

**IOWA DEPARTMENT OF INSPECTIONS AND APPEALS**  
**Social and Charitable Gambling Program**  
**Annual Report Form**

Name of License Holder:	
Address of License Holder (include street address, city, and zip code):	
Name of Responsible Party:	Telephone Number for Responsible Party (include area code):
License Number:	Type of Charitable Gambling License:
<input type="checkbox"/> Check this box if no gambling activity occurred during the reporting period.	

**Report of Annual Gambling Activity**

Annual Gambling Activity	Totals
• Gambling money collected as the result of Bingo →	\$
• Gambling money collected as the result of Raffles →	\$
• Gambling money collected as the result of Games of Skill or Games of Chance →	\$
<b>ITEM 1: TOTAL</b> Gambling Money Collected →	\$
<b>ITEM 2:</b> Divide total gambling money collected by 1.06 (1.07 if local option sales tax applies) to calculate gross receipts →	\$
<b>ITEM 3:</b> Enter the cost of prizes, excluding all donated prizes →	\$
<b>ITEM 4:</b> Subtract item three from item two to determine net receipts →	\$
<b>ITEM 5:</b> Enter allowable expenses incurred as a result of gambling activities. This amount cannot exceed 25 percent of the net receipts. ( <i>Receipts are necessary to document all allowable expenses.</i> ) →	\$
<b>ITEM 6:</b> Subtract the allowable expenses from the net receipts to determine the amount that must be used for charitable, religious, educational, public, civic, or patriotic purposes. →	\$
<b>TOTAL</b> income from all sources (include all gross gambling and non-gambling income your organization received during the previous fiscal year, such as dues, fund raisers, etc. →	\$

**Acknowledgment:**

By signing this report form, I acknowledge that I have examined the information provided, and to the best of my knowledge and belief, the information is true, accurate, and complete. I am aware that I am subject to investigation or audit by the Department of Inspections and Appeals (DIA), the Department of Public Safety (DPS), the Attorney General, or any law enforcement official.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Preparer

Iowa law requires that qualified organizations submit an annual report of all transactions conducted as part of the licensee's activities. The annual report is due by July 30<sup>th</sup> of each year for transactions occurring during the previous fiscal year (July 1<sup>st</sup> through June 30<sup>th</sup>). Failure to submit an annual report is grounds for revocation of the organization's license. Once completed, the Annual Report Form should be submitted **no earlier than July 1<sup>st</sup>** to the Department at the address below:

Iowa Department of Inspections and Appeals  
 Social and Charitable Gambling Program  
 Lucas State Office Building  
 321 East 12<sup>th</sup> Street  
 Des Moines, IA 50319-0083  
 Telephone: (515) 281-6848  
 Fax: (515) 281-3291