

2023 APPLICATION

NEW MARKETS TAX CREDIT PROGRAM

NMTC PROGRAM

2023 ALLOCATION
APPLICATION



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The CDFI Fund is an equal opportunity provider.

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APPLICANT INSTRUCTIONS

- Read the relevant New Markets Tax Credit (NMTC) Program publications prior to completing the *Allocation Application*. For information on the calendar year (CY) 2023 NMTC Program allocation round (this Round), read the *Notice of Allocation Availability (NOAA)* and the *Community Development Financial Institutions Fund's* (the CDFI Fund's) document titled "*NMTC Allocation Application Frequently Asked Questions*" (FAQ). For tax related information on the NMTC Program, read the final regulations issued by the Internal Revenue Service (26 CFR 1.45D-1) and related guidance. For information on *Community Development Entity (CDE)* certification, read the CDFI Fund's document titled "*CDE Certification Q&A Document.*" All of these documents are available on the CDFI Fund's website at www.cdfifund.gov. The CDFI Fund's Q&A Document is periodically updated, so continue to check the website on a regular basis.
- Consult the Glossary of Terms when completing the *Allocation Application*. All terms and phrases that are in *Capitalized Italics* in the *Allocation Application* are defined in the Glossary of Terms. The Glossary of Terms is no longer included in the electronic application. Capitalized terms and phrases that are not italicized are the titles of documents on the CDFI Fund's website, pick-list options in the electronic application, or titles of sections of this *Allocation Application*.
- ***A Subsidiary CDE cannot submit an Allocation Application.***
- If the *Applicant* has not been certified as a *CDE* by the CDFI Fund, it must submit its *CDE Certification Application* through the CDFI Fund's Awards Management Information System (AMIS) **on or before the CDE Certification deadline specified in the NOAA. The CDFI Fund will not approve a CDE Certification Application if the Applicant's information does not match the information in AMIS.** The *CDE Certification Application* is available on the CDFI Fund's website at www.cdfifund.gov. Organizations whose *CDE Certification Applications* are not submitted in AMIS in a timely fashion will be considered ineligible for *NMTC Allocations* in this Round of the Program.

NOTE: The CDFI Fund cannot process a *CDE Certification Application* unless each entity seeking certification as a *CDE*: (a) is a legal entity and is a domestic corporation or partnership for federal tax purposes; and (b) has a valid and distinct Employer Identification Number (EIN). *Applicants* or *Subsidiary Applicants* that have applied for, but not yet received, an EIN as of the date of the *Authorized Representative's* signature on the *Allocation Application* will not be accepted. For more information on EINs and applying for an EIN, refer to the *CDE Certification Q&A Document* on the CDFI Fund's website at www.cdfifund.gov.

- Carefully read the *Allocation Application* and the *NOAA* to determine whether the *Applicant* has the requisite eligibility, capacity, experience, and skills to compete for and administer an *NMTC Allocation*, execute the proposed business strategy and achieve the proposed community outcomes. Be sure also to review carefully the Assurances and Certifications provided in this document. By signing this *Allocation Application*, the *Applicant* is certifying to the truth, completeness, and correctness of this *Allocation Application*, including the items listed in the Assurances and Certifications.

- If the CDFI Fund determines that any portion of the *Allocation Application* is incorrect in any material respect, the CDFI Fund reserves the right, in its sole discretion, to reject the *Allocation Application*.
- As the *Applicant* prepares the *Allocation Application*, assume that the CDFI Fund's *Allocation Application* reviewers are learning about the organization for the first time, even if the organization has previously submitted an application to the CDFI Fund under this or any of the other CDFI Fund programs.
- A newly formed entity that does not have a track record of raising capital or offering products and services may reference the activities of its *Controlling Entity* in certain areas of the *Allocation Application*. However, a start-up may not reference the activities of individuals, including *Principals* or board members, to demonstrate such track record. The activities and experiences of individuals may be addressed in the Management Capacity section.
- The term *Applicant* refers to the *CDE* applying for an *NMTC Allocation* as well as any other *Subsidiary* entities, whether already formed or in the process of formation, which may receive a transfer of all or a part of an *NMTC Allocation* from the *Applicant*. To the extent practicable, the *Applicant* may respond to each question in this *Allocation Application* collectively on behalf of all such entities. If responses vary for separate entities, be sure to clearly articulate which entity is being referenced in the narrative and tables.
- Be sure to keep each narrative brief. Please note that each narrative text response has a maximum character length, which, depending on font size, will range from about 1/3 of a page to about 2 pages). These character maximums include spaces, punctuation, and special characters. All text that exceeds the maximum set for a narrative text response (which is noted at the end of each question) will be truncated at the character limit.
- The CDFI Fund updated the title and format of this document so that it is consistent in appearance with the applications used by other CDFI Fund administered programs. This document includes all of the same content from the previous version of the *Allocation Application*; only now it's in tabular form. This document includes the *Allocation Application* questions, as well as the guidance, instructions and notes for *Applicants* to use when completing the electronic *Allocation Application* in AMIS.
- Use the electronic application: This version of the *Allocation Application* is a read-only version. Any organization interested in applying for an *NMTC Allocation* from the CDFI Fund is expected to submit an electronic *Allocation Application*. *Applicants* may access the electronic *Allocation Application* as soon as it is made available by logging in through AMIS on the CDFI Fund's website at amis.cdfifund.gov. *Applicants* who have not already done so are encouraged to register a user account through AMIS as soon as possible. Please contact the CDFI Fund's IT Help Desk at (202) 653-0422 or AMIS@cdfi.treas.gov if you are having problems registering under AMIS. **The electronic *Allocation Application* must be received no later than the application submission deadline specified in the NOAA.** Complete instructions regarding the electronic submission requirements will be posted on the CDFI Fund's website at www.cdfifund.gov when the online *Allocation Application* is made available.
- All *Applicants* must **complete and save all responses to the Application Registration section of the NMTC Allocation Application in AMIS by 5 pm ET on the Application Registration deadline specified in the NOAA in order to submit the remaining sections of the Allocation Application.**

To complete the Application Registration, *Applicants* must provide a response to each question in this section, select “Yes” to lock its responses, and press the save button. AMIS will not allow additional edits to the Application Registration once it has been completed and saved. Once the Application Registration deadline passes, AMIS will not allow the creation of any new CY 2023 *NMTC Allocation Applications*. Additionally, *Applicants* will not be permitted to submit CY 2023 *NMTC Allocation Applications* if the Application Registration section of those Applications remains incomplete and unsaved after the Application Registration deadline. Please see the CY 2023 NMTC Program Allocation Application Frequently Asked Questions document and the CY 2023 NMTC Program AMIS Navigation Guide (Section 6.2) for more details on completing the Application Registration section.

- Required Investor Letters (if applicable): *Applicants* completing Table E3 are required to submit *Commitment* letters or letters of interest from investors per the NOTE for Exhibit E. Please upload these documents electronically through the *Applicant's* AMIS account. In doing so, an *Applicant* is also validating the following information: name of investor, dollar amount of equity sought or obtained (or dollar amount of debt, in the case of an investor partnership using debt capital), status of the investment request (e.g., funds received, *Commitment* of funds, *Letter of Interest/Intent*). For examples of acceptable documentation for the required information, refer to the CDFI Fund's *NMTC Allocation Application* FAQ Document. *Applicants* that do not complete Table E3 should not submit investor letters.
- Submitting Required Documents and Controlling Entity Signature Page: All *Applicants* designating a *Controlling Entity* will be required to upload the *Controlling Entity* Signature Page and other documents (Assurances and Certifications narrative (if applicable), *investor* letters (if applicable) and organizational charts) electronically through their AMIS accounts. An *Applicant* will be instructed on how to upload the aforementioned Signature Page and other documents (i.e., attachments) at the time the *Applicant* submits its *Allocation Application*. **All attachments must be uploaded by the application and attachment deadline specified in the NOAA.** If the attachments are not received by the applicable deadline, they will not be given consideration as part of the review process. **Only those attachments requested by the CDFI Fund will be considered as part of the review process. Furthermore, the CDFI Fund will not accept any revisions or amendments to an application or the attachments once they have been submitted for review.**
- Part V - Information Regarding Previous Awards: All *Applicants* are required to complete Part V of the *Allocation Application*. *Applicants* that have not received previous *NMTC Allocations* or that have not received other CDFI Fund Awards (i.e., FA-TA, CMF, BEA will simply need to respond “Yes” to Questions 42 and 43 and respond “No” to Question 45. *Applicants* that have not made *QE/s* into previous *Allocatees* or assumed *Control* of previous *Allocatees* should respond “No” to Question 45 Please note that Part V is not scored as part of the Phase I review process and is only considered if the *Applicant* is ranked highly enough to proceed to Phase II of the application review process.
- Each *Applicant* should expect that if it receives an *NMTC Allocation*, information provided in this *Allocation Application* will be used to determine the terms of an *Allocation Agreement*.
- The contents of this *Allocation Application* are consistent with the Internal Revenue Code Section 45D and the *NMTC Program Income Tax Regulations*. In the event of any inconsistency between the contents of this *Allocation Application* and the Internal Revenue Code Section 45D or the *NMTC*

Program Income Tax Regulations, the provisions of the Internal Revenue Code Section 45D and the *NMTC Program Income Tax Regulations* shall govern.

NOTE: If you have programmatic or technology-related questions about the *Allocation Application*, you may contact the CDFI Fund by submitting an AMIS service request. In the Service Request form, select “NMTC Program” as the Program. Use of AMIS Service Requests is the best method to submit and track your request. Additionally, you can call (202) 653-0422 or e-mail AMIS@cdfi.treas.gov for information technology assistance.

