

Minnesota Investment Fund (MIF) Program Application

State Funds

Please consult with your DEED Loan Officer before completing this application.

APPLICATION PROCEDURES

The Minnesota Investment Fund (MIF) Program provides loans to businesses that create or retain high-paying, full-time permanent jobs, and invest in machinery or real property acquisition or improvements. The program is available statewide for manufacturing, distribution, warehousing, and other eligible business activities that would not occur but for the MIF assistance. Applications are accepted on a year-round basis as funds are available.

To receive funds, a business must work in conjunction with the city or county government (Local Government) where the business will be located. In consultation with the Department of Employment and Economic Development (DEED), the Local Government will make a preliminary determination about whether a business meets the minimum program requirements. See the MIF eligibility information on the program [website](#) for guidance.

If a business is potentially eligible, the following steps are completed:

1. The business and Local Government work together to complete the MIF Application. The Local Government will submit the completed application to the designated DEED Loan Officer.
2. DEED evaluates the application and notifies the Local Government and business of approval or denial. If approved, DEED will determine a maximum funding amount and job creation requirements.
3. **Jobs created and capital investment expenditures may only be counted after the Grant Contract has been fully executed. The project should not commence prior to execution of the Grant Contract without prior authorization from the MIF Loan Officer.**

POST AWARD PROCESS

4. DEED and the Local Government will enter into a Grant Contract specifying the details of the award and job creation requirements.
5. After the Grant Contract is fully executed, the Local Government will enter into a Loan Agreement with the business.
6. The Local Government will submit the required executed agreements, payment request documentation, annual progress reports, and other information requested by DEED.
7. MIF funds will be paid on a **reimbursement** basis after required documentation verifying expenditures is submitted and approved.

SECTION 1 – Local Government Applicant Information

Local Government Applicant	Local Government Contact Name and Title
Email:	Telephone:
Address:	City/State/Zip:

PART A – Local Resources & Financing Request

- Does the Local Government have Revolving Loan Funds? Yes No
**Attach a copy of the Local Government's Revolving Loan fund Policies*
- What is the balance of the local revolving loan funds? _____
- What is the Local Government committing to this project? (e.g. TIF, RLF dollars, reduced price land, etc.)

- Is the applicant up to date filing Minnesota Business Assistance Forms? Yes No
- Is the applicant up to date with the filing of MIF Revolving Loan Fund annual reports? Yes No N/A
- What is the requested MIF loan amount? _____ Rate (0-3%)? _____ Term? _____
- Is Applicant proposing any loan forgiveness? Yes No
- If yes, what is the proposed amount to be forgiven? _____
- Explain the rationale for forgivable funding: _____
- What will the MIF funds be used for? (attach estimates) _____
- When was the Local Government's latest financial audit? (attach a copy of the audit results) _____

Part 1A attachments:

- RLF Policies Estimates for Item 10 Audit Results

PART B – Community Needs & Capacity

The project will be scored, in part, on the following community and economic development conditions. Include a project narrative which addresses the following areas as appropriate:

- Economic vulnerability of the community (e.g., need to diversify industrial base, underemployment of labor pool, labor pool needs);
- Unique factors demonstrating effective inducement of economic development (e.g., recent loss of large employer, labor pool dependent upon one sector or industry, seasonality of employment, natural disaster, filling long vacant space, long-term member of business community, contributes to cluster industry, tax base increase);
- Lack of local jobs (e.g., recent population decline due to lack of employment, significant outmigration, or population working outside the community);
- Project will support the economic viability of underserved businesses (i.e., veteran, minority, disabled, or women owned). If applicable, business must complete self-certification on page 17;
- Describe the Local Government's experience and ability to manage the grant, revolving loan fund, state and local compliance requirements, and the implementation of the project.
- Describe how the MIF project will strengthen and/or diversify the local or Minnesota economy.

Part 1B attachments:

- Narrative Items 1-6

PART C – Citizen Participation

1. A public hearing is required to provide citizen notification and involvement prior to submitting the application. Submit a copy of the public hearing minutes, a copy of the Public Hearing Notice and Affidavit of Publication, and the Local Government Resolution.

