

### **Lottery and Gaming Control Commission**

1800 Washington Boulevard, Suite 330, Baltimore, MD 21230

# GAMING CONTRACTOR LICENSE RENEWAL APPLICATION

Form #1025

Applicant:	

#### **ELIBIGILITY AND REQUIREMENTS**

- 1) Any currently licensed Maryland Gaming Contractor, other than an employee of a video operation licensee, who contracts with a video lottery operation licensee, a video lottery operation licensee applicant or other person to:
  - (a) Manage or operate a video lottery facility;
  - (b) Provide security for a video lottery facility;
  - (c) Perform service, maintenance, or repairs of a video lottery terminal, central operating system, associated equipment, or software;
  - (d) Own or control a person described above; or
  - (e) Provide any other service that is essential to operation of a video lottery facility must:
    - I. submit an application for renewal to the Commission at <u>least 6 months before the</u> <u>contractor's license expires</u>, but not more than 9 months before the contractor's license expires;
    - II. continue to comply with all licensing requirements;
    - III. submits to a background investigation; and
    - IV. pays the required renewal fees and costs described below in 'Fees and Costs'.
- 2) Applicant owners, current officers, directors, trustees listed on Exhibit 9 and Exhibit 11 of this form **must file** the Principal Employee Application Form 1004 or Principal Employee Renewal Application Form 1008.
- 3) All video lottery employees of a contractor must be licensed. A contractor must submit the Temporary Gaming Employee License Application Form 2003 if the employee has not previously been licensed by the Maryland Lottery and Gaming Commission (Commission) or a Gaming Employee License Renewal Application Form 4001 if the employee's Gaming license is within 150 days of expiration.

#### **FEES AND COSTS**

#### License fee:

(Tier 1)

- \$2,500 for a contractor who contracts with a video lottery operation licensee or other person to:
  - a. Manage or operate a video lottery facility;
  - b. Provide security for a video lottery facility;
  - c. Perform service, maintenance, or repairs of a video lottery terminal, table game device, central operating system, associated equipment, or software;
  - d. Own or operate an item or Applicant listed above in (a), (b) or (c);
  - e. Provide junket enterprise services; or
  - f. Provide any other service that is essential to operation of a video lottery facility.

Form - 1025 RI	ENEWAL (I	Rev March 7, 2017)	Page 2 of 39	]	lnitials
			•		

(Tier 2)

\$800 for a contractor who contracts with a video lottery operation licensee or other person to:

- g. Provide a service that is essential to the operation of a facility service, but has no contact with or access to a:
  - i. Central operating system;
  - ii. Facility's video lottery system
  - iii. Video lottery terminal; or
  - iv. Table game.

#### **Background investigation costs:**

A \$2,000 Background Investigation Deposit is required at the time an Applicant files a Gaming Contractor License Renewal Application. Should the deposit be exhausted prior to the completion of the background investigation, the Applicant will be billed for any additional investigative costs incurred by the Commission. Conversely, the Applicant will be refunded any unused portion of this fee once the investigation has been concluded.

#### TERM OF LICENSE, RENEWALS, EXEMPTIONS

#### Term:

A Maryland Gaming Contractor license is valid for <u>five years</u> from the date of approval. Each subsequent renewal of a Maryland Gaming Contractor license is valid for <u>five years</u> from the date of approval.

#### **Renewal process:**

The Commission may renew the Gaming Contractor license if the contractor licensee:

- a. Submits an application for renewal to the Commission at least 6 months before the contractor's license expires, but not more than 9 months before the contractor's license expires;
- b. Continues to comply with all licensing requirements;
- c. Submits to a background investigation; and
- d. Pays license renewal fees and costs described above in 'Fees and Costs'.

#### **Exemptions:**

A contractor is exempt from:

- (1) Bond requirements under COMAR 36.03.02.15.; and
- (2) Labor peace agreement requirements under State Government Article,

Page 3 of 39

- §9-1A-07(c)(7)(v), Annotated Code of Maryland, unless the contractor is engaged:
  - (a) As a lessee;
  - (b) As a tenant: or
  - (c) Under a management agreement.

#### **REMITTANCE OF FEES AND COSTS**

Note: Application fees, license fees and the background investigation deposit, made payable to "Maryland Lottery and Gaming Control Agency", are due at the time of application. Application fees and license fees are non-refundable. You may wire transfer your payment or send it (certified/bank check or money order) with the application to the following address:

Maryland Lottery and Gaming Control Agency Attn: <u>Casino Licensing and Background Investigation Division</u> 1800 Washington Blvd, Suite 330 Baltimore, Maryland 21230

#### **Wire Payment to:**

- 1. Maryland Lottery and Gaming Control Agency Account Number: 4928823376
- 2. Name of the Account Maryland State Lottery Wells Fargo Bank, N.A.
- 3. **If required,** the SWIFT code is WFBIU6S ABA Routing Number: 121000248

#### TABLE OF CONTENTS

		Page #
Section A	IMPORTANT NOTICES	5
Section B	INSTRUCTIONS	6
<b>Section C</b>	CONTRACTOR LICENSE RENEWAL PACKAGE FORMS	8
Section D	DEFINITIONS	9
Section E	APPLICANT INFORMATION	9
	E.1 Name of Applicant	9
	E.2 Contractor Business	
	E.3 Licensee Association	9
	E.4 Applicant's Form of Organization	9
	E.5 Point-of-Contact	
	E.6 Applicant's Principal Address	
	E.7 Incorporation	
	FORM 4506-T	17
	EXHIBITS	18 - 34
	REQUIRED ATTACHMENT CHECKLIST	35
	AUTHORIZATION FOR RELEASE OF INFORMATION.	36

AFFIDAVIT OF REPRESENTATIVE OF APPLICANT	37
ACKNOWLEGEMENT AND DISCLOSURE	38
CERTIFICATION OF RUSINESS RELATIONSHIP	30

#### **SECTION A - IMPORTANT NOTICES**

- A.1 This form is an official document of the Maryland Lottery and Gaming Control Commission ("Commission"). It may not be altered or changed, except to insert the information that is required. Any alteration or change to this document may cause this application or your license to be delayed or denied.
- **A.2** The Maryland Contractor license is a privilege. The burden of proving qualifications to receive and hold a license is at all times on the Applicant. The Applicant accepts any and all risk of adverse public notice, embarrassment, criticism, emotional distress or financial loss that may result from any action with respect to this application. The Applicant expressly waives any and all claims for damages as result thereof. Information not called for in this form or in addition to what is provided in response to this form may be requested. The Applicant shall provide all information, documents, materials and certifications at the Applicant's own expense.
- **A.3** You <u>must</u> make accurate statements and include all material facts. Any misrepresentations, failure to provide any requested information, or failure to meet any other requirement as set out in law or regulation may result in the denial of the application and may subject you to civil and/or criminal penalties.
- A.4 The total cost of the investigation conducted pursuant to this application shall be borne by the Applicant. In addition, the Applicant is responsible for the payment of all application fees required under the law and regulations and the posting of a bond that may be required by the Commission. The application will not be processed until the fees have been submitted.
- **A.5** The Applicant is under a continuing obligation to **promptly** disclose any changes in the information provided in the application, as well as any changes to the materials submitted at the request of the Commission. The duty to make such additional disclosures shall continue throughout any period of the license that is granted by the Commission.
- **A.6** The Applicant shall **promptly** provide written notification to the Commission of any corrections or changes to this application once submitted or to any of the materials submitted at the request of the Commission.
- **A.7** All notices regarding the application will be sent to the address provided by the Applicant on this form. The Applicant must immediately notify the Commission of any change of address.
- **A.8** Any Applicant who applies for and obtains a license from the Commission may be required to submit to warrantless searches as stated in the law or regulation.

