is an initial application for a Business Entity Disclosure Gaming Vendor - Primary License.
- ☐ This is an application for retention of a Business Entity Disclosure Gaming Vendor - Primary License, provide the license number and the date of the latest submission filed: _____

Initials/Date _____

LIAISON BETWEEN THE APPLICANT AND THE MASSACHUSETTS GAMING COMMISSION

This person will also accept official notices from the Commission and Bureau on behalf of the applicant.

Check One: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.		
Last Name:		
First Name:	MI:	
Business Title:		
Business Name:		
Business Address:		
City:	State:	Zip Code:
Country:	Province (if applicable):	
Business Telephone:	Extension:	
Business Fax:		
E-Mail Address:		

PRINCIPAL BUSINESS ADDRESS

Number / Street:		
City:	State:	Zip Code:
Country:	Province (if applicable):	
Business Telephone:	Extension:	
Business Fax:		

BUSINESS ADDRESS FROM WHICH THE VENDOR IS OR WILL BE CONDUCTING BUSINESS WITH GAMING ENTITY IN MASSACHUSETTS

☐ Same as above

Number / Street:		
City:	State:	Zip Code:
Country:	Province (if applicable):	
Business Telephone:	Extension:	
Business Fax:		

Initials/Date _____

PART 1 - CERTIFICATION

- A. 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 1-A**
- ☐ No
- B. 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 1-B**
- ☐ No
- C. Is the applicant a "veteran-owned small business" or a "service-disabled veteran-owned small business", as such terms that are 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 the "Qualifier's DD214 Form".
- ☐ Yes - Provide Letter of Verification, Qualifier's DD214 or Certification Number _____
NOTE: If providing a Letter of Verification and/or Qualifier's DD214, please label as **attachment to question 1-C**
- ☐ No

PART 2 – BUSINESS DESCRIPTION

- A. Specify the business form of this applicant:
- ☐ S-Corporation ☐ Partnership ☐ Limited Partnership ☐ LLC
☐ C-Corporation ☐ Trust ☐ Sole Proprietorship
☐ Other (describe): _____
- B. Is the supplier and/or its parent company a publicly traded corporation within the United States?
- ☐ Yes ☐ No
- If you checked yes, indicate on what exchange the stock is traded _____ symbol _____
- C. Is the supplier and/or its parent company a publicly traded corporation outside the United States?
- ☐ Yes ☐ No
- If you checked yes, please list the country: _____
- D. If the applicant is not an individual, provide as an attachment labeled **attachment to question 2-D** the incorporation documents or registration with its corporate officers and identity of shareholders (Note: If a registration statement or pending registration statement is on file with the Securities and Exchange Commission, only the names of those persons or entities holding interest of 5% or more need be provided.)
- ☐ Not Applicable
- E. Provide as an attachment labeled as **attachment to question 2-E**, a copy of the Business Registration Certificate or other proof of valid business registration in Massachusetts.
- ☐ Not Applicable

Initials/Date _____

F(1). Names of the Applicant and the time period they were used.

List all other names under which the applicant has done business and give approximate time periods during which such names were being used:

☐ Not Applicable

Name	Time Period

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-F(1)**.

F(2). State all other addresses presently held by the vendor and all addresses from which the applicant is presently doing business:

☐ Not Applicable

Number and Street	City	State	Zip Code

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-F(2)**.

F(3). State all addresses, other than those listed above, which the vendor held or from which it was conducting business during the last 10-year period, and give the approximate time periods during which such addresses were held:

☐ Not Applicable

Number and Street	City	State	Zip Code	Dates	
				From:	To:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-F(3)**.

Initials/Date _____

G. 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.

Name of Subcontractor	Address	Types of Goods and Services	Contract Amount	Subcontractor Contact Person in reference to this information	Telephone Number

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-G.**

H. Describe the business presently conducted and the business intended to be conducted and the general development of the business during the past 5-years. The description should include the following:

1. Products produced and services rendered by the business and its parent, intermediary and subsidiary companies, the principal markets for said products or services and the methods of distribution;
2. A detailed account of the goods and services being provided to the gaming establishment;
3. If your business is conducting or intends to conduct both gaming-related and non-gaming-related business, differentiate between the two.

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-H.**

I. Estimate the annual dollar amount of goods and/or services to be provided to the gaming licensee(s). \$ _____ **(Required)**

J. Describe any former business, not listed in response to "G", which the vendor or any parent, intermediary or subsidiary company engaged in during the last 10-year period and the reasons for the cessations of such business. Indicate approximate time period during which each such business was conducted.

☐ Not Applicable

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-J.**

Initials/Date _____

K. Contracts and Suppliers.

Furnish the information called for in the table below with respect to the ten highest contracts or agreements with business entities and/or individuals during the past year.

☐ Not Applicable

Number	Address	Nature of Contract or Goods or Services Supplied

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-K**.

L. Stock Description (Corporation)

Describe the nature, type, terms, conditions, rights and privileges of all classes of voting, non-voting and other stock issued, or to be issued, by the corporation, including the number of shares of each class of stock authorized or to be authorized and the number of shares of each class of stock outstanding (i.e. not held by or on behalf of the issuer), as of this date.

If the right of holders of any class of stock may be modified otherwise than by a vote of a majority or more of the outstanding shares so affected, voting as a class, so state and explain briefly:

☐ Not Applicable

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-L**.

M. Non-Voting Shareholders this is listed in regulation under 134.07(6)(m).

Furnish the information called for in the table below, as to each person or entity holder of record or having a beneficial interest in any non-voting stock issued by the applicant listed in section L.

Name and Address	Date of Birth	Class of Non-Voting Stock Held	Number of Shares Held	% of Out Standing Voting Stock

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-M**.