**Required templates of the Public Hearing Notice and the Local Government Resolution are attached as Exhibits A & B. If the Local Government is not a city, county, town or tribal government (i.e., economic development authority, housing & redevelopment authority, or port authority), an additional resolution is required. Contact your Loan Officer for the required template.*

Part 1C attachments:

- Public Hearing Minutes Public Hearing Notice Affidavit of Publication Resolution

PART D – Business Credit Check

Provide a short narrative describing the steps completed for due diligence. The following information searches on the business and owners holding 10 percent or more of the business must be acquired and reviewed prior to passing the Local Government Resolution:

- Google news
- Secretary of State Good Standing
- property tax status
- lien/judgment
- criminal record
- pending lawsuit
- credit status
- bankruptcy

Part 1D attachments:

- Due Diligence Narrative

PART E - Other Assistance

List and provide amount of other public financial assistance and location in which the business has received **within the last five years** or expects to receive related to this expansion from state or local governments, such as loans, grants, or project specific tax benefits (e.g., tax increment financing, tax abatements, tax refunds):

Subsidy Grantor	Subsidy Amount	Date Received/Will be Received	Type of Subsidy	Location where Subsidy Received/Used
Example: City	\$100,000	01/01/2016	Loan	Saint Cloud, MN

PART F – Financial Analysis

1. The Local Government must conduct a financial underwriting analysis of project/business financials for the proposed project. Provide a narrative of the findings of your financial analysis.
2. Please attach a copy of the lead lender’s credit presentation with this application, if available.

Part 1F attachments:

- Financial Analysis Narrative Lender’s Credit Presentation

PART G – Project Compliance with State Statutes & Rules

All businesses receiving a MIF loan must abide by the following statutes and rules:

1. Minnesota Statutes, Section 181.59. Prohibits discrimination in contracts.
2. Minnesota Statutes, Section 363A.08. Prohibits unfair discrimination practices related to employment or unfair employment practices.
3. Minnesota Statutes, Chapter 363A Minnesota Human Rights Act. Requires that all public services be operated in such a manner that does not discriminate against any person in the access to, admission to, full utilization of or benefit from such public service.
4. Minnesota Statutes, Section 176.181, subd. 2. Requires recipients and subcontractors to have worker's compensation insurance coverage.
5. Minnesota Statutes, Sections 290.9705. Requires that 8 percent of payments made to out-of-state contractors be withheld once cumulative payments made to the contractor for construction work done in Minnesota exceed \$50,000 in a calendar year, unless a waiver is granted by the Department of Revenue.
6. Minnesota Statutes, Section 116J.871. Requires recipients of \$500,000 or more of state loan funds to be used for construction to ensure that prevailing wages are paid to laborers and mechanics at the project construction site.
7. Minnesota Statutes, Section 16B.98 and Department of Administration, Office of Grants Management, Policy Number 08-01 Conflict of Interest Policy for State Grant-Making. Forbids public officials from engaging in activities which are, or have the appearance of being, in conflict of interest.
8. Minnesota Statutes, 116J.993-995. Business Subsidy laws apply to this project.
9. Minnesota Statutes, 116J.8731. Minnesota Investment Fund laws apply to this project.
10. Minnesota Investment Fund, Rules Chapter 4300.
11. Minnesota Statutes, Chapter 13. The Minnesota Government Data Practices Act provides guidance on data privacy related to this project.

Local Government Certification:

If an award is provided for the project, the information contained in the application will become a matter of public record with the exception of those items protected under the Minnesota Government Data Practices Act found in Minnesota Statutes, Chapter 13. I also certify compliance with the appropriate State Statutes and Rules as stated in the accompanying Local Government Resolution.

I have read the above statement and I agree to supply the information requested to the Minnesota Department of Employment and Economic Development, Office of Business Finance with full knowledge of the information provided herein. I certify the information contained herein is true and accurate.

Name/Title of Local Government Official

Signature of Local Government Official

Date

Conflict of Interest Disclosure Form

This form gives Local Government agencies an opportunity to disclose any actual, potential or perceived conflicts of interest that may exist when receiving a grant. It is the agency's obligation to be familiar with the Office of Grants Management (OGM) [Policy 08-01](#), Conflict of Interest Policy for State Grant-Making and to disclose any conflicts of interest accordingly.

All Local Government applicants must complete and sign a conflict of interest disclosure form.

I or my agency do NOT have an ACTUAL, POTENTIAL, or PERCEIVED conflict of interest.

