

# Special Event Liquor License Application Attachment B

Licensing Office  
55 North Center Street  
**Mailing Address:**  
PO Box 1466  
Mesa, Arizona 85211-1466  
480-644-2316 Telephone  
480-644-3999 Fax  
www.mesaaz.gov



**If you intend to serve alcohol at your special event, you will need to obtain a Special Event Liquor License or an Extension of Premises from the City of Mesa Licensing Office. This must be submitted at least 60 days prior to the event. A license is required with special provisions outlined. Plan a minimum of 60 days to complete this process.**

Check all that apply:

- ☒ Free/Host Alcohol  
Beer
- ☐ Alcohol Sales  
Beer and Wine
- ☒ Host and Sale Alcohol  
Beer, Wine and Distilled Spirits

Do you plan to secure a:

☒ **Special Event Liquor License** - The Special Event Liquor License fee is \$25 and must be approved by the City Council. After city approval, your application must be submitted to, and approved by, the State of Arizona. There are fees involved at the State. This license can only be obtained by a non-profit organization, 501(C). (Complete the State of Arizona Special Event Liquor Application and site plan and submit it with this Attachment B.)

☐ **Extension of Premises License** - There is no fee involved with the Extension of Premises. This is allowed when a liquor license is already in effect and you want to extend the area where liquor is sold. (Complete the State of Arizona

Extension of Premises Application and site plan and submit it with this Attachment B.)

If this is an Extension of Premises, are there any other activities taking place except for the sale of liquor in the extended area? No ☒ Yes ☐ Type of activities taking place: \_\_\_\_\_

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event The Beer Garden hosted at the Mesa Marathon will be barricaded off from the rest of the venue and will have security at the points of exit and entrance to ensure a safe area.

**If applying for a Special Event Liquor License the following must be provided:**

Brooksee Foundation 81-1378327  
Charity's or Organization's Name 501 (C)#  
Darrell Phippen Board Member [REDACTED]  
Name of Contact at Charity/Organization Title with Organization Phone Number  
Darrell Phippen  
On-Site Agent Responsible for Liquor

How will attendees over the age of 21 be identified? Attendees over the age of 21 must show ID prior to entering the beer garden. A stamp and/or a wristband will be given to this person in order to receive entrance into the beer garden.

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? Barricades will surround the beer garden to keep those under the age of 21 from entering. Security will also be at points of exit and entrance to ensure this as well.

Will food be served? Yes ☐ No ☒ If yes, what type of food will be served \_\_\_\_\_  
Seating capacity of designated area: # 300

CSR:
Amount:



# SPECIAL EVENT LICENSE

## APPLICATION FEE \$25.00 PER DAY

Arizona Department of Liquor Licenses and Control  
800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
(602) 542-5141

**RECEIVED**  
**DEC 06 2022**  
**CITY OF MESA**  
**LICENSING OFFICE**

**DLIC USE ONLY**

Job #:
Date Accepted:
CSR:
License #:

Application **MUST** be submitted to the Department of Liquor 10 days prior to the event.

**SECTION 1** Applicant must be a member of a qualifying nonprofit organization, political party, or Government entity and authorized by an Officer, Director, or Chairperson of the Organization.

- Applicant: 2023 Mesa Marathon - Phippen Darrell  
(Must be an Officer/Member of the Non Profit Entity) Last First Middle
- Applicant's mailing address: 374 South 671 West Pleasant Grove UT 84062  
Street City State Zip
- Applicants home/cell phone: [REDACTED] Applicant's business phone: [REDACTED]
- Applicant's email address: darrell@brooksee.com
- Special Event Name: 2023 Mesa Marathon
- Name of Non-Profit Organization, Candidate or Political Party/Gov: Brooksee Foundation
- Non-Profit/IRS Tax Exempt Number: 81-1378327
- Arizona Corporation Commission File #: \_\_\_\_\_ If out of State please specify: Attached  
(Attach letter of good standing)
- Event Location Name: Riverview Park, 2100 West Rio Salado Parkway, Mesa, AZ 85201
- Event Address: Riverview Park, 2100 West Rio Salado Parkway, Mesa, AZ 85201

