

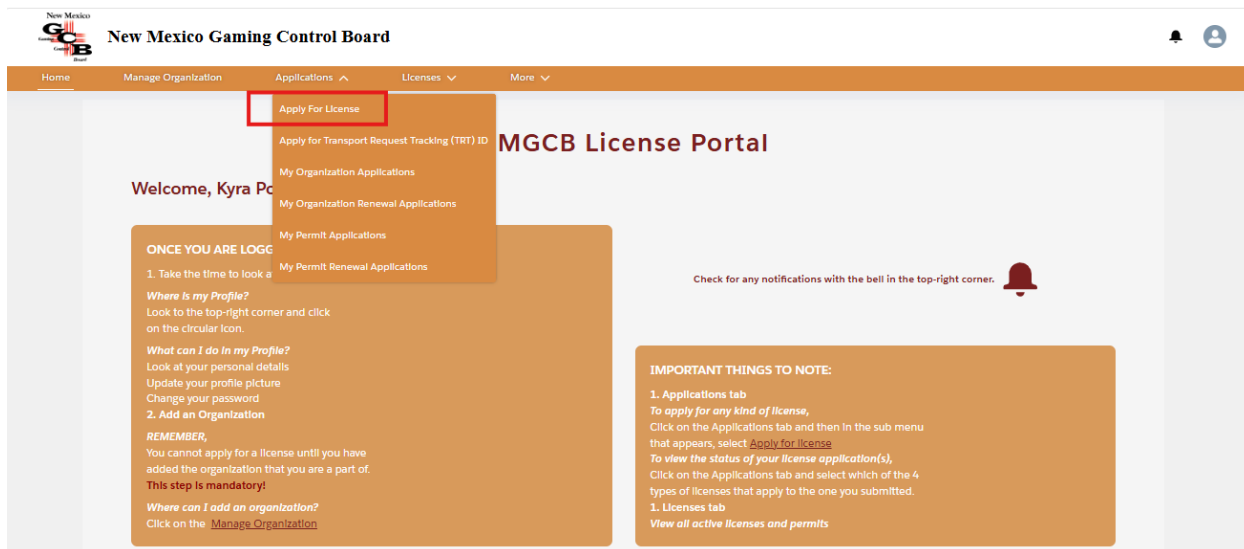
Nonprofit Gaming Operator Intake Application User Guide

This user guide will walk you through submitting a Nonprofit Gaming Operator Intake Application.

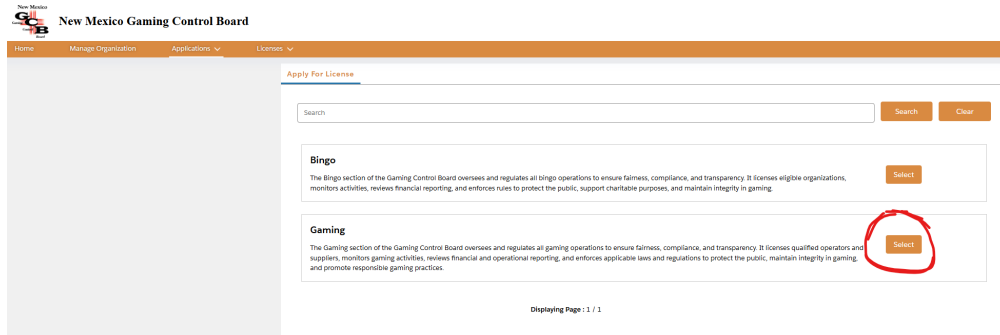
Step 1: Log in to the Portal / External Site via:

<https://nmgcb.my.site.com/gcb/s/login/>

Step 2: Click on Applications -> Apply for License



Step 3: Click Select for 'Gaming Board'



Step 4: Click 'Apply' next to Nonprofit Gaming Operator to launch the application.