- A.9 All submissions with and for this application become the property of the Commission and <u>will</u> <u>not</u> be returned.
- **A.10** Once the application has been submitted to the Commission, the Applicant <u>may not</u> withdraw its application without permission of the Commission.
- A.11 A completed application, with all of the original signatures, initials, and notarization must be submitted to the Maryland Lottery and Gaming Control Agency's <u>Casino Licensing and Background Investigation Division</u>. A copy of the completed application must be forwarded on the electronic storage device described in A.12 and A.13.
- **A.12** The Applicant must provide all accompanying documentation, attachments, appendices and/or supporting documents, (such as business formation papers and tax returns) on a password protected, electronic storage device, such as a CD or 'thumb drive', in .pdf format. The application and each document must be <u>saved as separate .pdf files</u> (not one continuous .pdf), and each file must be identified by name or designated exhibit number.
- **A.13** The Applicant is required to mail, send or transmit the password to the Licensing Division in a timely fashion. The Applicant should forward the password **separately** from the application.
- **A.14** The Maryland Lottery and Gaming Control Agency's <u>Casino Licensing and Background Investigation Division</u> is referred to throughout this application as the "Licensing Division".

#### **SECTION B - INSTRUCTIONS**

These instructions are applicable to any Applicant seeking a Maryland Gaming Contractor license ("license"). If a business entity that applies for a license is a subsidiary or if a business entity holding a license is to become a subsidiary, each holding company and each intermediary company with respect to the Applicant shall, as a condition of the subsidiary acquiring or retaining a license, provide all the information requested by the Commission.

- **B.1** Read each question carefully. Answer each and every question completely. **Do not leave blank spaces.** If a question does not apply, write "Does not apply" or "N/A." If the correct answer to a particular question is "None," write "None."
- **B.2** All entries on the form must be typed or printed block lettering. Initials or signatures must be in handwriting, unless otherwise stated by the Commission, by the person providing the information. If the answers are not legible, the application may not be accepted. Do not misstate or omit any material fact(s). All information is subject to verification. False or misleading information is grounds for the Commission to deny the application, or to suspend or revoke the license.
- **B.3** The Applicant, if it is an individual, <u>must initial all pages</u> or if the Applicant is not an individual, the person authorized to complete the form on behalf of the Applicant (<u>Exhibit 19</u>) <u>must initial each page</u> as provided in lower right-hand corner. The Applicant is attesting to the accuracy and completeness of the information contained on that page and that they have read the page.
- **B.4** If additional pages are required in order to answer any question, additional pages may be utilized and must be attached to the form. Be sure to indicate the number(s) of the question(s) being

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 6 of 39

answered and initial each additional page. Some schedules may require disclosure of information for more than one individual or entity or type of information. If there are multiple disclosures, make additional copies of the blank schedule and complete it for each individual or entity.

- **B.5** All required documentation, such as business formation papers, tax returns and appendices, as well as the application forms that comprise an application package for a license, as listed above, <u>must</u> be submitted at the time of filing this form.
- **B.6** An Applicant should give specific attention to the clear identification of those portions of its application that it deems to be confidential, proprietary commercial information or trade secrets, and provide justification of why such materials, upon request, should not be disclosed by the State pursuant to the Public Information Act ("PIA"), Title 10, Subtitle 6, State Government Article, Annotated Code of Maryland. Confidential information supplied shall be revealed in the course of the necessary administration of this application. A blanket statement by an Applicant that its entire application is confidential, proprietary commercial information or a trade secret is unacceptable. Applications shall be open to public inspection only after award of a license has been made, to the extent permitted by the PIA. The Applicant is advised that, upon request for this information from a third party, the Commission will make an independent determination whether the information may be disclosed. An Applicant or licensee waives any liability of the State of Maryland, and its employees and agents, the Commission, and the Maryland State Lottery and Gaming Control Agency for any damages resulting from any disclosure or publication in any manner.

When the Agency receives a PIA request, Staff retrieves and compiles all records that are responsive to the request. "Records" means all papers, emails, notes, recordings, maps, plans, forms, etc. After Staff compiles all responsive records, the Office of the Attorney General (OAG) reviews the request and the records, and makes a legal determination as to whether the records may be released. Additionally, when the Agency receives a request for records of an entity that holds a gaming-related license, or a vendor registration or certification, Agency Staff or the OAG typically advise the entity of the request and our anticipated response. The entity may file litigation to prevent the Agency from releasing records it wants kept confidential.

- **B.7** The Commission may request additional financial and other information as needed.
- **B.8** The license and application fees described in the "Fees and Costs" section on Pages 2 and 3 of this form and authorized by COMAR are non-refundable. Additional costs and expenses may be incurred by the Commission in its investigation of the Applicant. Background investigation costs will be assessed by the Commission and shall be reimbursed to the Commission promptly upon receipt of an invoice. The failure to reimburse the Commission for background investigation costs is a basis for disqualification of the Applicant.
- B.9 Attach proof of registration with the Maryland Department of Assessments and Taxation (MD SDAT) to do business within the State. A "Certificate of Good Standing" must be obtained from MD SDAT (not from the Maryland Comptroller's Office). An Applicant will need to determine if the company's status is listed as in "Good Standing" by checking the following: <a href="http://sdat.resiusa.org/ucc-charter/Pages/CharterSearch/default.aspx">http://sdat.resiusa.org/ucc-charter/Pages/CharterSearch/default.aspx</a>. Assistance with this process may be obtained from: <a href="http://dat.maryland.gov/Pages/default.aspx">http://dat.maryland.gov/Pages/default.aspx</a> or by sending email inquiries to <a href="mailto:charterhelp@dat.state.md.us">charterhelp@dat.state.md.us</a> if necessary.

Form - 1025 RENEWAL (Rev March 7, 2017)

# SECTION C - CONTRACTOR LICENSE RENEWAL APPLICATION PACKAGE FORMS

C.1 Contractor Application Renewal and Disclosure Information (Form -1025)
C.2 Principal Employee Application (Form -1004) or Principal Employee Renewal Application (Form -1008) – An individual who is a Principal Employee of a (Tier 1) company, to include each Director, Partner, Officer, Trustee or Owner, applying renew a Gaming Contractor license who contracts with a video lottery operation licensee or other person to:  a. Manage or operate a video lottery facility; b. Provide security for a video lottery facility; c. Perform service, maintenance, or repairs of a video lottery terminal, table game device, central operating system, associated equipment, or software; d. Own or operate an item or Applicant listed above in (a), (b) or (c); e. Provide junket enterprise services; or f. Provide any other service that is essential to operation of a video lottery facility, must:  I. Be licensed by the Commission as a Principal Employee; or II. Submit a Principal Employee License Application Form 1004, via MLGCA's 'eLicensing' system, if the Director, Partner, Officer, Trustee or Owner has not previously been licensed by the Commission; or  III. Submit a Principal Employee License Renewal Application Form 1008, via MLGCA's 'eLicensing' system, if the Director, Partner, Officer, Trustee or Owner's Principal
Employee License is within six months of expiration; unless  IV. The individual believes he or she is eligible for a waiver of a licensing requirement. An individual who submits the <a href="Principal Employee waiver">Principal Employee waiver</a> form (Form 1007) does not need to complete Form 1004 or a Form 1008 unless directed to do so by the Commission.
<b>IMPORTANT:</b> As of March 15, 2017 the online Temporary Principal Employee License application, the Principal Employee License Application and the Principal Employee Renewal License Application are now included and operational in the 'e-Licensing' system; the Commission will <u>no longer</u> accept paper applications for any of these Principal Employee related licenses. If you have not previously utilized MLGCA's 'e-Licensing' system, please contact MLGCA's Licensing Division for guidance.
<ul> <li>C.3 Gaming Employee License Application (Form -2001) - An individual who is a Principal Employee of a (Tier 2) company, to include each Director, Partner, Officer, Trustee or Owner, applying to become a Gaming Contractor who provides a service that is essential to the operation of a facility service, but has no contact with or access to a: <ol> <li>a. Central operating system;</li> <li>b. Facility's video lottery system;</li> <li>c. Video lottery terminal; or</li> <li>g. Table game, must: <ol> <li>Be licensed by the Commission as a Gaming Employee; or</li> <li>Submit a Gaming Employee License Application, Form 2001, via MLGCA's 'eLicensing' system, if the Director, Partner, Officer, Trustee or Owner has not previously been licensed by the Commission; or</li> </ol> </li> </ol></li></ul>

Page 8 of 39

- III. Submit a Gaming Employee License <u>Renewal</u> Application, Form 4001, via MLGCA's 'eLicensing' system, if the Director, Partner, Officer, Trustee or Owner's Principal Employee License is within 150 days of expiration; unless
- IV. The individual believes he or she is eligible for a waiver of a licensing requirement. An individual who submits the <u>Principal Employee waiver</u> form (Form 1007) does not need to complete Form 2001 or a Form 4001 unless directed to do so by the Commission.