If at any time after submission of this form, I or my agency discover any conflict of interest(s), I or my agency will disclose that conflict immediately to the appropriate agency or grant program personnel.

I or my agency have an ACTUAL, POTENTIAL, or PERCEIVED conflict of interest. *(Please describe below):*

If at any time after submission of this form, I or my agency discover any additional conflict of interest(s), I or my agency will disclose that conflict immediately to the appropriate agency or grant program personnel.

Printed name

Signature

Local Government Agency

Date

LOCAL GOVERNMENT RESOLUTION EXAMPLE

MINNESOTA INVESTMENT PROGRAM

This resolution must be adopted prior to submission of the application.

BE IT RESOLVED that (Applicant) act as the legal sponsor for the project contained in the Minnesota Investment Fund Application to be submitted on or about (Date) and that (Title of First Authorized Official) and (Title of Second Authorized Official) are hereby authorized to apply to the Department of Employment and Economic Development for funding of this project on behalf of (Applicant).

BE IT FURTHER RESOLVED that (Applicant) has the legal authority to apply for financial assistance, and the institutional, managerial, and financial capability to administer the proposed project.

BE IT FURTHER RESOLVED that (Applicant) has not violated any Federal, State, or local laws pertaining to fraud, bribery, kickbacks, collusion, conflict of interest or other unlawful or corrupt practice.

BE IT FURTHER RESOLVED that upon approval of its application by the State, (Applicant) may enter into a Grant Contract with the State of Minnesota for the approved project, and that (Applicant) certifies that it will comply with all applicable laws, statutes, regulations and rules as stated in the Grant Contract and described in the Project Compliance Certification of the Application.

AS APPLICABLE, BE IT FURTHER RESOLVED that (Applicant) has obtained credit reports and credit information on (Name of Business) and (Name of Owners). Upon review by (Applicant) and (Applicant's Legal Counsel), no adverse findings or concerns regarding, but not limited to, tax liens, judgments, court actions, and filings with state, federal and other regulatory agencies were identified. Failure to disclose any such adverse information could result in revocation or other legal action.

NOW, THEREFORE BE IT RESOLVED that (Title of First Authorized Official) and (Second Authorized Official), or their successors in office, are hereby authorized to execute the Grant Contract and amendments, thereto, as are necessary to implement the project on behalf of the (Applicant).

I CERTIFY THAT the above resolution was adopted by the (City Council or County Board) of (Applicant) on (Date).

*Add signature blocks as required by your jurisdiction.

PUBLIC HEARING NOTICE EXAMPLE

Notice of Public Hearing

Notice is hereby given that on (date/time) at (location details) the (local unit of government) will hold a public hearing concerning submittal of an application to the Minnesota Department of Employment and Economic Development for a grant under the Minnesota Investment Fund (MIF) program.

The (local unit of government) is requesting approximately \$ (amount of MIF funds to be requested) to assist with the (start-up or expansion) of (name of business). The funds will be used for the creation of jobs.

All interested parties are invited to attend the public hearing at which time you will be given the opportunity to express comments on the project.

Written testimony will also be accepted at the public hearing. Written comments must be received by (date) at (address). Specific questions can be directed to (contact name and phone number).

The (local unit of government) makes reasonable accommodation for any known disability and to meet the needs of non-English speaking residents that may interfere with a person's ability to participate in this public hearing. Persons needing an accommodation must notify (contact person, phone number) no later than (date) to allow adequate time to make needed arrangements.

SECTION 2 – Business Information

Business Operating Name:	Business Legal Name:
Name of Borrower (if different):	Parent Company (if applicable):

Business Mailing Address:	Street Address for MIF Project Site:
Business City/State/Zip:	City/State/Zip for MIF Project Site:
Primary Business Contact:	Contact Title:
E-mail:	Telephone:
Business Website:	FEIN:
NAICS Code:	Minnesota Tax ID:

PART A – Business Description

Describe the business and its major activities.