New Mexico Gaming Control Board

Home Manage Organization Applications Licenses

Apply For License

Search Search Clear

Gaming Machine Manufacturer License
Authorizes the licensee to design, manufacture, assemble, sell, distribute, or otherwise provide gaming machines and related gaming devices for use in the State of New Mexico in accordance with the New Mexico Gaming Control Act and applicable regulations, subject to the oversight and compliance requirements of the New Mexico Gaming Control Board. [Apply](#)

Limited Use Distributor License
Authorizes distribution activities with limited scope or volume under New Mexico Gaming Control Board regulations. [Apply](#)

Nonprofit Gaming Operator
Authorizes the nonprofit organization to conduct and operate approved gaming activities in accordance with applicable gaming laws and regulations, subject to ongoing regulatory oversight and compliance requirements of the relevant gaming regulatory authority. [Apply](#)

Step 5: Specify the Organization for which you would like to apply towards. **You must select a Nonprofit Organization.**

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Select Organization

Organization Name	NM Tax ID Number	FEIN	Organization Type	Organization Status	Your Status	Action
Zia Community Education Fund	78-787287-38-7	78-7387837	Nonprofit	Verified	Authorized	Select
New Horizons Learning Foundation of New Mexico		32-7999298	Nonprofit	Verified	Authorized	Select
Desert Phoenix Gaming LLC	95-898958-49-8	84-5894859	Profit	Verified	Authorized	Select
United Gaming	78-980768-97-0	67-8798786	Profit	Verified	Authorized	Select
Desert Mesa Educational Foundation	73-673467-36-7	76-6376734	Nonprofit	Pending Verification	Authorized	Select
Four Corners Enrichment Group	94-009409-49-3	39-9389489	Profit	Verified	Authorized	Select
Enchanted Skies Education Initiative	92-839288-29-8	09-0909109	Profit	Verified	Authorized	Select

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Step 6: First is the Introduction Screen

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Introduction
A regulatory authorization issued to nonprofit organizations that permits them to conduct specific, approved gaming activities in accordance with applicable federal, state, or local gaming laws and regulations. This authorization is granted subject to ongoing regulatory oversight and requires the organization to adhere to defined compliance obligations, including licensing conditions, operational controls, reporting requirements, and audit or inspection provisions imposed by the relevant regulatory authority.

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Step 7: Next is the Organization Information Screen

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Organization Information

Organization Information

Name of Qualified Organization

Does the organization do business under different name? If yes, specify DBA and Trade Name.

Mailing Address

Mailing Address

Mailing City

Mailing State

Mailing Zip

Mailing Country

Is physical address same as mailing address?

Physical Address

Physical Address

Physical City

Physical State

Physical Zip

Physical Country

Business Phone

Business Email

FEIN

NM State Tax ID Number

Nonprofit Designation

Date Established

New Horizons Learning Foundation of New Mexico

☐ Yes ☐ No

1890 Sunrise Canyon Dr

Santa Fe

New Mexico

87507

United States

☐ Is physical address same as mailing address?

4021 Turquoise Trail SE

Rio Rancho

New Mexico

87124

United States

(906) 986-9958

nh@mail.com

32-7999298

☒ 501-(C)(8) ☐ 501-(C)(10) ☐ 501-(C)(19) ☐ 501-(C)(23) ☐ 501-(C)(3)

▼ First Primary Contact Information

* First Contact Name

First Title

* First Contact Phone ((XXX) XXX.XXXXX)

* First Contact Email

☐ Is primary contact address same as mailing address?

▼ First Primary Contact Address

* Street

* City

* State

* Zip

* Country

▼ Second Primary Contact Information

Second Contact Name

Second Title

Second Phone ((XXX) XXX.XXXXX)

Second Contact Email

☐ Is primary contact address same as mailing address?

▼ Second Primary Contact Address

Second Phone ((XXX) XXX XXXX)

Second Contact Email

☐ Is primary contact address same as mailing address?

Second Primary Contact Address

Street

City

State

New Mexico

Zip

Country

United States

Third Primary Contact Information

Third Contact Name

Third Title

Third Phone ((XXX) XXX XXXX)

Third Contact Email

☐ Is primary contact address same as mailing address?

