



**MORE JOBS FOR MARYLANDERS  
EXISTING MARYLAND BUSINESS  
PROJECT ENROLLMENT APPLICATION**

**APPLICANT INFORMATION**

1. Business Name			
2. Business Mailing Address			
	City	State/Zip	
3 (a) FEIN		3 (b) UI Number	
4. Business 6-digit NAICS Code			
5. Attach SDAT Certificate of Good Standing.			
6. Beginning Date of Tax Year (MM/DD/YY)		End Date of Tax Year (MM/DD/YY)	
7(a). No. of Full-time Maryland Employees		7(b) Aggregate Payroll of Full-time Maryland Employees	
8. No. of Years in Business			

**EXISTING ESTABLISHMENT INFORMATION**

9. Facility Location:	Address:		
	City	State/Zip	County
10. Is the business facility located in an Opportunity Zone?    YES            NO			
11. Facility NAICS			
12. Beginning Date of Operations at this location			
13. Confirm that the business DID NOT move its facility from one Maryland county to another Maryland county after June 1, 2017.            _____ (INITIAL)			
14. If you have other Maryland facility locations, attach a list of locations.			
15. Description of activities performed and/or products manufactured at the facility:			
16. Which best describes your project?			
a. Expansion at existing location			
b. Expansion of business into new facility			
c. Other _____			



## **MORE JOBS FOR MARYLANDERS- OPPORTUNITY ZONE ENHANCEMENT TAX CREDIT QUALIFICATIONS**

Businesses which answer “Yes” to all three questions below, may be eligible for enhanced tax credits under the Opportunity Zone Enhancement program. If the business answered “YES” to all three questions, please fill out and file Addendum A with this application to determine eligibility.

The business facility is located in an Opportunity Zone:   YES           NO

The business entity is a Qualified Opportunity Zone Business, as defined in Article 1400Z-2 of the Internal Revenue Code (see instructions on Addendum A for more information):   YES           NO

The Qualified Opportunity Zone Business has received an investment from a Qualified Opportunity Zone Fund as defined in Article 1400Z-2 of the Internal Revenue Code (see instructions on Addendum A for more information)?   YES           NO

**Collection of Personal Information:** In accordance with Executive Order 01.01.1983.18, the Department of Commerce (“Commerce”) advises you as follows: Certain personal information requested by the Department is necessary in determining your eligibility. Failure to disclose this information may result in the denial of one of these benefits or services. Availability of this information for public inspection is governed by the provisions of the Maryland Public Information Act, General Provisions Article, Sections 4-101 et seq. of the Annotated Code of Maryland. This information will be disclosed to appropriate staff of the Department and other public officials for purposes directly connected with administration of the program for which its use is intended. Such information is routinely shared with State, federal or local government agencies. You have the right to inspect, amend or correct personal records in accordance with the Maryland Public Information Act.

**Publicity:** The applicant agrees that the Department of Commerce may issue press releases and otherwise publicize information about the applicant’s employment levels before and after its qualification for the More Jobs for Marylanders Incentive Program.

**THE FORM MUST BE SIGNED BY AN OWNER OR OFFICER OF THE BUSINESS ENTITY**

I verify that the business is applying for Certification as a Qualified Business Entity and to enroll its Project in the More Jobs for Marylanders Incentive Program. The business (1) is current in all State and local tax obligations; (2) is not in default in any State or local contract; (3) is in good standing and authorized or registered to do business in the State.

I verify that the business applying for Certification as a Qualified Business Entity did not move its existing facility to another County in the State after June 1, 2017.

Under penalties of perjury, I declare that the information contained in this application, to the best of my knowledge and belief, it is true, correct and complete.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Officer of Company

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Print Officer’s Name

\_\_\_\_\_  
Contact Email Address

\_\_\_\_\_  
Title of Officer

\_\_\_\_\_  
Contact Phone Number

**Voluntary Survey**

This form is for gathering statistical data only. This form will be separated from the application and the information provided in it will not be a part of the application approval process. Furnishing this information is voluntary; failure to do so will have no effect on the approval of the requested financial assistance.

