



## TAX CREDIT ACCOUNTABILITY ACT REPORTING FORM

<b>Project ID Number:</b>	<b>Business/Organization Name:</b>		
<b>COMMUNITY DEVELOPMENT TAX CREDIT</b>			
<input type="checkbox"/> Family Development Account <input type="checkbox"/> Neighborhood Assistance Program <input type="checkbox"/> Transportation Development <input type="checkbox"/> Dry Fire Hydrant			
Title and Location of the corresponding project:			
Estimated or actual time period for completion of the project:			
All geographic areas impacted by the project:			
<b>REDEVELOPMENT TAX CREDIT</b>			
<input type="checkbox"/> Historic Preservation <input type="checkbox"/> Brownfield Redevelopment <input type="checkbox"/> CDC Bank			
Property use is: <input type="checkbox"/> residential <input type="checkbox"/> commercial <input type="checkbox"/> government purposes			
Projected or actual project cost:			
Labor costs:			
Date of Completion:			
<b>BUSINESS RECRUITMENT TAX CREDIT</b>			
<input type="checkbox"/> Enterprise Zone <input type="checkbox"/> Rebuilding Communities <input type="checkbox"/> Development Tax Credit Program (DTC) <input type="checkbox"/> Business Facility Program (BFC) <input type="checkbox"/> Film Production <input type="checkbox"/> Enhanced Enterprise Zone (EEZ) <input type="checkbox"/> Quality Jobs			
Business size: <input type="checkbox"/> <100 <input type="checkbox"/> 100-500 <input type="checkbox"/> >500			
Address of the business headquarters:			
All offices located within Missouri:			
Number of employees at the time of this annual update:			
Updated estimate of the number of employees projected to increase as a result of the completion of the project:			
Estimated or actual project cost:			
<b>HOUSING TAX CREDIT</b>			
<input type="checkbox"/> Neighborhood Preservation Act (NPA)			

PLEASE SIGN ON REVERSE SIDE →

Address of the property:			
Fair Market Value of the property:			
Projected or actual labor cost:			
Completion date of the project:			
<b>ENTREPRENEURIAL TAX CREDIT</b>			
<input type="checkbox"/> Small Business Incubator	<input type="checkbox"/> Guarantee Fee		<input type="checkbox"/> New Enterprise Creation Act
<input type="checkbox"/> Research Expense			
Amount of Investment:			
Name of the project:			
Name of the fund:			
Name of the Research project:			
<b>AGRICULTURAL TAX CREDIT</b>			
<input type="checkbox"/> Wine and Grape			
Type of agricultural commodity:			
Amount of contribution:			
Type of equipment purchased:			
Name and description of facility:			
<b>ENVIRONMENTAL TAX CREDIT</b>			
<input type="checkbox"/> Charcoal Producer			
Details of change to type of equipment purchased, if applicable:			
Any change to any environmental impact statement, if such statement is required by state or federal law:			
<b>Tax Credit Recipient or Authorized Agent Name (Printed):</b>			
<b>Signature of Tax Credit Recipient or Authorized Agent</b>		<b>Date</b>	

**Return form by JUNE 30 to:**  
Missouri Department of Economic Development  
Business and Community Finance  
PO Box 118  
Jefferson City, MO 65102