Third Primary Contact Address

Street

City

State

New Mexico

Zip

Country

United States

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Step 8: Next is the Organization Address Screen

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Organization Address

List all principal places of business for the past 10 years if different from the current address.

Principal Places

Add New

Organization Name	Address	
High Desert Gaming Solutions	321 Unser Blvd SE, Rio Rancho, NM 87124, US	
505 Esports Collective	789 N Telshor Blvd, Las Cruces, NM 88011, US	

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Click Add New to add an entry to the table

Principal Places

* Organization Name

* Address

* City

* State

* Zip

* Country

Save

Step 9: Next is the Premise Information Screen

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Premise Information

* Licensed Premise DBA

* Phone

* Total Square Footage of the Building (Gross Building Area)

* Total Square Footage to be Licensed for Gaming

* Anticipated Number of Gaming Devices

☐ Is premise address same as physical address of organization?

Address Information

* Physical Address

* Physical City

* Physical State

* Physical Zip

* Physical Country

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Step 10: Next is the Premise Ownership Screen

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Premise Ownership

* Specify the current ownership status of the proposed licensed premises?

☐ Fully owned by the applicant ☐ Fully leased by the applicant ☐ Partially owned and partially leased ☐ Other

Save for later

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Premise Ownership

☐ Fully owned by the applicant ☐ Fully leased by the applicant ☒ Partially owned and partially leased ☐ Other

☐ Yes ☐ No

☐ Yes ☐ No



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Management Structure

The President or Commander and key executives of a nonprofit organization that has applied for a license must be certified individually. Key executives are those officers, employees, volunteers and other persons who are designated by the nonprofit organization as key executives. Typically, this includes chief officers, anyone with check-writing responsibilities, and the gaming committee. The Board may require additional officers, employees, volunteers and other persons to become certified if the board determines the public interest is served by the additional certifications.

Add New

First Name	Last Name	Title	Address	
No data available				

[Save for later](#)

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Click Add New to add an entry to the table

Officer Information

*Please select the appropriate option to add an officer

- ☐ Create new
☐ Search existing

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Step 12: Next is the Licensing History Screen. Based on your selection, an explanation box may appear

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Licensing History

*Has the applicant ever applied for a gaming license, liquor license, or any other regulated license in this or any other jurisdiction, foreign or domestic, whether or not the license was ever issued? If Yes, provide details including jurisdiction, type of license, license number, and dates license held or applied for. You can also upload any associated documents as 'Other Supporting Documents' on the document screen later in the application.

☒ Yes ☐ No

Provide Details

*Has the applicant ever been denied a gaming license, withdrawn a gaming license or had any disciplinary action taken against any gaming license that they have held in this or any other jurisdiction? If Yes, provide details including jurisdiction, type of action, and date of action. You can also upload any associated documents as 'Other Supporting Documents' on the document screen later in the application.

☐ Yes ☐ No

*Is the applicant in good standing in New Mexico? If No, provide details. You can also upload any associated documents as 'Other Supporting Documents' on the document screen later in the application.

☐ Yes ☐ No

*Has the applicant ever been charged with, or convicted of, any illegal gaming activity in New Mexico or any other jurisdiction? If Yes, provide details including jurisdiction, type of action, and date of action. You can also upload any associated documents as 'Other Supporting Documents' on the document screen later in the application.

☐ Yes ☐ No

*Has the applicant ever been cited by the New Mexico Alcohol & Gaming Division? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

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Step 13: Next is the Financial History Screen. Based on your selection, additional explanation boxes will appear.

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*Is the applicant delinquent in the payment of any judgments or tax liabilities due to any governmental agency anywhere? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☒ Yes ☐ No

Provide Details

*Has the applicant ever held a financial interest in or conducted a gambling venture, including but not limited to, card room, bingo parlor or pull tabs, whether or not a license to hold such interest was applied for or received? If Yes, provide details. You can also upload any associated documents as 'Other Supporting Documents' on the document screen later in the application.