Initials/Date _____

N. Other than this application does the applicant have any financial or ownership interest, or other relationship with a:

Gaming Licensee or Applicant

☐ Yes ☐ No

Gaming Vendor Licensee or Applicant

☐ Yes ☐ No

If you checked "YES" to any of the above, explain the nature of the interest or relationship.

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-N.**

O. Insurance Documents

Attach and label as **attachment to question 2-O** the Certificate of Insurance for the applicant demonstrating insurance and limits for liability and casualty.

☐ Not Applicable

P. Insider Transactions (Corporation)

Furnish the information called for by the table below of each change within the last 5 years preceding this application in the beneficial ownership of the equity securities of the corporation on the part of any person who is indirectly or directly a beneficial owner of more than 5% of any class of equity security of the corporation or who is or was within that period a director or officer of the corporation. (Include changes resulting from (a) gift; (b) purchase; (c) sale; (d) exercise of an option to purchase; (e) exercise of an option to sell; (f) grant or receipt of a put; or (g) grant or receipt of a call.)

Date of Transaction	Nature of Transaction	Parties to Transaction (Include Positions)	Number of Securities Involved

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-P.**

Q. Securities

Has the applicant had any securities or debt offerings suspended from trading or had any action taken against it by any financial regulatory agency?

☐ Yes ☐ No

If you checked yes, please explain:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-Q.**

Initials/Date _____

R. Security Options¹ (Business Entity)

Describe in detail any options existing or to be created with respect to securities issued by the business which description shall include, but not be limited to, the title and amount of securities subject to option, the year or years during which the options were or will be granted, the conditions under which the options were or will be granted, the consideration for granting the option and the year or years during, and the terms under which optionees become or will become entitled to exercise the options and when such options expire.

☐ Not Applicable

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-R.**

S. Identify all persons holding the options described above and include the market value of the option at the time of issuance

Name of Person(s) Holding Options	Market Value of Option at Time of Issuance

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 2-S.**

PART 3 – GAMING VENDOR QUALIFIERS

A. Please indicate all persons or entities in your business that correspond to the sub-items listed below:

NOTE: IF YOU ARE APPLYING FOR A GAMING VENDOR – PRIMARY LICENSE, A KEY GAMING EMPLOYEE-STANDARD APPLICATION FORM MUST BE COMPLETED BY EVERY NATURAL PERSON NOTED IN ITEMS "1" THROUGH "7" BELOW.

1. All persons who will act as sales representatives or otherwise regularly engage in the solicitation of business from a casino licensee or applicant.
2. If your business is a junket enterprise, each person who indirectly holds any beneficial or ownership interest of 5% or more of that enterprise, and each junket representative who will be defined as any person who negotiates the terms of, or engages in the referral, procurement or selection of persons who may participate in any junket to a licensed casino in any jurisdiction (M.G.L. c. 23K, §33).
3. All persons who have signed or will sign any agreement with a casino licensee or applicant.
4. The owner, if the business is a sole proprietorship.
5. If the gaming vendor applicant is a corporation:
 - a. All officers of the business;
 - b. All inside directors or trustees of the business;
 - c. All outside directors serving on the audit or compliance committee; and
 - d. Any person owning more than 5% of the common stock in the business.
6. If the business is a limited liability corporation:
 - a. Each Member;
 - b. Each transferee of a Member's interest; and
 - c. Each Manager.
7. All Partners, whether general, limited or otherwise.

¹For the purpose of this application, option shall mean right, warrant, or option to subscribe to or purchase any securities issued by the corporation.

Initials/Date _____

For every person or entity noted in Items "1" through "9", please provide the information requested in the following form.

Personal or Business Disclosure Attached	Name	Date of Birth	Home Address	Title, Position or Association with the Vendor	% of Ownership ²
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 3-A**.

The Massachusetts Gaming Commission may require additional individuals and entities to submit disclosure forms based on information contained in this application or otherwise disclosed during the course of the investigation.

Part 4 - OWNERSHIP

A. ORGANIZATIONAL CHART

As an attachment labeled **attachment to question 4-A**, provide a flowchart which illustrates the fully-diluted ownership of the applicant. List all parent, holding or intermediary companies until the flowchart reflects the stock, partnership or ownership interest as being held by a natural person(s) and not another business or businesses. If the ultimate parent company is publicly traded and no natural person(s) control 5% or more of the publicly traded stock, indicate that in a footnote to the flowchart.

B. OUTLINE OF OWNERSHIP STRUCTURE

Provide as an attachment labeled **attachment to question 4-B** a corporate structure of the business identifying all subsidiaries, intermediary, holding, and associated companies, and all members of the board, officers, directors, and substantial shareholders. Include position descriptions and the names of persons holding such positions.

C. FLOW CHART

Provide a flow chart as an **attachment to question 4-C** which illustrates the ownership of any other vendor which holds an interest in the filing vendor if applicable.

D. COMPENSATION OF OFFICERS AND DIRECTORS OR PARTNERS

List the total annual compensation received during the last calendar year and the amount to be received during the subsequent calendar year by each director, trustee, officer and/or partner of the business, whether such compensation is in the form of salary, wages, commissions, fees, stock options, bonuses or otherwise:

Name	Positions Held with the Vendor	Amount of Compensation

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 4-D**.

E. COMPENSATION OVER \$300,000

Furnish the information called for below as to each person, other than those listed as qualifiers in Part 4, who currently receive or who reasonably can be expected to receive, from the business, compensation as described above in "D" exceeding \$300,000 per annum.

☐ Not Applicable

² Include number of shares held and class of stock, if applicable.

