



Instructions for Completing the Background Certification and Disclosure Form

Purpose

The Michigan Strategic Fund Board adopted the Michigan Strategic Fund Background Review Policy, which can be found at michiganbusiness.org/background. The Policy requires that the Michigan Economic Development Corporation (“MEDC”) perform a background review.

Instructions

1. Choosing the Correct Form for the Applicant Entity

The MEDC has created three categories of forms to satisfy the MSF Background Review Policy:

- The Background Certification and Disclosure Form for Publicly Traded Companies;
- The Background Certification and Disclosure Form for Nonprofits, Municipalities, and Institutions of Higher Education;
- The Background Certification and Disclosure Form for Privately Held Companies.

Choose the Form that most closely resembles the applicant entity.

2. Publicly Traded Companies

This Form may be used in any of these three situations:

- The applicant company is a publicly traded company;
- The applicant company’s direct parent company is a publicly traded company; or
- The applicant company’s ultimate parent company is publicly traded and owns 100% of the applicant company’s direct parent company.

For purposes of the MEDC Background Review process, “direct parent company” means that the applicant company is a wholly-owned subsidiary of the publicly traded company (direct parent owns 100% of applicant). In the same way, the “ultimate parent company” is defined as a company that owns 100% of the direct parent company.

If these situations do not apply to the applicant company, use the Form for Privately Held Companies.

Example 1:

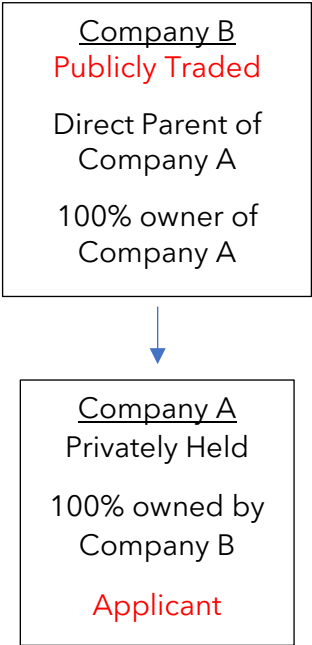
Company A is the applicant company. Company A is publicly traded. Company A can complete the Form for Publicly Traded Companies.

Company A = Publicly Traded = Form for Publicly Traded Companies

Example 2:

Company A is the applicant company. Company A is not publicly traded. Company A is a wholly-owned subsidiary of Company B. Company B is publicly traded. Company A can complete the Form for Publicly Traded Companies.

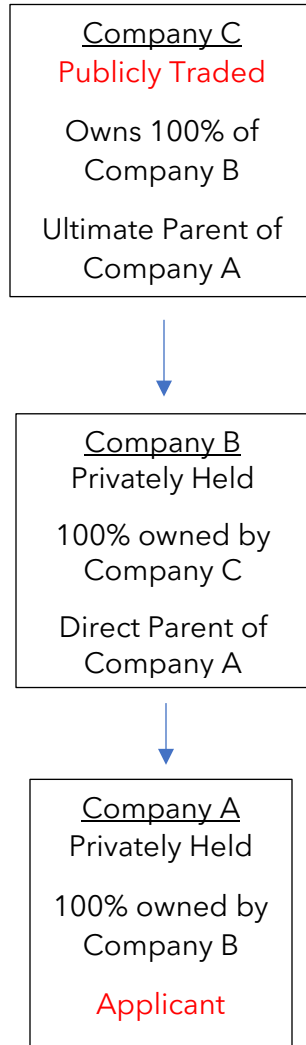
Company A Organizational Chart



Example 3:

Company A is the applicant company. Company B, which owns 100% of Company A, is the direct parent company of Company A. Company B is not publicly traded. Company C, which is a publicly traded company, owns 100% of Company B. Company A can complete the Form for Publicly Traded Companies.

Company A Organizational Chart



Questions as to whether your entity can use this Form? Email Collin Good goodc1@michigan.org for assistance.

3. Nonprofits, Municipalities, and Institutions of Higher Education:

If the applicant entity is a non-profit organization, a municipality, or an institution of higher education, the Certification and Disclosure Form for Non-Profit Organizations, Municipalities, and Institutions of Higher Education can be used.

This Form collects the information needed to complete a background review, including the contact information for the applicant entity, as well as the full name the Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, and the date of birth and residential address of the person responsible for managing the incentive. If the applicant entity doesn't use the titles used on the Form, complete the Form by listing the information for the person in the role most closely resembling these roles.