**IMPORTANT:** The Commission <u>will not accept the paper version</u> of the Gaming Employee License Application. If it is determined that an individual listed by the Applicant is required to submit a Gaming Employee License Application, the point-of-contact listed in **E.5** will be required to contact the MLGCA's Casino Licensing and Background Investigation Division and request 'e-Licensing System' log-on and account access.

C.4	<b>Principa</b>	<b>l</b> Entity	Disclosur	e Form	(Form-1	<u>006)</u> –	Control	ling share	holders,	interest	of
			rtners (if p								

C.5 Principal Employee Waiver Form (Form-1007) – For an individual who is a principal or key employee requesting a waiver of a licensing requirement.

#### **SECTION D - DEFINITIONS**

Please refer to the list of Consolidated Definitions applicable to all video lottery license applications, which is available on the website of the Maryland Lottery and Gaming Control Agency's website: <a href="http://gaming.mdlottery.com/licensing/">http://gaming.mdlottery.com/licensing/</a>.

#### **SECTION E - APPLICANT INFORMATION**

<b>E.1</b>	1	NAME OF APPLI	CANT *
* As it is written on the A	Articles of Incorpor	ration, By-Laws, Charter, p	artnership agreement or other official documents filed
with a State or Federal G	lovernment.		
D/D/A T 1 N	( )		
D/B/A or Trade Name	(s):		
E.2	(	CONTRACTOR B	USINESS
Describe the type of prod	luct and/or service	(s) provided:	
<b>E.3</b>	I	ICENSEE ASSO	CIATION
Name the Licensee with	whom you have an	agreement:	
<b>E.4</b>	APPLICA	ANT'S FORM OF	ORGANIZATION
Check one:			
☐ Sole Proprietorship	☐ Partnership	☐ Limited Partnership	☐ C-Corporation☐ Limited Liability Company
☐ S-Corporation ☐ Trus	st 🗆 Othe	r (Describe)	
Form – 1025 RENEWAL (Re	v March 7, 2017)	Page 9 of 39	Initials

E.5 PO	INT-OF-CONTA	CT FOR APPLIC	CANT *
Name		Title / Position with	in the company
Email address	Office telephone	number	Fax number
	Cell number		
License Application, the poi Licensing and Background I	nt-of-contact listed ab nvestigation Division	ove will be required for 'e-Licensing Sys	to submit a Gaming Employee to contact the MLGCA's Casino tem' log-on and account access.
	PPLICANT'S PRI	NCIPAL ADDR	ESS
Address Line 1 (Street Location)			
Address Line 2			
City	State		Zip code
Country	Telephone Num	ber	Fax Number
Mailing Address – if different fr Address Line 1	om above		
Address Line 2			
City	State		Zip code
Country	Telephone Num	ber	Fax Number
Web Site Address(es)	I		
E.7 (If a Sole Prop	INCORPO rietorship, provide an		riate questions)
(a) <u>APPLICANT'S INC</u>	CORPORATION DO	<u>CUMENTS</u>	
1) Business name a	ns it appears on format	ion documents:	
2) Place of Incorpo	oration or other type of	Formation:	
Form – 1025 RENEWAL (Rev March 7,	2017) Pa	age 10 of 39	Initials

3) Date of Formation:
-----------------------

#### (b) INCORPORATORS / FOUNDERS

Use <u>Exhibit 1</u> to provide the Applicant's Incorporators/Founders. (**Note**: <u>If a Sole Proprietorship</u>, <u>provide</u> the appropriate information on the Exhibits.)

#### (c) MARYLAND SDAT COMPLIANCE

- 1) Is the Applicant registered to do business in Maryland: □ Yes □ No
- 2) If "Yes", please provide registration number:

#### **IMPORTANT:**

Submit a *.pdf* of the Applicant's 'Good Standing' status from the Maryland Department of Assessments and Taxation (MD SDAT). The exhibit should be submitted as described in **A.12** and **A.13** and labeled as "Certificate of Good Standing". For further information, see **B.9**.

#### (d) OTHER NAMES OF CORPORATION

Use <u>Exhibit 2</u> to list all other names in which the Applicant has done business and give the approximate time periods during which these names were being used. (**Note**: <u>If a Sole Proprietorship</u>, <u>provide the appropriate information on the Exhibits.)</u>

#### (e) ADDRESSES OF APPLICANT

Use <u>Exhibit 3</u> to provide all the current addresses of the Applicant and all current addresses from which the Applicant is doing business. (**Note**: <u>If a Sole Proprietorship</u>, <u>provide the appropriate information on</u> the Exhibits.)

#### (f) APPLICANT'S BUSINESS BACKGROUND

Use <u>Exhibit 4</u> to provide a detailed description of the Applicant's business, type(s) of service and/or goods the Applicant anticipates providing to the video lottery licensee and the name(s) of the facility to which the Applicant's goods and/or services are to be provided.

#### (g) <u>APPLICANT'S CONTRACT OR WRITTEN AGREEMENT WITH A FACILITY</u>

Use <u>Exhibit 5</u> to provide details of the Contract or Written Agreement that the Applicant has enacted with the video lottery licensee. Submit a copy of the Contract or Agreement as described in **A.12** and **A.13**.

#### (h) APPLICANT SUBSIDIARIES

Use <u>Exhibit 6</u> to provide details of each company in which the Applicant has an ownership interest. Submit an organizational chart as described in **A.12** and **A.13**.

	Form – 1025 RENEWAL (Rev March 7, 2017	Page 11 of 39	Initials
--	--	---------------	----------

#### (i) <u>LICENSES</u>

Has the Applicant, or any affiliate, intermediary, subsidiary or holding company ever applied in any
jurisdiction, including but not limited to, any federal, state, local or Native American governments for a
license, permit or other authorization to participate in lawful gambling operations (including slot
machines, video lottery terminals, table gaming, horse racing, dog racing, pari-mutuel operation etc.)?

	Yes No
Has the Applicant, or any affiliate, intermediary, subsidiary or happlication, license, permit or other authorization issued by a go jurisdiction denied, suspended or revoked in last five year perio	overnment agency in this state or any other
, <u>, , , , , , , , , , , , , , , , , , </u>	Yes No
If "Ves" to either question use <b>Exhibit 7</b> to provide information	on for each license application license

permit, or other authorization. If "No", write "None" in the first row on **Exhibit 7**.

#### (j) EMPLOYEES CONDUCTING BUSINESS WITH LICENSEE

Use **Exhibit 8** to provide details of any Applicant, or any employee of an Applicant, who:

- a) Entered into an agreement with, or will deal directly with, a Maryland licensed casino (e.g. technicians and sales representatives); and
- b) The immediate supervisor of such individuals; and
- c) The immediate supervisor's supervisor.

An Applicant applying for renewal of a **Tier 1** Contractor license **must**:

- a) Submit a completed and notarized Release Authorization, <u>Exhibit 18</u>, for each individual listed on **Exhibit 8**;
- b) Fulfill licensing requirements as outlined in **C.2** for each individual listed as an immediate supervisor or an immediate supervisor on **Exhibit 8**; and
- c) Fulfill licensing requirements as outlined in **C.3** for each individual listed on **Exhibit 8** who has entered into an agreement with, or will deal directly with, a Maryland licensed casino.