Initials/Date _____

Name	Date of Birth	Home Address	Position and Length of Time Employed with the Vendor	Amount of Compensation

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 4-E**.

F. FORMER OFFICERS AND DIRECTORS

Furnish the information called for below as to each person, not listed in response to the Vendor Gaming Qualifiers, who held a position as an officer or director of the business during the last 10-years.

☐ Not Applicable

Name	Date of Birth	Last Known Address	Position and Dates Held	Reason for Leaving

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 4-F**.

G. Does the applicant have any direct, indirect or attributed legal or beneficial interest in any business entity outside of the United States?

☐ Yes ☐ No

If you checked yes, attach a detailed statement describing the entity, its location, your affiliation, and/or interest with the foreign entity and label it **attachment to question 4-G**.

H. INTEREST OF PARTNERS (PARTNERSHIP)

Describe the interest held by each partner, whether general or limited, in the partnership.

☐ Not Applicable

1. Amount of initial investment, whether in the form of cash, negotiable instruments, property or otherwise:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 4-H(1)**.

2. Amount of any additional contribution made to the partnership:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 4-H(2)**.

Initials/Date _____

3. Amount and nature of any anticipated future investments:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question4-H(3)**.

4. Degree of control of each partner over the activities of the partnership:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question4-H(4)**.

5. Percentage of ownership of each partner:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question4-H(5)**.

6. Method of distributing profits to each partner:

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question4-H(6)**.

I. Do you offer bonus, profit sharing, pension, retirement, deferred compensation or similar plans to your employees?

☐ Yes ☐ No

PART 5 – CRIMINAL HISTORY

A. The following question relates to any alleged criminal offense, arrest, misdemeanor or felony charges or conviction involving the business or agents named on its behalf. 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 authorities.
- 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, a plea of guilty. An adjudication of delinquency shall 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.

Initials/Date _____

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

Has the "Entity" or any of its subsidiaries ever been charged with or convicted of a criminal offense or been a party to or named as an unindicted co-conspirator in any criminal proceeding in Massachusetts or any other jurisdiction?

☐ Yes ☐ No

If you checked "YES", complete the chart below.

Nature of Charge or Offense	Date of Charge or Complaint	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 5-A**.

PART 6 – LITIGATION AND MISCELLANEOUS VIOLATIONS

A. Existing Litigation

Describe all existing civil litigation at equity and law to which the business, or any subsidiary, is presently a part, whether in Massachusetts or in another jurisdiction.

Is the applicant currently a party to any civil lawsuits?

☐ Yes ☐ No

Has the applicant or any of its officers, executives, or managers been a party to any other litigation?

1. In the previous 10-years?

☐ Yes ☐ No

2. In which an ultimate decision could have a current or future effect on the applicant.

☐ Yes ☐ No

3. In which an ultimate decision could reasonably be expected to reflect upon the current or future financial responsibility or ability of the applicant.

☐ Yes ☐ No

Initials/Date_____

4. In which an ultimate decision could reasonably be expected to reflect upon the character, reputation or integrity, of the applicant or any of its officers, executives or managers?

☐ Yes ☐ No

If you checked "YES" to any of the above questions, submit the following as an attachment labeled **attachment to question 6-A(4)**.

- Official title or caption of the case
- Docket or case number
- Name and location of the court before which the case is pending
- Identity of all parties to the litigation
- applicant, its General nature of all claims being made

B. Insolvency Proceedings & Appointed Receiver, Agent or Trustee

1. Has the applicant, its parent or any intermediary company had any petition under any provision of the Federal Bankruptcy Act or under any state insolvency law filed by or against it in the last 15-year period?

☐ Yes ☐ No

2. Has the parent or any intermediary company sought relief under any provision of the Federal Bank Act or under any state insolvency law in the last 15-year period?

☐ Yes ☐ No

3. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last 15-year period, by a court for the business or property of the business or its parent, holding, intermediary or subsidiary companies?

☐ Yes ☐ No

If you checked "YES" to any of the above, provide the following information on the chart below:

Name of Person Appointed	Date Appointed	Name and Address of Court or Agency	Reason

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 6-B(3)**.

C. Antitrust, Trade Regulation and Securities Agreements, Statutory and Regulatory Violations

1. Has the applicant ever had a judgment, order, consent decree, 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 the applicant?

☐ Yes ☐ No

2. In the past 10-years, has the applicant and/or qualifier had a judgment, order, consent decree consent order pertaining to a violation, 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 the applicant?

☐ Yes ☐ No

Initials/Date _____

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

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 6-C(2)**.

PART 7 – REGULATION AND LICENSURE

A. Is the applicant subject to licensure by any governmental agency in Massachusetts or in any other jurisdiction?

☐ Yes ☐ No

If you checked "YES", provide the following information on the chart below:

Name and Location of Public Agency	Type of Regulation	License Number or Identifying Number

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

If an applicant for a gaming vendor license or non-gaming vendor registration is licensed or registered in another jurisdiction within the United States with comparable license and registration requirements, as determined by the Bureau, and is in good standing in all jurisdictions in which it holds a license or registration, the commission may enter into a reciprocal agreement with the applicant, upon the recommendation of the Bureau, to allow for an abbreviated licensing or registration process and issue a gaming vendor license or registration in accordance with 205 CMR 134.00; provided, however, as part of any such an agreement that the commission shall reserve its rights to investigate the qualifications of an applicant at any time and may require the applicant to submit to a full application for a gaming vendor license or provide further information for registration.

B. Has the business ever applied, in Massachusetts or any other jurisdiction, for a license, permit or other authorization, to participate in lawful gambling operations (including casino gaming, non-profit, horse racing, dog racing, pari-mutuel operation, lottery, sport betting, etc.)?

