Alaska Department of Revenue Tax Division PO Box 110420 Juneau, Alaska 99811-0420 Telephone 907.465.2320

State of Alaska Games of Chance and Contests of Skill 2010 Permittee Annual Financial Statement AS 05.15.080(b)

Dept Use Only FSN:	

Due: March 15, 2011

	This form is also availab		et at www.tax.a	laska.gov		
Federal EIN	Permit Number Organ	nization Name				
			•	O'' O' ' 7'		
Mailing Address				City, State, Zip		
Telephone Number	Fax Number	ĪF-m	nail Address			
Tolophone Humbol			ian / taareee			
CALCULATION OF ADDITIONAL	19/ 555					
Gross receipts from operator/MBP		AO column A lir	ne 10)		Γ	1
Gross receipts from permittee acti					-	2
Gross receipts from vendor activity	• • •	,			_	3
Total gross receipts from all activit					_	4
Net proceeds from operator/MBP :					-	5
Net proceeds from permittee activ					-	
7. Net proceeds from vendor activity					-	7
Total net proceeds from all activities		•				8
Expenses exceeding the limitation						<u> </u>
and bingo prizes exceeding the			ge 2 of the Instr	ructions		9
10. Add lines 8 and 9						10
If total gross receipts	on line 4 are less than \$2	0,000, stop here	e and go to lin	e 15. NO FEE IS DU	≣ . □	
11. FEE: Multiply line 10 by 1%						11
12. Penalty for late payment (1% per	30 day period or fraction of	a period, not to	exceed 25% of	the fee on line 11)		12
13. Interest. See Page 2 of the Instruc	ctions					13
14. Total amount due (add lines 11,	12, and 13)			Amount you o	we	14
GAMING ACCOUNT BALANCE					_	
15. Prior year balance of ALL Games	of Chance and Contests of	f Skill checking a	and savings acc	counts		15
16. Net Proceeds (Page 1, line 8)						16
17. Interest earned on Games of Char	nce and Skill checking and	savings accoun	ts			17
18. Other Deposits and Increases (Sc	hedule F, line 4)					18
19. Total (add lines 16, 17, and 18)						19
20. Total Donations of net proceeds (S	Schedule E)					20
21. Other Disbursements and Reducti	ons (Schedule F-1, line 4)					21
22. Total reductions to checking and s	savings accounts (add lines	s 20 and 21)				22
23. Year-end balance of All Games of	Chance and Skill checking	g and savings ac	counts(add line	es 15 and 19, subtract	line 22)	23
We declare, under penalty o	of unsworn falsification, tha d, to the best of our knowle				ing schedule	s and statements,
Member in Charge or Agent Signature	-,	Date	Printed			
x						
President or Treasurer Signature		Date	Printed	Name		
X						
Paid Preparer's Signature		Date	Printed	Name		
X						
Paid Preparer's Firm Name		Paid	d Preparer's Firm	Address, City, State, Zip		
DEPT USE ONLY A	ttach a copy of your D	ecember 31, 2	2009, and	DEPT USE ONL	Y	
	r 31, 2010, bank stater					

Permit Number	Permittee Name
Optr Lic / MBP No	Operator or MBP Name / dba

SCHEDULE AO: OPERATOR / MULTIPLE-BENEFICIARY PERMITTEE ACTIVITY REPORT

List only that income received as a direct result of the games, or sale of gaming equipment. Food booth receipts and other income should not be included in this report.

	See instructions if your organization contracted with more than one operator, or is an MBP member	Column A Gross Receipts	Column B Taxes	Column C Cost of Prizes Awarded	Column D Adjusted Gross Income (col. A less B & C)	Column E Game-Related Expenses	Column F Net Proceeds (col. D less E)
1.	Bingo						
2.	Pull-Tabs						
3.	Vendor Sales (Pull-Tabs)						
4.	Raffles						
5.	Other (Specify)						
6.	Other (Specify)						
7.	Other (Specify)						
8.	Other (Specify)						
9.	Sale of Equip. and Supplies						
10.	Total						
11.	Net Proceeds Paid to Permittee by	y Operator / MBP					

Permit Number	Permittee Name

SCHEDULE AP: PERMITTEE ACTIVITY REPORT

		Column A	Column B	Column C	Column D Other (Specify)	Column E Other (Specify)	Column F Other (Specify)	Column G Other (Specify)	Column H Other (Specify)	Column I
	Description	Bingo ⁽³⁾	Pull-Tabs ⁽³⁾	Raffles	cule: (cpccy)	cule: (epcelly)	cule: (epcelly)	силог (Сроспу)	силог (сроспу)	Total
1.	Gross Receipts									
2.	Taxes									
3.	Cost of Prizes									
4.	Adj Gross Income (1)									
5.	TOTAL EXPENSES									
6.	NET PROCEEDS (2)									

⁽¹⁾ Subtract lines 2 and 3 from line 1.