An Applicant applying for renewal of a **Tier 2** Contractor license **must**:

- a) Submit completed and notarized Release Authorization, <u>Exhibit 18</u>, for each individual listed on **Exhibit 8**; and
- b) Fulfill licensing requirements as outlined in C.3 for each individual listed on Exhibit 8.

#### (k) CURRENT DIRECTORS, PARTNERS, OFFICERS AND TRUSTEES

Use <u>Exhibit 9</u> to provide information for each Director, Partner, Officer and Trustee of the Applicant. Include any Grantors or Beneficiaries of a Trust who is required to be licensed as a Principal as defined in this application.

uns application.		
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 12 of 39	Initials

#### **IMPORTANT**:

- a. As part of this application each Director, Partner, Officer and Trustee of an Applicant applying to become a Gaming Contractor of a video lottery terminal or table game device; a central monitor and control system; associated equipment and software; or a distributor or reseller of a video lottery terminal, a table game device, a central monitor and control system, or associated equipment and software, (Tier 1), must fulfill licensing requirements as outlined in C.2.
- b. As part of this application, each Director, Partner, Officer and Trustee of an Applicant applying to become a Gaming Contractor of a product that is related to video lottery terminals, table games or associated equipment and software that is intended for sale, lease, or other assignment to a licensee; does not have the ability to impact the integrity of a game; and is not essential to table game play, (Tier 2), must fulfill licensing requirements as outlined in C.3.

### (I) FORMER (NO LONGER ACTIVE) DIRECTORS, PARTNERS, OFFICERS AND TRUSTEES

Use <u>Exhibit 10</u> to provide information for all officers, directors, partners and trustees who are no longer actively involved with Applicant but who held such a position during the last five (5) years.

#### (m) **OWNERS**

Use <u>Exhibit 11</u> to provide information for each individual or person who directly or indirectly owns more than five (5) percent of the Applicant or its business. For publicly traded companies, only provide information for each individual or person who directly owns more than five (5) percent of the Applicant or its business.

#### **IMPORTANT**:

- a. As part of this application, each owner of an Applicant applying to become a (**Tier 1**) Gaming Contractor of a video lottery terminal or table game device; a central monitor and control system; associated equipment and software; or a distributor or reseller of a video lottery terminal, a table game device, a central monitor and control system, or associated equipment and software, <u>must</u> fulfill licensing requirements as outlined in **C.2**.
- b. As part of this application, each owner of an Applicant applying to become a (**Tier 2**) Gaming Contractor of a product that is related to video lottery terminals, table games or associated equipment and software that is intended for sale, lease, or other assignment to a licensee; does not have the ability to impact the integrity of a game; and is not essential to table game play, **must** fulfill licensing requirements as outlined in **C.3**.

#### (n) BANKRUPTCY OR INSOLVENCY PROCEEDINGS

Use <u>Exhibit 12</u> to provide information for bankruptcy or insolvency proceeding involving the Applicant or any individual or person listed in <u>Exhibit 8</u>, <u>Exhibit 9</u>, <u>Exhibit 10</u> or <u>Exhibit 11</u>.

Form – 1025 RENEWAL (Rev March 7, 2017)	Page 13 of 39	Initials
TOTAL TOZZ REIVE WAE (Rev March 1, 2017)	1 age 13 01 37	mittals

#### (o) <u>CRIMINAL HISTORY</u> (Directors, Partners, Officers, Trustees and Owners)

#### **IMPORTANT:**

The Commission will make inquiries to establish whether the individuals and subsidiaries listed in this application have had any involvement with law enforcement agencies. Failure to disclose any such involvement will be taken into account when assessing the Applicant's character, honesty and integrity.

This section asks about any arrests, offenses or charges against the Applicant or any of its subsidiaries or any of its directors, partners, officers, trustees or owners.

Prior to answering this question, carefully review the DEFINITIONS and INSTRUCTIONS.

#### **DEFINITIONS – For purposes of this section ONLY:**

- 1) **ARREST:** includes any time that you were stopped by any law enforcement officer and advised that you were under arrest, detained, held for questioning or were requested by a law enforcement officer to come to a law enforcement office or facility and answer questions. "Arrest" also includes any circumstances in which you were taken into custody by any law enforcement officer, fingerprinted, detained in any jail or detention center, or otherwise been the subject of a court order to appear in a judicial proceeding in which you were accused of a crime or offense as defined in subsection C.
- 2) <u>CHARGE</u>: includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- 3) **OFFENSE:** includes all felonies, misdemeanors, gambling offenses and summary offenses that may have required you to appear before any municipal, state, or federal grand jury, court, or any other judicial tribunal except juvenile court. "Offense" also includes all driving-related charges or offenses which carry any period of incarceration.

#### **INSTRUCTIONS** for question below

- 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 downgraded to a lesser charge;
  - C. You completed a pretrial intervention or other rehabilitation or diversionary program;
  - D. You were not convicted;
  - E. You did not serve any time in a correctional facility;
  - F. The charges or offenses happened a long time ago; or
  - G. You were not arrested for the charge.
- 1) Answer "No" if:
  - A. You have never been charged with or arrested for any crime or offense;
  - B. You were arrested or charged when you were under eighteen (18) years of age <u>and</u> your arrest or charge, including any sentence that a court imposed, was adjudicated entirely in juvenile court;
  - C. The records of the charge or arrest have been expunged pursuant to an order of court or otherwise sealed by a court of competent jurisdiction.

Form – 1025 RENEWAL (Rev March 7, 2017	Page 14 of 39	Initials

Maryland Lottery and Gaming Control Commission Commission	ontractor License RENEWAL Application Form # 1025
* Question:	
During the past five (5) years, has the Applicant; or Have any of the Applicant's subsidiaries; or Have any of the Principal Employees, (Directors, Partner arrested, charged with, or convicted of, a criminal offense conspirator in any criminal proceeding in this state or any	e or been a party to or named as an unindicted
	Yes No
If "Yes", use Exhibit 13 to provide information concerni	ing criminal history during the past five (5) years.
(p) TESTIMONY, INVESTIGATIONS OR POLY	YGRAPHS
During the past five (5) years, has the Applicant or any of Officers, Trustees, Owners) been called to testify before by, or requested to take a polygraph exam by any govern investigatory body (municipal, state, county, provincial, minor traffic-related offenses?	, been the subject of an investigation conducted mental agency, court, committee, grand jury or
If "Yes", use Exhibit 14 to provide information concerni	ing testimony, investigations or polygraphs.
(q) <u>LITIGATION</u>	
Use <b>Exhibit 15</b> to describe all existing civil litigation or five (5) years to which the Applicant, its parent, affiliate, any jurisdiction. This description must include the title a location of the court before which it is pending, the ident nature of all claims being made and the nature of any jud	holding or any subsidiary is or was a party in nd docket number of the litigation, the name and tity of all parties to the litigation, the general
(r) ANTITRUST, TRADE REGULATION & SEC AND REGULATORY VIOLATIONS	CURITY JUDGEMENTS, STATUTORY
During the past five (5) years, has the Applicant, or any of holding companies ever had a judgment, order, consent dalleged violation of the federal antitrust, trade regulation province or country entered against it?	lecree or consent order pertaining to a violation or
During the past five (5) years, has the Applicant, or any of holding companies been the subject of a judgment, order, any state or federal statute, regulation or code that results	, consent decree or consent order pertaining to
	Yes No
If "Yes", to either question, use <b>Exhibit 16</b> to provide in	formation.
Form – 1025 RENEWAL (Rev March 7, 2017)  Page 15 of	39 Initials

#### (s) <u>APPLICANT'S FINANCIAL STATEMENTS</u>

Submit the **two** most recent year's financial statements for the Applicant, specifically 'Balance Sheets' and 'Profit and Loss Statements', in the manner described in A.12 and A.13.

