



Marijuana Business Limited Partnership Questionnaire

Form Instructions

What is this form?

Use this form to provide information on any limited partnership that is part of your business structure for your marijuana license. This includes a limited partnership that will hold the license itself, that has a financial interest in the business to be licensed, or that owns all or part of another legal entity to be licensed.

If your business structure involves more than three legal entities, provide a business structure diagram showing the legal entities involved, which entity or entities will hold the license, and each entity's relationship to one another.

What happened to the Marijuana Business Structure Form?

From January 2016 to March 2017, marijuana license applicants were directed to use the "Marijuana Business Structure Form." That document has been replaced with the following forms:

- [Marijuana Business Corporate Questionnaire](#)
- [Marijuana Business Limited Liability Questionnaire](#)
- [Marijuana Business Limited Partnership Questionnaire](#)
- [Marijuana Business Sole Proprietor/Other Entity form](#)
- [Marijuana Business Individual History form](#)

What information is required for my limited partnership?

- An Oregon Secretary of State registration number.
- Names of all general partners and limited partners.
- Total capital investment commitment in US dollars of each partner at the time of licensure

Who needs to complete a Marijuana Business Individual History form?

- All general partners
- All limited partners who have committed 10% or the total investment into the partnership
- Any spouse or domestic partner of any individuals listed above
- Individuals otherwise entitled to a portion of the revenue
- Anyone entitled with an "ownership interest" as described in [OAR 845-025-1045\(3\)](#)
- **Other individuals as required by your License Investigator**
- If any partner is another legal entity, that entity will need to complete another corporate questionnaire, limited liability questionnaire, limited partnership questionnaire, or sole proprietor/other entity form.

What other information may be required?

Depending on the structure of your business, you may be required to submit a diagram of your business structure to clearly establish the relationship between the business to be licensed and any other legal entities that may own or have an interest in the business. If an individual or entity that is not part of the business to be licensed is determined to have a significant interest in the business, financial or otherwise, you may need to also submit business structure information for that individual or entity.

It is important that you disclose investors or any other persons who may have a financial interest in the business to be licensed. Failure to do so may result in denial or revocation of your license.



OREGON LIQUOR CONTROL COMMISSION

Marijuana Business Limited Partnership Questionnaire

Section 1 – Business Information

Partnership Name:					
Mailing Address:					
City:		State:		ZIP:	
Business Phone:		Email:			

Section 2 – Partners

Check the box for “direct control” for any person or entity who may, other than as an employee acting under the direction of the owner:

- Exercise control over, or be entitled to exercise control over, the business.
- Incur, or be entitled to incur, debt or similar obligations on behalf of the business.
- Enter into, or be entitled to enter into, a contract or similar obligations on behalf of the business.

“Capital Investment” refers to all capital that the person has ever contributed to the partnership.

	Name of Partner (First & Last or Entity Name)	Date of Birth (MM/DD/YYYY)	General or Limited?	Capital Investment	Direct Control?
1.				\$	<input type="checkbox"/>
2.				\$	<input type="checkbox"/>
3.				\$	<input type="checkbox"/>
4.				\$	<input type="checkbox"/>
5.				\$	<input type="checkbox"/>
6.				\$	<input type="checkbox"/>
7.				\$	<input type="checkbox"/>
8.				\$	<input type="checkbox"/>
9.				\$	<input type="checkbox"/>
10.				\$	<input type="checkbox"/>

If your limited partnership has more than 10 partners, attach additional documentation as needed.

Section 3 – Other Interests

Yes

No

Is any person or entity entitled to a portion of the revenue of this business other than as a partner in the limited partnership? **(If yes, please attach a written explanation)**

Has any capital been invested in or loaned to the business other than by a partner in the limited partnership? **(If yes, please attach a written explanation)**

Signature: _____

Date: _____

Name: _____

Title: _____