



Rhode Island Commerce
CORPORATION

Rhode Island Qualified Jobs Incentive Tax Credit Application Materials

Rhode Island Qualified Jobs Incentive Tax Credit program details can be found at:
<http://commerceri.com/services/taxes-incentives>

Rhode Island Qualified Jobs Incentive Tax Credit Application Submission Instructions

Please submit four (4) complete hard copies, a complete electronic copy, and a one-time, nonrefundable application fee of \$1,000 in the form of a check made payable to the Rhode Island Commerce Corporation. Applications can be submitted in person or by USPS registered mail to the following address:

**Rhode Island Commerce Corporation
Attn: Investments Team
315 Iron Horse Way, Suite 101
Providence, RI 02908**

Questions on the application process may be submitted to Investments@commerceri.com.

- Read and review the Rules and Regulations, including all eligibility requirements, for the Rhode Island Qualified Jobs Incentive Tax Credit Program before completing this application. All eligibility requirements, including the Application Certification Form, must be met for an application to be considered. The rules and regulations are available online at http://commerceri.com/wp-content/uploads/2015/10/Qualified-Jobs-Incentive_Rules.pdf.
- This application may be updated from time to time. **Please ensure the most up-to-date version of the application is used for a response.** The up-to-date version is located here: <http://commerceri.com/finance-business/taxes-incentives/qualified-jobs-incentive>.
- The Rhode Island Qualified Jobs Incentive Tax Credit application consists of an application form, a set of required attachments, a certification form, and a nonrefundable \$1,000 application fee. To be considered for a tax credit, all items must be submitted in a single submission, organized as instructed below. Failure to provide required information could result in a delay in the review of, or rejection of, an application.
- The Commerce Corporation reserves the right to require the submission of additional information in connection with any application or to require the revision of an application.
- Applicants approved for tax credits will be required to enter into an incentive agreement with the Corporation in order to receive tax credits. The Corporation may request additional information in the course of negotiating that agreement.
- **NOTE: Applicants accounting for the first 500 jobs to receive credits under this program will be automatically eligible for the maximum available annual credit – the lesser of \$7,500 per job or the W-2 withholding of the jobs created.**

Rhode Island Qualified Jobs Incentive Tax Credit Application

1. Applicant Information

Business Name _____

Trade Name/DBA _____

Mailing Address _____

City _____ State _____ Zip _____ - _____

Business Phone _____ Website _____

Federal Tax ID # _____ RI Tax ID # (if applicable) _____

Industry _____

Business Structure (select one):

C Corporation

Limited Liability Corporation

Limited Partnership

S Corporation

Sole Proprietorship

Other: _____

Is the applicant registered to do business in Rhode Island with the Secretary of State? Yes No

Primary Contact for Application:

Full Name _____

Job Title _____

Mailing Address _____

City _____ State _____ Zip _____ - _____

Phone _____ Email _____

2. Job Creation Information

Municipality(ies) where new full-time jobs will be located: _____

Number of new full-time jobs created: _____ Date hiring will be completed: _____

5-Digit NAICS Code(s) for the new full-time jobs: _____

Annual median wage of new jobs to be created (must match Attachment 3): _____

Number of years for which tax credit is sought (no more than 10): _____

Commitment period (must be 20% longer than the number of years for which tax credit is sought): _____

Maximum per job credit sought (must match Attachment 9): _____

3. Required Attachments

Please attach to the application form responses to the following prompts. Attach these items in the order provided below. Each attachment should have a cover page that identifies the attachment, e.g., "Attachment 1: Project Summary."