**Respondent does not wish to furnish this information: YES                      NO**

**If Respondent is a business organization:** If Respondent is a business owned and controlled primarily by individuals who are identified in any of the following categories, please check all the categories that apply:

- Female
- Of Hispanic or Latino origin
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Veteran

Is the Respondent a State/Federal/Other certified Minority Business Enterprise?    YES                      NO

If yes, please provide your:

State MBE certification number: \_\_\_\_\_

Federal 8(a)/SDB certification number: \_\_\_\_\_

Identify who the other issuer is and the other certification number: \_\_\_\_\_

Respondent is a publicly held entity or other organization not classifiable as owned by individuals of a particular gender, race, ethnicity, or veteran status.    YES                      NO

**If the Respondent is an individual:**

Is the Respondent Female?    YES                      NO

Is the Respondent of Hispanic or Latino origin?    YES                      NO

Is the Respondent a Veteran?    YES                      NO

Which of the following categories describes the Respondent (select all applicable racial categories):

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White

FOR DEPARTMENT USE ONLY:

Respondent Name: \_\_\_\_\_                      Date: \_\_\_\_\_

# More Jobs for Marylanders Existing Maryland Business Project Enrollment

## Application Instructions

Below are instructions for filling out the More Jobs for Marylanders Existing Business Project Enrollment Application.

**General Information:** More Jobs for Marylanders is a tax credit program for new or existing manufacturing businesses located anywhere in the State or for new or existing non-manufacturing businesses located in an Opportunity Zone.

### Manufacturing Businesses:

To qualify, an Existing Manufacturing business must:

- Be primarily engaged in manufacturing at the facility with a facility NAICS code of 31, 32 or 33. Primarily is defined as at least 51%. **DOES NOT** include refiners.
- Provide Notice of Intent to Commerce before it begins hiring.
- Create at least 5 qualified positions in a Tier 1 Area and 10 jobs in a Tier 2 Area.
- Qualified Positions pay at least 120% of State minimum wage, are full-time and must be filled for 12 months before they qualify for credits
- Offer ongoing job training or provide a post-secondary education program

### Non-Manufacturing Businesses:

To qualify, a non-manufacturing business must:

- Be located in an Opportunity Zone
- Provide Notice of Intent to Commerce before it begins hiring.
- Create at least 5 qualified positions.
  - Qualified Positions pay at least \$50K, are full-time and must be filled for 12 months before they qualify for credits.
- Offer ongoing job training or provide a post-secondary education program.
- A non-manufacturing business **DOES NOT** include a business that (i) provides adult entertainment, (ii) is primarily engaged in retail activities (except Grocery Stores), or (iii) is primarily engaged in the sale or distribution of alcoholic beverages.

Tier 1 Areas include: Baltimore City, Allegany, Baltimore, Caroline, Cecil, Dorchester, Garrett, Kent, Prince George's, Somerset, Washington, Wicomico and Worcester Counties. Tier 1 Areas also include Opportunity Zones located in any Maryland county. Tier 2 Areas are any areas which are **not** Tier 1 Areas.

### Applicant Information:

- 1) Provide the full legal name of the entity, as it will appear on the certificate.
- 2) Provide the mailing address of the business entity.
- 3) a) Provide the Federal Employee ID Number, and b) Unemployment Insurance Number.
- 4) Provide the 6-digit North American Industrial Classification Code (NAICS) of the business entity. More information on NAICS codes can be found at: <http://www.census.gov/eos/www/naics/>

- 5) Attach Proof of Good Standing (either an official certificate or screen shot status from the State Department of Assessment and Taxation's (SDAT) website: <https://egov.maryland.gov/BusinessExpress/EntitySearch>).
- 6) Provide the beginning and end date of the business's tax year.
- 7) Provide the total number of employees in Maryland and the aggregate annual payroll of those employees.
- 8) Provide the number of years the applicant has been in business.

