

# Corporate Accountability for Tax Expenditures Act 93-552

## Annual Project Progress Reports for 2015

Akorn, Inc.

Decatur

### I. Development Assistance Agreements Awarded in 2015

	Assistance Amount	Agreement Number
EDGE Tax Credit	0.00	15 ZCA955

### II. Organization/Project Site Information

Chief Officer or authorized designee

Gary Stamatkin

Title

Director of Tax

Address

1925 W Field Court, Suite 300

Lake forest, IL 60045

USA

Phone

847-279-6116

E-mail

gary.stamatkin@akorn.com

Standard Industrial Classification Number (SIC#)

2834

North American Industry Classification System (NAICS)

325412

III. Did the recipient's use of the State Funding reduce employment at any other site in Illinois?

No



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#### Number of Jobs Stated in the Agreement that would be Retained at the Site as a Result of Assistance

Job Classification	Avg Annual Salary	Positions	Full-Time	Part-Time	Temporary
None per Section 4D of the EDGE agreement	0.00	0	0	0	0
<b>Totals:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

#### Number of Full-Time Permanent Employees Anticipated To Be Hired at this Site on 12/31/2015

Job Classification	Anticipated Starting Dates	Number of Positions to be Hired in this Category	Average Annual Wage per New Employee	Total New Payroll to be Created
Warehouse staff	10/15/2016	25	\$28,000.00	\$700,000.00
<b>Totals:</b>		<b>25</b>		<b>\$700,000.00</b>

#### Job Creation Data Explanatory Notes

If the change (gain/loss) in the number of full-time permanent employees as of the date of the report plus the number of full-time permanent employees anticipated to be hired after date of the report does not equal the number of full-time permanent employees stated in the Agreement that would be created at the site as a result of the assistance, then please explain why not:

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I, Gary Stamatkin, as the chief officer or authorized designee of the recipient, verify that the information in the progress report contains no knowing misrepresentation of material facts upon which eligibility for development assistance is based. I further certify that, to the best of my knowledge, the recipient is in compliance with the development assistance agreement(s) between, or on behalf of, the recipient and the Illinois Department of Commerce and Economic Opportunity and/or the Illinois Department of Transportation and/or the office of the Illinois State Treasurer

**Signature on File**

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Signature

**6/6/2016**

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Date

**Director of Tax**

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Title