☐ Yes ☐ No

Initials/Date _____

If you checked "YES", provide the following information on the chart below:

Name and Address of Licensing Agency	Date of Application	Disposition		Type of Gambling Activity	If Issued, Give Appropriate Number and Expiration Date
		Granted <input type="checkbox"/>	Suspended <input type="checkbox"/>		
		Denied <input type="checkbox"/>	Conditioned <input type="checkbox"/>		
		Pending <input type="checkbox"/>	Withdrawn <input type="checkbox"/>		
		Expired <input type="checkbox"/>	Revoked <input type="checkbox"/>		
		Granted <input type="checkbox"/>	Suspended <input type="checkbox"/>		
		Denied <input type="checkbox"/>	Conditioned <input type="checkbox"/>		
		Pending <input type="checkbox"/>	Withdrawn <input type="checkbox"/>		
		Expired <input type="checkbox"/>	Revoked <input type="checkbox"/>		
		Granted <input type="checkbox"/>	Suspended <input type="checkbox"/>		
		Denied <input type="checkbox"/>	Conditioned <input type="checkbox"/>		
		Pending <input type="checkbox"/>	Withdrawn <input type="checkbox"/>		
		Expired <input type="checkbox"/>	Revoked <input type="checkbox"/>		
		Granted <input type="checkbox"/>	Suspended <input type="checkbox"/>		
		Denied <input type="checkbox"/>	Conditioned <input type="checkbox"/>		
		Pending <input type="checkbox"/>	Withdrawn <input type="checkbox"/>		
		Expired <input type="checkbox"/>	Revoked <input type="checkbox"/>		

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

C. Has the applicant ever had a complaint or other notice of pending disciplinary action from any jurisdiction?

☐ Yes ☐ No

During the last 10-year period has the applicant had any license or certificate issued by any jurisdiction denied, restricted, suspended, revoked or not renewed?

☐ Yes ☐ No

Has the applicant ever withdrawn its application, license or certificate in any jurisdiction?

☐ Yes ☐ No

Has the applicant ever appeared on the exclusion list in any jurisdiction?

☐ Yes ☐ No

If you checked "YES" to any of the above questions, include a statement describing the facts or circumstances and submit it as an attachment labeled **attachment to question 7-C**. If gaming-related, provide the information requested on the following chart in Section B.

PART 8 – FINANCIAL BACKGROUND

ITEM A. Financial Institutions

1. Furnish the information called for in the table below with respect to each bank, savings and loan association or other financial institution, whether domestic or foreign, in which the applicant has or has had an account over the last 10-year period, regardless of whether such account was held in the name of the business, a nominee of the business or was otherwise under the direct or indirect control of the business.

Initials/Date _____

Financial Institution Name	Address	Type of Account	Account Number(s)	Dates	
				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-A(1)**.

ITEM B. Financial Statements

1. Provide as an attachment labeled **attachment to question 8-B(1)** copies of all audited financial statements for the last 5 years with respect to the applicant, which shall include but not limited to income statements, balance sheets, statements of sources and applicants of funds, all notes to such statements, related financial schedules and any exceptions taken to such statements by any management response.

☐ Not Applicable
2. Provide as an attachment labeled **attachment to question 8-B(2)**, a list of all contributions, donations, loans and/or any other financial transactions between the applicant (including its entity and individual qualifiers) and any gaming operator in the past 5 years, except those involving direct sales of products or services by the applicant.

☐ Not Applicable

ITEM C. Annual Reports

1. Provide as an attachment labeled **attachment to question 8-C(1)** a copy of all annual reports of the business that were submitted to shareholders, partners, or other persons during the last 5-years.

☐ Not Applicable
2. A corporation that is a registrant under the Security Act of 1933, or the Securities Exchange Act of 1934, shall submit a copy of all annual reports prepared on form 10K and filed within the last 5-years. Provide as an attachment labeled **attachment to question 8-C(2)**.

☐ Not Applicable

ITEM D. Interim Reports

Provide as an attachment labeled **attachment to question 8-D** a copy of all reports prepared due to the occurrence of any of the following events: change in control of the business, acquisition or disposition of assets, bankruptcy or receivership proceedings, changes in the business certifying accountant, or other material events. If a corporation is a registrant with the SEC, it may submit a copy of the most recent form 8K filed with the SEC in response to this item.

☐ Not Applicable

ITEM E. Proxy and Information Statement (Corporation)

Provide as an attachment labeled **attachment to question 8-E** a copy of the last definitive Proxy or Information Statement filed pursuant to Section 14 of the Securities Exchange Act of 1934.

☐ Not Applicable

ITEM F. Registration Statement (Corporation)

Provide as an attachment labeled **attachment to question 8-F** a copy of all Registration Statements filed, in the last 5-years, pursuant to the Securities Act of 1933.

☐ Not Applicable

Initials/Date_____

ITEM G. Tax Returns

Provide as an attachment labeled **attachment to question 8-G**, a copy of all 1120 Forms (U.S. Corporate Income Tax Returns), or all 1065 Forms (U.S. Partnership Return), or 1040 Forms (personal tax returns) for the last 5-years. Be sure to include all schedules and attachments for these returns.

ITEM H. Description of Outstanding Debt

Describe the nature, type, terms, covenants and priorities of all outstanding debt of the business.

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

ITEM I. List the identity of every person having a direct or indirect interest in the business and the nature of such interest.

1. If the business is a partnership, list all partners, general and limited:

Name of Partner	Address

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 8-I(1)**.

2. If the business is a limited liability company, list all members:

Name of Member	Address

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 8-I(2)**.