The CDFI Fund will provide programmatic and information technology support related to the *Allocation Application* Monday through Friday between 9:00 am and 5:00 pm, Eastern Time until through the last day to contact the CDFI Fund which is specified in Table 1 of the *NOAA*. **The CDFI Fund will not respond to service requests, phone calls or e-mails concerning an *Allocation Application* submitted during the final two business days before the Application Deadline until after the *Allocation Application* submission deadline specified in Table 1 of the *NOAA*.**

NMTC APPLICATION REGISTRATION

All *Applicants* must **complete and save all responses to the Application Registration section of the NMTC Allocation Application in AMIS by 5 pm ET on the Application Registration deadline specified in the NOAA in order to submit the remaining sections of the Allocation Application.**

To complete the Application Registration, *Applicants* must provide a response to each question in this section, select “Yes” to lock its responses, and press the save button. AMIS will not allow additional edits to the Application Registration once it has been completed and saved. Once the Application Registration deadline passes, AMIS will not allow the creation of any new CY 2023 NMTC Allocation Applications. Additionally, *Applicants* will not be permitted to submit CY 2023 NMTC Allocation Applications if the Application Registration section of those Applications remains incomplete and unsaved after the Application Registration deadline. Please see the CY 2023 NMTC Program Allocation Application Frequently Asked Questions document and the CY 2023 NMTC Program AMIS Navigation Guide (Section 6.2) for more details on completing the Application Registration section.

| Section | Question | Response | Question Notes | Field Type |
|--|--|--|--|---------------|
| Applicant¹ Information | 1(a) <i>Applicant</i> Name | <i>Applicant</i> Name displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | 1(b) <i>Applicant</i> Employer Identification Number | <i>Applicant</i> Employer Identification Number displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | 1(c) Is the <i>Applicant</i> a domestic corporation or partnership for federal tax purposes? | <input type="checkbox"/> Domestic Corporation <input type="checkbox"/> Domestic Partnership | If the <i>Applicant</i> is not a domestic corporation or partnership for federal tax purposes, it is not eligible to apply for an NMTC Allocation. | Dropdown Menu |
| | 1(d) <i>Applicant's</i> date of incorporation or formation (month/day/year) | <i>Applicants</i> date of incorporation or formation displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | 1(e) <i>Applicant's</i> fiscal year end (month/day) | | | |

¹ For the purposes of Questions 2-6 in this *Applicant* Information section, the term *Applicant* shall only apply to the entity applying for a NMTC Allocation, and not to *Subsidiary* entities that may receive a transfer of all or part of a NMTC Allocation.

| | | | | |
|---------------------------------------|---|---|--|---------------|
| | Fiscal Year End Month | <i>Applicant's</i> Fiscal Year End Month displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | Fiscal Year End Day | <i>Applicant's</i> Fiscal Year End Day displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| Controlling Entity Information | 2(a) Would the <i>Applicant</i> like to designate a <i>Controlling Entity</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <p>A <i>CDE</i> may only designate one organization as a <i>Controlling Entity</i>. This entity must meet the definition of <i>Controlling Entity</i> set forth in the Glossary of Terms of this <i>Allocation Application</i>. Individuals cannot be deemed to be <i>Controlling Entities</i>.</p> <p><i>Applicants</i> may use this <i>Controlling Entity</i> to assist in demonstrating an organizational track record and in completing the related exhibits. An <i>Applicant</i> may identify the parent organization or the company of its parent (i.e., “grandparent”) as its <i>Controlling Entity</i> to demonstrate an organizational track record, provided that the relationship between the “grandparent” and the <i>Applicant</i> conforms to the CDFI Fund’s definition of a <i>Controlling Entity</i>.</p> <p>Should the <i>Applicant</i> receive an <i>NMTC Allocation</i> in this Round, the designated <i>Controlling Entity</i> will need to continue in that capacity throughout the term of the <i>Allocation Agreement</i> and for any future <i>Allocation Agreements</i> with the CDFI Fund, should the <i>Applicant</i> apply and receive an allocation in a future round. Any <i>Applicant</i> that receives an <i>NMTC Allocation</i> in this Round must designate the same <i>Controlling Entity</i> as designated in this <i>Allocation Application</i> in any <i>Allocation Applications</i> for future rounds.</p> <p><i>Applicants</i> that received an <i>NMTC Allocation</i> in the CY 2013 round or later rounds are expected to maintain the <i>Controlling Entity</i> stated in their <i>Allocation Agreement</i> in Question 3(a). Please see the Application FAQ for further guidance and information.</p> <p>The <i>Controlling Entity Representative</i> is required to affirm, through submission of a Signature Page, that it is indeed the</p> | Dropdown Menu |

| | | | | |
|---------------------------------------|--|---|---|---|
| | | | <i>Controlling Entity</i> of the Applicant and supports the Applicant's Allocation Application. | |
| | 2(b) <i>Controlling Entity</i> Name: | Text Entry | | Text box Maximum Response Length: 100 characters |
| | 2(c) <i>Controlling Entity</i> Employer Identification Number: | Text Entry | | Text box Maximum Response Length: 10 characters |
| Applicant Mailing Information | 3(a) <i>Applicant</i> Mailing Address | | | |
| | Address | <i>Applicant's</i> Address displays | | Prepopulated |
| | City | <i>Applicant's</i> City displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | State | <i>Applicant's</i> State displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | Nine-Digit Zip Code | <i>Applicant's</i> Nine-Digit Zip Code displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| Applicant Shipping Information | 3(b) <i>Applicant</i> Shipping Address | Prepopulated | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | Address | <i>Applicant's</i> Address displays | | Prepopulated |

| | | | | |
|--------------------------------------|---|--|---|----------------------|
| | City | <i>Applicant's City</i> displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | State | <i>Applicant's State</i> displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | Nine-Digit Zip Code | <i>Applicant's Nine-Digit Zip Code</i> displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| Applicant Contact Information | | | <p>Representatives of the <i>Applicant</i> and <i>Controlling Entity</i> (if applicable), should not provide private, personal contact information in response to Question 5. Only official, public contact information should be provided.</p> <p>Should the <i>Applicant</i> be selected to receive an <i>NMTC Allocation</i>, the CDFI Fund reserves the right to publish the <i>Applicant's</i> response to select questions in the <i>Applicant Information</i> and <i>Business Strategy</i> sections, including <i>Public Contact Person</i> information provided in Question 5(c).</p> | |
| | 4(a) <i>Applicant Authorized Representative</i> Information Designate an <i>Authorized Representative</i> for this Application | Text Entry | Only the AMIS user designated as the <i>Authorized Representative</i> in Question 5(a) will be eligible to sign the <i>Allocation Application</i> . | Search Records |
| | | <p>AMIS record displays the following fields:</p> <ol style="list-style-type: none"> 1. Title 2. Mailing Street 3. Mailing City 4. Mailing State/Province 5. Mailing Zip/Postal Code 6. Business Phone | Once Authorized Representative is identified, the AMIS record for that person will appear. | AMIS record displays |

| | | | | |
|---------------------------------------|--|--|---|----------------------|
| | | 7. Email | | |
| | 4(b) <i>Application Contact Person Information</i> | Text Entry | The Application Contact Person is the individual that the CDFI Fund may contact—jointly with the <i>Authorized Representative</i> —during the course of the <i>Allocation Application</i> review with questions or requests for additional information regarding the <i>Allocation Application</i> . It is strongly recommended that the <i>Application Contact Person</i> listed is someone other than the <i>Applicant Authorized Representative</i> . | Search Records |
| | | AMIS record displays the following fields: 1. Title 2. Mailing Street 3. Mailing City 4. Mailing State/Province 5. Mailing Zip/Postal Code 6. Business Phone 7. Email | Once Authorized Representative is identified, the AMIS record for that person will appear. | AMIS record displays |
| CDE Certification Information: | 5(a) Has the <i>Applicant</i> already been certified as a <i>CDE</i> by the CDFI Fund or submitted a <i>CDE Certification Application</i> by the deadline in the <i>NOAA</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | An <i>Applicant's CDE Certification Application</i> must be submitted through AMIS no later than 5 pm Eastern Time on the date of the CDE Certification deadline specified in the NOAA to be considered for an <i>NMTC Allocation</i> in this Round. The <i>CDE Certification Application</i> is available on the CDFI Fund's website at www.cdfifund.gov . The CDFI Fund cannot process a <i>CDE Certification Application</i> unless each entity seeking certification as a <i>CDE</i> : a) is a legal entity and is a domestic corporation or partnership for federal tax purposes; and b) has a valid and distinct EIN. CDE service area amendment requests will not be considered for purposes of this application unless filed by the deadline stated in this Round's NOAA. | Dropdown Menu |
| | 5(b) By the stated deadline in the <i>NOAA</i> , is the <i>Applicant</i> filing a service area | <input type="checkbox"/> Yes | | Dropdown Menu |

| | | | | |
|--|--|---|---|---------------|
| | amendment in connection with this application? | <input type="checkbox"/> No | | |
| Prior CDFI Award Information | 6. Is the prior CDFI Award information complete? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Please review your prior awardee data table (Q. 42) for accuracy. Select "Yes" when you have confirmed that the data in this table is accurate. If you have not received a prior award from the CDFI Fund, select "Yes". | Dropdown Menu |
| | 7. Is the prior NMTC Award information complete? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Please review your prior awardee data table (Q. 43) for accuracy. Select "Yes" when you have confirmed that the data in this table is accurate. If you have not received a prior award from the CDFI Fund, select "Yes". | Dropdown Menu |
| Application Registration Submission | Select "Yes - I want to Lock and Save my Application Registration" in the field below to lock and save your NMTC Application Registration responses. | Yes - I want to Lock and Save my Application Registration | You must complete all the fields in this section, select "Yes - I want to Lock and Save my Application Registration" in the field below, and click the "Save" button to successfully submit your NMTC Application Registration. | Dropdown Menu |
| | Yes - I want to Lock and Save my Application Registration | Check Box | | Check Box |

APPLICATION MATERIALS

In this section of the electronic NMTC Application in AMIS a link has been provided to the NMTC Apply page of the CDFI Fund's website. *Applicants* should use this link to access the CY 2023 Application materials. *Applicants* are required to confirm in AMIS that they have reviewed the Application Materials in order to submit the electronic NMTC Application in AMIS.

Application Materials

1. **CY 2023 Notice of Allocation Authority**
2. **CY 2023 NMTC Application**
3. **CY 2023 Electronic Application Instructions**
4. **CY 2023 Application FAQs**

| Question | Question Text | Response | Question Notes | Field Type |
|--|---|---|---|---------------|
| Confirmation of Application Materials | Has the <i>Applicant</i> read the Application Materials that provide guidance in completing the NMTC Application? | <input type="checkbox"/> Yes <input type="checkbox"/> No | The <i>Applicant</i> must read the Application Materials and confirm with a 'Yes' before starting the NMTC Application. | Dropdown Menu |

ASSURANCES AND CERTIFICATIONS

Generally, the *Applicant* must provide the Assurances and Certifications below in order to apply for an *NMTC Allocation*.

A. General Certifications

With regard to the General Certifications (below):

- If the *Applicant* is unable to provide General Certifications numbered 1 through 9; the *Applicant* is ineligible to apply for an *NMTC Allocation*.
- If the *Applicant* is unable to provide General Certifications numbered 10 through 17; the *Applicant* must provide a written explanation in the text box provided in the electronic *Allocation Application*. The CDFI Fund will consider the explanation provided and determine, in its sole discretion, whether the *Applicant* is eligible to apply for an *NMTC Allocation*.

Please select “True,” “False,” or “Not Applicable” to each certification. By selecting “True” the *Applicant* is certifying that the corresponding statement is true. By selecting “False” the *Applicant* is certifying that the corresponding statement is not true. By selecting “Not Applicable” the *Applicant* is certifying that the corresponding statement is not applicable to their application.

Instructions: Where the *Applicant* is unable to answer “True” to one or more of the statements in items 10 through 17 of the General Certifications, the *Applicant* must submit a written explanation with this *Allocation Application* that clearly identifies the item number(s) and corresponding statement(s) it is unable to certify. The written explanation should also identify the applicable specific entity and/or individual by name. If the *Applicant* submits a written statement in response to items 12(c), 12(e), 13(c), 14(c) or 15(c), it should identify and summarize the litigation or regulatory matters typically disclosed in the applicable entity’s annual SEC filings for 2019, 2020, 2021 and quarterly for 2022.

As the *Authorized Representative* of the *Applicant*, I hereby assure and certify that:

1. The *Applicant* is duly organized and validly existing under the laws of the jurisdiction in which it was incorporated or otherwise established.

True _____ False _____

2. The *Applicant* has the legal authority to apply for an *NMTC Allocation*, and the institutional, managerial, and financial capability to ensure proper use of such allocation as described in this *Allocation Application* and in accordance with IRC §45D and the *NMTC Program Income Tax Regulations*, and all applicable Department of the Treasury regulations and guidance documents.