The files must be submitted as **separate** .pdf files, and should be <u>labeled</u> as:

Exhibit 22a (Balance Sheet #1);

Exhibit 22b (Balance Sheet #2);

Exhibit 22c (Profit and Loss Statement #1); and

Exhibit 22d (Profit and Loss Statement #2).

During the investigation to determine the Applicant's financial stability, the Commission may require that additional financial documentation be submitted.

#### (t) REQUEST FOR TRANSCRIPTS OF FEDERAL TAX RETURNS

The <u>IRS Form 4506-T</u> is required to be executed so that the Commission will be authorized to obtain independent verification of the Applicant's filing of required federal tax returns.

The Applicant must submit 2 (two) original IRS Form 4506-T forms with the application packet. (During the course of the investigation, the Commission may need to request up to five years of returns, but the Form 4506-T only provides space to request four years, which creates a need for a second form to be completed and submitted).

Since the IRS updates the language on the <u>Form 4506-T</u> periodically, please check the upper left corner and determine if the revision date is current. If the enclosed form is no longer the most current, the Applicant is asked to retrieve an up-to-date version from the IRS website:

#### https://www.irs.gov/Forms-&-Pubs

On both copies of the <u>Form 4506-T</u>, the Applicant must complete lines 1 through 4; check the "Signatory declaration" block; sign the form; date the form; and enter a telephone number corresponding to line 1a.

Since the Casino Licensing and Background Investigation Division will need to determine which tax returns will be necessary to complete the financial stability inquiries, the Applicant is requested to leave lines 6 through 9 blank. It is recommended that the Applicant contact the Licensing Division if the Applicant has questions or concerns regarding the cautionary notes above line 6 and below line 9.

## Form ,4506-T (Re., SBptamber 2015)

(Re,\_SBptamber 2015)
Depertment ai ft., T......y
1'1la"1laR! a""""" Steev.joa

#### Request for Transcrip,tof Tax.Return

- ▶ Do noll siign this form u11l0ss all applicab'le lines lia,vg.b0e11completed.
  - ▶ RGq;Uest may bG nrjected if the form is incompl'em or illGgible.
- ► For more infonmation about Form 4506aT, vi;sit www.i .go11ltorm4506t.

0MB ti<>. 1!i.45-1872

Tip. Use Farm 4506-7 to otrdar a Imnocript or other 1etum infoonalion flee of ctlarge. See the product list below. You can quict IJ;y 1equest transcripts by using our autornatoo sllf-hillp SQIVice tDO!s. PJsase visit us at IRS.go and Clifologo "G;il a Tax Transcript..- under "Toofs" or call 1-BOCJ-908-9946. If you 0000 a OOW of your mtum, use Form 4006, Ilfligquest for C!! JIPY of J:ax RIlttin, Th8re is afee to get a oppy of your 1etum.

,		,	, 9		
		shown oo tax 1etu:m. If a joint return, e,nterllie name 1fir5st	1b first social security number orn!aoc oomber, or em oyer identification		on
2a	lf a joi	n! rat.um, oo!er spouse's r1ama showr1 or1tax ieturn	2b Second soc:Tallsecurity numbe idiQ.ntificatio11num'oor if Joint t	r or individual taxpayar ax r,9rum	
a (	Otmoo	o! name ocldress (includir1g apl. room. or suiti. <b>no.),.</b> city sra	abEI. and Z[P cods, (sse instruciilms)		
4- F	re'.liou	us address shffi'm or1the last 10turn filed if diffenmll from lins	s,3 (see instructilms)		
		ranscript or tax info.rmatior1is to b9 mail.lld to a third party (ephofilflnumber.	suclI as a mortgage compa:n.y). enlllI tile	e tllird party's riamG. addrnss,	
	Miai	<u>r)'ia:ooLo:ery</u> & <u>Gaming, Lkemng</u> DMsion, 1800 <u>Wa</u>	astirl1J: n Blvd., 9tn.e 330:, more M	D 21230 (410) 230-\$18	
you ha	ve fillo 5, tl:1	Te tax transcript is beir1g mailed to a third party, ensure that oct in Ituioo lir1es. Comple!ir1g ttJ9se skips h lps to protect 9 [RS has no control o rer Ylh:al the third party does wfth the nformation, you can specify lhis limitation in your wrfttHn agree	your privacy. Oncg tile [RS disclosas you immmation_H you Y1ould lii@lo limilllha	r tax tnmscfipt to the third party lis	too
6		script <b>requested.</b> Bnterths tax:form number here (1040. H. nb9r per request. ▶	J65. 1120. etc.) and ci19ck the appropri.i	t:9box below.  Errter ooly Oflifl tax:	form
а	cha1 Fmm	rrn 1Franscript, which includes mos! of ttJ9 lir1e il:9ms of a l1g as 1Tifiif9 to ttJ9 ac-coont after 1:119 return is processed. n 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120- returns proc9559d du.ring the prior 3 processir1g y9a:rs. MoSs!	Tlans0fiplls am oo/y availabl9 for ttJ9 fol !., aoo Form 1120S. Relum transcripts an	lowing rnrurns: Form 1040 series, rs availabl9 for 1he currerlll yeru-	D
b	asse	ount Tr-anscript, whicil cootains irnformatiornor1 ttte firiancial sesmanls. and adjustments made by you or Ilhe IRS attr fl19 esfima19d lla:x pay,menlls. Acooun! transcliplls are avai,able for	le!um was ed. R9tum imOJT11atiornism	iled to ems Silldh as Imia: bility	D
,C		cord ,of Account, which provides ltm most dellai d inforn nscript. Available for CIJrl9ITT year a11d 3 prior tax y9ars. M			D
7		ication ,of N'onfilirng, wtJicll is proof ITTIIII the IRS that you ir Jur1e 15lh. There are no a\la.ilabilify restrictions or1 prior ye			D
8	lllese lra110 exam	n W-2, Ferm 1099 S!II'ies, IFoIIIIII HI9S S81'i!!≮s_, or Form 54: inform11tior1returns_Slate or local illformalion is not iocl11: OCripII Informalion fol" to 10 yea:r:s_ Infonnatiornfor 11:le cWTnple, W-2'.infIIIIIIIalion fOI"2011, filed in 2012, will likely no! be a poses, you should cornta.ctttle Social SecIJIify Admili[stratiorna	doo wnh the Form W-2 irnforrmfion. The em9t (!1r is genarally oo,t avairable lfililllle y ail:mle fffllll ttle lRS uni□201a_lf oo 110	FIS may be a!ble o provide this oo.r after ill is MOOwill ttie IRS_For 00 W-2'.infOITI11!liofoor relir9f1fllrt	
	: H yo	ou m:ied a cqpy of Form W-2 or Form 1000, you shookl iirs I co um. you musll use Form 4506 and raqu9st a copy of your re	oorad the payer. To gEt a copy of 1119 Fo		
9	years	or or period mqu0stoo. &Iler IfIfI 9r1ding dale of Ih9 years or periods, you must attach another Form 4506-T. For quarter or I:ax pe:riod separalillly.			
C3llti:oı	n: Do	r1oll sigrntllis form unless all app icable lines have be9r1 oom	platedl.		
imorma sha:rnh cgrtify l	ition rold,llr, tla! I l	of llaxpayer(s),. I deolare 117:a! I am enluir tl:19 ta.xpaygr w equwted. If the request ap;pl"es to a joirrt return, al leaS, partner, managing member, guardian, tax matll9rs pa;r'trul have the auttiority to el!E!CU!e Form 4!506-T or1 bellalf of t irn1.20 days of the signature date.	st oni. spouse must sig:rn.lf sign9d by r, exocutor. receiv,er; admirnistrator. Irust	a corporam offic8r, 1 percerrt or a e9. or pa;rty other Ilhan tl:19 taxpa	more yer, I
		ry al:ms that h!l/smi has read 1lh!l atl:QS.!lltiondauSll and upoall all dharityto sign the Form 4506-T. See imstructions.	on so NI3d'.ing1m:ic!:inis that hQ/sli11i,	Pholl19 r1u:mber of t11Xpayer ori lin 1a or 2a	е
Sigin	<b>)</b>	Sigrurture (see instructiClf15)	Date	I	
Here	•	$\label{eq:Tiie} \textbf{Tliie} \ \text{frl} \ \textbf{IriB} \ \textbf{1} \ \textbf{a} \ \text{above} \ ; ,, \ \textbf{a} \ \textbf{corporation}, \ \text{partner.ship}, \ \text{estate,or trust})$			
		nouse"a signistura	Dale		

EXHIBIT 1 INCORPORATORS/FOUNDERS					
Please provide the Applicant's Incorporators/Founders. (Note: If a Sole Proprietorship, provide the appropriate information on the Exhibits.)					
Last Name	First Name		Middle Name		Suffix (Jr., Sr., etc.)
Occupation		Title			
Address Line 1		Address Line 2			
City		State/Province		Postal Code	
Country		email address		Phone number	
Principal Employee (Form 1004) Attached Principal Entity Disclosure Form (Form 1006) Attached Gaming Employee Form (Form 2001) Attached				☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	
Last Name	First Name		Middle Name		Suffix (Jr., Sr., etc.)
Occupation		Title			
Address Line 1		Address Line 2			
City		State/Province		Postal Code	
Country		email address		Phone number	
Principal Employee (Form 1004) Attached Principal Entity Disclosure Form (Form 1006) Attached Gaming Employee Form (Form 2001) Attached				☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	
Note: Attach additional copies of Exhibit page	s as needed				
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 18 of 39	In	itials		

#### **EXHIBIT 2:**

#### OTHER NAMES OF CORPORATION

List all other names in which the Applicant has done business and give the approximate time periods during which these names were being used. (Note: If a Sole Proprietorship, provide the appropriate information on the Exhibits.)

NAME	FULL ADDRESS	FROM	то

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 19 of 39

#### EXHIBIT 3: ADDRESSES OF APPLICANT

Provide all addresses which the Applicant has used or from which it was conducting business during the last ten (10) year period, and provide the approximate dates during which such addresses were used.

Address specific use	ress specific use		Dates		
Address Line 1	Address Line 2				
City	State/Province		Postal Code		
Country	email address		Phone number		
Address specific use		Dates			
Address Line 1	Address Line 2				
City	State/Province		Postal Code		
Country	email address	Phone number			
Address specific use		Dates			
Address Line 1	Address Line 2				
City	State/Province		Postal Code		
Country	email address		Phone number		

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 20 of 39

Initials\_\_\_\_\_

EXHIBIT 4:	APPLICANT'S BUSINESS BACKGROUND
	DESCRIPTION OF PRESENT BUSINESS
Т	PE OF GOODS OR SERVICES TO BE PROVIDED BY CONTRACTOR TO FACILITY
N <sub>2</sub>	AME OF FACILITY TO WHICH SUCH GOODS OR SERVICES WILL BE PROVIDED
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 21 of 39 Initials

# APPLICANT AND FACILITY AGREEMENT **EXHIBIT 5:** The date that the Applicant & Facility formally agreed to **Contract Start Date: Contract Completion Date:** conduct business **Terms of Compensation: Amount of Compensation** Nature of Contract or Agreement and Goods and/or Services to be Provided (Attach a copy of the WRITTEN agreement)

#### EXHIBIT 6: NAMES AND ADDRESSES OF APPLICANT'S SUBSIDIARIES

Provide the following information with respect to each company in which Applicant has an ownership interest and provide an organizational chart.

	Name ar	nd Address of Subsidiaries	s		
Other Name (if applicable)					
Address specific use					
Address Line 1		Address Line 2			Date at Address
Address Line 1		Address Line 2			Date at Address
City		State/Province		Postal Code	,
Country	Email Address		Phone number		
,					
	Name ar	nd Address of Subsidiaries	s		
Other Name (if applicable)					
Address specific use					
Address Line 1		Address Line 2			Date at Address
Address Line 1		Address Line 2			Date at Address
City		State/Province		Postal Code	,
Country	Email Address		Phone number		

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 23 of 39

#### EXHIBIT 7: LICENSES – GAMING AND NON-GAMING (Please list Gaming licenses <u>first</u> and Non-gaming Licenses <u>second</u>.)

If the Applicant has applied for any type of license, registration, certification or permit by any governmental agency provide the following information:

Type of License or Permit	Name and Location of Governmental Agency	Application Number	Disposition (i.e. Granted, Denied, Pending, Expired, Suspended, Revoked Withdrawn etc.)	Disposition Date	If Issued, Give Appropriate License, Permit or Other Such Number and Expiration Date. If Denied, Pending, Expired, Suspended, Conditioned, Withdrawn or Revoked, Provide Why

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 24 of 39

#### EXHIBIT 8: APPLICANTS EMPLOYEES CONDUCTING BUSINESS WITH FACILITY

Provide the following information for each individual who entered into an agreement with or will deal directly with the facility operator, including sales representatives; the immediate supervisors of such individuals; and that individual's supervisor.

Each individual listed in Exhibit 8 must submit a Release Authorization and a Principal or Gaming license application as described in E.7(j)

		Name and Ad	ldress			
Last Name	First Name		Midd	lle Name	Suffix	Date of Birth
Home address	·	City	State	Postal Code		Country
Business address		City	State	Postal Code		Country
Email address	Phone Number	Social Security #		Title/Position	Years / Mon	nths with company
		Name and Ad			<del>-</del>	
Last Name	First Name		Midd	lle Name	Suffix	Date of Birth
Home address		City	State			Country
Business address		City	State	Postal Code		Country
Email address	Phone Number	Social Security #		Title/Position	Years / Mon	nths with company
		Name and Ad	ldress			
Last Name	First Name		Midd	lle Name	Suffix	Date of Birth
Home address		City	State			Country
Business address		City	State	Postal Code		Country
Email address	Phone Number	Social Security #		Title/Position	Years / Mon	nths with company

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 25 of 39

Initials\_\_\_\_\_

Note: Attach additional copies of Exhibit pages as needed

Page 26 of 39

Form – 1025 RENEWAL (Rev March 7, 2017)

#### EXHIBIT 9: CURRENT DIRECTORS, PARTNERS, OFFICERS AND TRUSTEES

Provide the following information for all officers, directors/partners and trustees. The term "officer" means President, Chief Executive Officer, a Chief Financial Officer and a Chief Operating Officer and any individual routinely performing corresponding functions with respect to an organization whether incorporated or unincorporated.

For <u>Publicly Traded Companies</u>, list only those who will be involved in the conduct of the Applicant's business with the facility. Each individual listed in <u>Exhibit 9</u> must submit a Release Authorization and a Principal or Gaming license application as described in C.2 and C.3

		Name, Ho	ome Address & Business A	Address of	Director, Partner, Offic	cer or Truste	e		
Last Name	Last Name First Name			Middle Name			Suffix (Jr., Sr., etc.)	Date of Birth	
Home Address Line 1		1		Hon	ne Address Line 2		· ·		-
City				State/Province Postal Code					
Country	Email Address		Telephone Number		Number			ecurity Number	
Title/Position	Fron	n	To	Ann	ual Compensation	Compo	osition o	f compensation	
		Name, Ho	me Address & Business A	Address of	Director, Partner, Offic	cer or Truste	e		
Last Name		First 1	Name		Middle Name			Suffix (Jr., Sr., etc.)	Date of Birth
Home Address Line 1		1		Hon	ne Address Line 2				•
City				State	e/Province		Postal C	Code	
Country	Email Address		Telephone Number	Fax	Number		Social S	ecurity Number	
Title/Position	Fron	n	То	Ann	ual Compensation	Compo	osition o	f Compensation	

#### EXHIBIT 10: FORMER (NO LONGER ACTIVE) DIRECTORS, PARTNERS, OFFICERS AND TRUSTEES

Provide the following information for all officers, directors/partners and trustees who are no longer actively involved with the Applicant but who held such a position during the last ten (10) years.

		Na	me. Home	Address & Rusiness	Address o	f Director, Partner, Off	ficer or Trust	ee		
-		114						1	1 =	
Last Name			First Naı	me		Middle Name		Suffix (Jr., Sr., etc.)	Date of Birth	
Home Address Line 1					Hon	ne Address Line 2				
City					State/Province Postal Code			Code		
Country	Email Ad	ldress	7	Telephone number	Fax	Number		Social	Security Number	
Most Recent Title/Posit	tion	From		То	Ann	ual Compensation	Com	position	of compensation	
Reason for leaving:										
		Na	me, Home	e Address & Business A	Address o	f Director, Partner, Off	ficer or Trust	ee		
Last Name			First Naı	me		Middle Name			Suffix (Jr., Sr., etc.)	Date of Birth
Home Address Line 1					Home Address Line 2					
City					State	State/Province Post		Postal	Postal Code	
Country	Email Ad	ldress	7	Telephone number	Fax	Number		Social	Security Number	
Most Recent Title/Posit	tion	From		То	Ann	ual Compensation	Com	position	of compensation	
Reason for leaving:		1		ı			l			
Note: Attach add	ditional c	opies of Ex	hibit pa	ges as needed						
Form – 1025 RENEWAL	(Rev March 7,	, 2017)		Page 27 of 39		Initials_				

#### **EXHIBIT 11:**

#### **APPLICANT'S OWNERS**

Provide the following information for each individual or person who directly or indirectly owns more than five (5) percent of the Applicant or its business. For publicly traded companies provide only the following information for each individual or person who directly owns more than five (5) percent of the Applicant or its business. Each individual listed in Exhibit 11 must submit a Release Authorization and a Principal or Gaming license application as described in C.2 and C.3

		Name and A	Address						
Last Name	First Name		Middle Name		Suffix (Jr., Sr., etc.)	Date of Birth			
Home Address Line 1		Home Add	ress Line 2						
City		State/Provi	nce	Postal	Code				
Country		Email Add	ress	Contac	t Number				
Percent of Ownership	Date Acquired	Employer I	D Number	Social S	ecurity Number				
	Describe Nature, Type, Terms and Conditions of Ownership								
		Name and A	Address						
Last Name	First Name		Middle Name		Suffix (Jr., Sr., etc.)	Date of Birth			
Home Address Line 1		Home Add	Home Address Line 2						
City		State/Provi	State/Province		Postal Code				
Country		Email Add	Email Address		Contact Number				
Percent of Ownership	Date Acquired	Federal Em	ployer ID Number	Social S	ecurity Number				
	Describe Nature,	Type, Terms an	nd Conditions of Own	ership					
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 28 of 39		Initials_						

Mar	vland	Lottery	and	Gaming	Control	Commission

#### Contractor License RENEWAL Application Form # 1025

EXHIBIT 12	BANKRUPTCY OR I	INSOLVENCY PROCEEDINGS (During the past 5 years only)
Date Petition Filed or Relief Sought	Title of Case and Docket Number	Name and Address of Court or Agency
Date Judgment Entered		Name and Date Appointed of Court Appointed Receiver, Agent or Trustee
Nature of Judgment or Relief		

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 29 of 39

#### **EXHIBIT 13:**

#### CRIMINAL HISTORY (During the past 5 years only)

NAME OF CASE AND DOCKET NUMBER	NATURE OF CHARGE, INDICTMENT OR COMPLAINT	DATE OF CHARGE OR COMPLAINT	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITON (ACQUITTED, CONVICTED, DISMISSED, ETC.)	SENTENCE	NAME OF DIRECTOR, PARTNER, OFFICER OR TRUSTEE

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 30 of 39

Initials\_\_\_\_

Form – 1025 RENEWAL (Rev March 7, 2017)

#### **EXHIBIT 14:**

#### TESTIMONY, INVESTIGATIONS, OR POLYGRAPHS (During the past 5 years only)

Has Applicant or any of its Principal Employees, (Directors, Partners, Officers, Trustees, Owners) 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? If "Yes", provide the following information.

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS OR INVESTIGATION	WAS TESTIMONY GIVEN? (Yes or No)	DATES ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION	DIRECTOR, PARTNER, OFFICER OR TRUSTEE
Type of Proceeding or Investigation					
NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS OR INVESTIGATION	WAS TESTIMONY GIVEN? (Yes or No)	DATES ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION	DIRECTOR, PARTNER, OFFICER OR TRUSTEE
Type of Proceeding or Investigation					
Note: Attach additional copies	of Exhibit pages as needed				

Initials

Page 31 of 39

#### **EXHIBIT 15:**

#### LITIGATION (During the past 5 years only)

Describe all existing civil litigation or any settled or closed legal action over the past five (5) years to which the Applicant, its parent, affiliate, holding or any subsidiary is or was a party in any jurisdiction. 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, the general nature of all claims being made and the nature of any judgments. List the most recent litigation first.

Name of case and docket number	Name and address of law court involved in litigation	Name of all parties involved in litigation	Nature of Claim(s) and judgment (if judgment has been rendered)

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 32 of 39

## EXHIBIT 16 ANTITRUST, TRADE REGULATION & SECURITY JUDEMENTS STATUTORY AND REGULATORY VIOLATIONS (During the past 5 years only)

STATUTOR!	Y AND REGULATORY VIOL	LATIONS (During the past 5 years only)
		ubsidiaries or holding companies had a judgment, order, consent decree or regulation or securities laws, or similar laws of any state, province or
		☐ Yes ☐ No
During the past five (5) years, has the Applican consent decree or consent order pertaining to a		ubsidiaries or holding companies been the subject of a judgment, order, code that resulted in a fine of \$25,000 or more?  Yes No
	VIOLATIO	N
Name of Case & Docket Number	Date of Judgment, Order or Decree	Name & Address of Agency or Court
Nature of Offense		<u>'</u>
Disposition: Acquitted Convicted	Dismissed Other:	
Nature of Judgment, Decree or Order		
	VIOLATIO	)N
Name of Case & Docket Number	Date of Judgment, Order or Decree	Name & Address of Agency or Court
Nature of Offense		
Disposition: Acquitted Convicted	Dismissed Other:	
Nature of Judgment, Decree or Order		
Note: Attach additional copies of Exhi	bit pages as needed	
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 33 of 39	Initials

#### **EXHIBIT 17**

#### **REQUIRED ATTACHMENTS - EXPLANATIONS**

Provide an explanation for any attachment that is not applicable to the Applicant.

Attachment	Explanation

Note: Attach additional copies of Exhibit pages as needed

Form – 1025 RENEWAL (Rev March 7, 2017)

Page 34 of 39

#### REQUIRED ATTACHMENTS

Attachments are appendices you are to provide or create. Attachments do not contain corresponding questions, exhibits or charts. Each document provided as an attachment must be presented in the same order as listed below provided to the Commission in the manner described above in **A.12** and **A.13** (separated, secure and labeled).

If an attachment is not applicable to the Applicant, indicate " $\underline{N/A}$ ", then use  $\underline{Exhibit\ 17}$  to  $\underline{explain\ why\ it\ is\ not}$  applicable. All information shall be provided *in addition* to the exhibits that are to be submitted.

