Form AB-300

Alcohol Beverage Personal Questionnaire

Date

All individuals and businesses involved in the alcohol beverage business must complete this form, including:

sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
- all partners of a partnership
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Questionnaires are submitted.

Part A: Business Information											
1. Legal Business Name (individual name if sole proprietor)											
2 Busins	ess Trade Name or DBA										
2. Busine	ess Trade Name or DBA										
3. Busine	ess Type (check one)										
☐ So	☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization										
Part B: Personal Information											
1. Last N	ame/Business Name			2. Fi	rst Name					3. M.I.	
4. Relation	onship to Business (Title)		5. Email					6	6. Phone		
7. Home Address											
						_					
8. City					9. State	10. Zip Code	Э	1	11. Date of Bi	rth	
10. D.:	1: (0) (15)		10.5:	(0)			T. (
12. Drive	rs License/State ID Numb	er	13. Drivers Licer	ise/Sta	te ID State	of Issuance	14. SSN or FEIN	N			
Part C: Address History											
1. Do you currently reside in Wisconsin? (residing outside Wisconsin is not necessarily disqualifying)											
Years Months										Months	
If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?											
2. List in	n chronological order a	ll of your ad	dresses within the	last 5	years. Att	ach additiona	I sheets if neces	ssar	y.		
Previous	Address 1			City			Stat	te	Zip Code		
Previous Address 2				City				te	Zip Code		
Previous	Address 3			City			Stat	te	Zip Code		
Previous Address 4				City	City				Zip Code		
Previous Address 5				City	City			te	Zip Code		
3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.											
State	County	State	County		State	County	Stat	te	County		
State	County	State	County		State	County	Stat	te	County		

 $Continued \rightarrow$

Part D: Criminal History									
Have you ever been convicted of any offenses (excluding for violation of any federal, Wisconsin, or another state of the state of	's laws or of any count	y or municipal ordinances?	. Yes No						
Law/Ordinance Violated	Location		Conviction Date						
Penalty Imposed		Was sentence completed?	Yes No						
Law/Ordinance Violated	Location		Conviction Date						
Penalty Imposed		Was sentence completed?	Yes No						
2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances?									
Part E: Interest Restrictions									
Questions 1-3 are specific to the business listed in Pa	rt A.								
1. Do you hold a manager's license or work in a manage	erial capacity?		. Yes No						
2. Are you a partner, officer, director, member, or agent of a corporation or limited liability company? Yes									
3. Do you have an ownership interest of more than 10% in the business listed in Part A? % ownership Yes									
If Yes to any of the above, you are a restricted investor.									
Do you have interest in an alcohol beverage license or If yes, list name and address of other business.	permit in a different tie	r than the business listed in Part A	? Yes No						
If No to Question 4, Part E is	s complete Continue	a to signature on page ?							
Question 5,7 at 2 is									
5. Do you hold more than 10% ownership interest?	% ownership		Yes No						
6. Are you an officer, director, manger, operator, or agen	t?		. Yes No						
7. Are you involved in the day-to-day operations of the li operations beyond the ability to vote as an owner? .			. Yes No						
If No to Questions 5-7, complete restr If Yes to 5 is due to marria									
Don't Fr. Adda adada in									
Part F: Attestation	hy of law I have soon	world analy of the above guestic	no completely and						
READ CAREFULLY BEFORE SIGNING: Under penal truthfully. I certify that I am not prohibited from participal beverage industry as a restricted investor. I understand under penalty of state law. I further understand that I may with this application, and that any person who knowingly to forfeit not more than \$1,000 if convicted.	ting in this business of that any license issue the prosecuted for sul	lue to any involvement in another ed contrary to Wis. Stat. Chapter omitting false statements and affid	tier of the alcohol 125 shall be void avits in connection						
Signature		Date							

Form AB-300 Instructions

Alcohol Beverage Personal Questionnaire

Who must complete Form AB-300?

Any person or business entity involved in the applicant business who are sole proprietors, partners of a partnership, officers, directors, members, managers, or agents must complete and submit Form AB-300. These people are identified in Form AB-101 *Alcohol Beverage Appointment of Agent* or an alcohol beverage permit application. Business entities such as LLCs or corporations submitting this form must be completed by an authorized representative of the entity.