If one individual performs more than one of these roles, please duplicate the information where necessary to ensure all lines and boxes have been completed. Please see the examples provided in the Examples Supplement for additional information.

Questions as to whether your entity can use this Form? Email Collin Good goodc1@michigan.org for assistance.

4. Privately Held Companies:

The majority of applicant entities will use the Form for Privately Held Companies.

Any applicant company that is not publicly traded, is not using a publicly traded parent, or is not a nonprofit, municipality, or institution of higher education must complete the Form for Privately Held Companies.

If a nonprofit is an applicant entity, and your MEDC contact advises you to complete the Form for Privately Held Companies, the applicant entity must complete the Form for Privately Held Companies.

This Form will collect the following information:

- Applicant company's name, EIN, address of the principal place of business, and a contact person for the applicant company, along with their contact information.
- Applicant company's ownership structure.

The MSF Background Review Policy requires MEDC to conduct a background review of any owner of an applicant company that holds a 20% or greater direct or indirect interest. To comply with the Policy, the Forms must include a breakdown of ownership that includes any direct or indirect interest holder in the applicant company that holds 20% or greater interest.

Many companies do not differentiate between their direct and indirect ownership, but many entities do. As the ownership of a company is known to the company, MEDC relies on the applicant company to provide this information. Both columns must equal 100% if the chart on the Form is completed without a separate attachment detailing ownership.

Applicant companies often have a capitalization table, or an ownership chart, that they use for traditional lenders or compliance with regulators or other entities. MEDC will accept these tables or charts provided that these reflect both direct and indirect ownership breakdowns.

All owners holding 20% or more interest in the applicant company must disclose their full first, middle, and last names, dates of birth, addresses, and contact information, as well as the percentage of interest held. If the owner is a business, the legal name of the company, the company's address (principal place of business) and contact information for that entity must be provided. This information must be provided in the Supplemental Forms. Without this information, MEDC cannot complete the background review process.

- Information for Applicant's Executive Officers

This Form collects the information needed to complete a background review, including the name, date of birth, address, and contact information for the Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, and the person responsible for managing the incentive. If the applicant entity doesn't use those titles, complete the Form by listing the information for the person in the role most closely resembling these roles.

If one individual performs more than one of these roles, please duplicate the information where necessary to ensure all lines and boxes have been completed. Please see the examples provided in the Examples Supplement for additional information.

- Supplemental Forms for Ownership

To collect all of the information needed to perform a background review on an applicant company's owners, the individuals and companies that own the applicant company must complete the Supplemental Forms for Ownership.

These Forms have been broken down into two categories: individuals and companies.

Each owner, whether an individual or a company, must complete a Supplemental Form for Ownership or submit the same information and attach this information to the Certification and Disclosure Form. The Supplemental Forms for Ownership do not need to be signed, allowing for the person responsible for managing the incentive, or any agent of the applicant company, to collect this information.

Questions regarding any of these Forms? Email Collin Good goodc1@michigan.org for assistance.

Examples Supplement

Form for Publicly Traded Companies



Publicly Traded Companies

Applicant Company Name:

Applicant EIN:

Applicant Company's Principal Place of Business Address: (street, city, state, zip)

Contact Person for Applicant Company: (name, title, email, phone)

Answer one of these three questions:

Is the Applicant Company a publicly traded company?

If the answer is yes, provide the name of the publicly traded entity:

Is the Applicant Company's direct parent company a publicly traded company?

If the answer is yes, provide the name of the publicly traded entity:

Is the Applicant Company's ultimate parent company both: (i) a publicly traded company that (ii) also owns 100% of the Applicant Company's direct parent company?

If the answer is yes, provide the name of the publicly traded entity:

Certification

By signing this Form, I understand that the information contained in and attached to this Form will be used by the Michigan Economic Development Corporation to complete a background review, including, in accordance with the Michigan Strategic Fund Background Review Policy.

The Michigan Strategic Fund Background Review Policy can be found at michiganbusiness.org/background.

Authorized Agent

Title

Signature

Date

Questions regarding this Form? Contact Collin Good (goodc1@michigan.org) for assistance.