## **Non-Manufacturing Businesses Only**

### **Existing Establishment Information**

An existing business that moves its facility from one Maryland County into another after June 1, 2017 will not be eligible for the income tax credit incentive.

- 9) Provide the address of the facility where the new qualified positions will be located?
  - Provide the city, state and zip code of the facility.
  - Provide the County the business is locating in.
- 10) Confirm that the business is located in an Opportunity Zone. An interactive Opportunity Zone map can be found at: <https://maryland.maps.arcgis.com/apps/webappviewer/index.html?id=1cc479d2dc3948239f0c47bda8b6967e>
- 11) Provide the Facility NAICS. For manufacturing businesses, the establishment that is creating the qualified positions must be primarily engaged in NAICS 31, 32 or 33.
- 12) Provide the date that the business started its operation at this facility location.
- 13) Confirm that the business did not move from one Maryland County to another after June 1, 2017.
- 14) If you have other facility locations in Maryland, attach a list of those locations.
- 15) Provide a description of the activities performed and/ or the products manufactured at the facility.
- 16) Check that which best describes your project.
- 17) Provide the Notice of Intent Date. The business may only include employees hired for qualified positions after the Notice of Intent.

### **Jobs and Wages**

- 18) Provide the projected number of new qualified positions and annual wages of those positions and the year they will be created.
- 19) A business is required to begin hiring within 12 months of its Notice of Intent Date. Please confirm that hiring will begin within this timeframe.
- 20) A business is required to hire at least 5 new qualified positions in Tier Area 1 or 10 in Tier 2 Areas within 12 months of its first hire. Please confirm that the business is projecting to meet this requirement.
- 21) Provide the projected amount of capital investment that will be made related to this project.

22) For manufacturing businesses only, please confirm that the qualified positions will pay at least 120% of State minimum wage. State minimum wage will change between 2020 and 2025. The schedule is as follows:

<b>Effective date</b>	<b>State Minimum Wage</b>	<b>120% State Minimum Wage</b>
1/1/2020	\$11.00	\$13.20
1/1/2021	\$11.75	\$14.10
1/1/2022	\$12.50	\$15.00
1/1/2023	\$13.25	\$15.90
1/1/2024	\$14.00	\$16.80
1/1/2025	\$15.00	\$18.00

23) For non-manufacturing businesses only, please confirm that qualified positions will pay at least \$50,000.

### **Job Training**

A requirement of the More Jobs for Marylanders Incentive Program is to provide an ongoing jobs skills enhancement training program or post-secondary education program approved by Commerce.

24) Indicate which of the following (or both if applicable) that the business provides:

- ongoing job training
- a post-secondary education program or tuition reimbursement

25) Describe the type of training offered at the facility.

26) Attach documentation of tuition reimbursement program or training programs offered including benefits manual, course materials, invoices, certificates employees receive for completing training.

27) Provide the number of employees at the business that have participated in the last two years.



**More Jobs for Marylanders-Opportunity Zone Enhance Program**

If a manufacturer or a non-manufacturer is located in an Opportunity Zone, meets the definition of a “Qualified Opportunity Zone Business” and has received an investment from a “Qualified Opportunity Fund”, it can apply for enhanced tax credits. For more information, see Addendum A.

You can check if your facility address is located in an Opportunity Zone at the following website:

<https://maryland.maps.arcgis.com/apps/webappviewer/index.html?id=1cc479d2dc3948239f0c47bda8b6967e>

**To submit an application by mail, mail the signed application and attachments to:**

Kelly Adams  
Tax Specialist  
Maryland Department of Commerce  
401 East Pratt Street, 17<sup>th</sup> Floor  
Baltimore, Maryland 21202

**To submit an application by email, send to: [taxincentives.commerce@maryland.gov](mailto:taxincentives.commerce@maryland.gov).**

Please contact Kelly Adams at [Kelly.Adams1@maryland.gov](mailto:Kelly.Adams1@maryland.gov) or 410-767-6438 with any questions.