

	subsidy. The new threshold is \$150,000 for either a grant or loan, and raises the threshold for a public hearing requirement also to \$150,000. However, reports of public financial participation are still required the old threshold levels of I									
	loans. (See §116J.993, Se available on the DEED we Please use this form to rethrough 2022 that fall ur provide the status of the be used to help the legis development activities a reports are required.	ection 2, Subdivisi ebsite. eport on all finan- nder the old thres project towards I lative body under	MBAFY Region ( Date Re		ist	-				
	Questions? Call (651) 25 Employment and Econor Minnesota Street, Suite	nic Development, E	conomic /	Analysis Unit, First Natio	onal E					
	Section 1: (Grantor Information)									
	1. Name of grantor (funding entity): City of Eyota			2. Name of person completing this form:  Cathy Enerson						
	3. Street address: 38 South Front Stree	et		4. City: Eyota		5. ZIP Code: 55934				
- 1	6. County: DImsted	7. Phone number: 507-545-213		8. Fax number: 507-545-2235		9. Email address: cathy.enerson@cedausa.com				
- 1	10. Classification of grantor (Mark one. If grantor is entity created by government agency, please indicate affiliation. For example, a city EDA would check "City government.")									
	<ul><li>✓ City government</li><li>✓ County government</li><li>✓ Regional government</li><li>✓ State government</li><li>✓ Other (Please specify):</li></ul>									
F	Section 2: Recipient Information									
				12. Address where financial assistance will be used:						
financial assistance:				Street address: 417 2nd st SW						
-	_ittle Eagles, l		City/State/ZIP Code: Evota, MN 55934							
13. Type of organizational structure of recipient receiving financial assistance (Mark one)										
	☐ C-Corporation ☐ S-Corporation ☐ Other (Please specify):			Limited Liability Company (LLC)						
14. Does the recipient have a parent corporation? ( <i>Mark one.</i> )										
	Yes (Indicate name and address of the parent corporation below. If more than one, indicate ultimate owner.)									
	✓ No									
	Name of parent corporation:									
	Street address:									
	City/State/ZIP Code:									
	15. Recipient's primary ind	ustry (Mark one.):								
	Manufacturing	Services	·	Finance, Insurance, Re	al Est	ate				
	Retail Trade	☐Wholesale Tra	ade [	]Construction						

Other (please specify):

Section 3: Agreement Info	ormation						
16. Project Start Date: 2017		17. Expected Project Com 2019 /2/20 3	pletion Date:				
B. Please specify all funding sources for project (attach sources/use statement if available). The table should							
clude all funding sources used by the recipient to fund the project:							
Identify Private or Public	(\$) Value	Type of Assistance	Use of Funds (i.e.,				
Participant		(grant, loan, TIF, TAF,	infrastructure, cleanup, capital				
		etc.)	improvement)				
Public	\$ 68000	TIF	Child care center infrastructure				
Public	\$ 50000	TAF	City Land was sold for \$1				
PAVATE	\$ 1 082 000	111.					
1.10:112	\$ 7000						
	\$						
Total Project Budget (all sources): 1,200,000							
our public participation percentage of total budget: 9%							
9. Minn. Stat. §116J.994 requires that financial assistance meet a public purpose. Which of the following public							
urposes were used to determine your participation? (Mark all that apply.)							
✓ Enhancing economic diversity ✓ Stabilizing the community							
Creating high-quality job growth							
Job retention Other (please specify):							
OTE: If job creation or retention is not a goal then please skip to Question 21.							
ection 4: Goals and Actual Performance							
10. Job Creation and/or Retention <b>Goals</b> (first year report) and <b>Actuals</b> (second year report):							
for each of the following categories if required, indicate the (new) job creation and/or retention goals stated in the financial							
issistance agreement and the number of actual (new) jobs created and/or retained since the benefit date including the							
verage hourly value of any employer-provided benefits goals for those jobs.							
(Full-time jobs are defined as new, permanent, non-seasonal positions created subsequent to the financial assistance agreement in which employees are scheduled to work on average at least a 40 hour work week. Part-time is defined as a new iob in which an employee works for the recipient at a rate less than 40 hours per week within 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 Wa					
	Employees	Level	Health Insurance				
(New) Full-time							
Job Creation ( <b>Goals</b> )							
(New) Part-time							
Job Creation (Goals)							
Job Retention (Goals)							
(A) - A F. II Alman	The state of the state of	AND THE RESERVE OF THE					
(New) Full-time Job Creation (Actuals)							
(New) Part-time							
Job Creation (Actuals)							
Job Retention (Actuals)							
Total (House)							
TIF for child care deve		front for the projet loan	, and tax abatement used to				
pay the city back for its	s land it gave to the pro	jet for \$1. The land was	s also used as collateral for				
Cund Cares - for	3,000 in public assistan 78 Children People	LUCE mount due to la	Whateo their Sye annivers				
Page 2	,	_	ancial Assistance Form (12/15/22				
~g~ -		iriiiiiCoota i iii					