

# MISSOURI BUSINESS FACILITY CREDIT PROGRAM

# **ATTACHMENTS**

- Memorandum of Understanding (MOU) A copy of the executed MOU (electronically signed by company & DHS-USCIS) between the company / organization and the Department of Homeland Security, United States Citizenship and Immigration Services (DHS-USCIS) and the Social Security Administration must be on file for the company participating in the project.
- Employee Listing Attach a current listing of all full-time employees at the facility to be considered.

**Notice:** Tax credits may be claimed against taxes imposed by Chapters 143 (state income tax, excluding withholding tax), 148 RSMo (financial institution tax), and Section 375.916 (Insurance Co. Retaliatory Tax) and may not be carried forward; but shall be claimed within one year of the close of the taxable year for which they were issued.

## **Contact information:**

Missouri Department of Economic Development BCS, Business & Community Finance 301 W. High Street, Room 770 P.O. Box 118 Jefferson City, MO 65102-0118

Phone: 573-751-4539 Fax: 573-522-4322

www.missouridevelopment.org E-mail: dedfin@ded.mo.gov



# NEW/EXPANDED BUSINESS FACILITY CREDIT (HEADQUARTERS) - NOTICE OF INTENT Section 135.110 - 135.155, RSMO

,					,		··-·· seemon i	20.110 120	100,1101110	
Name o	f Facility						Federal ID No.	(FEIN)		
Facility Address Missouri T					Missouri Tax II	ax ID No.(MITS)				
City	y County				MISSC	MISSOURI Zip Code				
Does more than one company work from this project facility?				7?			l	Yes	No	
If yes, are the companies wholly-owned subsidiaries? Attach a copy of the organization chart illustrating the company ownership structure.						Yes	No			
	Commencement Date for New or Expanded Business Facility Project									
Has the company ever been convicted of a violation of the laws of any state and, or federal law?  If yes, provide the date, the Court, the charges at disposition and the case number.							Yes	No		
Has the "principal" (Chiefs Executive Officer, Chief Financial Officer, Principal, Managing Partner and, or Owner) ever been convicted of a violation of the laws of any state and, or federal law?							Yes	No		
If yes, provide the date, the Court, the charges at disposition and the case number.  Has the "contact" ever been convicted of a violation of the laws of any state and, or federal law?  If yes, provide the date, the Court, the charges at disposition and the case number.						Yes	No			
	act Information									
Business Contact Person Title										
								T = : - :	Ta: 0.1	
Address			City		State		Zip Code	Zip Code		
Telephone Number			Fax Number E-		E-ma	nail				
Preparer Contact Person			Title Co		Comp	npany				
Address			City		State	State		Zip Code		
Telephone Number			Fax Number E-m			E-ma	ail			
Comp	pany Description									
Describ	e the business activities to be co	nducted at this	s facili	ty (Be specific):						
Facili	ty Description – Check	all that ap	ply							
	Start-Up Company									
	New Facility									
	Replacement Facility (a new facility which replaces an old facility)									
	Expansion Facility									
	Moving from	(	Count	ty to		Count	tv			

### Certification

I, the undersigned, acting on behalf of the Applicant named below, hereby certify and agree to the following:

- The information submitted by the Applicant to DED in connection with the Project is true and correct and such information is consistent with documents provided to lenders, other government programs, or investors. The Applicant hereby authorizes DED to verify such information from any source:
- Neither the Applicant, nor any person actively engaged in the management of the Applicant:
  - a) Has committed a felony, is currently under indictment for a felony, or is currently on parole or probation;
  - b) Is delinquent with respect to any non-protested federal, state or local taxes or fees;
  - c) Has filed (or is about to file) for bankruptcy, unless otherwise disclosed to DED; or
  - d) Has failed to fulfill any material obligation under any other state or federal program;
- There are no pending or threatened liens, judgments, or material litigation against the Applicant or any person identified on the application which is likely to have a material impact on the Applicant's viability;
- Neither the operations of the Project itself nor the receipt of incentives for the Project would violate any existing agreement;
- The Applicant has obtained or is capable of obtaining all necessary federal, state and local permits and licenses for the Project;
- I certify that the applicant does NOT knowingly employ any person who is an unauthorized alien and that the applicant has complied with federal law (8 U.S.C. § 1324a) requiring the examination of an appropriate document or documents to verify that each individual is not an unauthorized alien;
- I certify that the applicant is enrolled and will participate in a federal work authorization program as defined in Section 285.525(6), RSMo, with respect to employees working in connection with the activities that qualify applicant for this program. I certify that the applicant will maintain and, upon request, provide the Department of Economic Development documentation demonstrating applicant's participation in a federal work authorization program with respect to employees working in connection with the activities that qualify applicant for this program;
- I certify that the Applicant shall include in any contract it enters with a subcontractor in connection with the activities that qualify applicant for this program, an affirmative statement from the subcontractor that such subcontractor is not knowingly in violation of Section 285.530.1, RSMo, and shall not be in violation during the length of the contract. In addition the Applicant will receive a sworn affidavit from the subcontractor under the penalty of perjury, attesting that the subcontractor's employees are lawfully present in the United States. I certify that the Applicant will maintain and provide the Department of Economic Development and Department of Revenue access to documentation demonstrating compliance with this requirement
- I understand that, pursuant to section 285.530.5, RSMo, a general contractor or subcontractor of any tier shall not be liable under section 285.525 to 285.550 when such general contractor or subcontractor contracts with its direct subcontractor who violates section 285.530.1, if the contract binding the contractor and subcontractor affirmatively states that the direct subcontractor is not knowingly in violation of section 285.530.1 and shall not henceforth be in such violation and the contractor or subcontractor receives a sworn affidavit under the penalty of perjury attesting to the fact that the direct subcontractor's employees are lawfully present in the United States;
- I understand that if the applicant is found to have employed an unauthorized alien, applicant maybe subject to penalties pursuant to Sections 135.815, 285.025, and 285.535, RSMo;
- I understand that if the applicant is found to have employed an unauthorized alien in Missouri and did not, for that employee, examine the document(s) required by federal law, the applicant shall be ineligible for any state-administered or subsidized tax credit, tax abatement or loan for a period of five years following any such finding;
- I attest that I have read and understand the Business Facility Headquarters Credit guidelines;
- I will inform DED if, at any time before project completion, there is any change to any of the certifications made herein;
- I hereby agree to allow representatives of the Department of Economic Development (DED), Department of Revenue, or either of their designated representatives, access to the property and applicable records as may be necessary for the administration of this program; and,
- I certify under penalties of perjury that the above statements and information contained in the application and attachments are complete, true, and correct to the best of my knowledge and belief.

I certify that I am a Corporate Officer/Member of the Applicant and have the proper authority to execute this document on behalf of the Applicant. I am authorized to make the statement of affirmation contained herein. I realize that failure to disclose material information regarding the Applicant, any owners or individuals engaged in the management of the Applicant, or other facts may result in criminal prosecution.

Applicant Signature	Title
Print Name	Date
COUNTY OF	
appeared [name of Corporate Officer/ I	], known to me to be the person who executed the within Agreement on
Notary Public	
(STAMP OR SEAL)	My commission expires
Mail all claims for tax benefits and all related inquiries to:  Business and Community Finance Missouri Department of Economic Development 301 W. High Street, Room 770  Jefferson City, MO, 65102	Effective August 28, 2005, pursuant to Section 620.1900, RSMo, this tax credit program is subject to a fee of 2.5% of the amount of tax credits issued. Applicants will be invoiced for the fee after the tax credit application has been approved. Tax credits will be issued upon receipt of the fee.



Missouri Business Facility Credit (Headquarters) – Facility Base Employment						
Companies should complete this form	n for the facility to be	e considered.				
Name of Company						
A 11						
Address						
City	County	State	Zip Code			
Full-Time Employees						
Month		# of Full-Time	Payroll of Full-Time			
(Most recent)	Year	Employees	Employees			
Average Full-Time Employees & Payroll						
(Average of Last 12 Months)						



~ 4	T 1	4	TO	4 •
Current	Hmni	ovment	Intor	matian
Cullent	Linhi	Oy michic	THU	manon

This listing should include all employees located at the facility and may be submitted in an Excel spreadsheet. Send electronically to <a href="mailto:dedfin@ded.mo.gov">dedfin@ded.mo.gov</a>, noting that the list is intended for use with the Business Facility Credit program. Attach a copy of this listing to the Notice of Intent.

	Last 4 digits of			
Name (Last, First)	SSN or Employee ID #	Date Hired	Average hours	worked annually
			3	v
Current Employment Number				
Taxpayer's or Designee's Signature	Title			Date
Preparer's Signature	Title			Date