All applicants are advised that any and all records (documents, correspondence, memoranda, etc.), received or maintained by the Commerce Corporation may be a matter of public record and subject to release upon a request from a member of the public under the Rhode Island Access to Public Records Act ("APRA"), R.I. Gen. Laws Section 38-2-1 *et seq.* In response to a request, the Commerce Corporation has the right, in its sole discretion, to redact or withhold information which is exempt from disclosure under APRA, including trade secrets and commercial or financial information which is of a privileged or confidential nature. **The Corporation recommends that any portion of any attachment in the application that contains such information be clearly labeled with the legend "Confidential Information."**

Attachment 1: Project Summary

Provide a summary of the project not to exceed 2 pages in length. The summary should include:

- Description of the business operation that will be adding new jobs.
- Summary information on the jobs to be added, including description of the jobs, details on the anticipated salaries and hire dates, and the length of time the applicant will commit to keeping the jobs in Rhode Island
- Detail on the tax credit requested, on an annual per job basis and aggregate basis, and the numbers of years, not to exceed 10, for which the credit is requested.
- Whether the newly-created jobs are the result of an expansion of existing operations in state or the result of an out-of-state relocation.
- A summary of where the jobs will be located and any construction and/or acquisition necessary.
- A description of any capital investment associated with the creation of the new jobs.

Attachment 2: Operations and Employment Baseline

Provide, for both the applicant and any related companies, (1) a brief description of all existing operations and locations in Rhode Island, and (2) the total number of full-time employees in Rhode Island as of the date of the application, as well as the average monthly total number of full-time employees in the state for each of the preceding 12 months.

A **related company** is any entity controlling, controlled by or under common control with an applicant.

A **full-time employee** is a natural person who is employed in the state by a business for consideration for at least thirty-five (35) hours a week, or who is employed in the state by a professional employer organization pursuant to an employee leasing agreement between the business and the professional employer organization for at least thirty-five (35) hours a week, and whose wages are subject to withholding.

For economically fragile industries, the Corporation may reduce the wage threshold. As of the date of this application, Economically Fragile industries are the following:

- Manufacturing and Logistics (including but not limited to processing, refining, metalworking, packaging, warehousing, shipping, and distribution)
- Seafood (including but not limited to harvesting, growing, and processing)

Attachment 3: Jobs Created

Provide the number of new jobs to be created, the median wage for the new jobs created, and the length of time the applicant will commit to keeping the jobs in Rhode Island, i.e. the commitment period (this commitment period must be at least 20% longer than the period for which tax credits are sought). Include a table with a breaking down the new full-time jobs by classification, title, salary, anticipated hiring date, and location.

The median wage of the new full-time jobs is determined by listing all salaries in ascending order and selecting the value with equal number of salaries above and below its value, or with an average of the two middle values if there is no middle number.

Provide a brief summary of typical employee benefits, such as health care and insurance offerings, that will likely be included in the benefits package to the new full-time employees.

Provide a brief summary of normal company hiring practices that will be used to fill the newly created jobs.

Attachment 4: Site Control

Identify each location housing the new full-time jobs and provide documentary evidence of existing or anticipated control over such location(s), such as proof of ownership, a purchase and sale agreement, a lease, or a letter of intent.

Attachment 5: Federal Procurement (if applicable)

If any of the full-time jobs to be created are related to any actual or likely future federal procurement, provide a description of that federal procurement and indicate which of the full-time jobs to be created are related to that procurement. If none of the jobs to be created are related to any actual or likely future federal procurement, indicate "N/A" (Not Applicable).

Attachment 6: Statement of Need

Provide evidence demonstrating that, without a tax credit, the creation of the new full-time jobs would not occur in this state. Such evidence may include, but is not limited to:

1. A financial analysis, supported by appropriate documentation, showing that the receipt of the requested tax credit is necessary to make the creation of the new full-time jobs feasible in this state, such as a financial analysis using best available data showing that, without the credit, it is not feasible for the applicant to create the new full-time jobs in this state or it is economically more beneficial for the applicant to create the new full-time jobs out of state. Such analysis should take into account the transaction costs of relocating to or from another state.
2. Evidence that the applicant could reasonably and efficiently locate outside of the state, which may, for example, include a proposed lease, proposed purchase and sale agreement, a real estate term sheet, prospective offer or offer letter, a term sheet concerning an out of state facility, or an incentive letter or incentive term sheet from another state.

Attachment 7: Other Incentives

List all federal, state, and local incentives, grants, tax credits or other aid that will or may be received or requested in relation to the creation of the new full-time jobs, and the status of the application for each. This includes, but is not limited to, any incentive sought in relation to the construction, acquisition, lease, or investment in property that facilitates the creation of the new full-time jobs.

Attachment 8: Related Companies

Provide the employer identification or social security numbers for all related companies of the applicant that employ persons in this state, and provide a clear and detailed presentation of the operations of those related companies to assure the Corporation that the new full-time jobs are not being transferred from a related company within the State.

Attachment 9: Tax Credit Amount

Identify the tax credit amount sought, on both an annual per job and aggregate basis, and the number of years, not to exceed 10, for which the credit is sought. The first 500 jobs for which credits are approved are automatically eligible for a credit of \$7,500 (assuming such amount does not exceed the reasonable W-2 withholding for the jobs created). To determine the tax credit amount, the applicant should complete the attached Tax Credit Amount Worksheet (below).

This portion of the application should include the completed Tax Credit Amount Worksheet, a breakdown of the anticipated salaries for the new full-time jobs and provide the estimated reasonable W-2 withholding associated with those salaries, as well as any additional required attachments, as detailed below.

Note that the Tax Credit Amount Worksheet calculates the maximum credit amount theoretically available. The actual credit amount awarded may differ and will depend upon verification that the applicant is eligible for the bonus amounts asserted in the form. Additionally, in all circumstances, the credit will be capped by the reasonable W-2 withholding received by the state in for each new full-time job created.

TAX CREDIT AMOUNT WORKSHEET

<i>Base Credit Amount</i>	\$2,500
<p><i>Salary</i></p> <p>A bonus is available if the median wage of the newly-created jobs exceeds 110% of the median hourly wage for Rhode Island, as most recently reported by the United States Bureau of Labor Statistics. To claim a bonus based on this criterion, please fill in the information below:</p> <p>(A) Median wage of newly created jobs: _____</p> <p>(B) Median R.I. wage: _____</p> <p>(C) Subtract (B) from (A), and divide the result by (B): _____</p> <p>(D) Multiply (C) times 10 and eliminate any decimals: _____</p> <p>(E) Multiply (D) times \$300: _____</p> <p>(F) Enter the result in line (E) in the cell to the right.</p>	
<p><i>Targeted Industry – If Claiming, Complete Attachment 9-1</i></p> <p>Are the full time jobs in a targeted industry (see below, under Attachment 9-1, for a list of targeted industries)?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>If yes, enter \$5,000 in the cell to the right.</p>	
<p><i>Hope Community</i></p> <p>Are the full time jobs located in a hope community (for applications submitted prior to December 2015, those are Central Falls, Pawtucket, Providence, West Warwick, and Woonsocket)?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>If yes, enter \$1,000 in the cell to the right.</p>	
<p><i>Out-of-State Relocation</i></p> <p>Are the new full-time jobs created by virtue of an out-of-state business relocating a business unit or units to the state?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>If yes, enter \$5,000 in the cell to the right.</p>	
<p><i>Number of Jobs Created</i></p> <p>If the number of new full-time jobs created is</p> <p><input type="checkbox"/> between 10 and 49, inclusive, enter 0 in the cell to the right;</p>	