BUSINESS DOCUMENTS	
Certified copies of all charters, articles of incorporation, by-laws, articles of organization,	Attached N/A
operating agreements, partnership agreements, trust agreements or other similar documents of the Applicant, including all amendments.	
Proof of Registration with the Maryland Secretary of State. (Certificate of Good Standing)	Attached N/A
ANNUAL REPORTS	
The most recent annual report of the Applicant that was submitted to shareholders, partners, members or other persons and meeting minutes from the last 12 months.	Attached N/A
The most recent annual report (s) filed with the Secretary of State or similar official for all states in which the Applicant conducts business.	Attached N/A
PUBLICLY TRADED ENTITIES	
A corporation that is a registrant under the Securities Act of 1933 or the Securities Exchange Act of 1934 shall submit a copy of the two most recent annual reports prepared on Form 10K.	Attached N/A
A corporation that is a registrant with the Securities and Exchange Commission (SEC) shall submit a copy of the Form 10Q for the last two filings.	Attached N/A
A corporation that is a registrant with the SEC shall submit a copy of the most recent Form 8K filed with the SEC if filed after the latest 10K filing.	Attached N/A
ORGANIZATIONAL CHARTS	
A flowchart illustrating the fully diluted ownership of the Applicant. List all parent, subsidiary or intermediary companies until the flowchart reflects 100% of the stock, partnership, membership or ownership interest as being held by an individual(s) and not other legal persons. If the ultimate parent company is publicly traded and no natural person controls more than 5% of the publicly traded stock, indicate that in a footnote to the flowchart.	Attached N/A
A chart showing the corporate structure of the Applicant	Attached N/A
An organizational chart identifying all officers, directors, managers, managing members, partners and key/managerial employees of the Applicant. Include position descriptions and the names of persons holding such positions.	Attached N/A
TAX RETURNS	
All U. S. Corporate Income Tax Returns, or all U. S. Partnership Returns, or personal tax returns and state business or personal tax returns for the <b>past three years</b> . Include all amended returns, exhibits and attachments to tax returns.	Attached N/A
A list of all IRS 1099 recipients for the past year.	Attached N/A
Form – 1025 RENEWAL (Rev March 7, 2017) Page 35 of 39	Initials

#### EXHIBIT 18 AUTHORIZATION FOR RELEASE OF INFORMATION

TO:			
FROM:			
	Printed Name of Applicant En	tity)	
I am the authorized representative of an Applica	nt for a Gaming Contractor lie	cense in the State of Maryland.	
Applicant for a video lottery terminal license of collect and evaluate information about the ent Commission, and persons authorized by the Odocuments; (2) conduct a background investigation	or instant bingo facility licensity that I represent. On beha Commission, to: (1) verify alution of the entity; and to have a similar license in that jurisd	required by law to conduct an investigation of an se. That investigation requires the Commission to alf of the entity, I irrevocably give consent to the ll information provided in the license application re access to any and all information that the entity liction, as well as the information obtained by that ducted about the entity.	
about the entity that the Commission requests:	local, State or federal govern	release to the Commission any and all information ment unit; commercial or business enterprise; non- ed information may be released in written, verbal,	
entity, I expressly waive, release, discharge and	forever hold harmless and ag the authority of this Authoriz	ed information to the Commission, on behalf of the gree to indemnify, the unit, entity, or individual that eation. Photo, facsimile, or electronic copy of this	
Signature of Individual Completing Form	m	Date	
Printed Name		Title	
	NOTARY PUBLIC		
, certifies that the a or satisfactorily proven to be the individual who	above named individual appea	, in the State of ared in person, and before me, either known to me within instrument and signed the Authorization and	
Notification. Thisday of	, 20, and to whic	, 20, and to which witness my hand and seal.	
		Notary Public	
Stamp or Seal		Printed Name	
,	My commission exp	pires, 20	
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 36 of 39	Initials	

#### EXHIBIT 19 AFFIDAVIT OF REPRESENTATIVE OF APPLICANT

I,	_(printed name), am authorized to	complete and execute
this Gaming Contractor License Application on (printed name of Contractor). I am also authorize Form to the Maryland Lottery and Gaming Cont (collectively, "the Commission"), and to make the	zed to provide all of the information trol Commission, its employees, a	gents, and vendors
I have read, and understand, every page of this A and belief, the information that I have provided and not misleading. I understand that any misre of an application for a license, or may result in the up to and including revocation of its license if it any misrepresentation or omission on this Application of civil or criminal liability. I underst duty to promptly notify the Commission if any its angle of this Application of the commission if any its angle of the commission is angle of the commission in the commission in the commission is any its angle of the commission in the commission is any its angle of the commission in the commission is any its angle of the commission in the commission in the commission is any its angle of the commission in the c	on, or attached to, this Application epresentation or omission may lead the Commission imposing sanction has been awarded or issued a lice acation may also subject me, or the and and acknowledge that the con	n is accurate, complete, d to the delay or denial as against the Applicant, nse. I understand that e contractor that I tractor has an ongoing
By a separate Authorization for Release of Information about the Contractor that I represent purposes of its investigation of an Applicant for	t, to release that information to the	<del>-</del>
On behalf of the Contractor and its successors at forever hold harmless and agree to indemnify, the employees, agents, and representatives, from lia any actions that the Commission or the State of from the Contractor and the use of that informat Investor.	he Commission, the State of Mary bility for any and all claims or leg Maryland may take related to the o	land, and their al action arising from collection of information
SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE	
PRINTED NAME OF AUTHORIZED REPRESENTATION	VE TITLE	
NOTA	ARY PUBLIC	
The undersigned, a Notary Public in and for, certifies that the above name or satisfactorily proven to be the individual whose name Notification.  This day of	subscribed to the within instrument and	signed the Authorization and
	Notary Public	
Stamp or Seal	Printed Name	
	My commission expires	
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 37 of 39	Initials

#### EXHIBIT 20 ACKNOWLEGEMENT AND DISCLOSURE

I understand and acknowledge the following: I am a representative of the Applicant name of Contractor), who is applying to the Maryland Lottery and Gaming Control Commission ("Commission") for a Maryland Gaming Contractor License. The Applicant cannot conduct business with a video lottery operation licensee applicant or a video lottery operation licensee unless the Commission finds that the Applicant meets the legal requirements for licensure. The Commission, through its employees, agents and vendors, is required by law to conduct a background investigation of each Applicant for a license. During the investigation, the Commission is required to collect and evaluate various kinds of information or reports to determine if Applicants meet the eligibility requirements for licensure. The background investigation will include, but not be limited to, information or reports about the Applicant's: character; general reputation; personal characteristics, including honesty and integrity; financial stability; debts to State agencies; criminal records, records of involvement with federal, state or other law enforcement agencies as specified in the application, or record of involvement with any litigation. As a representative, I have the right to request a complete and accurate disclosure of the nature and scope of the investigation and a copy of a summary of the Applicant's rights under federal credit reporting law. I am requesting that the Commission, through its employees, agents or vendors, obtain this information about the Applicant to evaluate their eligibility for a license. I acknowledge that this disclosure and authorization remain in effect during the time the application is pending and during the time of any Contractor license that may be granted. By separate Authorization for Release of Information, I am authorizing any entity or individual that has information about the Contractor that I represent, to release that information to the Commission for purposes of its investigation of an Applicant for a Gaming Contractor license. Signature Printed Name Date **NOTARY PUBLIC** The undersigned, a Notary Public in and for the County of \_\_\_\_\_\_, in the State of \_\_\_\_\_\_, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification. \_day of \_\_\_\_\_\_, 20 , and to which witness my hand and seal. This Notary Public Printed Name Stamp or Seal Page 38 of 39 Form – 1025 RENEWAL (Rev March 7, 2017) Initials

#### **EXHIBIT 21**

### **CERTIFICATION OF BUSINESS RELATIONSHIP**

LICENSEE:		
CONTRACTOR:		
	(Applicant's Printed Name)	
I,Business Agreements on behalf ofstated above has entered into an agreement licensee.	(printed name), ar	m authorized to complete and execute(Licensee Name). The Contractor ming related goods or services to this
The Contractor will provide the followin in detail the goods and/or services to be p		nd/or services to this facility (describe
Signature of Licensee Representative		Date
Printed Name		Title
Frinted Name	NOTADY	Title
	NOTARY	
The undersigned, a Notary Public in a, certifies that the abor satisfactorily proven to be the individual who Notification.  This day of	bove named individual appeared see name subscribed to the with	d in person, and before me, either known to me in instrument and signed the Authorization and
	-	Notary Public
Stamp or Seal		Printed Name
	My commission expires	, 20
Form – 1025 RENEWAL (Rev March 7, 2017)	Page 39 of 39	Initials