1. Please attach a narrative and include the following information:
 - a. Business overview and company history
 - b. Product or industry outlook for the MIF project
 - c. Markets for the MIF Project (local, statewide, national, international) & competitive advantage for each
2. Attach three years historical financials (profit & loss/balance sheets), 2 years financial projections, and year to date internally generated financials. If available, audited or reviewed financials are required. If not available, copies of tax returns will be required.
3. Indicate type of business & provide documentation listed:
 - Corporation: Articles of Incorporation, By-Laws, Certificate of Incorporation
 - Partnership: Partnership Agreement
 - LLC: Articles of Organization, Operating Agreement, Member Control Agreement, Certificate of Organization
 - Sole Proprietorship: Assumed Name Certificate, Affidavit of Publication
 - Foreign Corporation: Certificate of Authority to Transact Business in Minnesota and in home state
4. Does the property or the business have any outstanding local, state or federal tax liabilities? Yes No
If yes, describe: _____
5. Are there current or unsatisfied judgments or injunctions against the business or owners? Yes No
If Yes, describe: _____
6. Is there current or pending litigation involving the business? Yes No
If yes, attach summary and disposition.
7. Within the past five years, has there been any violation(s), citation(s), or complaint(s) of discrimination filed against the company in a state or federal court or before any state, federal or Local Government agency?
 Yes No If Yes, attach a copy of the violation(s), citation(s), or complaint(s) and the disposition of each.

- 8. Have there been any current or past bankruptcies on the part of the business, or on the part of any current (or prospective) officer, principal, owner or in any business dealings of current (or prospective) officers, principals, or owners of the applicant entity? Yes No
- 9. List holders of outstanding stock of 10% or more of business ownership. For holders over 20% and holders over 10% that are active in the business, personal financial statements must be submitted.

Name	Title	% of Ownership

10. List officers / key employees and include resumes (President, Vice President, etc.):

Name	Title	Years at Company

Part 2A attachments:

- Narrative (Items a-c) 3 Yrs. Financials 2 Yrs. Projections YTD Financials Item 3 Documents
- Item 6 (if applicable) Item 7 (if applicable) Personal Financial Statements Resumes

SECTION 3 – Project Overview

PART A – Project Description

Describe the project for which MIF funds are being requested.

- 1. Please attach a narrative and include the following information:
 - a. Provide details for the project for which MIF funds are being requested. Discuss topics such as square footage, lease versus ownership, machinery and equipment, new construction versus renovation, leasehold improvements, etc.
 - b. Is this a new facility/site, expansion and/or acquisition?
 - c. Will the business purchase, lease, or construct the facility? Who will own the facility?
 - d. Explain why MIF financing is necessary for this project to move forward (e.g. financing gaps, lack of collateral, potential non-Minnesota locations).
- 2. Attach a commitment letter from each financing source, including a letter of commitment for any business equity.

Part 3A attachments:

- Project Narrative (Items a-d) Commitment Letters

PART B – Project Timeframe

Task	Estimated Completion Date
Commitment of Funds	_____
Start of Construction	_____
Purchase Equipment	_____
Equipment in Service/Occupancy (for MIF funded activities)	_____

PART C – Project Sources & Uses

Use of Funds	MIF	Bank	Equity	Local Government	Other	Total
Property Acquisition						
Site Improvement						
New Construction						
Renovation of Existing Bldg.						
Purchase of M & E						
Other						
Total Project Cost						
Term (years)						
Interest Rate						

- Do you acknowledge that Personal or Parent Company Guarantees are required as a condition of the MIF loan? Yes
- Describe source of any "Equity" listed: _____
- Description of "Other" source of funds: _____
- Description of "Other" use of funds: _____
- Describe collateral offered and collateral position for each funding source, including proposed MIF award (e.g. Letter of Credit, Lien on Equipment, Mortgage):

Source	Collateral	Position
MIF		

PART D – Detailed Job & Wage Information

- Current number of permanent, FTE employees in Minnesota: _____
- Current number of permanent, FTE employees at proposed MIF project site: _____
**Provide a most recent payroll report to document current employment levels. Social security numbers and other sensitive information should be redacted.*
- Will any jobs be relocated from another Minnesota site to the proposed MIF site? Yes No
- If yes, which location(s) will the employees be relocated from? _____ # of Positions _____
**For jobs relocated from another Minnesota location, a letter in support of the move from the city where the jobs will be moving from must be attached.*
- Will there be any reduction of positions (non-transfers) at other company sites during the next two years, or a reduction in purchases from Minnesota suppliers or vendors as a result of the project? If yes, please describe.

