LG220 Application for Exempt Permit

An exempt permit may be issued to a nonprofit organization that:

- conducts lawful gambling on five or fewer days, and
- awards less than \$50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be \$1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **\$100**; otherwise the fee is **\$150**.

Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

ORGANIZATION INFORMATION					
Organization Name:	Previous Gambling Permit Number:				
Minnesota Tax ID Number, if any:	Federal Employer ID Number (FEIN), if any:				
Mailing Address:					
City:	State:	Zip:	County:		
Name of Chief Executive Officer (CEO):					
Daytime Phone:		_ Email:			
NONPROFIT STATUS					
Type of Nonprofit Organization (check one):					
Fraternal Religious	Vetera	ans	Other Nonprofit Organization		
Attach a copy of one of the following showing	ng proof of non	profit status:			
(DO NOT attach a sales tax exempt status or fed	eral employer ID	number, as the	ey are not proof of nonprofit status.)		
Don't have a copy? Obtain this certificate from: MN Secretary of State, Business Services Division 60 Empire Drive, Suite 100 St. Paul, MN 55103 IRS income tax exemption (501(c)) letter in your organization's name Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS toll free at 1-877-829-5500. IRS - Affiliate of national, statewide, or international parent nonprofit organization (charter) If your organization falls under a parent organization, attach copies of both of the following: 1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling, and 2. the charter or letter from your parent organization recognizing your organization as a subordinate.					
GAMBLING PREMISES INFORMATION	N				
Name of premises where the gambling event will (for raffles, list the site where the drawing will ta Address (do not use P.O. box):	ke place):		County:		
Date(s) of activity (for raffles, indicate the date of the drawing):					
Check each type of gambling activity that your or	rganization will co	onduct:			
Bingo Paddlewheels	Pull-Tabs	Tipboard	ds		
Raffle (total value of raffle prizes awa	— Irded for the ca	 lendar year: \$	s)		
Gambling equipment for bingo paper, bingo be from a distributor licensed by the Minnesota Gamble devices may be borrowed from another organization www.mn.gov/qcb and click on <i>Distributors</i> to the control of the cont	nbling Control Bo tion authorized to	ard. EXCEPTION conduct bingo	DN: Bingo hard cards and bingo ball selection b. To find a licensed distributor, go to		

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGMENT (required before submitting application to the Minnesota Gambling Control Board)

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CITY APPROVAL for a gambling premises located within city limits	COUNTY APPROVAL for a gambling premises located in a township		
The application is acknowledged with no waiting period.	The application is acknowledged with no waiting period.		
The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).	The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.		
The application is denied.	The application is denied.		
Print City Name:	Print County Name:		
Signature of City Personnel:	Signature of County Personnel:		
	Title: Date:		
The city or county must sign before submitting application to the Gambling Control Board.	TOWNSHIP (if required by the county) On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.) Print Township Name: Signature of Township Officer: Date:		
CHIEF EXECUTIVE OFFICER'S SIGNATURE (requ	uired)		
	rate to the best of my knowledge. I acknowledge that the financial		
	Date:		
(Signature must be CEO's signat	ure; designee may not sign)		
Print Name:			
REQUIREMENTS	MAIL APPLICATION AND ATTACHMENTS		
Complete a separate application for: • all gambling conducted on two or more consecutive days, or • all gambling conducted on one day. Only one application is required if one or more raffle drawings are conducted on the same day.	Mail application with: a copy of your proof of nonprofit status, and application fee (non-refundable). If the application is postmarked or received 30 days or more before the event, the application fee is \$100; otherwise the fee is \$150. Make check payable to State of Minnesota.		
Financial report to be completed within 30 days after the gambling activity is done: A financial report form will be mailed with your permit. Complete and return the financial report form to the Gambling Control Board.	To: Minnesota Gambling Control Board 1711 West County Road B, Suite 300 South Roseville, MN 55113		
Your organization must keep all exempt records and reports for	Questions? Call the Licensing Section of the Gambling Control Board at		

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

3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Depart-

651-539-1900.

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

This form will be made available in alternative format (i.e. large print, braille) upon request.