



**Division of Charitable Gaming  
GC/BC FORM 105 – Schedule C  
Corporation Statement**

Corporation Name: \_\_\_\_\_

**METHOD OF INCORPORATION** (check the appropriate box)

Filed a Certificate or Article of Incorporation or Charter  
 Granted by: \_\_\_\_\_ In the State of \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_  
 (Title of Public Official or Agency)

Act of Legislative Body \_\_\_\_\_ Number of Law \_\_\_\_\_ Year \_\_\_\_\_  
 (State Legislative Body)

Foreign Corporation \_\_\_\_ yes \_\_\_\_ no

Have you filed a Certificate of Authority to conduct business in New York State been obtained? \_\_\_\_ yes \_\_\_\_ no  
 (If so, please provide a copy with your application.)

Person in this state who is authorized to produce records and supply information on your company's behalf:

Name	Street Address	City	State	Zip Code	Title
_____	_____	_____	_____	_____	_____

Has the corporation filed Federal Tax Returns? \_\_\_\_ yes \_\_\_\_ no Where? \_\_\_\_\_  
 (Please provide a copy of your most recent tax return)

List names, addresses and compensation of all officers, directors and employees. (If necessary use a separate sheet of paper)

Name	Street Address	City	State	Zip Code	Title	Compensation
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____

List names and addresses of all stockholders and the number of shares held by each.  
 (If necessary use a separate sheet of paper)

Name	Street Address	City	State	Zip Code	# of Shares Held
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Does any person not named in the application herein, or, if a corporate applicant, any person not an officer, director or stockholder of such corporation have any interest, financial, proprietary or other, direct or indirect, in the business to be licensed, or has made any loan to the applicant for said business or have any lien mortgage on the fixtures in the business? \_\_\_\_yes \_\_\_\_no

Has the applicant or (if a partnership) any of the partners or (if a corporation) any of the officers, directors or stockholders ever had any proprietary, equitable or credit interest in any premises leased for the conduct of games of chance and/or bingo? \_\_\_\_yes \_\_\_\_no

Does any stockholder hold all or any part of his or her shares as agent, nominee, trustee or in any fiduciary capacity for or on behalf of any disclosed or undisclosed person, firm or corporation? If yes, give details on a separate sheet of paper.

**ATTACH A COPY OF EACH:** 1. Agreement creating the entity and any supplement or changes. (new applicants only)  
2. Most recent financial statement (balance sheet or profit & loss statement).

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\_\_\_\_\_, \_\_\_\_\_ being duly sworn and says that he/she  
(Print Name of Applicant) (Title)

is the person above named, that he/she has read the foregoing statement and the answer therein noted, and that such answers are true and that he/she has personally affixed his/her signature to this affidavit.

Sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)

**NOTARY STAMP**

\_\_\_\_\_  
(Signature of Notary Public)