CG-AFF, AFFILIATION ATTACHMENT FOR ANNUAL AFFILIATE LICENSE APPLICANTS State Form 56745 (R / 1-23)
INDIANA GAMING COMMISSION

| National Foundation or National Organization legal name |  | National Foundation or Organization Federal Identification Number (FID/EIN) | AAL license number |
| :---: | :---: | :---: | :---: |
| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square$ Yes $\square$ No |
| Date formed (month, day, year) | Location(s) of proposed event(s) |  | Estimated number of events |
| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square$ Yes $\square$ No |
| Date formed (month, day, year) | Location(s) of proposed event(s) |  | Estimated number of events |
| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square$ Yes $\square$ No |
| Date formed (month, day, year) | Location(s) of proposed event(s) |  | Estimated number of events |
| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square \text { Yes } \quad \square \text { No }$ |
| Date formed (month, day, year) | Location(s) of proposed event(s) |  | Estimated number of events |
| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square$ Yes No |
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| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square \text { Yes } \quad \square \mathrm{No}$ |
| Date formed (month, day, year) | Location(s) of proposed event(s) |  | Estimated number of events |
| Name and address of Affiliate |  | Federal Identification Number | Exemption with IRS? $\square$ Yes $\square$ No |
| Date formed (month, day, year) | Location(s) of proposed event(s) |  | Estimated number of events |

General Instructions: Enter the name of each affiliate to be recognized on the AAL license. Reminder: Each affiliate must have IRS exemption status. Affiliates without IRS exemption status will not be included on the AAL license and will not be eligible to obtain approval for activities Please provide the date the affiliate was formed, the location of the proposed events and an estimated number of events. The affiliate must have sixty (60) days existence in Indiana prior to their first activity.