True _____ False _____

3. The *Applicant’s* governing body (e.g., Board of Directors) has by proper resolution or similar action authorized the signing and filing of this *Allocation Application*, including all understandings and assurances contained herein, and directed and authorized me as the *Authorized Representative* of

the *Applicant* to act in connection with this *Allocation Application* and to provide such additional information as may be required.

True _____ False _____

4. The *Applicant* will give the Department of the Treasury, the Comptroller General of the United States, and if appropriate, the State of the *Applicant's* incorporation, through any *Authorized Representative*, access to and the right to examine all records, books, papers, or documents related to the provision of an *NMTC Allocation*; and will establish a proper accounting system in accordance with generally accepted accounting standards; Office of Management and Budget (OMB) regulations, guidelines, and circulars; and Department of the Treasury regulations and directives.

True _____ False _____

5. The *Applicant* will establish safeguards to prohibit employees from using their positions for purposes that constitute or present personal or organizational conflicts of interest, or personal gain, either real or perceived.

True _____ False _____

6. The *Applicant* will comply with all applicable requirements of the Community Renewal Tax Relief Act of 2000 (26 U.S.C. 45D), and as amended, regulations implementing the NMTC Program and all other applicable Department of the Treasury regulations, guidance, and implementing procedures (and any regulations or procedures which are later promulgated to supplement or replace them).

True _____ False _____

7. The *Applicant* will comply, as applicable and appropriate, with the requirements of OMB Circulars and any regulations and circulars which are later promulgated to supplement or replace them, including standards for fund control and accountability.

True _____ False _____

8. The *Applicant* will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing the NMTC Program.

True _____ False _____

9. The *Applicant* has not knowingly and willfully made or used a document or writing containing any false, fictitious, or fraudulent statement or entry as part of this *Allocation Application* or any related document, correspondence, or communication. The *Applicant* and its *Authorized Representative* are aware that, under 18 U.S.C. 1001, whoever knowingly and willfully makes or uses such document or writing shall be fined or imprisoned for not more than five years, or both.

True _____ False _____

10. The *Applicant* and its *Affiliates* have never filed for bankruptcy.

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 10. (Maximum Response Length: 1,000 Characters)

11. The following entities are not federally regulated financial institutions currently under any *Enforcement Action* from any federal regulator.

| | True | False | Not Applicable |
|---------------------------|-------|-------|----------------|
| <i>Applicant</i> | _____ | _____ | |
| <i>Controlling Entity</i> | _____ | _____ | _____ |
| <i>Affiliate</i> | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 11. (Maximum Response Length: 1,000 Characters)

12. Certifications for the *Controlling Entity*:

(a) The *Controlling Entity* has not within a three-year period preceding the date of this *Allocation Application* been indicted, charged with or convicted of, or had a civil judgment rendered against it for commission of fraud or a criminal offense;

True _____ False _____ Not Applicable _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 12(a). (Maximum Response Length: 1,000 Characters)

(b) The *Controlling Entity* has not within a three-year period preceding the date of this *Allocation Application* been indicted, charged with or convicted of, or had a civil judgment rendered against it for violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

True _____ False _____ Not Applicable _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 12(b). (Maximum Response Length: 1,000 Characters)

(c) The *Controlling Entity* is not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraphs 14(a) and 14(b) of this certification;

True _____ False _____ Not Applicable _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 12(c). (Maximum Response Length: 1,000 Characters)

(d) The *Controlling Entity* has not within the three-year period preceding the date of this *Allocation Application* been the subject of any formal investigation or disciplinary proceeding by a government agency, regulatory body, or professional association in connection with any matter which may have a material adverse effect on the *Applicant* or its financial condition or the *Applicant's* ability to carry out the authorized uses of an *NMTC Allocation*; or

True _____ False _____ Not Applicable _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 12(d). (Maximum Response Length: 1,000 Characters)

(e) The *Controlling Entity* has not within the three-year period preceding the date of this *Allocation Application* been found liable in any civil legal action involving creditor's claims of greater than \$500,000.

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 12(e). (Maximum Response Length: 1,000 Characters)

13. Certifications for the *Applicant*:

(a) The *Applicant* has not within a three-year period preceding the date of this *Allocation Application* been convicted of or had a civil judgment rendered against it for commission of fraud or a criminal offense;

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 13(a). (Maximum Response Length: 1,000 Characters)

(b) The *Applicant* has not within a three-year period preceding the date of this *Allocation Application* been convicted of or had a civil judgment rendered against it for violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 13(b). (Maximum Response Length: 1,000 Characters)

(c) The *Applicant* has not within the three-year period preceding the date of this *Allocation Application* been found liable in any civil legal action involving creditor's claims of greater than \$500,000.

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 13(c). (Maximum Response Length: 1,000 Characters)

14. The following individuals or entities of the *Applicant*:

(a) have not within a three-year period preceding the date of this *Allocation Application* been convicted of or had a civil judgment rendered against him/her for commission of fraud or a criminal offense.

True False N/A

| | | | |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 14(a). (Maximum Response Length: 1,000 Characters)

(b) have not within a three-year period preceding the date of this *Allocation Application* been convicted of or had a civil judgment rendered against it for violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

| | True | False | N/A |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 14(b). (Maximum Response Length: 1,000 Characters)

(c) have not within the three-year period preceding the date of this *Allocation Application* been found liable in any civil legal action involving creditor's claims of greater than \$500,000.

| | True | False | N/A |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 14(c). (Maximum Response Length: 1,000 Characters)

15. Certifications for the *Applicant*:

(a) The *Applicant* has not within a three-year period preceding the date of this *Allocation Application* been indicted for or charged with the commission of fraud or a criminal offense;

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 15(a). (Maximum Response Length: 1,000 Characters)

(b) The *Applicant* has not within a three-year period preceding the date of this *Allocation Application* been indicted for or charged with the violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 15(b). (Maximum Response Length: 1,000 Characters)

(c) The *Applicant* is not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraphs 15(a) and 15(b) of this certification;

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 15(c). (Maximum Response Length: 1,000 Characters)

(d) The *Applicant* has not within the three-year period preceding the date of this *Allocation Application* been the subject of any formal investigation or disciplinary proceeding by a government agency, regulatory body, or professional association in connection with any matter which may have a material adverse effect on the *Applicant* or its financial condition or the *Applicant's* ability to carry out the authorized uses of an *NMTC Allocation*.

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 15(d). (Maximum Response Length: 1,000 Characters)

(e) The following entities have not within the three-year period preceding the date of this *Allocation Application* been the subject of any formal investigation by the Internal Revenue Service related to any NMTC transactions or activities.

| | | |
|------------------|------------|-------------|
| <i>Applicant</i> | True _____ | False _____ |
| <i>Affiliate</i> | True _____ | False _____ |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 15(e). (Maximum Response Length: 1,000 Characters)

16. The following individuals or entities of the *Applicant*:

(a) have not within a three-year period preceding the date of this *Allocation Application* been indicted for or charged with the commission of fraud or a criminal offense;

| | True | False | N/A |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 16(a). (Maximum Response Length: 1,000 Characters)

(b) have not within a three-year period preceding the date of this *Allocation Application* been indicted for or charged with the violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

| | True | False | N/A |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 16(b). (Maximum Response Length: 1,000 Characters)

(c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraphs 16(a) and 16(b) of this certification;

| | True | False | N/A |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 16(c). (Maximum Response Length: 1,000 Characters)

(d) have not within the three-year period preceding the date of this *Allocation Application* been the subject of any formal investigation or disciplinary proceeding by a government agency, regulatory body, or professional association in connection with any matter which may have a material adverse effect on the *Applicant* or its financial condition or the *Applicant's* ability to carry out the authorized uses of an *NMTC Allocation*.

| | True | False | N/A |
|-----------------|-------|-------|-------|
| Officers | _____ | _____ | |
| Directors | _____ | _____ | |
| Majority Owners | _____ | _____ | _____ |
| Key Employees | _____ | _____ | |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 16(d). (Maximum Response Length: 1,000 Characters)

17. The *Applicant* has never been delinquent on amounts due to the Internal Revenue Service or on any debts owed to Federal, State, or local government.

True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 17. (Maximum Response Length: 1,000 Characters)

B. Certification Regarding Debarment, Suspension, and Other Responsibility Matters — Primary Covered Transactions

- This Certification is a material representation of fact upon which reliance is placed when the CDFI Fund enters into an *Allocation Agreement* with the *Applicant*. If it is later determined that the *Applicant* knowingly rendered an erroneous or false Certification, the CDFI Fund may terminate, in its sole discretion, the *Allocation Agreement* for cause or default.
- The *Applicant* must provide immediate written notice to the CDFI Fund if at any time the *Applicant* learns that this Certification was erroneous or false when submitted or has become erroneous or false by reason of changed circumstances.
- The terms “covered transactions,” “debarred,” “suspended,” “ineligible,” “lower tier covered transaction,” “participant,” “person,” “primary covered transaction,” “*Principal*,” “proposal,” and “voluntarily excluded,” as used in this Certification, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. The *Applicant* may contact the CDFI Fund for assistance in obtaining a copy of those regulations (31 CFR Part 19).
- The *Applicant* agrees that, by submitting this *Allocation Application*, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the CDFI Fund.
- The *Applicant* further agrees that, by submitting this *Allocation Application*, it will include the Certification titled “Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion-Lower Tier Covered Transaction,” to be provided by the CDFI Fund, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions (see 31 CFR part 19, Appendix B).
- A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous or false. A participant may decide the method and frequency by which it determines the eligibility of its *Principals*. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-procurement Programs. See www.sam.gov for more information.
- Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the Certification hereby required. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- Except for transactions authorized under paragraph 4 above, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from

participation in this transaction, in addition to other remedies available to the Federal Government, the CDFI Fund may terminate, in its sole discretion, the *Allocation Agreement* for cause or default.

WITH REGARD TO THE CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (BELOW):

- If the *Applicant* is unable to provide **any** of the Certifications in section B below; the *Applicant* must submit a **written explanation** after each statement it is unable to certify in its *Allocation Application*. The CDFI Fund will consider the explanation provided and determine, in its sole discretion, whether the *Applicant* is eligible to apply for an *NMTC Allocation*.
- If the *Applicant* fails to furnish either the Certification or a written explanation, the *Applicant* is not eligible to apply for an *NMTC Allocation*.

The prospective primary participant (the *Applicant*) certifies to the best of its knowledge and belief the following:

1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

| | | |
|-------------------|-----------|------------|
| <i>Applicant</i> | True_____ | False_____ |
| <i>Principals</i> | True_____ | False_____ |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 1. (Maximum Response Length: 1,000 Characters)

2. have not within a three-year period preceding this *Allocation Application* been convicted of or had a civil judgment rendered against them for:

- (a) commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction;

| | | |
|-------------------|-----------|------------|
| <i>Applicant</i> | True_____ | False_____ |
| <i>Principals</i> | True_____ | False_____ |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 2(a). (Maximum Response Length: 1,000 Characters)

- (b) violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

| | | |
|-------------------|-----------|------------|
| <i>Applicant</i> | True_____ | False_____ |
| <i>Principals</i> | True_____ | False_____ |

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 2(b). (Maximum Response Length: 1,000 Characters)

3. are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (2)(b) of this certification;

Applicant True _____ False _____
Principals True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 3. (Maximum Response Length: 1,000 Characters)

4. have not within a three-year period preceding this *Allocation Application* had one or more public transactions (Federal, State, or local) terminated for cause or default.

Applicant True _____ False _____
Principals True _____ False _____

If false is selected, the *Applicant* must provide an explanation in the text box below for why it is unable to certify the statement in Question 4. (Maximum Response Length: 1,000 Characters)

Instructions Where the *Applicant* is unable to certify to one or more of the statements above Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions, the *Applicant* must submit a written explanation after each statement it is unable to certify in its *Allocation Application* that clearly identifies the applicable specific entity and/or individual by name.

Supplemental Certification

Applicants unable to select “True” for a statement(s) in General Certifications 10 through 17 and statement(s) one through four in the Certification Regarding Debarment, Suspension, and Other Responsibility Matters — Primary Covered Transactions must “Agree” to the statement below before submitting their *Allocation Application*.

The *Applicant* hereby certifies based upon reasonable information and after due inquiry, there are no matters previously disclosed by the *Applicant* in the CY 2023 New Markets Tax Credit (NMTC) Program Application and Written Explanation; any other litigation or *Enforcement Actions* currently in effect with regard to the *Applicant*, its *Affiliates*, its *Controlling Entity*, or any of its managed *Subsidiary CDEs*; or any ongoing obligations or restrictions resulting from any litigation or *Enforcement Actions* with regard to the *Applicant*, its *Affiliates*, its *Controlling Entity*, or any of its managed *Subsidiary CDEs*; that will have a material adverse effect on the *Applicant*, its financial condition or ability to carry out the authorized uses of a CY 2023 NMTC Program allocation, should the *Applicant* be successful in the CY 2023 round.

Instructions: The Supplemental Certification is not applicable for *Applicants* that selected “True” for each statement in the Assurances and Certifications related to this *NMTC Allocation Application*.

| Section | Question | Response | Question Notes | Field Type |
|-----------------------------------|--|---|---|---------------|
| Supplemental Certification | Did the <i>Applicant</i> respond with a ‘False’ to any statements in Question 10 through 17? | <input type="checkbox"/> Yes <input type="checkbox"/> No | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Dropdown Menu |

APPLICANT INFORMATION

NOTE: The answer to question 2(j) must be “No.” An *Applicant* and its *Affiliates* may collectively submit only one application for an *NMTC Allocation* under this Round of the NMTC Program. If separate *Allocation Applications* are received from multiple *Affiliated* entities, the CDFI Fund reserves the right to reject all such applications. Likewise, *Subsidiary CDEs* are ineligible to submit an *Allocation Application*.

For the purposes of this requirement, in addition to assessing whether *Applicants* meet the definition of the term “*Affiliate*” found in the *Glossary of Terms* at the end of this *Allocation Application*, the CDFI Fund will consider, among other things: (i) whether different *Applicants* have the same individual(s), including the *Authorized Representative*, staff, board members and/or consultants, involved in day-to-day management, operations and/or investment responsibilities; (ii) whether *Applicants* have business strategies and/or proposed activities that are so similar or so closely related that, in fact or effect, may be viewed as a single entity; and/or (iii) whether the applications submitted by separate *Applicants* contain significant narrative, textual or other similarities such that they may, in fact or effect, be viewed as the substantially identical applications. In such cases, the CDFI Fund will reject all applications received from such entities. For more information regarding these requirements, please review the *NOAA and Allocation Application FAQ Document* on the CDFI Fund’s website at www.cdfifund.gov. If you have questions about whether two entities are *Affiliated*, you should contact the CDFI Fund within a week of the *NMTC Allocation Application* release date.

| Question | Question Text | Response | Question Notes | Field Type |
|---|---|--------------------------------|---|-------------------------|
| 1. Applicant NMTC Allocation Request | Total dollar amount of <i>NMTC Allocation</i> requested in this <i>Allocation Application</i> : | \$_____ | | Numerical-Dollar Amount |
| 2. Applicant² Information | (a) <i>Applicant Name</i> | <i>Applicant Name</i> displays | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |
| | (b) <i>Applicant Employer</i> | <i>Applicant Employer</i> | This field is prepopulated from the Organization profile and locked. To make any changes, please update the Organization profile in AMIS. | Prepopulated |

² For the purposes of Questions 2-6 in this *Applicant Information* section, the term *Applicant* shall only apply to the entity applying for a *NMTC Allocation*, and not to *Subsidiary* entities that may receive a transfer of all or part of a *NMTC Allocation*.

| | | | | |
|--|---|--|--|---------------|
| | Identification Number: | Identification Number displays | | |
| | (c) Structure of the <i>Applicant</i> Is the Applicant a For-profit or Non-profit entity?* | <input type="checkbox"/> For-Profit <input type="checkbox"/> Non-Profit | | Dropdown Menu |
| | Select all that apply: | <input type="checkbox"/> Credit Union <input type="checkbox"/> Small Business Investment Company / Specialized Small Business Investment Company <input type="checkbox"/> CDFI <input type="checkbox"/> Publicly Traded Company <input type="checkbox"/> New Market Venture Capital Company <input type="checkbox"/> Government-Controlled Entity <input type="checkbox"/> Faith-Based Institution | Hold the control button to make multiple selections from the list. | Dropdown Menu |

| | | | | |
|--|---|---|--|---------------|
| | | <input type="checkbox"/> Thrift, Bank or Bank Holding Company <input type="checkbox"/> Real Estate Development Company <input type="checkbox"/> Series of Funds <input type="checkbox"/> None of the above | | |
| | (d) Is the <i>Applicant</i> Minority-owned or Minority-controlled? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | (e) Is the <i>Applicant</i> a domestic corporation or partnership for federal tax purposes? | The selection the <i>Applicant</i> made to this question in the Application Registration displays | <p>If the <i>Applicant</i> is not a domestic corporation or partnership for federal tax purposes, it is <u>not</u> eligible to apply for an <i>NMTC Allocation</i>).</p> <p>This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted.</p> | Prepopulated |
| | (f) Is the <i>Applicant</i> Native American-owned or Native American-controlled? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | (g) <i>Applicant's</i> date of incorporation | Applicant's date of incorporation | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |

| | | | | |
|--|---|---|--|-------------------------|
| | or formation (month/day/year) | or formation displays | | |
| | (h) <i>Applicant's</i> total assets as of the date of this <i>Allocation Application</i> : | \$_____ | | Numerical-Dollar Amount |
| | (i) <i>Applicant's</i> fiscal year end (month/day) | | | |
| | <i>Applicant's</i> Fiscal Year End Month | <i>Applicant's</i> Fiscal Year End Month displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | <i>Applicant's</i> Fiscal Year End Day | <i>Applicant's</i> Fiscal Year End Day displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | (j) Does the <i>Applicant</i> have any <i>Affiliates</i> that are applying for an <i>NMTC Allocation</i> in this Round? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| 3. Controlling Entity Information | Is the <i>Applicant</i> designating a <i>Controlling Entity</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <p>This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted.</p> <p>A <i>CDE</i> may only designate one organization as a <i>Controlling Entity</i>. This entity must meet the definition of <i>Controlling Entity</i> set forth in the Glossary of Terms of this <i>Allocation Application</i>. Individuals cannot be deemed to be <i>Controlling Entities</i>.</p> <p><i>Applicants</i> may use this <i>Controlling Entity</i> to assist in demonstrating an organizational track record and in completing the related exhibits. An <i>Applicant</i></p> | Prepopulated |

| | | | | |
|---|---|--|---|--|
| | | | <p>may identify the parent organization or the company of its parent (i.e. “grandparent”) as its <i>Controlling Entity</i> to demonstrate an organizational track record, provided that the relationship between the “grandparent” and the <i>Applicant</i> conforms to the CDFI Fund’s definition of a <i>Controlling Entity</i>.</p> <p>Should the <i>Applicant</i> receive an <i>NMTC Allocation</i> in this Round, the designated <i>Controlling Entity</i> will need to continue in that capacity throughout the term of the <i>Allocation Agreement</i> and for any future <i>Allocation Agreements</i> with the CDFI Fund, should the <i>Applicant</i> apply and receive an allocation in a future round. Any <i>Applicant</i> that receives an <i>NMTC Allocation</i> in this Round must designate the same <i>Controlling Entity</i> as designated in this <i>Allocation Application</i> in any <i>Allocation Applications</i> for future rounds.</p> <p><i>Applicants</i> that received an <i>NMTC Allocation</i> in the CY 2013 round or later rounds are expected to maintain the <i>Controlling Entity</i> stated in their <i>Allocation Agreement</i> in Question 3(a). Please see the Application FAQ for further guidance and information.</p> <p>The <i>Controlling Entity Representative</i> is required to affirm, through submission of a Signature Page, that it is indeed the <i>Controlling Entity</i> of the <i>Applicant</i> and supports the <i>Applicant’s Allocation Application</i>.</p> | |
| (a) <i>Controlling Entity Name:</i> | <i>Controlling Entity Name</i> displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated | |
| (b) <i>Controlling Entity Employer Identification Number:</i> | <i>Controlling Entity Employer Identification Number</i> displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated | |
| (c) <i>Controlling Entity Mailing Address:</i> | | | | |
| Address | Text Entry | | Text box Maximum Response Length: 100 characters | |

| | | | | |
|--|--|--|--|--|
| | City | Text Entry | | Text box Maximum Response Length: 100 characters |
| | State | Select State From List | | Dropdown Menu |
| | Nine-Digit Zip Code: | Text Entry | | Text box Maximum Response Length: 10 characters |
| | (d) Structure of the <i>Controlling Entity</i> : Is the <i>Controlling Entity</i> a For- profit or Non- profit entity?* | <input type="checkbox"/> For-Profit <input type="checkbox"/> Non-Profit | | Dropdown Menu |
| | Structure of the <i>Controlling Entity</i> (check all that apply) | <input type="checkbox"/> Credit Union <input type="checkbox"/> Small Business Investment Company / Specialized Small Business Investment Company <input type="checkbox"/> CDFI | Hold the control button to make multiple selections from the list. | Dropdown Menu |

| | | | |
|---|---|--|---------------|
| | <input type="checkbox"/> Publicly Traded Company <input type="checkbox"/> New Market Venture Capital Company <input type="checkbox"/> Government-Controlled Entity <input type="checkbox"/> Faith-Based Institution <input type="checkbox"/> Thrift, Bank or Bank Holding Company <input type="checkbox"/> Real Estate Development Company <input type="checkbox"/> Series of Funds <input type="checkbox"/> None of the above | | |
| (e) Is the <i>Controlling Entity</i> Minority-owned or Minority-controlled? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| (f) Is the <i>Controlling Entity</i> Native American-owned or Native | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |

| | | | | |
|---|---|---|---|-------------------------|
| | <i>American-controlled?</i> | | | |
| | (g) Total assets of <i>Controlling Entity</i> : | \$_____ | | Numerical-Dollar Amount |
| | Please select the track record of either the <i>Applicant</i> or <i>Controlling Entity</i> to complete all tables in Exhibit B, as well as Table D1 and Table E1. | <input type="checkbox"/> <i>Applicant</i> <input type="checkbox"/> <i>Controlling Entity</i> | The response to this question will prepopulate the noted tables with either <i>Applicant</i> or <i>Controlling Entity</i> based on which is selected. | Dropdown Menu |
| 4. Applicant Mailing Information | <i>Applicant</i> Mailing address: | | | |
| | Address | <i>Applicant's</i> Address displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | City | <i>Applicant's City</i> displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | State | <i>Applicant's State</i> displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | Nine-Digit Zip Code | <i>Applicant's Nine-Digit Zip Code</i> displays | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | <i>Address</i> Shipping Address: | | | |