<input type="checkbox"/> between 50 and 100, inclusive, enter \$3,000 in the cell to the right; <input type="checkbox"/> between 101 and 249, inclusive, enter \$4,000 in the cell to the right; <input type="checkbox"/> 250 or greater, enter \$5,000 in the cell to the right.	
<p><i>Job Location – If Claiming, Complete Attachment 9-2</i></p> <p>The new jobs are located (select no more than one)</p> <input type="checkbox"/> within one-half mile of T.F. Green Airport, Quonset Business Park, or a passenger rail station, enter \$4,000 in the cell to the right <input type="checkbox"/> within a transit oriented development area, enter \$1,000 in the cell to the right.	
<p><i>Capital Investment – If Claiming, Complete Attachment 9-3</i></p> <p>If the applicant is creating 25 or more new full-time jobs at a location where the applicant has made or will be making a capital investment of \$5,000,000 or more in connection with the creation of new full-time jobs at that location, a bonus is available in an amount determined by the following formula”</p> <p>(A) Total capital investment: _____ (B) Divide (A) by \$5,000,000: _____ (C) Multiply (B) by \$1,000: _____ (D) Enter the result in line (D) in the cell to the right.</p>	
<p><i>I-195 Land</i></p> <p>If the new full-time jobs are created on land that, as of July 1, 2015, was owned by the I-195 Redevelopment District Commission, enter \$5,000 in the cell to the right.</p>	
<p><i>Academic Mission – If Claiming, Complete Attachment 9-4</i></p> <p>For new full-time jobs that align with the academic mission of a college or university in the state, enter \$2,500 in the cell to the right.</p>	
<p><i>Scientific Research and Development or Industrial Design -- If Claiming, Complete Attachment 9-5</i></p> <p>If the new full-time jobs are in the fields scientific research and development or industrial design, enter \$5,000 in the cell to the right.</p>	
<p><i>Total</i></p> <p>Sum the entries in the right-hand column.</p>	
<p><i>Maximum Credit Eligibility</i></p> <p>If the preceding total is less than \$7,500, enter that in the cell to the right. If the total is \$7,500 or greater, enter \$7,500 in the cell to the right.</p>	

Attachment 9-1: Targeted Industry

As of the date of this application, targeted industries are the following:

- Biomedical Innovation
- IT/Software, Cyber-Physical Systems, and Data Analytics
- Defense Shipbuilding and Maritime
- Advanced Business Services
- Design, Food, and Custom Manufacturing
- Transportation, Distribution, and Logistics
- Arts, Education, Hospitality, and Tourism

If seeking to qualify for an additional credit amount under this criterion, describe the project's impact on the targeted industry, both at the project site and its potential to enhance the industry's presence, efficiency, and output in the state.

Attachment 9-2: Transit Oriented Development Area

If claiming a bonus because the jobs are located within one-half mile of T.F. Green Airport, Quonset Business Park, or a passenger rail station, provide a map of the project location and a description of how the project relates to or enhances transit oriented development within the area.

If claiming a bonus because the jobs are located in a proposed transit oriented development area, provide a demonstration that the area in which the project is located satisfies the transit oriented development criteria. Under this program, transit oriented development can take one of two forms:

- 1) Public-transit oriented development is development that is in close proximity to, compatible with, and supportive of public transit;
- 2) Freight-transit oriented development is development in an area with ready access to freight rail, air, and/or marine transportation where manufacturing, warehousing, distribution, and freight forwarding operations are or could be located.

A project can qualify for additional tax credits if it is located in either a public-transit or freight-transit oriented development area. An applicant can demonstrate qualification for this additional tax credit as follows:

Public-transit oriented development area

If the applicant is proposing a new designation of a public-transit oriented development area, it should include in the application the following:

- A map delineating the public-transit oriented development area and identifying the public transit within the area and the zoning in the area. A description of the rationale for the area's boundaries should also be included.
- Evidence of the municipality's commitment to transit oriented development in the proposed area, in the form of zoning ordinances, planning documents, etc. This evidence should reflect planning for compact, mixed-use, pedestrian-friendly, transit-supportive or -related development.
- List and describe the following:
 - The modes of public transit that currently serve the area.
 - Existing or planned infrastructure to make the area more conducive to pedestrian and bicycle transport.
 - Existing and/or planned public amenities at the transit facility that were initiated by the municipality, e.g. parks, civic spaces, public art, memorials, tourist information booths, wayfinding signage.
- A description of how the project will enhance transit oriented development within the area.
- Identify and describe additional real estate development within the proposed area, beyond the project site, where transit oriented development – i.e., compact, mixed-use, pedestrian-friendly, transit-supportive or -related development – has occurred or is planned. For planned projects, provide a brief statement of the project status.