3. If the business is a trust, list all the beneficiaries:

Name of Beneficiary	Address

Note: Should you require additional space, attach a separate sheet of paper in the same format and label it **attachment to question 8-I(3)**.

Initials/Date _____

STATEMENT OF TRUTH

I, _____, hereby state under the pains and penalties of perjury that:

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.

(Signature)

(Type, Stamp or Print Name)

(Date)

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 Massachusetts Gaming Commission
(Name of President, Officer, Partner, or Sole Proprietor)
(Commission) and Investigations and Enforcement Bureau (Bureau) to conduct a full investigation into the background and activities of said business 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 my application of said entity filed with the Commission.

I authorize the release of any and all information pertaining to 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 on behalf of said entity 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)

(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)



CERTIFICATION OF FILING AND PAYMENT OF FEDERAL AND STATE TAXES (GAMING VENDORS PRIMARY & SECONDARY)

The Investigations and Enforcement Bureau of the Massachusetts Gaming Commission requires that the Applicant and each qualifying entity submit this Certification in accordance with M.G.L. c. 23K, §§ 12, 31, and 205 CMR 112.

I, as the duly authorized representative of the Applicant or qualifying entity, do hereby certify that after inquiry and to the best of my knowledge and belief, that: [Check all boxes that apply.]

1. ☐ The Applicant or qualifying entity has filed all U.S. Federal and State tax returns required during the 5 years preceding the application; AND
2. ☐ The Applicant or the qualifying entity has 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 is not in default;

OR

3. ☐ The Applicant or qualifying entity is not required to file U.S. Federal tax returns because [please explain reason(s), for example, taxes are filed in a non-U.S. jurisdiction]. Please provide specifics below.

Signature of Authorized Certifying Official

Date

Printed Name and Title

Name of the Applicant



KEY GAMING EMPLOYEE – STANDARD LICENSE APPLICATION FORM

PLEASE NOTE

- This application should be completed only after you have received an offer of employment from a Massachusetts casino.
- Applicants may check with the employing Casino Human Resources Department for advice on how to prepare to fill out the application form.
- 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.)
- **Retain a completed copy** of this application for your own records.

After submitting, you will have access to your completed application through your online LMS account.

Please keep your LMS username and password secure.

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 Key Gaming Employee - Standard 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** REAL ID driver's license; **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 Standard 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.

OR

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 Standard 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 PROVIDE 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.

IDENTIFYING AND DESCRIPTIVE 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) _____

<p style="text-align: center;">HAIR COLOR</p> <p><input type="checkbox"/> BLACK <input type="checkbox"/> BROWN</p> <p><input type="checkbox"/> BLONDE <input type="checkbox"/> RED</p> <p><input type="checkbox"/> GRAY <input type="checkbox"/> WHITE</p> <p><input type="checkbox"/> BALD</p>	<p style="text-align: center;">EYE COLOR</p> <p><input type="checkbox"/> BLACK <input type="checkbox"/> BROWN</p> <p><input type="checkbox"/> HAZEL <input type="checkbox"/> BLUE</p> <p><input type="checkbox"/> GRAY <input type="checkbox"/> GREEN</p>	<p>HEIGHT: _____ FT _____ IN</p> <p>WEIGHT: _____ LBS</p>
---	---	---

CITIZENSHIP

1. If you are not a citizen of the United States, please indicate: // N/A ☐ //
- 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: _____

MARITAL STATUS

2. 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: If you require additional space, continue this answer under “Supplemental Answers” which can be found at the end of this document.

Initials/Date: _____

RESIDENCE DATA

3. 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 ten (10) years.

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

Note: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

4. 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: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

EMPLOYMENT AND LICENSING DATA

5. In the chart below, provide the information regarding your employment for the past ten (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)				

Note: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

6. 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 ten (10) year period, have you been subject to any disciplinary action related to your employment?

Yes ☐ No ☐

Initials/Date: _____

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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

7. 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 ☐

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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

8. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

EDUCATIONAL DATA

9. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

Initials/Date: _____

MILITARY SERVICE DATA

10. If you have ever served in the US Military or reserves of the United States, please provide the following information: // N/A ☐ //

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 _____

11. 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): _____

OWNERSHIP OR FINANCIAL INTEREST

12. In the past twenty years or since the age of 18, whichever is less or in which you served as an officer Yes ☐ No ☐
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?

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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

13. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

FINANCIAL DATA

14. State when you filed your last Federal tax returns and the tax period it covered.

Date Filed: _____ Period Covered: _____

Initials/Date: _____

15. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

16. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

17. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

18. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

Initials/Date: _____

FINANCIAL JUDGEMENTS

19. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

20. 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: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

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 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 ☐

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

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

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," including juvenile charges.
- C. **Conviction:** includes the finding of guilty of any "offense" upon a trial or a plea of guilty. Findings of delinquency from a juvenile court must be disclosed and may be considered by the MGC in determining overall suitability; however, a finding of delinquency will not lead to automatic disqualification of your application.
- D. **Crime or Offense:** includes all felonies, misdemeanors, and juvenile delinquency matters.
- E. **Disposition:** is the way the case was resolved, for example: guilty, not guilty, continued without a finding, dismissed, pending, delinquent, not delinquent.

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. The charge(s) or offense(s) occurred when you were a juvenile;
 - 5. You were not convicted or found delinquent;
 - 6. You were not placed in handcuffs;
 - 7. You did not serve any time in prison or jail;
 - 8. The charge(s) or offense(s) happened a long time ago.
- B. Answer "No" **IF:** You have never been arrested or charged with any crime or offense.
- C. You are **NOT** required to disclose records of criminal appearances, criminal dispositions, and/or any information concerning acts of delinquency that have been sealed.

