

2025 Minnesota Financial Assistance Form

A 2008 amendment to Minn. Stat. §116J.993 to §116	•		
The new threshold is \$150,000 for either a grant or lo		·	
	I norticination are still r	equired for two-year	
old threshold levels of between \$	Report Year 2025	5	e §116J.993, DEED website.
Section 2, Subdivision 3). Additio Please use this form to report on MBAF Year:			ear 2008 through
	entral		ide the status of
	2-27-2025		elp the
legislative body understand how Tracking #:	2-21-2023		ivities and where
additional state financial resources may be best done			Wittes and where
 Questions? Call (651) 259-7179. Please mail complet 	,	to Minnesota Depar	tment of
Employment and Economic Development, Economic	-		
 Great Northern Building, 180 E 5th St, Suite 1200, St. 		to: (651) 215-3841	
3,	,	,	
Section 1: Grantor Information			
1. Name of grantor (funding entity): Sherburne Cou	unty EDA		
Name of person completing this form: Brian Flemi	na		
Name of person completing this form.	3		
Address: 13880 Business Center Dr. NW	Elk River	55330	Sherburne
Street Address	City	Zip Code	County
Phone: 763-765-3014 Fax: 763-765-30	002 Email: brian	.fleming@co.sher	burne.mn.us
2. Indicate who in your organization should receive the N	ЛВАF if different than t	he person listed abov	ve.
Name:	Title:		
Address:			
Street Address		City	Zip Code
Phone:	Email:		
Thories			
3. Classification of grantor (If grantor is entity created by would check "City government".)	government agency, ir	ndicate affiliation. Fo	r example, a city EDA
City government © County government	Other (specify):	
State government Regional government			

Section 2: Recipient Information

4. Name of business or organization receiving finance	ial assistance: Alacrit	y Investments IV, LLC	>		
5. Address where business subsidy or financial assist	ance will be used:		55000		
20055 - 177 ST NW		Big Lake	55309		
Street Address		City	Zip Code		
6. Type of organizational structure of recipient recei	ving financial assistan	ce			
C-Corporation S-Corpor	ation	Limited Liabil	ity Corporation (LLC)		
Other (Please specify):					
7. Does the recipient have a parent corporation?					
Yes (If yes, answer questions below. If more the	nan one owner, indica	te ultimate owner)	No		
Name of parent corporation: Engage Tech	nologies Corporation	on			
7041 Boone AVE N		Brooklyn	55428		
Street Address	-	City	Zip Code		
8. Industry of recipient's facility					
Manufacturing Serv	vices	Finance, I	nsurance, Real Estate		
Retail Trade Wh	olesale Trade	Construct	Construction		
Other (specify):					
Section 3: Agreement Information					
	Expected Project Com	pletion Date: RLF Matu	rity Date: 3/1/2047		
 Please specify all funding sources for project (at funding sources used by the recipient to fund th 		ement if available). The tai	bie should include all		
Identify Private or Public Participant	(\$) Value	Type of Assistance (grant, loan, TIF, TAF, etc.)	Use of Funds (i.e., infrastructure, cleanup, capital improvement)		
1. Sherburne County EDA RLF Loan	\$ 100,000	Loan	Property Acquisition		
2. Owners Equity	\$ 400,000	Cash	Property Acquisition		
3. Bank Loan	\$2,000,000	Loan	Property Acquisition		
4.	\$				
5.	\$				
11. Total Project Budget (all sources): \$\frac{2,500,000}{}	Pub	lic Participation of total bu	udget: 4%		

	that business subsidy and financial a ourposes were stated in the agreeme	ssistance agreements state a public purpose. ent (Mark all that apply)
Enhancing economic diversity Job retention	Increasing tax base (cannot be only purpose) Stabilizing the community	Creating high-quality job growth Other (specify):
Note: If job creation or retent	ion is not a goal then please skip to	Question 14.

Section 4: Goals and Actual Performance

13. 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.

(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 job 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.

Goals	Total Number of Employees	Average Hourly Wage Level	Average Hourly Value of Health Insurance
New Full-time Job Creation	3		
New Part-time Job Creation			
Job Retention	38		

Actuals	Total Number of Employees	Average Hourly Wage Level	Average Hourly Value of Health Insurance
New Full-time Job Creation	7	\$29.75	\$5.89
New Part-time Job Creation			
Job Retention	38	\$29.75	\$5.89

14. What is the status of the project and how successful have they been in meeting stated goals?

Engage Technologies Corporation/ Alacrity Investments IV LLC is conducting business well in the new property purchased in part with the RLF Financial assistance provided by Sherburne County EDA. Payments are on time and current.