SCHEDULE C: GAME-RELATED EXPENSES

	Expenses	Bingo	Pull-Tabs	Raffles	Other (Specify)	Total				
1.	Rental of Facility									
2.	Other Facility Costs									
3.	Contract / Pro. Services									
4.	Accounting									
5.	Wages									
6.	Payroll Taxes									
7.	Pull-Tab Tax Paid									
8.	Cost of Pull-Tab Games and Bingo Cards (Sch C-1)									
	Advertising									
10.	Equipment Purchases									
11.	Depreciation									
12.	Door Prizes									
13.	Other Expenses									
14.	TOTAL EXPENSES (4)									

⁽⁴⁾ To Schedule AP line 5.

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⁽²⁾ Subtract line 5 from line 4.

⁽³⁾ Accrual accounting required.

Permit Number	Permittee Name

SCHEDULE AV: VENDOR ACTIVITY REPORT

VENDOR INFORMATION

	ABC License Number	Vendor Name
Vendor 1		
Vendor 2		
Vendor 3		
Vendor 4		
Vendor 5		

FINANCIAL INFORMATION

Vendor Number from schedule	Column A	Column B	Column C	Column D Adjusted Gross	Column E Vendor	Column F Cost of	Column G Pull-Tab	Column H Other	Column I Total	Column J Net
above	Gross Receipts	Taxes	Prizes	Income	Compensation		Tax Paid	Vendor	Expenses	Proceeds
	G. GGG Procesipile	Taxoo	111200	(col A less col B & C)	_	Games	Tux Tulu	Expenses	(add col E - H)	(col D minus col I)
Vendor 1										
Vendor 2										
Vendor 3										
Vendor 4										
Vendor 5										
	(to page 1, line 3)									(to page 1, line 7)
Total										

G	In u				To			
Permit Number	Permittee Name			License Number	Operator Name / Vendo	Name / dba		
		SCHEDIII I	ED. DIII T	AB ATTACHN	/ENT			
			L D. FOLL-I	AD ATTACIN	ALIN I			
All pull-tabs were	reported on the quarterly report: (check one)	Yes No						
The attached gam	nes were sold by: (check one) Permittee	Vendor Ope	rator					
Distributor		Game Serial	Form	Gross	Prize	Ideal	3%	Date In/
License No.	State ID Stamp Label	Number	Number	Receipts	Payout	Net	Tax	Date Out
								IN
								OUT
								IN OUT
					+			
								IN_ OUT
								IN
								IN OUT
								IN_ OUT
								OUT
								IN_ OUT
								IN
								IN OUT
			1					IN
								OUT
								IN OUT
					+			IN
								OUT
								IN
								IN_ OUT
								IN OUT
			1				+	
								IN OUT
								IN OUT
								IN OUT
								IN OUT
	+		1		+		+	IN
								IN OUT
								IN OUT
							1	OUT
	Subtotal (amount	s from this page)						
	`	,			+			Use additional sheets if necessary.
	Grand Total (include amount	e from all nages)		1				sneets if necessary.

	2010 Permittee Annual Financial S	tatement		
Permit Number Permittee Name				Page of
				1 ugc 01
SCHEDULE E: DONATIONS (
RECIPIENT	PURPOSE	DATE	CHECK NO	AMOUNT
	Subtotal (amounts	s from this page)		

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Grand Total (include amounts from all pages, enter on page 1, line 20)

		2010 Fermittee Amidai Financiai Stat	ıeı	Hent					
Peri	mit Number	Permittee Name							
SCHEDULE C-1: COST OF PULL-TAB GAMES AND BINGO CARDS									
Inventory method for pull-tab games: Unopened Games									
		Percent Complete				-Tab Games			
1.		entory of unopened games/unused cards at beginning of year. from last year's ending inventory, attach explanation.)	1	Self-Directed	1	Vendor	1	Bingo Cards	
2.	Cost of pull	Cost of pull-tab games or bingo cards purchased.				2	2		
3.	Add line 1 a	Add line 1 and line 2.				3	3		
4.	Cost of inventory of unopened games/unused cards at end of year				4		4		
5.	Cost of pull-tab games (Subtract line 4 from line 3).1			j	5	,	5		
6.	Cost of bingo cards (Subtract line 4 from line 3). ²						6		
Use Schedules F and F-1 to reconcile Page 1, line 23, of the 2010 Annual Financial Statement to your December 31, 2010 gaming bank account reconciliation.									
SCHEDULE F: OTHER DEPOSITS AND INCREASES									
	Prior year net proceeds deposited after December 31, 2009.				H				
	Sales Tax Collected. (1)				2	+			
ა.	Other deposits and increases (please describe, including loans and girts).				3 +				
				_					
4.	Total (Enter	on page 1, line 18).		- 	. 4				
4		F-1: OTHER DISBURSEMENTS AND REDUCTIONS			٦				
	Current year net proceeds not deposited by December 31, 2010								
	Non-deductible sales tax. ⁽¹⁾				2	+			
ა.	other disputaements / reductions (piease describe).				3 +				
			-	_					
4.	Total (Enter	on page 1, line 21).		-	4	(to pa	ge 1,	line 21)	

 $^{^{(1)}}$ See instructions for permittee activity report, Schedule AP, total gross receipts.