IMPORTANT

The Massachusetts Gaming Commission will make inquiries to establish whether you have had any involvement with law enforcement agencies. Failure to disclose any such involvement will be taken into account in assessing your character, honesty, and integrity.

22. 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 below and on the next page:

CHARGE OR OFFENSE (LIST ALL CHARGES ARISING FROM EACH INCIDENT)	DATE OF CHARGE OR OFFENSE	NAME AND ADDRESS OF LAW ENFORCEMENT OR COURT INVOLVED	DISPOSITION (EG: GUILTY, NOT GUILTY, DISMISSED, CONTINUED WITHOUT A FINDING, DELINQUENT, NOT DELINQUENT)	SENTENCE

Initials/Date: _____

NOTE: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

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.

23. 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

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

SETTLEMENTS, ALLEGATIONS, AND ADDITIONAL DISCLOSURES

24. Have you ever reached a settlement or had a settlement reached by another person or entity, on your behalf, prior to or in the absence of litigation or criminal charges being filed?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

Initials/Date: _____

25. Have you ever reached a settlement or had a settlement reached by another person or entity, on behalf of a company with which you were/are affiliated, prior to or in the absence of litigation or criminal charges being filed?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

26. Have you participated in any type of sexual harassment, sexual misconduct, or unlawful discrimination?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

27. Have any allegations of sexual harassment, sexual misconduct, or unlawful discrimination been made concerning your behavior (including by employees and/or subordinates)?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

Note: If you require additional space, continue this answer under "Supplemental Answers" which can be found at the end of this document.

Initials/Date: _____

28. In the interest of full disclosure and your obligation to be forthcoming in your application, is there any other information which might reflect adversely in an evaluation of your honesty, integrity, or good character, or otherwise impact a determination on your suitability for gaming licensure/qualification?

Yes ☐ No ☐

If you checked "Yes", provide a detailed explanation below:

Note: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

Initials/Date: _____

NET WORTH STATEMENT – ASSETS AND LIABILITIES

NOTE: Complete the financial statements on pages 14 through 23 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		\$	\$

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		
<u>NET WORTH</u> <u>TOTAL ASSETS</u> (FROM COLUMN B) LESS <u>TOTAL LIABILITIES</u> (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: _____

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
						\$
						TOTAL CURRENT BALANCE (ENTER THIS FIGURE IN ITEM 1, COLUMN B ON PAGE 14)

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 14)					TOTAL CURRENT BALANCE (ENTER THIS FIGURE IN ITEM 2, COLUMN B ON PAGE 14)

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
								\$
					TOTAL PURCHASE PRICE (ENTER THIS FIGURE IN ITEM 3, COLUMN A ON PAGE 14)			TOTAL CURRENCY MARKET VALUE (ENTER THIS FIGURE IN ITEM 3, COLUMN B ON PAGE 14)

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 14)		TOTAL CURRENT MARKET VALUE (ENTER THIS FIGURE IN ITEM 4, COLUMN B ON PAGE 14)

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
						\$
						TOTAL CASH SURRENDER VALUE (ENTER THIS FIGURE IN ITEM 5, COLUMN B ON PAGE 14)

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
				\$		\$
				TOTAL CUMULATIVE EMPLOYEE CONTRIBUTION (ENTER THIS FIGURE IN ITEM 6, COLUMN A ON PAGE 14)		TOTAL CURRENT CASH VALUE (ENTER THIS FIGURE IN ITEM 6, COLUMN B ON PAGE 14)

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.					TOTAL COST(S) OF VEHICLES (ENTER THIS FIGURE IN ITEM 7, COLUMN A ON PAGE 14)	TOTAL CURRENT MARKET VALUE OF VEHICLES (ENTER THIS FIGURE IN ITEM 7, COLUMN B ON PAGE 14)
**If leased, enter the sum of the down payment plus monthly payments to date as the total cost						

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 14)			TOTAL CURRENT MARKET VALUE OF OTHER ASSETS (ENTER THIS FIGURE IN ITEM 8, COLUMN B ON PAGE 14)

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
						\$			\$
						TOTAL ORIGINAL AMOUNT OF NOTES PAYABLE (ENTER THIS FIGURE IN ITEM 10, COLUMN C ON PAGE 15)			

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
		\$		\$
		TOTAL ORIGINAL TAX OBLIGATION(S) (ENTER THIS FIGURE IN ITEM 12, COLUMN C ON PAGE 15)		TOTAL AMOUNT OF TAXES PAYABLE (ENTER THIS FIGURE IN ITEM 12, COLUMN D ON PAGE 15)

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
			\$				\$
			TOTAL ORIGINAL MORTGAGES OR LIENS PAYABLE ON REAL ESTATE (ENTER THIS FIGURE IN ITEM 13, COLUMN C ON PAGE 15)				TOTAL MORTGAGES OR LIENS PAYABLE ON REAL ESTATE (ENTER THIS FIGURE IN ITEM 13, COLUMN D ON PAGE 15)

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
		\$				\$
TOTAL ORIGINAL LIABILITY INSURANCE/PENSION LOANS (ENTER THIS FIGURE IN ITEM 14, COLUMN C ON PAGE 15)			TOTAL AMOUNT OUTSTANDING INSURANCE/PENSION LOANS (ENTER THIS FIGURE IN ITEM 14, COLUMN D ON PAGE 15)			

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
					\$	\$
TOTAL ORIGINAL AMOUNT OTHER INDEBTEDNESS (ENTER THIS FIGURE IN ITEM 15, COLUMN C ON PAGE 15)					TOTAL AMOUNT OUTSTANDING OTHER INDEBTEDNESS (ENTER THIS FIGURE IN ITEM 15, COLUMN D ON PAGE 15)	