- Number of new FTE jobs to be created within 2 years at the MIF Project site: _____
**Full-time equivalent (FTE) permanent jobs based upon expected work hours of 2080 annually*
- Which eligible non-mandated benefits will be provided?
 - Health Dental Retirement Life Profit Sharing/Bonuses

Part 3D attachments:

- Payroll Report Letter of Support (if applicable)

JOB CREATION FORM – List All Permanent Jobs to Be Created

Position title (List permanent FTE positions only)*	Number of Positions	Hourly Cash Wage W/O Benefits ****	Hourly Value of Benefits**	Total Hourly Compensation Including Benefits***

Total jobs to be Created: _____ **Average hourly wage:** _____ **Average hourly benefits:** _____

**For the purposes of the Minnesota Investment Fund program, jobs considered must be non-contract, non-seasonal, permanent full-time (or part time that add to 2080) equivalent positions working at least 2080 hours per year.*

*** Only eligible non-mandated benefits to the employee as indicated in Part D question #8. Social security tax, unemployment insurance, workers compensation insurance and other benefits mandated by law must be excluded.*

**** Total compensation including base wage and benefits must be at least 110% of the federal poverty income level for a family of four (verify current wage levels with loan officer at the time of application).*

***** Each wage level should be indicated separately, do not use average wages.*

PART E - Environmental

1. Are there any environmental risks associated with the site, building, or the business itself? Yes No
If yes, please describe:

2. Have state environmental review requirements been met? Yes No N/A

SECTION 4 – Business Acknowledgement and Certifications

Data Privacy Acknowledgement:

Tennessen Warning Notice: per MN Statutes 13.04, Subd.2, this data is being requested from you to determine if you are eligible for assistance from the Minnesota Department of Employment and Economic Development. You are not required to provide the requested information, but failure to do so may result in the department’s inability to determine your eligibility for assistance. The data you provide that is classified as private or non-public and will not be shared without your permission except as specified in state and federal laws.

Data Privacy Notice: per MN Statutes 13.591, Subdivision 1, certain data provided in this Application is private or non public data; this includes financial information about the business, including credit reports, financial statements, net worth calculations, business plans; income and expense projections; balance sheets; customer lists; income tax returns; and design, market, and feasibility studies not paid for with public funds. Per MN Statutes 116J.401, Subd. 3., certain data provided in this application is private data; this includes data collected on individuals pursuant to the operation of business finance programs.

Business Certification:

Financial Assistance Certification: I hereby certify that the Minnesota Investment Fund program is necessary to my business start-up or expansion and that without the Minnesota Investment Fund my business start-up or expansion project would not happen to the extent outlined in the Minnesota Investment Fund Application. I certify that I will not count any existing positions or employees moved or relocated from another of Minnesota facility where my business conducts operations as new permanent full-time employees for the purposes of fulfilling requirements of the Minnesota Investment Fund Program. I certify I will not terminate, lay-off, or reduce the working hours of an employee for the purpose of hiring an individual to fulfill the requirements of the Minnesota Investment Fund Program.

I have read the above statements and I agree to supply the information requested to the MN Department of Employment and Economic Development, Office of Business Finance with full knowledge of the information provided herein. I certify that all information provided herein is true and accurate and that the official signing this form has authorization to do so.

Name/Title of Business Official: _____

Signature of Business Official: _____ Date: _____

Job Listing Notice

A business receiving financial assistance from the State of Minnesota in an amount in excess of \$200,000 for a single project shall work with DEED's Employment and Training staff to list any vacant or new positions related to the project on www.careerforcemn.com per Minn. Stat. 116L.66. The employer is also encouraged to enlist the services of DEED's Employment and Training staff to recruit and refer job candidates.

The Job Listing requirements follow these easy steps:

1. At the time of financing award, DEED's Business Finance Office will provide written notification of the award to DEED's Employment and Training staff. This notification will include the business name, address and phone number (as well as for the contact person) and the number and type of jobs to be created as a result of the DEED assistance.
2. The Employment and Training representative will contact the business to schedule a meeting to sign a Job Listing Agreement that details how positions will be posted on www.careerforcemn.com. The employer is required to list only those job openings that are part of the project DEED is assisting.
3. Managerial positions, positions that require unusual skills, knowledge, abilities and/or experience not common to the labor market, and job openings to be filled by internal promotion will not subject to the Agreement and need not be listed on www.careerforcemn.com.
4. The business will notify the Employment and Training staff of job openings and will ensure that job vacancies are entered into www.careerforcemn.com at least 15 days prior to the anticipated hiring date. Employment and Training staff may refer the employer to free services that can expedite the job order entry.
5. Applicants will follow instructions on www.careerforcemn.com to apply for open positions. However, the business will make all decisions on which candidates they will interview and hire.
6. The employer may continue to use other recruitment and job referral services in addition to www.careerforcemn.com and may fill positions prior to meeting with Employment and Training staff and signing the Job Listing Agreement.

The Job Listing Notice is designed to help businesses recruit and hire qualified candidates. If you have questions about using www.careerforcemn.com, please contact your Employment and Training (<https://mn.gov/deed/business/help/workforce-assistance/wf-strategy.jsp>) or the www.careerforcemn.com Help Desk Specialist at (651) 259-7500.

Certification

I have read the above information and understand that as a recipient of state financial assistance in excess of \$200,000, a representative shall meet with DEED Employment and Training staff and agree to sign a job listing agreement and post project-related jobs on www.careerforcemn.com following the meeting.

Printed Name and Title of Business Contact

Phone

Signature

Date

Prevailing Wage Certification

Businesses receiving an award from the State of Minnesota of at least \$500,000 must complete this certification which explains the prevailing wage requirements for this project.

I certify as follows:

I have the following relationship with the business named below, which is a Recipient of benefits from the Minnesota Investment Fund, and am authorized to act on behalf of the business:

Relationship to Recipient business (i.e., President, Vice President, owner, partner, etc.):

Name of Recipient business:

The Recipient business intends to construct, make improvements or purchase equipment to its Project at the following address:

Facility address:

The construction, improvements or installation of equipment directly financed with \$500,000 or more of state loan funds for the Recipient's Project at the address in Paragraph 2 will involve the employment of laborers, workers, or mechanics for erection, construction, installation, remodeling or repair activities.

Because the Recipient is receiving an award under the Minnesota Investment Fund and because the construction or improvements referenced above will involve the employment of laborers, workers, or mechanics for erection, construction, installation, remodeling or repair activities, the Recipient:

Agrees all such persons will be paid the prevailing wage rate, as defined in Minn. Stat. § 177.42, subd. 6, as required under the laws of the State of Minnesota, and

Understands that failure to pay prevailing wage is a misdemeanor and that each day of violation is a separate offense.

Authorized Signature

Printed Name

If you have questions about these requirements, please visit <http://www.dli.mn.gov/LS/PrevWage.asp> or call the Minnesota Department of Labor and Industry at 651-284-5091.

Consent to Release Private Business Employment and Wage Data

Collected and Maintained by the Minnesota Unemployment Insurance Program

To qualify for financial assistance from the DEED Office of Business Finance, your business must agree to create or retain a minimum number of jobs within a specific period of time. These jobs must also pay at or above specified wage levels.

To verify that these requirements have been met, the Office of Business Finance uses quarterly wage records submitted by businesses to the Minnesota Unemployment Insurance Program.

Because Unemployment Insurance records are private, we need your permission to access records about your business. The records we seek to access include:

- Aggregate Minnesota employment levels for your business
- Aggregate Minnesota employment levels at the relevant project site
- Information about your compliance with Unemployment Insurance tax and reporting requirements

It is important to note that we will not receive the names or social security numbers of your employees.

If you sign this form, your records will be securely transmitted by Unemployment Insurance Program staff to the Office of Business Finance. The Office of Business Finance will receive your Unemployment Insurance records on an ongoing basis until your business subsidy agreement expires or is terminated. We will not release any data from your Unemployment Insurance records to any other parties.

You are not legally required to grant us access to your Unemployment Insurance records. You also have the right to withdraw your permission at any time. Please note, however, that refusal to grant access to your Unemployment Insurance records may limit your eligibility for financial assistance.

If you have questions about this form, please contact Bob Isaacson, Executive Director, Office of Business Finance at 651-259-7458 or bob.isaacson@state.mn.us.

I give my permission for the Unemployment Insurance Program to release the records about my business (as described in this form) to the DEED Office of Business Finance. I understand that these records will be used by the Office of Business Finance to verify the satisfaction of requirements associated with my business subsidy agreement.