Freight-transit oriented transit development area

Alternatively, if the project has a freight component, the applicant can satisfy this criterion by demonstrating that the project is an area with ready access to freight rail, air, and/or marine transportation where manufacturing, warehousing,

distribution, and freight forwarding operations are or could be located. An applicant seeking to make this demonstration should include:

- A map delineating the proposed or existing freight-transit oriented development area. A description of the rationale for the area's boundaries should also be included.
- List and describe the following:
 - The modes of freight transit that currently serve the area, and any steps taken to integrate these modes.
 - Existing or planned infrastructure to make the area more conducive to freight transit.
- A description of how the project will enhance freight-transit oriented development within the area.

Attachment 9-3: Capital Investment

To claim a bonus on the basis of a capital investment, provide a detailed discussion of the capital investment being made, including a description of the project, the project timeline, and a sources and uses breakdown.

Attachment 9-4: Academic Mission

To claim a bonus based on academic mission, provide an explanation of how the new jobs will align with a Rhode Island college or university's mission. Examples that would demonstrate such alignment include, but are not limited to:

- A technology transfer from the college or university to the business
- Funding scholarships or facilities or experiential learning opportunities
- Hiring a significant number of school graduates

Vague, open-ended, or merely aspirational objectives will not satisfy this criterion.

Attachment 9-5: Scientific Research and Development or Industrial Design

To claim a bonus based on scientific research and development or industrial design, describe how the jobs created satisfy the definitions of these fields. Scientific Research and Development means conducting research and experimental development in the physical, engineering, and life sciences, including but not limited to agriculture, electronics, biology, botany, biotechnology, computers, chemistry, food, fisheries, forests, geology, health, manufacturing, mathematics, medicine, oceanography, pharmacy, physics, veterinary, and other allied subjects. Industrial Design means the profession of designing products to optimize the function, value, and appearance for the benefit of the user of the product and/or the manufacturer or creator of the product.

Attachment 10: Conflict of Interest Disclosures

Provide (1) the full name and address of each individual who is an owner, partner, or investor, or otherwise holds an interest in an applicant, either individually or through one or more other entities (except that individuals having an interest in an applicant by virtue solely of ownership in a publicly-traded corporation need not be listed); (2) a complete list of each entity holding an interest in the applicant; and (3) a complete list of each officer, director, or manager of the applicant.

4. Application Certification Form

The undersigned is the chief executive officer or equivalent officer of the applicant with the authority to bind the company for the proposed Rhode Island Qualified Jobs Incentive Tax Credit.

I certify that:

- I have reviewed the information contained in this application and confirm that the statements made in this application in its entirety including all attachments, appendices, etc. are true, accurate and complete to the best of my knowledge.
- The creation of the new full-time jobs for which a tax credit is sought would not occur, or would not occur in Rhode Island, but for the provision of tax credits under the Rhode Island Qualified Jobs Incentive Act.
- The applicant will create new full-time jobs in an amount equal to or greater than the number of new full-time jobs for which a tax credit is sought in this application.
- The applicant is neither a person subject to the Rhode Island Code of Ethics nor a person within the scope of R.I.G.L. § 36-14-5(h).
- The applicant has not been convicted of bribery or attempting to bribe a public official or employee of the Rhode Island Commerce Corporation or of the State, has not been disqualified from an awarded contract with Rhode Island Commerce Corporation or the State, and has never defaulted on work awarded by the Rhode Island Commerce Corporation or the State.
- By signing below, I authorize the Rhode Island Commerce Corporation and the Rhode Island Division of Taxation to share information concerning the applicant for the purpose of verifying any information the Commerce Corporation deems relevant to this application.
- By signing below, I authorize the Rhode Island Department of Labor and Training to share information concerning the applicant with the Rhode Island Commerce Corporation for the purpose of verifying any information the Commerce Corporation deems relevant to this application.

Name of Certifying Officer: _____

Title: _____

Signature of Certifying Officer: _____

Date Signed: _____

STATE OF _____
COUNTY OF _____

On _____ before me appeared the above-named certifying officer for the applicant known by me to be the individual executing this document and he/she swore under oath that the foregoing was true and accurate to the best of his/her knowledge and belief.

NOTARY