



**MO CERTIFIED INCUBATORS ANNUAL PERFORMANCE REPORT
FOR FISCAL YEAR ENDING JUNE 30, 2011**

DUE: SEPTEMBER 30, 2011

NAME OF INCUBATOR			YEAR ESTABLISHED		YEAR CERTIFIED
ADDRESS (STREET, PO BOX)			MITS / MISSOURI TAX ID NUMBER		FEDERAL TAX ID NUMBER
CITY	STATE		ZIP		NAICS CODE
CONTACT PERSON'S NAME					
TELEPHONE NUMBER		FAX NUMBER		EMAIL ADDRESS	
# FULL TIME EMPLOYEES	# PART TIME EMPLOYEES	TOTAL PAYROLL \$	BUILDING SIZE (SQ.FT.)	RENTABLE UNIT SIZE (SQ.FT.)	# OF UNITS
FOCUS: <input type="checkbox"/> Product Manufacturing <input type="checkbox"/> Product Development <input type="checkbox"/> Research & Development <input type="checkbox"/> Business Development Services <input type="checkbox"/> Other _____					
MISSION					
ALLIANCES, PARTNERSHIPS AND SPONSORS					
ORGANIZATIONAL STRUCTURE					
Please provide additional information (if any) related to you incubator such as Recent Developments, Awards, Future Tenants, etc:					

TARGET MARKETS			
SERVICES OFFERED			
ENTRANCE CRITERIA			
SUCCESS GRADUATION CRITERIA			
FAILURE EXIT CRITERIA			
CURRENT OCCUPIED CAPACITY (%)			
FUNDING	SOURCE OF FUNDING	NAMES OF ALL PROGRAMS UTILIZE(D)	TOTAL AMOUNT
	FEDERAL		
	MISSOURI		
	LOCAL		
	PRIVATE		
	OTHER		
	TOTAL		\$

TENANTS	<p>In a separate document, please provide information for EACH TENANT, including whether a company came from another state or country, and explain why that company chose Missouri and your incubator:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Name <input type="checkbox"/> Contact Information <input type="checkbox"/> Occupancy Length (years) <input type="checkbox"/> Occupancy Size (%) <input type="checkbox"/> Expected Graduation Date <input type="checkbox"/> Business Description <input type="checkbox"/> Recent Developments <input type="checkbox"/> Other 			
	<p>The following information is required (total for all tenants)</p>	<p>NUMBER OF FULL TIME JOBS</p>	<p>NUMBER OF PART TIME JOBS</p>	<p>TOTAL PAYROLL \$</p>
MISSOURI GRADUATES	<p>In a separate document, please provide information for each graduate that operates in Missouri:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Name <input type="checkbox"/> Contact Information <input type="checkbox"/> Occupancy Length (years) <input type="checkbox"/> Date of Graduation <input type="checkbox"/> Business Description <input type="checkbox"/> Recent Developments <input type="checkbox"/> Reasons Why the Company Decided to Stay in Missouri 			
	<p>The following information is required (total for all tenants)</p>	<p>NUMBER OF FULL TIME JOBS</p>	<p>NUMBER OF PART TIME JOBS</p>	<p>TOTAL PAYROLL \$</p>
OTHER GRADUATES	<p>In a separate document, please provide information for each graduate that left Missouri:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Name <input type="checkbox"/> Contact Information <input type="checkbox"/> Occupancy Length (years) <input type="checkbox"/> Date of Graduation <input type="checkbox"/> Business Description <input type="checkbox"/> Recent Developments <input type="checkbox"/> Reasons Why the Company Decided to Leave Missouri 			
FAILED TENANTS	<p>In a separate document, please provide the following information for each failed company:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Name <input type="checkbox"/> Occupancy Length (years) <input type="checkbox"/> Date and Reasons for Failure <input type="checkbox"/> Business Description <input type="checkbox"/> Recent Developments 			
<p>RETURN TO: Department of Economic Development Division of Business & Community Finance Management 301 West High Street, Room 770 PO Box 118 Jefferson City, MO 65102</p>				