| | | | | |
|---|---|--|---|--------------|
| | Address | <i>Applicant's Address displays</i> | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | City | <i>Applicant's City displays</i> | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | State | <i>Applicant's State displays</i> | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| | Nine-Digit Zip Code | <i>Applicant's Nine-Digit Zip Code displays</i> | This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted. | Prepopulated |
| 5(a) Applicant Contact Information | <i>Applicant Contract Information</i> | | <p>Representatives of the <i>Applicant</i> and <i>Controlling Entity</i> (if applicable) should not provide private, personal contact information in response to Question 5. Only official, public contact information should be provided.</p> <p>Should the <i>Applicant</i> be selected to receive an <i>NMTC Allocation</i>, the CDFI Fund reserves the right to publish the <i>Applicant's</i> response to select questions in the <i>Applicant</i> Information and Business Strategy sections, including <i>Public Contact Person</i> information provided in Question 5(c).</p> | |
| | (a) <i>Applicant Authorized Representative Information: Designate an Authorized Representative for this Application</i> | <i>Applicant Authorized Representative Name Displays</i> | <p>This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted.</p> <p>Only the AMIS user designated as the <i>Authorized Representative</i> in Question 5(a) will be eligible to sign the <i>Allocation Application</i>.</p> | Prepopulated |
| | (b) <i>Application Contact Person Information</i> | <i>Application Contact Person Name Displays</i> | <p>This field is locked. This is an Application Registration question that cannot be changed after the Application Registration has been submitted.</p> <p>The Application Contact Person is the individual that the CDFI Fund may contact—jointly with the <i>Authorized Representative</i>—during the course of the <i>Allocation Application</i> review with questions or requests for additional information regarding the <i>Allocation Application</i>. It is strongly recommended</p> | Prepopulated |

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| | | | that the <i>Application Contact Person</i> listed is someone other than the <i>Applicant Authorized Representative</i> . | |
| | (c) <i>Public Contact Person Information:</i> | Text Entry | | Search Records |
| | | <p>AMIS record displays the following fields:</p> <ol style="list-style-type: none"> 1. Title 2. Mailing Street 3. Mailing City 4. Mailing State/Province 5. Mailing Zip/Postal Code 6. Business Phone 7. Email | Once <i>Public Contact Person</i> is identified, the AMIS record for that person will appear. | AMIS record displays |
| 5(b) Controlling Entity Contract Information | (a) <i>Controlling Entity Representative Name</i> | Text Entry | | Search Records |
| | (b) <i>Controlling Entity Representative Information</i> | <p>AMIS record displays the following fields:</p> <ol style="list-style-type: none"> 1. Title 2. Mailing Street 3. Mailing City 4. Mailing State/Province 5. Mailing Zip/Postal Code | Once <i>Controlling Entity Representative</i> is identified, the AMIS record for that person will appear. | |

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| | | 6. Business Phone 7. Email | | |
| 6. CDE Certification Information | (a) Has the <i>Applicant</i> already been certified as a <i>CDE</i> by the CDFI Fund or submitted a <i>CDE Certification Application</i> by the deadline in the <i>NOAA</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | This field is prepopulated from the AMIS Profile and locked. To make any changes, please update the AMIS Profile. An Applicant's CDE Certification Application must be submitted through AMIS no later than 5 pm Eastern Time on the date of the CDE Certification deadline specified in the NOAA to be considered for an NMTC Allocation in this Round. The CDE Certification Application is available on the CDFI Fund's website at www.cdfifund.gov. The CDFI Fund cannot process a CDE Certification Application unless each entity seeking certification as a CDE: a) is a legal entity and is a domestic corporation or partnership for federal tax purposes; and b) has a valid and distinct EIN. CDE service area amendment requests will not be considered for purposes of this application unless filed by the deadline stated in this Round's NOAA. | Prepopulated |
| | If Yes, provide <i>CDE Certification Number</i> : | <i>CDE Certification Control Number Displays</i> | This field is prepopulated from the AMIS Profile and locked. To make any changes, please update the AMIS Profile. | Prepopulated |
| | (b) By the stated deadline in the <i>NOAA</i> , is the <i>Applicant</i> filing a service area amendment in connection with this application? | <input type="checkbox"/> Yes <input type="checkbox"/> No | This field is prepopulated from the AMIS Profile and locked. To make any changes, please update the AMIS Profile. | Prepopulated |
| 7. Service Area | Identify the type of service area that the <i>Applicant</i> will serve. The service area identified here must be identical to the service area | <input type="checkbox"/> National service area <input type="checkbox"/> Multi-state service area | The service area identified here must be identical to the service area identified by the <i>Applicant</i> in its <i>CDE Certification Application</i> approved by the CDFI Fund: The CDFI Fund will use the most recently approved <i>CDE</i> certification service area information for <i>Applicants</i> with a Multi-state, Statewide or Local service area. This includes any service area amendments submitted by the <i>Applicant</i> that adhere to criteria in the <i>NOAA</i> . | Dropdown Menu |

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| | identified by the <i>Applicant</i> in its <i>CDE Certification Application</i> approved by the CDFI Fund: | <input type="checkbox"/> Statewide (or territory-wide) service area <input type="checkbox"/> Local service area (e.g., neighborhoods, cities, a county or contiguous counties, or metropolitan areas) within a state or territory | If an <i>Applicant</i> would like to focus its investments in this <i>Allocation Application</i> on a subset of its certified service area, it may discuss this in the narrative response to Question 17. | |
| 8. Geographic Area | Did the <i>Applicant</i> select 'National Service Area' in Question 7? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If the <i>Applicant</i> has a national service area, please identify at least one state and up to six additional states for which you expect to receive the largest amount of projected <i>Qualified Low-Income Community Investments (QLICs)</i> . | Dropdown Menu |
| | States | Dropdown Menu | Hold down the 'Control' key to make multiple selections from the list. | Dropdown Menu |
| 9. Urban or Rural Focus | Estimate the percentage of activities, by dollar amount that will be directed to each of the following markets: | _____ % Major urban areas (Counties in metropolitan area with a population equal to or greater than 1 million, including both central city and surrounding suburbs) _____ % Minor urban areas (Counties in metropolitan area with a population less than 1 million, including both central city | The total percentage should add up to 100% of the <i>NMTC Allocation</i> . | Numerical-Percentage |

| | | | | |
|---|--|--|-----------------|---------------|
| | | and surrounding suburbs) _____ % Non-Metropolitan Counties | | |
| 10. Predominant Financing Activity | Please indicate the <i>Applicant's</i> predominant anticipated financing activity: | <input type="checkbox"/> Operating Business financing <input type="checkbox"/> Real Estate financing: (check only one accompanying sub-category) <input type="checkbox"/> Retail <input type="checkbox"/> Office Space <input type="checkbox"/> Industrial or Manufacturing <input type="checkbox"/> Community Facilities <input type="checkbox"/> Mixed-use (housing, commercial, or retail) <input type="checkbox"/> Other Real Estate Financing: <input type="checkbox"/> Financing of other CDEs | Check only one. | Dropdown Menu |

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|------------------------------|--|--|--|---|
| | | <input type="checkbox"/> Loan purchase from other CDEs <input type="checkbox"/> Financial Counseling and Other Services | | |
| 11. Executive Summary | <p>Provide a summary of the <i>Applicant's</i> business strategy including the following:</p> <ul style="list-style-type: none"> • A brief summary of the <i>Applicant's</i> service area, including the specific needs or challenges that it intends to address with NMTCs. • A brief summary of how the <i>Applicant's</i> overall community development strategy and NMTC investments will address the specific needs or challenges identified. | Text Entry | <p>Please note that Question 11 is meant to be a brief <u>summary</u> of the <i>Applicant's</i> overall business strategy, thus it is not necessary to provide a detailed discussion of items that will be specifically covered in detail in other parts of the Business Strategy section. <i>Applicants</i> may discuss the strategy of the <i>Controlling Entity</i> if one has been identified.</p> | Text box Maximum Response Length: 5,000 characters |

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| <p>12. Time to Complete</p> | <p>Estimate how long this <i>Allocation Application</i> form took to complete:</p> | <p>Text Entry</p> | <p>For the purpose of estimating hours, <i>Applicants</i> should focus only on the amount of time it took to complete the questions asked in this application. Other activities that are carried out in the normal course of business and are only indirectly related to the completion of this application (e.g., securing investor <i>Commitments</i>; developing a business strategy or marketing plan; etc.) should not be included in this estimation. In the electronic on-line application form, you will not be able to answer this question until <u>all</u> other application questions are complete. You must answer this question in order to complete and submit the on-line application.</p> | <p>Numerical</p> |
|------------------------------------|--|-------------------|---|------------------|

PART I: BUSINESS STRATEGY

Information in Part I is scored during the Phase I stage of the Application review. Total Maximum Points for Part I: 25 points, plus up to 10 additional “priority points” available under sub-sections B and E. Information provided in this section will also be evaluated during the Phase II stage of the Application review. For more information on the *NMTC Allocation* Application review process, please consult the *NOAA*.

NOTE: An *Applicant* will score well in this section to the extent it can articulate, with specificity, its strategy to use an *NMTC Allocation* and can describe a strong, relevant track record, including a track record of serving LICs. Included in this section is the ability to earn “priority points” for meeting the statutory priorities of: 1) investing in Unrelated entities; and/or 2) demonstrating a track record of serving *Disadvantaged Businesses* or *Disadvantaged Communities*. Refer to the *NOAA* for further information on the statutory priorities.

A. Products, Services, and Investment Criteria

NOTE: For the purposes of completing the Business Strategy section and all relevant exhibits, *Real Estate Activities* refers to the development (including construction of new facilities and rehabilitation/enhancement of existing facilities), acquisition, management, or leasing of real estate. *Non-Real Estate Activities* refer to all other types of business activities.

NOTE: An *Applicant* will score well under the Products, Services, and Investment Criteria sub-section to the extent that it clearly describes its financial products and will deploy debt or equity capital, or offer products and services that feature more favorable rates, terms, structuring and non-traditional features when compared with market offerings. Please note, these criteria do not apply for an *Applicant* who intends to use its *NMTC Allocation* to pursue *Financial Counseling and Other Services (FCOS)* as their sole line of business.