**Form for Nonprofits, Municipalities, and
Institutions of Higher Education**



Non-Profit Organizations, Municipalities, and Institutions of Higher Education

Applicant Entity Name:

Applicant EIN:

Applicant's Principal Place of Business Address: (street, city, state, zip)

Contact Person for Applicant: (name, title, email, phone)

List the officers of the Applicant Entity, or the person whose duties most closely resemble that position. All lines must be completed, even if a name is repeated or if more than one duty is performed by a single person.

First Name

Middle Name

Last Name

Chief Executive Officer:

Chief Operating Officer:

Chief Financial Officer:

Person responsible for managing this incentive:

First Name

Middle Name

Last Name

Date of Birth

Email

Residential Address

City

State

Zip

Phone

Certification

By signing this Form, I understand that the information contained in and attached to this Form will be used by the Michigan Economic Development Corporation to complete a background review, including, in accordance with the Michigan Strategic Fund Background Review Policy.

The Michigan Strategic Fund Background Review Policy can be found at michiganbusiness.org/background.

Authorized Agent

Title

Signature

Date

Questions regarding this Form? Contact Collin Good (goodc1@michigan.org) for assistance.

Form for Privately Held Companies



Privately Held Companies

Applicant Company Name:

Applicant EIN:

Applicant's Principal Place of Business Address: (street, city, state, zip)

Contact Person for Applicant: (name, title, email, phone)

Ownership

Any person or entity holding a 20% or greater direct or indirect interest in the Applicant must be disclosed, along with the ownership percentage that person or entity holds.

The direct and indirect interest columns must each total 100%.

For individuals: list the full first, middle, and last name, along with the direct and indirect interest percentages held by that individual. If no middle name, please write "no middle name".

For entities: list the legal name of the entity and the direct and indirect interest percentages held by that entity.

All owners must also complete the Supplemental Form for Ownership.

Owner: Full First, Middle, and Last Name or Company Legal Name	Direct %	Indirect %

This section may be completed separately and attached to this form.



Applicant's Officers

List the officers of the Applicant, or the person whose duties most closely resemble that position. All lines must be completed, even if a name is repeated or if more than one duty is performed by a single person.

Chief Executive Officer:

First Name	Middle Name	Last Name	Date of Birth	Email	
Residential Address		City	State	Zip	Phone

Chief Financial Officer:

First Name	Middle Name	Last Name	Date of Birth	Email	
Residential Address		City	State	Zip	Phone

Chief Operating Officer:

First Name	Middle Name	Last Name	Date of Birth	Email	
Residential Address		City	State	Zip	Phone

Person responsible for managing this incentive:

First Name	Middle Name	Last Name	Date of Birth	Email	
Residential Address		City	State	Zip	Phone



**MICHIGAN ECONOMIC
DEVELOPMENT CORPORATION**

MICHIGAN ECONOMIC DEVELOPMENT CORPORATION Background Review Certification and Disclosure Form

Instructions for completing this form, including a guide to frequently asked questions, can be found at michiganbusiness.org/background

Certification

By signing this Form, I understand that the information contained in and attached to this Form will be used by the Michigan Economic Development Corporation to complete a background review, including, in accordance with the Michigan Strategic Fund Background Review Policy.

The Michigan Strategic Fund Background Review Policy can be found at michiganbusiness.org/background.

Authorized Agent

Title

Signature

Date

Questions regarding this Form? Contact Collin Good (goodc1@michigan.org) for assistance.



Supplemental Form for Ownership - Individual

Applicant Name:

Any person or entity holding a 20% or greater direct or indirect interest in the Applicant must be disclosed, along with the ownership percentage that person or entity holds, as part of the Background Review Certification and Disclosure Form.

Each owner listed on the Certification and Disclosure Form (individual and entity) must complete this Supplemental Form.

First Name:

Middle Name:

(if none, write "no middle name")

Last Name:

Date of Birth:

Email Address:

Phone Number:

Street Address:

City:

State:

Zip:

This Form may be completed separately and attached to the Certification and Disclosure Form.



Supplemental Form for Ownership - Entity

Applicant Name:

Any person or entity holding a 20% or greater direct or indirect interest in the Applicant must be disclosed, along with the ownership percentage that person or entity holds, as part of the Background Review Certification and Disclosure Form.

Each owner listed on the Certification and Disclosure Form (individual and entity) must complete this Supplemental Form.

Entity Name:

Contact Person:

Email Address:

Phone Number:

Entity Street Address:

City:

State:

Zip: