

subsidy. The new threshorequirement also to \$150 periods under the old the loans. (See §116J.993, Seavailable on the DEED we Please use this form to rethrough 2023 that fall urprovide the status of the be used to help the legisted development activities a reports are required. Questions? Call (651) 25 Employment and Econor	old is \$150,000 for either a group of the project o	6J.995 adjusted the level of we grant or loan, and raises the the public financial participation at Report Year 2024 2023 2-24 2-2024 2-24 eted form before April 1 to Mile Analysis Unit, 2. Paul MN 55101; or fax to: (6)	reshold for a public hearing re still required for two year 150,000 in 15 are ear 2008 ort to 16 nered will 16 nic 16 tional		
Section 1: (Grantor Informa	ation)				
Name of grantor (funding entity): Benton County		Name of person completing this form: Amanda Othoudt			
3. Street address:		4. City:	5. ZIP Code:		
531 Dewey Street PO	Box 129	Foley	56329		
6. County: Benton	7. Phone number: 320-968-5000	8. Fax number:	9. Email address: aothoudt@bentonpartnership.org		
10. Classification of grantor affiliation. For example, a confidence in City government State government		ment Reg	ency, please indicate ional government		
Section 2: Recipient Inform	ation				
11. Name of business or org		12. Address where financial assistance will be used:			
financial assistance: Midas Trucking, Inc.		Street address: 2501 Little Rock Road NE City/State/ZIP Code: Sauk Rapids, MN 56329			
13. Type of organizational structure of recipient receiving financial assistance (Mark one)					
✓ C-Corporation S-Corporation Limited Liability Company (LLC Other (Please specify):		ited Liability Company (LLC)			
14. Does the recipient have a parent corporation? (Mark one.)					
☐Yes (Indicate name a ☑No	nd address of the parent co	rporation below. If more than	one, indicate ultimate owner.}		
Name of parent corporation:					
Street address: City/State/ZIP Code:					
15. Recipient's primary industry (Mark one.):					
☐ Manufacturing ☑ Retail Trade	☐Services ☐ Wholesale Trade ☐	Finance, Insurance, Real Est Construction	ate		
 □Other (please specify	THE STREET STREET, STR				

Section 3: Agreement Info	rmation		E	
Section 3: Agreement Information 16. Project Start Date: January 3, 2022		17. Expected Project Completion Date: January 2024		
		h sources/use statement if a	vailable). The table should	
include all funding sources		1		
Identify Private or Public Participant	(\$) Value	Type of Assistance (grant, loan, TIF, TAF, etc.)	Use of Funds (i.e., infrastructure, cleanup, capital improvement)	
Frandsen Bank Foley	\$ 2,800,000	Bank Loan	Company Aquisition	
Owner Equity	\$ 350,000	Equity	Closing Cost	
Benton County RLF	\$ 125,000	Revolving Loan	Equipment	
Initiative Foundation	\$ 175,000	Revolving Loan	Equipment	
Seller Financing	\$ 50,000	Loan	Company Acquistion	
Total Project Budget (all sou	urces): 3,500,000			
Your public participation pe	rcentage of total budget: 3	.5%		
	200 St. 200 St		Which of the following public	
purposes were used to dete				
Enhancing economic		abilizing the community		
✓ Creating high-quality		creasing tax base (cannot be	only purpose)	
✓ Job retention	50 60 60	ther (please specify):		
NOTE: If job creation or re	tention is not a goal then p	lease skip to Question 21.		
Section 4: Goals and Actual Performance				
20. Job Creation and/or Retention Goals (first year report) and Actuals (second year report):				
For each of the following categories if required, indicate the (new) job creation and/or retention goals stated in the financial assistance agreement and the number of actual (new) jobs created and/or retained since the benefit date including the average hourly value of any employer-provided benefits goals for those jobs.				
agreement in which employees job in which an employee work	s are scheduled to work on ave ks for the recipient at a rate le	ss than 40 hours per week withi	eek. Part-time is defined as a new n a recipient location). Job	
retention is defined as jobs at a specific wage level that exist prior to the signing of the financial assistance agreement. There must be evidence that the retained jobs will be lost without financial assistance or where job loss is specific and demonstrable.				
	Total Number of	Average Hourly Wage	Average Hourly Value of	
N NO 4008	Employees	Level	Health Insurance	
(New) Full-time	2	28.85		
Job Creation (Goals) (New) Part-time				
Job Creation (Goals)				
Job Retention (Goals)	20	28.85		
	20	20.00		
(New) Full-time				
Job Creation (Actuals)				
(New) Part-time	1		10 May 10	
Job Creation (Actuals)				
Job Retention (Actuals)	18	28.85		
21. What is the status of the project and how successful have they been in meeting stated goals? Larry paid off the RLF with the county in full in August 2023. Larry attributes the loss of employees to the slowing economy, and high inflation.				