**Dates and Hours of Event - Days must be consecutive and may not exceed 10 consecutive days.**

**\*\*SEPARATE APPLICATION FOR EACH "NON-CONSECUTIVE" DAY\*\***

Days	Date	Day of Week	Event Start Time AM/PM	License End Time AM/PM
DAY 1:	<u>02/04/2023</u>	<u>Saturday</u>	<u>8:00am</u>	<u>2:00pm</u>
DAY 2:	_____	_____	_____	_____
DAY 3:	_____	_____	_____	_____
DAY 4:	_____	_____	_____	_____
DAY 5:	_____	_____	_____	_____
DAY 6:	_____	_____	_____	_____
DAY 7:	_____	_____	_____	_____
DAY 8:	_____	_____	_____	_____
DAY 9:	_____	_____	_____	_____
DAY 10:	_____	_____	_____	_____



**SECTION 2** What type of security and control measures will you take to prevent violations of liquor laws at this event?  
(List type and number of police/security personnel and type of fencing or control barriers, if applicable.)

4 Number of Police 2 Number of Security Personnel ☒ Fencing ☐ Barriers

**Must** explain security measures: The beer garden will be fully enclosed with fencing and have security at all entrance/exits as well as police roaming the beer garden ensuring all participants are legal age and conducting themselves appropriately. All that enter will have their I.D.'s checked and a wristband attached to confirm they have been checked.

**SECTION 3** What is the purpose of this event?

☒ On-site consumption ☐ Off-site (auction/wine/distilled spirits pull) ☐ Both

How is this special event going to conduct all dispensing, serving, and selling of spirituous liquors?  
Check one of the following boxes. (R-19-318)

- A) ☒ Special Event being held on an **unlicensed** premises will require approval and signature by the Local Governing Body on page 3. (If checked move to section 4)
- B) ☐ Will this event be held on a currently licensed premises and within the already approved and licensed area?  
(Must attach a letter from the licensed premises with an explanation of the option checked below)

Name of Business

License Number

Phone (Include Area Code)

- ☐ Place license in non-use - Special Event Licensee selling all alcohol without retailer involvement  
**Must attach letter from the location suspending license for duration of special event**
- ☐ Dispense and serve all spirituous liquors under retailer's license - Business operates normally, minimum of 25% of gross revenue from alcohol sales is donated to licensee
- ☒ Dispense and serve all spirituous liquors under special event - The special event licensee is in charge of selling alcohol that was purchased or donated by the special event licensee. The retailers existing alcohol inventory must be separated from any alcohol used during the special event. **Must attach letter from the location suspending license for duration of special event**
- ☐ Split premise between special event and retail location - Both the special event licensee and the retailer will conduct sales of alcohol. (These sales will be done in separate areas. If alcohol is donated or purchased by the special event licensee it must be in a separate area than the alcohol that is dispensed by the licensed retailer.)
- ☐ Off Sale only - Wine/Distilled Spirits Pull, Live or Silent Auctions - Retailer will still be permitted to conduct all normal sale and service of alcohol.

**SECTION 4**

1. Has the applicant been convicted of a felony, or had a liquor license revoked within the last five (5) years?  
☐ Yes ☒ No If yes, attach letter of explanation.
2. How many special event days have been issued to this organization during the calendar year? 0
3. Is the Organization using the services of a Special Event Contractor? (A licensee can utilize the services of a special event contractor who may purchase and sell alcohol on behalf of the licensee. If no special event contractor is listed, the licensee is responsible for the sales and service of alcohol.)  
☐ Yes ☒ No If yes, please provide the Name of the Special Event Contractor: \_\_\_\_\_
4. Is the organization using the services of a series 6, 7, 11, or 12 licensee to manage the sale or service of alcohol? (Licensees who hold a series 6, 7, 11, or 12 license are automatically qualified to be the special event contractor)  
☐ Yes ☒ No if yes, please provide the Name of Licensee: \_\_\_\_\_ License #: \_\_\_\_\_

5. List the name of the Individual or Organization that will receive revenues, **MUST EQUAL 100 PERCENT.**

**Attach additional sheet if necessary.**

Name: Brooksee Foundation Percentage: 25

Address: 374 S 671 W Pleasant Grove UT 84062  
Street City State Zip

Name: Mesa Marathon Percentage: 75

Address: 374 S 671 W Pleasant Grove UT 84062  
Street City State Zip

Please read A.R.S. § 4-203.02 Special event license; rules and R19-1-205 Requirements for a Special Event License.

**ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVENT SITE ONLY.**

**NO ALCOHOLIC BEVERAGES SHALL LEAVE A SPECIAL EVENT UNLESS THEY ARE IN AUCTION WINE OR DISTILLED SPIRITS  
PULL SEALED CONTAINERS OR THE SPECIAL EVENT LICENSE IS STACKED WITH WINE /CRAFT DISTILLERY FESTIVAL LICENSE.**

**SECTION 5** License premises diagram. The licensed premises for your special event is the area in which you are authorized to sell, dispense or serve alcoholic beverages under the provisions of your license. Please attach a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades, or other control measures and security position.



If the special event will be held at a location without a permanent liquor license or if the event will be on any portion of a location that is not covered by the existing liquor license, this application must be approved by the local governing body before submitting to the Department of Liquor Licenses and Control. *Please contact the local governing board for additional information.*

**APPLICANT SIGNATURE**

**Declaration:**

I, (Print Name) Darrell Phippen, declare under penalty of perjury that I am authorized to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.

Signature

**LOCAL GOVERNING BODY**

Date Received: \_\_\_\_\_

I, \_\_\_\_\_ recommend ☐ APPROVAL ☐ DISAPPROVAL  
(Government Official) (Title)

On behalf of \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(City, Town, County) Signature Date Phone

**AZDLIC USE ONLY**

☐ APPROVAL ☐ DISAPPROVAL BY: \_\_\_\_\_ DATE: \_\_\_\_\_



Below is a map of the finish line venue for the 2023 Mesa Marathon that will be held on Saturday, February 4, 2023. The beer garden is labeled and at the center of this map. The cross street to the west is North Riverview. The road to the north is Cubs Way.

The dimensions for the beer garden are as follows: 110' x 120' x 100' x 130' with 3' barricade that will surround the entire area. Security will be at the entrance and exit points on the south and east sides.



RECEIVED  
JAN 04 2023  
CITY OF MESA  
LICENSING OFFICE

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **FEB 17 2016**

BROOKSEE FOUNDATION  
11968 ITHICA DR  
HIGHLAND, UT 84003-0000

Employer Identification Number:  
81-1378327  
DLN:  
26053442001956  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
509(a)(2)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
February 9, 2016  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 5436

BROOKSEE FOUNDATION

Sincerely,

A handwritten signature in black ink, appearing to read 'J. I. Cooper', with a stylized flourish at the end.

Jeffrey I. Cooper  
Director, Exempt Organizations  
Rulings and Agreements





**Utah State Tax Commission**

TAXPAYER SERVICES DIVISION 210 N 1950 W SALT LAKE CITY UT 84134-9000

Website: [tax.utah.gov](http://tax.utah.gov)

BIL046 03/2018

Letter Issue Date  
December 15, 2022

Letter ID  
L1892837024

Account Type  
Customer

Account Number  
15046447



BROOKSEE FOUNDATION INC  
374 S 671 W  
PLEASANT GROVE UT 84062-2692



**Business Name:** BROOKSEE FOUNDATION INC  
**Federal Identification Number:** XX-XXX8327  
**Department of Commerce Number:** 9690282-0140

**Letter of Good Standing**

The Utah State Tax Commission certifies:

**BROOKSEE FOUNDATION INC**

has filed all required returns with the Utah State Tax Commission  
and has paid all taxes due as of December 15, 2022.

This certificate expires January, 17, 2023.

**What to Do**

- Keep this certificate in your records.

**Please Note**

- All accounts can be audited at any time.

**Contact Information**

If you have any questions, please call Joseph Gonzalez at 801-297-7610 or toll free 1-800-662-4335 ext. 7610 or send me a fax at 801-297-7699. You may also write to me at the address at the top of this notice.

Respectfully,  
Joseph Gonzalez  
Tax Tech  
Taxpayer Services Division

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The Utah Taxpayer Bill of Rights (Pub 2) is available on the Tax Commission's website [tax.utah.gov](http://tax.utah.gov) or upon request. This publication describes your rights and obligations and the Tax Commission's procedures for appeals, refund claims and collections.

If you need an accommodation under the Americans with Disabilities Act, contact the Tax Commission at 801-297-3811 or TDD 801-297-2020. Please allow three working days for a response.