NOTE: The NOAA states, “As a condition of eligibility for this Allocation Round, the *Applicant* will not be permitted to use the proceeds of *Qualified Equity Investments (QEIs)* to make *Qualified Low-Income Community Investments (QLICIs)* in *Qualified Active Low-Income Community Businesses (QALICBs)* where *QLICI* proceeds are used, in whole or in part, to repay or refinance a debt or equity provider whose capital was used to fund the *QEI*, or are used to repay or refinance any *Affiliate* of such a debt or equity provider, except where: (i) the *QLICI* proceeds are used to repay or refinance documented reasonable expenditures that are directly attributable to the qualified business of the *QALICB*, and such reasonable expenditures were incurred no more than 24 months prior to the *QLICI* closing date; or (ii) no more than 5% of the total *QLICI* proceeds from the *QEI* are used to repay or refinance documented reasonable expenditures that are directly attributable to the qualified business of the *QALICB*. Refinance includes transferring cash or property, directly or indirectly, to the debt or equity provider or an *Affiliate* of the debt or equity provider.”

| Question Number | Question Text | Response | Question Notes | Field Type |
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| 13. (a) QLICI Uses and Activities | Will the <i>Applicant</i> commit that it will not permit the use of the proceeds of <i>QEIs</i> to make any <i>QLICIs</i> in <i>QALICBs</i> where <i>QLICI</i> proceeds are used to repay or refinance any debt or equity provider or a party related to any debt or equity provider whose capital was used to fund the <i>QEI</i> except where: (i) the <i>QLICI</i> proceeds are used to repay documented reasonable expenditures that are directly attributable to the qualified business of the <i>QALICB</i> , and such reasonable expenditures were made no more than 24 months prior to the <i>QLICI</i> closing date; or (ii) no more than five % of the <i>QLICI</i> proceeds are used to repay or refinance prior investment in the <i>QALICB</i> ? Refinance includes transferring cash or property | <input type="checkbox"/> Yes <input type="checkbox"/> No | If the <i>Applicant</i> selects “No” to Question 13(a), then the <i>Applicant</i> will not be eligible to submit this <i>NMTC Allocation</i> Application. If the <i>Applicant</i> selects “Yes” to Question 13(a), the <i>Applicant</i> will be held to this commitment as a condition of its Allocation Agreement. For additional information, please see the <i>NMTC Compliance & Monitoring Frequently Asked Questions</i> . | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|---|--|---|--|------------------------|
| | directly to any debt or equity provider or indirectly to a party related to any debt or equity provider. | | | |
| 13. (b) (i-iv) Table - QLICI Uses and Activities | Please indicate the activity types of <i>QLICIs</i> in which the <i>Applicant</i> intends to engage (check all that apply), and what percentage of allocations (by dollar amount) will be used for each activity type. (Percentages for (i)-(iv) should add up to 100%): | (i) _____ % Percent Investments in, or loans to, Qualified Active Low-Income Businesses (QALICB) (ii) _____ % Percent Investments in, or loans to, other CDEs. (iii) _____ % Percent Purchases of loans from other CDEs. (iv) _____ % Percent Financial Counseling and Other Services. | Loans / investments will be used to finance: (these three percentages should add up to 100% by dollar amount) (i) Table A1 and Table A5 will be visible if the percentage exceeds zero. (ii) Table A2, Table A5, and Question 14c will be visible if the percentage exceeds zero. (iii) Table A3 and Question 16 will be visible if the percentage exceeds zero. (iv) Table A4 will be visible if the percentage exceeds zero. | Numerical - Percentage |
| 13. (b) (i-iv) Detailed | i. Will the <i>Applicant</i> make investments in, or loans to, Qualified Active Low-Income Businesses (QALICBs)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Based on the percentages entered into the table for Question 13(b) in the previous sub-section, complete the following questions by answering “Yes” to the types of <i>QLICIs</i> where the <i>Applicant</i> indicated greater than zero percent. If the <i>Applicant</i> does not plan to use its allocation for a particular type of <i>QLICI</i> activity, the <i>Applicant</i> should answer “No.” | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--|---|--|------------------------|
| | | (1) _____ % Non-Real Estate Activities (2) _____ % Real Estate Activities where the real estate will be owned (either directly or through an <i>Affiliate</i>) and principally occupied by an Operating Business (3) _____ % Real Estate Activities where the real estate will be principally leased to third-party tenants or sold to a third-party | Total of (1), (2) and (3) Must Equal 100%. | Numerical - Percentage |
| | ii. Will the <i>Applicant</i> make investments in, or loans to, Qualified Active Low-Income Businesses (<i>QALICBs</i>)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | | (1) _____ % Enter percentage for origination of loans, investment of capital, or equity to <i>QALICBs</i> (2) _____ % Enter percentage for Financial Counseling and Other Services | Total of (1) and (2) Must Equal 100%. | Numerical - Percentage |
| | iii. Will the <i>Applicant</i> purchase loans from other <i>CDEs</i> ?* | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|---|--|---|--|---------------|
| | iv. Will the <i>Applicant</i> provide <i>Financial Counseling and Other Services</i> ?* | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | | How will the proposed Financial Counseling and Other Services be provided? <input type="checkbox"/> In conjunction with financing <input type="checkbox"/> As a discrete line of business | | Dropdown Menu |
| 14. Products, rates and terms that the <i>Applicant</i> intends to offer | (a) Indicate the number of financial products the <i>Applicant</i> intends to offer with capital raised from an <i>NMTC Allocation</i> . A financial product may consist of one or more financial notes. <i>Applicants</i> may describe up to three separate financial products. | <input type="checkbox"/> 1 FP <input type="checkbox"/> 2 FPs <input type="checkbox"/> 3 FPs | <p>If an <i>Applicant</i> intends to utilize its requested <i>NMTC Allocation</i> to engage solely in either the purchase of loans from other <i>CDEs</i> or in the provision of <i>FCOS</i>, and not in the origination of loans or equity, it should skip Questions 14 and 15.</p> <p><u>If the <i>Applicant</i> indicates it will be providing more than one financial product in Question 14(a), the <i>Applicant</i> should provide a distinct and unique narrative description for each financial product. <i>Applicants</i> that use the same narrative text for different financial products will not be scored as favorably.</u> To the extent the <i>Applicant</i> indicates a range of offerings within an item listed above (e.g., interest rates from 100 basis points (bps) to 500 bps below market), it should describe what circumstances would dictate the specific rates or terms, and how often the best rates and terms would be offered.</p> <p>The sheer number of financial products selected by the <i>Applicant</i> in Question 14(a) has no effect on the scoring of the Allocation Application.</p> | Check box |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|--|--|---|
| | <p>(b) For each financial product selected in Question 14(a), provide a narrative that addresses the following elements:</p> <ul style="list-style-type: none"> • Indicate whether the product is debt, equity, or some combination of the two. If debt, describe if it will have any equity equivalent features (e.g., convertible debt, debt with warrants, etc.) and which of the following flexible or non-traditional features the <i>Applicant</i> intends to include as part of the financial product: <ul style="list-style-type: none"> - Below market interest rates (or rate of return in the case of Equity Investments) - Lower than standard origination fees - Longer than standard period of interest-only loan payments - Higher than standard loan-to-value ratio - Longer than standard amortization period | <p>FP 1 _____%</p> <p>FP 2 _____%</p> <p>FP 3 _____%</p> <hr/> <p>FP 1 Narrative</p> <p>FP 2 Narrative</p> <p>FP 3 Narrative</p> | <p>The <i>Applicant</i> should base the expected percentage of Allocation for each financial product, on the <i>Applicant's</i> intended strategy and planned use. For <i>Applicants</i> that plan to offer more than one financial product, the expected percentages of Allocation should add up to 100%. Expected percentages of Allocation will not be subject to reporting or be considered in measuring compliance with the Allocation Agreement.</p> <p>For each product, the <i>Applicant</i> should clearly discuss how the product is structured as well as benefits this structure provides to borrowers/investees. A financial product structured with multiple financial notes (e.g., an A and B note, or an A, B, and C note, etc.) must be described as one financial product. In this case, the rates and terms of the financial notes should be discussed on a blended basis. For additional guidance on calculating blended interest rates, see the Application FAQ. The individual financial notes should not be listed as separate products unless they will also be offered on a stand-alone basis. <i>Applicants</i> will not be scored as favorably if they do not follow these instructions.</p> <p>The <i>Applicant</i> may discuss other flexible or non-traditional features of its financial products in Question 14(b). Only the non-traditional and flexible features listed below are subject to reporting and only these features will be considered in measuring compliance with the Allocation Agreement.</p> | <p>Numerical - Percentage</p> <hr/> <p>Text box Maximum Response Length: 5,000 characters</p> |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|------------|----------------|---|
| | <ul style="list-style-type: none"> - More flexible borrower credit standards - Non-traditional forms of collateral - Lower than standard debt service coverage ratio - Subordination <p>Include a brief description of the rates and terms that will be offered with its NMTC financial product and explain how these rates and terms compare with what is typically offered by the <i>Applicant</i> (or its <i>Controlling Entity</i>) and in the <i>Applicant's</i> service area.</p> <p>Provide an example of how the product will be used (alone or in conjunction with non-NMTC capital) to finance a projected NMTC investment identified in Question 17.</p> | | | |
| | <p>(c) For an <i>Applicant</i> that indicated under Question 13(b) that it intends to finance other <i>CDEs</i>, describe the strategy by which the <i>Applicant</i> will ensure that those <i>CDEs</i> will pass along the NMTC benefits to their QALICB borrowers in the form of more favorable rates or</p> | Text Entry | | Text box Maximum Response Length: 3,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
|---|---|---|--|------------------|
| | <p>terms. Provide an example of how the <i>QLICI</i> in a recipient <i>CDE</i> will be used (alone or in conjunction with non-NMTC capital) to finance an investment identified in Table A5 and how it will result in more favorable rates and terms.</p> | | | |
| <p>15. Additional Flexibility for Debt</p> | <p>Choose one of the following options. Check only one. The <i>Applicant</i> will commit that 100% of its <i>QLICs</i> will:</p> | <ul style="list-style-type: none"> <input type="checkbox"/> A: be provided in the form of equity; equity-equivalent financing; debt with interest; debt with interest rates at least 50% below market; or debt that otherwise satisfies at least 5 indicia of flexible or non-traditional rates and terms, as listed in Question 14. <input type="checkbox"/> B: be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 33% below market; or debt that otherwise satisfies at least 4 indicia of flexible or non-traditional rates and terms, as listed in Question 14. <input type="checkbox"/> C: be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 25% below market; or debt that otherwise satisfies at least 3 indicia of flexible or non-traditional rates | <p><i>Applicants</i> will score better to the extent they commit to provide equity or equity-equivalent financing; interest rate reductions on their debt; and/or a higher number of flexible/non-traditional rates and terms. An <i>Applicant</i> may meet this commitment by meeting one or more of the criteria listed above. <i>Applicants</i> will not be guaranteed a higher score simply by offering products with a minimal interest rate. An <i>Applicant</i> that checks one of the options A- D in Question 15 should be aware that this commitment will be a condition of its Allocation Agreement with the CDFI Fund.</p> <p>Please refer to the Application FAQ document for guidance on how to calculate below market interest rates.</p> | <p>Check box</p> |

| Question Number | Question Text | Response | Question Notes | Field Type |
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| | | <p>and terms, as listed in Question 14.</p> <p><input type="checkbox"/> D: be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 15% below market; or debt that otherwise satisfies at least 2 indicia of flexible or non-traditional rates and terms, as listed in Question 14.</p> <p><input type="checkbox"/> E: None of the above.</p> <p><input type="checkbox"/> F: Not Applicable. The <i>Applicant</i> indicated that it will not make loans/investments to <i>QALICBs</i> in the Question 13(b)(i).</p> | | |
| 16. Loan Purchasing Strategy | <p>(a) Will the <i>Applicant</i> require the <i>CDE</i> from which it purchases loans to reinvest all or a portion of the proceeds from the loan sales in <i>QLICs</i>?</p> <p>If yes, identify the percentage and briefly describe the <i>Applicant's</i> mechanisms for enforcing this requirement:</p> | <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> | <p>An <i>Applicant</i> purchasing loans from other <i>CDEs</i> generally will not score favorably in the Business Strategy section unless it indicates, in Question 16(a), that it will require the <i>CDE</i> from which it purchases loans to reinvest at least 85% of the proceeds from the loan sales in <i>QLICs</i>. The higher the percentage identified in Question 16(a), the better the <i>Applicant</i> will score under the Business Strategy section. However, if the <i>Applicant</i> receives an <i>NMTC Allocation</i>, it will be required to meet the percentage identified above, and such requirement will be a term of its Allocation Agreement.</p> | Check box |
| | | <p>_____ % of loan purchases that the <i>Applicant</i> will require the <i>CDE</i> to reinvest in <i>QLICs</i></p> | | Numerical - Percentage |
| | | Text Entry | | Text box Maximum Response Length: 2,000 characters |
| | <p>(b) Describe the extent to which the <i>Applicant</i></p> | Text Entry | | Text box |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--|----------|----------------|---|
| | intends to purchase loans that include rates, terms and/or with conditions that would not be possible without the benefit of an <i>NMTC Allocation</i> . | | | Maximum Response Length: 2,000 characters |