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
					\$	\$
					TOTAL ORIGINAL CONTINGENT LIABILITIES (ENTER THIS FIGURE IN ITEM 16, COLUMN C ON PAGE 15)	TOTAL AMOUNT OF OUTSTANDING CONTINGENT LIABILITIES (ENTER THIS FIGURE IN ITEM 16, COLUMN D ON PAGE 15)

Initials/Date: _____

QUESTION NUMBER	ANSWER
4	5/2000 – 5/2002, 123 Main St. Apt. 12a, Anytown PA 12345, 555-555-1212

Initials/Date: _____



**CERTIFICATION OF FILING AND PAYMENT OF FEDERAL TAXES
(KEY GAMING EMPLOYEE and INDIVIDUAL QUALIFIER OF A PRIMARY GAMING
VENDOR and INDEPENDENT, SELF-EMPLOYED JUNKET REPRESENTATIVE)**

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

I do hereby certify that (Check all boxes that apply):

1. ☐ I have filed all U.S. Federal tax returns required during the 5 years preceding my application;
2. ☐ I have not been notified of any unpaid U.S. Federal 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, and I am not in default;
3. ☐ I have not had any U.S. Federal tax returns that were examined, audited, or adjusted by the Internal Revenue Service in the past 5 years;
4. ☐ On _____, I have requested from the IRS my tax **Account Transcripts** for each of the past four (4) years through <https://www.irs.gov/individuals/get-transcript> (Get Transcript by Mail).

OR

5. ☐ I did not file U.S. Federal tax returns; however, I have filed all tax returns required by the applicable (foreign) taxing authority. Please list below the non-U.S. jurisdiction where tax returns were filed.

6. ☐ I have not had any tax returns that were examined, audited, or adjusted by the applicable (foreign) taxing authority in the past 5 years.

Printed Name of Applicant

Date



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.

Initials/Date _____

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.

Initials/Date _____

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:

Initials/Date

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.**

Initials/Date _____

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: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

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: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

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

NOTE: If you require additional space, continue this answer under “**Supplemental Answers**” which can be found at the end of this document.

Initials/Date _____

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

NOTE: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

**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

NOTE: If you require additional space, continue this answer under "**Supplemental Answers**" which can be found at the end of this document.

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)

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)

(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)

QUESTION NUMBER	ANSWER
2	5/2000 – 5/2002, 123 Main St. Apt. 12a, Anytown PA 12345, 555-555-1212

[illegible]

SUBCONTRACTOR INFORMATION FORM



Applicant: _____

SUBCONTRACTOR INFORMATION FORM APPLICATION INSTRUCTIONS

A subcontractor to a vendor shall not be required to obtain licensure or registration under 205 CMR 134.00. For purposes of 205 CMR 134.00 a subcontractor shall be considered a person that contracts with a licensed or registered vendor to provide goods or services necessary to fulfill the licensed or registered vendor's contract with a gaming licensee. The Bureau may, at its discretion, require the submission of additional information and documents, including but not limited to the Subcontractor Information Form as provided in 205 CMR 134.07(11).

Please review and complete the information provided on this Subcontractor Information Form

Should you have any questions or need additional information, please feel free to contact the Division of Licensing at 617.979.8400.

A Subcontractor will maintain at all times during the term of the agreement, insurance for claims which may arise from, or in connection with, the products furnished by Subcontractor, their agents representatives, employees or subcontractors with coverage at least as broad and with limits of liability not less than those stated below.

Workers Compensation and Employers Liability Insurance
General Liability Insurance
Automobile Liability Insurance

1. COMPLETING A SUBCONTRACTOR INFORMATION FORM:

- A. This form is to be completed by any person who contracts with a licensed or registered vendor to provide goods or services necessary to fulfill the vendor's contract with a gaming licensee.
- B. Read each question carefully prior to answering. Answer every question completely and be sure not leave blank spaces. If a question does not apply to you, indicate "Does Not Apply" in response to that question. If there is nothing to disclose in response to a particular question, state "None" in response to that question. **Note: the Commission will not accept your application unless you provide a response to every question.**
- C. 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.**
- D. If you need additional space to answer any question(s), supply the required information on an attachment page and clearly identify which question(s) you are answering.
- E. All requested attachments that apply to the applicant must be labeled with the specific attachment numbers and be attached in order to the back of the application.
- F. All required documentation must be submitted at the time of filing this form. The applicant is under a continuing duty to notify the Commission within ten (10) days if there is a change of the information provided to the Commission.
- G. All authorizations, waivers, and releases must be signed by the applicant or its designated representative or signatory.

2. BEFORE SUBMITTING THIS APPLICATION TO THE COMMISSION, CHECK THAT:

- A. You have answered every question completely.
- B. You have initialed and dated each page of this application (except the cover and signature pages) in the spaces provided.

Initials/Date _____

- C. You have signed the Statement of Truth and Consent forms included with this application.
- D. You have signed and had the Release Authorization forms included with this application notarized.
- E. 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.
- F. You retain a completed copy of this application for your own records.

3. DUTY TO UPDATE INFORMATION

- A. All subcontractors shall have the continuing duty to provide any assistance or information required by the Commission or the Investigations and Enforcement Bureau (Bureau) and to cooperate in any inquiry or investigation conducted by the Commission or the Bureau. Refusal to answer or produce information, evidence, or testimony by a subcontractor may result in the restriction of a subcontractor from providing goods and services to a licensed or registered vendor.
- B. No subcontractor shall willfully withhold information from or knowingly give false or misleading information to the Commission or Bureau. If the Commission or Bureau determines that a subcontractor has willfully provided false or misleading information, such subcontractor shall not be allowed to continue to provide goods or services to a licensed or registered vendor.
- C. To fulfill this continuing obligation, a subcontractor must:
 1. Submit information about the change to the Commission **in writing no later than ten (10) days** after the change occurs; and
 2. In the notice to the Commission, include the name of the subcontractor.