☐ Yes ☐ No

*Has the applicant ever filed a bankruptcy petition, had such a petition filed against it, or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for it? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

*Has a complaint judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against the applicant? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

*Has the applicant ever been a party to a lawsuit, either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

*Has the applicant filed a business tax return in the past three years? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

*Is the organization a party to a lease? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

*Does the applicant have a compliance committee or compliance officer? If Yes, provide details. You can upload any associated documents on the document screen later in the application.

☐ Yes ☐ No

*Has any interest or share in the revenues from gaming been pledged or hypothecated as security for a debt or deposited as a security for the performance of an act or to secure the performance of a contract including repayment of a loan? If Yes, provide details. You can also upload any associated documents as 'Other Supporting Documents' on the document screen later in the application.

☐ Yes ☐ No

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Step 14: Next is the Key Personnel Screen

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Key Personnel

Person who maintains applicant's business records

*Name

*Title

*Street

*City

*State

New Mexico

*Zip

*Country

United States

*Phone Number (xxx) xxx-xxxx

☐ Person who prepares applicant's tax returns, government forms & reports same as Person who maintains applicant's business records.

Person who prepares applicant's tax returns, government forms & reports

*Name

*Title

*Street

*City

*State

New Mexico

*Zip

*Country

United States

*Phone Number (xxx) xxx-xxxx

Location of financial books and records for applicant's business

*Physical Address

Step 15: Next is the Certification Screen

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Certification

I acknowledge, understand and agree that by applying for and accepting any license, certification, registration, renewal, finding of suitability, or other approval (each a "License") from the New Mexico Gaming Control Board ("Board"), I am certifying to the Board that:

1. I have read the Gaming Control Act, Sections 60-2E-1 through 60-2E-41 NMSA 1978 ("Act") and administrative rules, plans and policies adopted or approved by the Board (collectively "Rules"), and I understand the requirements of the Act and Rules.

2. I have read the minimum internal controls established or approved by the Board for use by the gaming operator licensee ("Licensee") for which I am a key person, and I understand the requirements of the minimum internal controls, OR, I certify that the minimum internal control requirements do not apply to my job duties.

3. I have read the compulsive gambling assistance plan required by the Act and Board rules and approved by the Board for use by the Licensee, and I understand the requirements of the compulsive gambling assistance plan, OR, I certify that the compulsive gambling assistance plan requirements do not apply to my job duties.

4. I understand and agree that, as a key person, I am responsible for the Licensee's compliance with the Act and Rules including, where applicable to my job duties, the minimum internal controls and compulsive gambling assistance plan.

5. I am signing this Certification with the knowledge that the Licensee and I will be subject to disciplinary action, including fines and/or revocation or suspension of the License, for failure to comply with the Act or Board rules including, where applicable to my job duties, requirements of the minimum internal controls and compulsive gambling assistance plan.

*Full Legal Name

*Date

Signature

Save Signature

Clear

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Tax Information Authorization

*** Business Name**

*** New Mexico ID Number**

*** Trade Name (DBA)**

*** Name**

FEIN (XX-XXXXXXX)

Street

City

State

Zip

Country

Telephone Number (XXX) XXX-XXXX

Hereby authorizes New Mexico Gaming Control Board Address: 4900 Alameda Blvd NE Telephone Number: (505) 841-9700 Albuquerque, NM 87113-1736 to represent me and/or my business pertaining to taxes administered by the New Mexico Taxation and Revenue Department.

Type of taxes that apply

☒ All state taxes
 ☐ CRS taxes
 ☐ Income taxes
 ☐ Others

Year

I certify that I have the authority to execute this tax information authorization.

*** Signature**

*** Title**

*** Date**

☐ Is this a joint return?

*The taxpayer may limit the scope of this authorization by specifying the particular information or tax types to be handled by authorized person.
For joint returns, both taxpayers must sign. If not signed by the taxpayer, signature must be that of a corporate officer, partner, or fiduciary on behalf of the taxpayer.*

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Step 19: Last is the Confirmation Screen



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Your application has been submitted successfully.
Application Number: P&R-0000000364

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