Where do I submit Form AB-300?

If applying for an alcohol beverage permit, submit this form as required by the permit application to the Division of Alcohol Beverages.

To update the agent for an alcohol beverage permit, submit this form with Form AB-101, *Alcohol Beverage Appointment of Agent* to the Division of Alcohol Beverages using the contact information below.

Specific Instructions

Date

Date the form in the top right corner.

Part A: Business Information

- Box 1: Enter the legal business name of the permit holder or applicant. If sole proprietor, enter the individual's first and last name.
- Box 2: Enter the business trade name or "doing business as" name, if different than the name in box 1.
- Box 3: Check one entity type to indicate how the business is legally organized.

Note: This business information must match the information on any alcohol beverage permit application or existing alcohol beverage permit.

Part B: Individual Information

- Provide all requested personal information.
- Box 4: Enter your title or describe your relationship to the business. Examples: President, Treasurer, Director, Chief Financial Officer, Member, Partner, Agent, etc.

Part C: Address History

 Question 2: List in chronological order all residential addresses within the last five years starting with your most recent address.

Part D: Criminal History

- Question 1: Disclose any civil or criminal violations of law in any jurisdiction (federal, state, or local ordinance), and include detailed descriptions of any violations of law involving alcohol beverages (OWI, disorderly conduct, etc.).
- Question 2: Disclose any pending charges against you in any jurisdiction and include detailed descriptions of any charges involving alcohol beverages.

Note: Subject to the Wisconsin Fair Employment Law (Ch. 111, Wis. Stats.), persons with convictions or pending charges may, if those offenses are sufficiently relevant, be prohibited from holding alcohol beverage license and permits under sec. 125.04(5)(a)(1) Wis. Stats. See the Department of Revenue's <u>Permit Predetermination Common Questions</u> for offenses that may prevent someone from holding a license.

Part E: Interest Restrictions

Some people are prohibited from holding certain roles in an alcohol beverage permit holder due to interests in another business. Tell us about your roll in the applicant business and any interest you may have in other businesses within other tiers of the alcohol beverages industry.

- Question 1: A manager's license is similar to an operator's (bartender's) license for managers, but only issued in some municipalities.
- · Question 2: Check Yes if you hold any of the listed roles for the business listed in Part A.
- Question 3: If no ownership interest is held, enter "0" in the % ownership field.

Note: If any of questions 1-3 are answered "Yes", you are a restricted investor relative to the business in Part A. "Yes" responses to these questions are not disqualifying on their own.

- Question 4: Alcohol beverage tiers are generally broken into 3 parts:
 - Production (brewers, wineries, distillers)
 - Distribution (wholesalers)
 - Retail (bars, restaurants, grocers)

Check "Yes" if you have an interest in a business in a different tier than the business listed in Part A. If you check "No," this part is complete and the remaining questions in this part can be left blank.

- Question 5: List the ownership percentage of any business disclosed in Question 4, if any. If no ownership interest is held, list "0."
- Question 6: Check Yes if you hold any of the listed roles for the business listed in Question 4.
- Question 7: Are you involved in the day-to-day operations of any business listed in Question 4?

Based on your responses to these questions, other forms may be required.

- If an interest described in Question 4 is due to a landlord/tenant relationship, include a copy of the lease agreement with this form.
- If Question 4 was marked "Yes," but 5-7 are marked "No," complete either:
 - o Form AB-104a, Restricted Investor Affidavit Restricted Individual or
 - o Form AB-104b, Restricted Investor Affidavit Restricted Entity
- If an interest described in Question 4 is held by a spouse, submit Form AB-103, Marriage Affidavit, with this form.

Part F: Attestation

• Read the attestation carefully, then sign and date.

Assistance

This form is designed by the Division of Alcohol Beverages. If you require assistance with this form, or if you have questions about alcohol beverage laws and regulations, you may contact the Division of Alcohol Beverages using the contact information below.

Website: <u>DOR Alcohol Beverage (wi.gov)</u>
Write: <u>DORAlcoholPermits@wisconsin.gov</u> or

Call: (608) 266-2526

Mail: Wisconsin Department of Revenue Division of Alcohol Beverages

PO Box 8934

Madison WI 53708-8934