4. IMPORTANT NOTICES

- A. All notices regarding your application will be sent to the email address, business, or home address that you provide on this form. You must notify the Commission immediately of any personal information changes.
- B. The term of subcontractor shall expire when the agreement to provide goods or services to a licensed or registered vendor has been completed or terminated. A new Subcontractor Information Form shall be submitted when the subcontractor enters into a new agreement with a licensed or registered vendor.
- C. If you have a business in Massachusetts or have ever conducted business in Massachusetts under the name of the company for which you are filing, you must submit a Certificate of Good Standing for that business and the link is provided below.

<https://wfb.dor.state.ma.us/webfile/Certificate/Public/WebForms/Welcome.aspx>

- D. 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 including the Massachusetts Gaming Commission. 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.
- E. Should you be 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 Ingles, es su responsabilidad de obtener los metodos necesarios de traduccion.

Initials/Date _____

**PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS
IN THE SPACES PROVIDED**

**IF ANY ITEMS ARE NOT APPLICABLE, INDICATE "NONE" OR "NOT APPLICABLE"
DO NOT LEAVE ANY QUESTIONS UNANSWERED**

PART 1. NAME OF BUSINESS

Official or Trade Name of Business (Do Not Abbreviate) _____

Name as it appears on the Certificate of Incorporation, Charter, By-Laws, Partnership Agreements or Other Official Documents. _____

PART 2. DESCRIPTION OF SUBCONTRACTOR'S BUSINESS

A. Form of Organization (check one):

☐ Sole Proprietorship ☐ Partnership ☐ Limited Partnership ☐ C-Corporation ☐ LLC

☐ S-Corporation ☐ Trust ☐ Other _____

(Describe) _____

B. Business name as it appears on formation documents: _____

C. Place of Incorporation or Formation: _____

D. Date of Incorporation or Formation: _____

E. Please submit a copy of the Certificate of Incorporation and all amendments, charter, by-laws, partnership agreement, trust agreement or other basic documentation of the business, if any. This document must be labeled as **Attachment 2-E**. If the business is a publicly traded corporation, please indicate below on what exchange its stock is traded and under what symbol.

F. Provide below your business's Federal Employer Identification Number (FIN#).

FID # _ _ - _ _ _ _ _

☐ Check box if applied for

G. If a sole proprietor, please provide your Social Security Number.

SSN: _ _ _ - _ _ - _ _ _

Initials/Date _____

**PART 3. TRADING AS (T/A) OR DOING BUSINESS AS (D/B/A),
OR THE SERVICES OF (F/S/O)**

Subcontractor Business Type

Street Location (Number/Street) City State Zip Code

Country Telephone Number Fax Number (if available)

Website (URL)**PART 4. PERSON TO BE CONTACTED IN REFERENCE TO THESE FORMS**

Name and Title

Home Telephone Number Daytime OR Work Telephone Number with Extension

Cell Number E-Mail Address Fax Number (if available)**PART 5. THE PRINCIPAL ADDRESS OF THE BUSINESS**

Street Location (Number/Street) City State Zip Code

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

Country Telephone Number Fax Number (if available)

Website (URL)

Initials/Date_____

PART 6. BUSINESS ADDRESS FROM WHICH THE APPLICANT IS OR WILL BE CONDUCTING BUSINESS WITH THE LICENSEE OR APPLICANT

(Complete only if different than the above principal address)

Street Location	(Number/Street)	City	State	Zip Code
Country	Telephone Number		Fax Number (if available)	
Website (URL)				

PART 7. OTHER NAMES AND ADDRESSES OF THE BUSINESS

- A. Provide the name, address, social security number and date of birth of an individual authorized to sign any agreement with the vendor on behalf of the subcontractor.

Name	Address	Social Security Number	Date of Birth

- B. Provide the names, addresses, and percentage of ownership held by each entity or person directly owning more than five (5%) percent of this business.

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

Name	Address	Percent of Ownership

NOTE: Should you require additional space, attach a separate sheet in the same tabular format and label it **Attachment 7-B**.

Initials/Date _____

PART 8. NATURE OF SUBCONTRACTOR'S BUSINESS

A. Provide the type of goods and services to be provided to the vendor including the term and value of the contract

[illegible]

NOTE: Should you require additional space, attach a separate sheet in the same tabular format and label it **Attachment 8-A**.

B. Insurance Documents

Attach and label as **Attachment 8-B** the Certificate of Insurance for the subcontractor demonstrating insurance and limits for liability and casualty.

Initials/Date _____

STATEMENT OF TRUTH and ACKNOWLEDGEMENT**STATEMENT OF TRUTH**

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

1. The information contained herein and accompanying 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.

ACKNOWLEDGEMENT

The Massachusetts Gaming Commission - Division of Licensing may, at some time during the course of the term of the Vendor's license, require a designated owner or principal employee of the Subcontractor to submit fingerprints, as authorized by 205 CMR 134.07, for the purpose of conducting a criminal background check.

I, _____, as a representative of the Subcontractor, hereby
(Print Name)
acknowledge that 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)

(Type, Stamp or Print Name)

(Date)

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 Massachusetts Gaming
(Name of President, Officer, Partner, or Sole Proprietor)
Commission (Commission) and Investigations and Enforcement Bureau (Bureau) to conduct a full investigation into the background and activities of the said business 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 the 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.

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

(Signature)

(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)