Signature of Business Official	Business Name	Date
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Printed Name of Business Official	Position
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E-mail	Phone
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Employer Identification Number (EIN) Used for Project Site
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Other Employer Identification Numbers (EINs) Used by Business

Notice: Accurately Reporting Business Units to the Minnesota Unemployment Insurance Program

This notice is a reminder that Minn. Stat. § 268.044 requires your business to submit quarterly wage records to the Minnesota Unemployment Insurance Program by “reporting unit”.

You have the option to split reporting units for your business by physical location, financial centers, division of labor, or user security requirements. For the purposes of monitoring job creation and wage level performance per your business subsidy agreement, the Office of Business Finance strongly recommends creating a specific reporting unit for the relevant project site.

Reporting units can be added or modified as follows:

To add a reporting unit:

1. **Log in to your account** at www.uimn.org
2. On My Home Page, click **Account Maintenance**.
3. Click **Maintain Reporting Units**.
4. Click **Add New Reporting Unit**.
5. Enter reporting unit information.
6. Click **Next**. The Address Validation page opens.
7. Confirm the address, and then click **Next**.
8. Verify the reporting unit information.
9. Click **Submit**.

To inactivate a reporting unit:

1. **Log in to your account** at www.uimn.org
2. On My Home Page, click **Account Maintenance**.
3. Click **Maintain Reporting Units**.
4. Under Active Reporting Units, click the reporting unit link.
5. Under Inactivate Reporting Unit, check the checkbox **Inactivate Reporting Unit**.
6. Enter the date of last covered wages for this reporting unit.
7. Select the reason for inactivating this reporting unit from the drop down menu, and then click **Next**.
8. Verify the reporting unit information and benefit account mailing address.
9. Click **Save**.

If you have any questions about reporting units or other aspects of the Unemployment Insurance wage detail submission process, contact Aaron Tell, Unemployment Insurance Outreach Specialist, at 651-259-7567 / aaron.tell@state.mn.us.

Signature of Business Official

Company

Date

Printed Name of Business Official

Position

E-mail

Phone

Targeted Population Designation Characteristics

In order to qualify for Targeted Population Designation, the business must be majority (at least 51%) owned by persons who meet certain qualifying characteristics. One or more individuals may be included when determining eligibility. Please provide information regarding qualifying characteristics of the owner(s). Check all that apply:

Minority

Minority group members are citizens (or lawfully admitted permanent residents) of the United States who belong to one or more of the following groups:

- a) "Black Americans," which includes persons having origins in any of the Black racial groups of Africa;
- b) "Hispanic Americans," which includes persons of Mexican, Puerto Rican, Cuban, Dominican, Central or South American, or other Spanish or Portuguese culture or origin, regardless of race;
- c) "Native Americans," which includes persons who are American Indians, Eskimos, Aleuts, or Native Hawaiians;
- d) "Asian-Pacific Americans," which includes persons whose origins are from Japan, China, Taiwan, Korea, Burma (Myanmar), Vietnam, Laos, Cambodia (Kampuchea), Thailand, Malaysia, Indonesia, the Philippines, Brunei, Samoa, Guam, the U.S. Trust Territories of the Pacific Islands (Republic of Palau), the Commonwealth of the Northern Marianas Islands, Macao, Fiji, Tonga, Kiribati, Juvalu, Nauru, Federated States of Micronesia, or Hong Kong;
- e) "Subcontinent Asian Americans," which includes persons whose origins are from India, Pakistan, Bangladesh, Bhutan, the Maldives Islands, Nepal or Sri Lanka;

Woman

Veteran

Veteran means a citizen of the United States or a resident alien who has been separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty for 181 consecutive days or by reason of disability incurred while serving on active duty, or who has met the minimum active duty requirement as defined by Code of Federal Regulations, title 38, section 3.12a, or who has active military service certified under section 401, Public Law 95-202. The active military service must be certified by the United States secretary of defense as active military service and a discharge under honorable conditions must be issued by the secretary.

Person(s) with disabilities

The term "disability" is defined under the Americans with Disabilities Act and means, with respect to an individual:

- a) a physical or mental impairment that substantially limits one or more major life activities of such individual;
- b) a record of such an impairment; or
- c) being regarded as having such an impairment.

I certify that the business is at least 51% owned by person(s) who are representative of one or more of the qualifying groups.

Name/Title of Authorized Business Representative

Signature of Authorized Business Representative

Date