B. Projected Business Activities

NOTE: Projected activities should be consistent with an *Applicant's* request for an *NMTC Allocation* and the *QLICI* activities selected in Question 13(b). An *Applicant* that has a set of clearly defined potential business activities and that can demonstrate an effective strategy for locating qualifying loans/investments in businesses and/or other eligible *QLICI* activities will score well under this sub-section.

NOTE: An *Applicant* must provide sample transactions in Table A5 with total *QLICI* needs equivalent to the *Applicant's* *NMTC Allocation* request in Question 1. These sample transactions should be representative of the types of projects that will be undertaken with an *NMTC Allocation*. If an *Applicant* intends to invest in a variety of business types (e.g. community facilities, retail, industrial, etc.) and activity types (e.g. loans to *QALICBs*, investments in *CDEs*, loan purchases from *CDEs*, etc.), it should provide a sample project for each business type in Table A5. An *Applicant* should also indicate whether pipeline transactions may involve multiple *CDEs*.

NOTE: It is not expected that the *Applicant* will invest in all of the listed projects. In the event an *Applicant* receives an allocation, the CDFI Fund recognizes that the *Applicant* may invest in projects not included in Question 17 and Table A5. Note, however, the CDFI Fund expects investments not presented in Question 17 and Table A5 will be clearly consistent with the *Applicant's* business strategy.

NOTE: Where the *Applicant* anticipates investment in a small dollar loan fund (equal to or less than \$4MM) and/or a revolving loan or equity fund, in most cases the "Small Dollar and/or Revolving Loan Fund" should be described as a single investment for the purposes of Table A5. Generally, it is not necessary in Table A5 to separately identify all of the pipeline investments that could be financed under that fund. Additional guidance on describing revolving loan funds in Question 17 and Table A5 will be provided in the Application FAQ document.

| Question Number | Question Text | Response | Question Notes | Field Type |
|--------------------------------|--|----------|---|-------------|
| 17. Projected NMTC Investments | (a) Complete Tables A1-A4, as applicable, according to the types of <i>QLICI</i> activities in which the <i>Applicant</i> intends to engage. | Table | The tables that appear depend on the <i>Applicant's</i> responses to Question 13(b)(i-iv) | Table A1-A4 |
| | (b) Complete Table A5 for each <i>QALICB</i> or <i>NMTC</i> activity to be financed using | Table | | Table A5 |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------------------------|---|---|--|---|
| | the <i>Applicant's</i> requested <i>NMTC Allocation</i> in Question 1. | | | |
| | (c) Please provide a narrative describing the <i>Applicant's</i> planned investments, including: | Text Entry | <p>The total number of businesses or <i>CDEs</i> already identified, including the total dollar amount of <i>NMTC</i> financing (e.g., <i>QEI</i> and <i>QLICI</i> amount) to be provided. Total <i>QEI</i> needs should be equivalent to the <i>Applicant's</i> allocation request in Question 1; be sure to indicate what portion of the <i>Applicant's</i> pipeline falls into different business types (e.g., community facilities, retail, industrial, etc.) and activity types (e.g., loans to <i>QALICBs</i>, investments in <i>CDEs</i>, loan purchases from <i>CDEs</i>, etc.).</p> <p>Describe the factors that inform the <i>Applicant's</i> investment strategy, including borrower/investee selection criteria, the capital needs of its borrowers/investees, range of dollar amounts of proposed <i>NMTC</i> investments, etc.</p> | Text box Maximum Response Length: 8,000 characters |
| 18. QALICB Due Diligence | Describe the due diligence that the <i>Applicant</i> will conduct to determine, prior to making a <i>QLICI</i> , a <i>QALICB's</i> ability to remain financially viable and operational during the term of the <i>QLICI</i> and through a successful exit of the <i>QLICI</i> . | Text Entry | <p>Please describe any documents that will be required from borrowers/investees.</p> <p>Please describe the types of analysis that will be performed on projected <i>NMTC</i> investments to make this determination.</p> | Text box Maximum Response Length: 3,000 characters |
| 19. Innovative Investments | 1. Does the <i>Applicant</i> intend to pursue any of the following innovative investments? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Question 19 <u>will not</u> be evaluated and scored in Phase I of <i>Allocation Application</i> reviews. Therefore, this question will not be used to determine whether an <i>Applicant</i> scored highly enough to receive consideration for an <i>NMTC Allocation</i> . The response to this question will be considered in Phase II of the <i>Allocation Application</i> reviews and may affect the size of the <i>Applicant's NMTC Allocation</i> (along with other evaluation criteria as discussed in the <i>NOAA</i>). For | Dropdown Menu |
| | 2. Please indicate the percentage of total <i>QLICIs</i> to be used for each of the | (a) _____% of loan purchases that the <i>Applicant</i> will require the <i>CDE</i> to reinvest in <i>QLICIs</i> | | Numerical - Percentage |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--|---|--|---|
| | <p>following innovative investments:</p> | <p>(b) _____% Investing in Unrelated Minority-owned or Native American-owned or controlled <i>CDEs</i> that do not have <i>NMTC Allocations</i>;</p> <p>(c) _____% Investing in states identified by the CDFI Fund as having received fewer dollars of <i>QLICs</i> historically</p> <p>(d) _____% Providing <i>QLICs</i> where the total <i>QLICs</i> received by the <i>QALICB</i> are \$4 million or less</p> <p>(e) _____% Making <i>QLICs</i> with an original term less than or equal to 60 months</p> <p>(f) _____% Providing <i>QLICs</i> for non-Real Estate Activities, such as working capital, inventory or equipment purchase</p> <p>(g) _____% Investing in <i>Federal Indian Reservations, Off-Reservation Trust Lands, Hawaiian Home Lands, and Alaska Native Village Statistical Areas</i></p> | <p>more information on the <i>Allocation Application</i> review process, please see the NMTC Program Application Presentation Slides on the NMTC page of the CDFI Fund's website and the <i>NOAA</i>. <u>If selecting the innovative <i>QLICs</i> option, note that no particular activity is preferred over another.</u> <i>Applicants</i> are required to provide the percentage of total <i>QLICs</i> to be used for each innovative investment type. If the <i>Applicant</i> receives an <i>NMTC Allocation</i>, it may be required to meet the percentage identified in Question 19 and such requirement may be a term of its <i>Allocation Agreement</i>. The CDFI Fund will only consider the activities listed in Question 19 as innovative investments.</p> <p>If the <i>Applicant</i> proposes to pursue innovative <i>QLICs</i> by investing in states that have historically received fewer dollars of <i>QLICs</i>, the <i>Applicant</i> should refer to the Application FAQ to find the list of 10 states (plus Puerto Rico) that have received the least amount of <i>QLIC</i> investments through FY 2019, based on <i>AMIS Compliance and Performance Reporting System</i> (ACPR) reporting data.</p> | |
| 3. | <p>If the <i>Applicant</i> entered a percentage above, discuss the <i>Applicant's</i> strategy to deploy <i>QLICs</i> for the innovative investment type(s) selected above. The <i>Applicant</i> should reference sample transactions from</p> | Text Entry | | Text box Maximum Response Length: 5,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|----------|----------------|------------|
| | Question 17(c) and Table A5, as well as its track record of similar activities in the past. | | | |

C. Prior Performance

NOTE: An *Applicant* that can demonstrate (either on its own or through its *Controlling Entity*) a strong, successful track record of providing products, services, or *FCOS* similar to those that it intends to provide with *QEI* proceeds will score well under this sub-section. Only the organizational track record of the *Applicant* or the *Controlling Entity* may be referenced. The track record of the *Controlling Entity* **must** include the financing activities (loans and *Equity Investments*) of all *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*. The track record of the *Applicant* must include the financing activities of **all** *Subsidiaries* of the *Applicant*. The track records of staff, *Principals*, board members and other management individuals are not relevant for this sub-section. There will be an opportunity to discuss individual qualifications in the Management Capacity section of this application.

NOTE: The NMTC Program authorizing statute requires the CDFI Fund to give priority to any *Applicant* that has a track record of successfully providing capital or technical assistance to *Disadvantaged Businesses* or *Disadvantaged Communities*. An *Applicant* may receive up to five “priority points” for demonstrating such a track record. Responses to Question 20 and Question 21 as well as Exhibit B, are used to determine the amount of “priority points.” Only the organizational track record of the *Applicant* or the *Controlling Entity* may be referenced. Do not refer to the track record of individuals (e.g., staff, *Principals*, consultants) associated with the *Applicant* or its *Controlling Entity*.

NOTE: The *Applicant* may reference, in the Tables in Exhibit B and in the narratives in Question 20(b) and Question 21(b) (if applicable), loans or *Equity Investments* that the *Applicant* (or its *Controlling Entity*) has itself financed and for which it has capital at risk (direct financing/investment). Only loans or *Equity Investments* may be included in the Tables in Exhibit B and in the narratives in Question 20(b) and Question 21(b). Grants provided by the *Applicant* or *Controlling Entity* may not be included. Please note that capital provided to non-profit businesses that are not in the form of a loan will be considered grants and should not be referenced in Question 20, Question 21 or included in Exhibit B. For additional details on completing Exhibit B, please refer to the NMTC Application FAQ document.

NOTE: An *Applicant* that demonstrates a longer track record of providing similar direct financing/investments or *FCOS* to entities that are not *Affiliates* (either on its own or through its *Controlling Entity*) will generally score higher in this section than an *Applicant* that demonstrates a shorter track record of direct financing/investments or *FCOS*. An *Applicant* (either on its own or through its *Controlling Entity*) will score lower in this section if its track record is comprised primarily or exclusively providing indirect financing/investments, and/or a track record of primarily or exclusively financing *Affiliates*.

NOTE: If an *Applicant* intends to utilize its *NMTC Allocation* to engage in the provision of *FCOS* as a discrete line of business (as indicated in Question 13), it must include the following in its narrative response to Question 20(b): (1) the number of businesses/entrepreneurs to which the *Applicant* has provided counseling or other services in the last five years; and (2) the percentage of those businesses/entrepreneurs that were located in *Low-Income Communities*. This information will be used to evaluate the *Applicant's* eligibility to receive “priority points” for demonstrating a track record of successfully providing capital or technical assistance to *Disadvantaged Businesses or Disadvantaged Communities*.

Please note that if an *Applicant* intends to use its *NMTC Allocation* to engage in the provision of *FCOS* as its sole line of business, and not in the purchase or origination of loans or *Equity Investments*, it does not need to complete Tables B1-B4.

| Question Number | Question Text | Response | Question Notes | Field Type |
|---------------------------------------|--|---|---|---------------|
| 20. Track Record (Table B1-B3) | (a) Does the <i>Applicant</i> , or its <i>Controlling Entity</i> , have a track record in any of the following activities listed below? Your selection should correspond to the activities selected in Question #13 and described in Question #17. Check all that apply. A narrative is required (Question #20(b)) if at least one activity is selected. | | Tables B1-B3 will stay hidden in AMIS unless you select a 'Yes' response for the related sub-question for Question 20 (ex. track record of directly providing or otherwise facilitating loans or <i>Equity investments</i> to Real Estate and <i>Operating Businesses</i> (excluding <i>Restricted NMTC Business Activities</i>), loans or <i>Equity investments</i> to <i>CDEs</i> , etc.). | |
| | Directly providing or otherwise facilitating loans or <i>Equity investments</i> to Real Estate and <i>Operating Businesses</i> (excluding <i>Restricted NMTC Business Activities</i>). | <input type="checkbox"/> Yes <input type="checkbox"/> No | (If 'Yes' is selected, complete Question 20(b) and Table B1) | Dropdown Menu |
| | Directly providing loans or <i>Equity investments</i> to other <i>CDEs</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | (If 'Yes' is selected, complete Question 20(b) and Table B2) | Dropdown Menu |
| | Purchasing loans from other <i>CDEs</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | (If 'Yes' is selected, complete Question 20(b) and Table B3) | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------------------|--|---|---|--|
| | <p>(b) Provide a narrative discussion of the organization's track record relevant to each type of activity selected (including FCOS) in Question 13, referencing data included in Tables B1-B3, as appropriate. <i>Applicants</i> that intend to use the <i>NMTC Allocation</i> to make loans to or investments in <i>QALICBs</i> should describe the similarity between their track record and the types of businesses to which they plan to provide <i>QLICIs</i>.</p> | Text Entry | <p>Be as specific as possible with respect to the uses of past financing (e.g. construction, new equipment purchase, etc.). Also indicate which activities were undertaken by the <i>Applicant</i>, as opposed to its <i>Controlling Entity</i> (including its Subsidiaries).</p> <p>If an <i>Applicant</i> submits its <i>Controlling Entity's</i> track record for Exhibit B, be sure to indicate the dollar amounts that refer to the <i>Applicant's</i> track record versus the <i>Controlling Entity's</i> (including its Subsidiaries) track record of direct financing (i.e., its own capital at risk). Also discuss the <i>Applicant's</i> versus the <i>Controlling Entity's</i> track record of indirect financing (e.g., loan packaging, project development, etc.). Also, indicate the extent (including the number and dollar amount) that loans or investments were made to <i>Affiliates</i> of the <i>Applicant</i> or its <i>Controlling Entity</i>.</p> <p>Focus the discussion specifically on the <i>Applicant's</i> or its <i>Controlling Entity's</i> experience targeting <i>Disadvantaged Businesses</i> or <i>Disadvantaged Communities</i>.</p> | Text box Maximum Response Length: 10,000 characters |
| | <p>(c) Provide the overall number of years that the Applicant or its <i>Controlling Entity</i> has provided capital or technical assistance to <i>Disadvantaged Businesses</i> or <i>Disadvantaged Communities</i></p> | Text Entry | Number of years. | Numerical Maximum Response Length: 3 characters |
| 21. Track Record (Table B4) | <p>(a) Complete Table B4, if applicable. Does the <i>Applicant</i>, or <i>Controlling Entity</i>, have a track record of successfully providing loans, Equity Investments, and/or financial counseling that do not directly correspond to the selections in Question 13 (e.g., Restricted NMTC Activities, loans and/or investments in NMTC investment funds or non-CDE</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No | See the Application FAQ for additional guidance on the types of "Financing/Investment Activities that would not qualify as <i>QLICI</i> Activities." | Check box |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|------------|------------------|---|
| | financial institutions, personal or consumer loans, and residential mortgages) but are similar to the proposed NMTC activities? | | | |
| | (b) Referencing Table B4 as appropriate, describe the <i>Applicant's</i> , or <i>Controlling Entity's</i> , track record over the past five years of successfully providing the loans or Equity Investments and financial counseling included in Table B4 and how these activities are similar to the proposed NMTC activities. | Text Entry | | Text box Maximum Response Length: 5,000 characters |
| | (c) Provide the overall number of years that the <i>Applicant's</i> or its <i>Controlling Entity</i> has provided capital or technical assistance to <i>Disadvantaged Businesses</i> or <i>Disadvantaged Communities</i> . | Text Entry | Number of years. | Numerical Maximum Response Length: 3 characters |

D. Non-Metropolitan Counties

NOTE: Question 22 will not be evaluated and scored in Phase I of *Allocation Application* reviews. Therefore, this question is not used to determine whether an *Applicant* scored highly enough to receive consideration for an *NMTC Allocation*. The response to this question will be considered in Phase II of the *Allocation Application* reviews and may affect the size of the *Applicant's NMTC Allocation* (along with other evaluation criteria as discussed in the *NOAA*). For more information on the *Allocation Application* review process, please see the *NMTC Application Roadmap Presentation* on the *NMTC* page of the *CDFI Fund's* website and the *NOAA*.

NOTE: As provided for in Section 102(b)(6) of the Tax Relief and Health Care Act of 2006 (Pub. L. 109-432), and described further in the *NOAA* and the *FAQ* document that accompanies this application, the *CDFI Fund* has established the goal that: (i) 20% of all *QLICs* made by *Allocatees* under this Round are invested in *Non-Metropolitan Counties*; and (ii) a proportionate number of *Rural CDEs* (as defined in the *NOAA*) receive allocation awards.

Applicants are therefore required to provide two target estimates below: (1) a minimum percentage of *QLICs* the *Applicant* is willing to commit to provide to *Non-Metropolitan Counties*; and (2) the maximum percentage of *QLICs* that the *Applicant* is willing to commit to providing to *Non-Metropolitan Counties*. At the discretion of the *CDFI Fund*, the *Applicant* may be required to deploy a percentage of its allocation at or above the minimum indicated in Question 22(b), but not more than the maximum percentage indicated in Question 22(c); and such requirement shall become a condition of its *Allocation Agreement* with the *CDFI Fund*.

NOTE: An *Applicant* that presents a minimum of a three-year track record of direct financing in Exhibit B, responds "Yes" to Question 22(a) (including an appropriate supporting narrative), and commits to a figure of 50% or greater in response to Question 22(c) may be deemed to be a "*Rural CDE*", and may be eligible to receive special consideration for an *NMTC Allocation* in accordance with the process outlined in the *NOAA*. For more information, see the *Application FAQ*.

An *Applicant* may receive a larger *NMTC Allocation* than would otherwise be the case, regardless of designation as a *Rural CDE*, if it: (i) makes a minimum commitment of 20% or greater in response to Question 22(b); (ii) has a track record of providing direct financing in *Non-Metropolitan Counties* and a strong strategy for deploying *NMTC* investments in these communities; and (iii) is ranked highly enough to be considered for an *NMTC Allocation*.

In accordance with the *NOAA* for this round, in the event the *CDFI Fund* adds additional *Rural CDEs* to the *Allocatee* pool in order to achieve the targeted percentage of investment in *Non-Metropolitan Counties*, a formula reduction will be applied as uniformly as possible, to the allocation amount for all *Allocatees* in the pool that have not committed to investing a minimum of 20% of their *QLICs* in *Non-Metropolitan Counties*.

| Question Number | Question Text | Response | Question Notes | Field Type |
|--------------------------------------|---|---|--|---|
| 22. Non-Metropolitan Counties | (a) Have at least 50% of the Applicant's (or <i>Controlling Entity's</i>) total direct financing dollars over the past five years, as shown in Exhibit B, been directed to <i>Non-Metropolitan Counties</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | (b) Provide the number of years (ranging from 0-6) that the <i>Applicant</i> or its <i>Controlling Entity</i> has provided direct financing in <i>Non-Metropolitan Counties</i> , as shown in Exhibit B. | Numerical | Value cannot be greater than 6. | Numerical - age |
| | (c) What is the minimum percentage of <i>QLICs</i> that the <i>Applicant</i> is willing to commit to deploy in <i>Non-Metropolitan Counties</i> ? | _____ % | | Numerical - Percentage |
| | (d) What is the maximum percentage of <i>QLICs</i> that the <i>Applicant</i> is willing to commit to deploy in <i>Non-Metropolitan Counties</i> ? | _____ % | This value must be equal to or greater than the value for Question 22(c) | Numerical - Percentage |
| | (e) If the response to Question 22(c) above is greater than 0%, referencing Exhibit B, briefly describe the <i>Applicant's</i> (or its <i>Controlling Entity's</i>) five-year direct financing track record in <i>Non-Metropolitan Counties</i> in Tables B1-B3 and Table B4. Specifically, describe the types of projects and the dollar amounts that the <i>Applicant</i> (or its <i>Controlling Entity</i>) provided directly to projects located in | Narrative | <i>Applicants</i> can and should list specific Non-Metropolitan transactions in response to Question 17 and Table A5. These transactions should be referenced in response to Question 22(e) as necessary to explain the <i>Applicant's</i> strategy for deploying <i>QLICs</i> in <i>Non-Metropolitan Counties</i> . | Text box Maximum Response Length: 2,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|------------------|--|---|
| | <p><i>Non-Metropolitan Counties. See the Application FAQ.</i></p> | | | |
| | <p>(f) If the response to Question 22(c) above is greater than 0%, and only to the extent not discussed elsewhere in the application, discuss the <i>Applicant's</i> strategy for deploying <i>QLICs</i> in <i>Non-Metropolitan Counties</i>.</p> | <p>Narrative</p> | <p>Indicate the number and dollar amount of transactions that have already been identified in <i>Non-metropolitan Counties</i>, for which underwriting is completed or underway.</p> <p>Reference sample transactions in the <i>Applicant's</i> Non-Metropolitan pipeline included in Table A5.</p> <p>Discuss the key challenges the <i>Applicant</i> anticipates it will have providing <i>QLICs</i> in <i>Non-Metropolitan Counties</i> and how the <i>Applicant</i> proposes to overcome those challenges.</p> | <p>Text box Maximum Response Length: 5,000 characters</p> |

E. Investments in *Unrelated* Entities

NOTE: The NMTC Program legislation requires the CDFI Fund to give priority to *Applicants* that intend to use “substantially all” of their *QEI* proceeds to make investments in one or more businesses in which persons *Unrelated* to the *Applicant* hold the majority equity interest. An *Applicant* that answers “Yes” to Question 23 will be awarded five additional points. An *Applicant* that receives priority points under this sub-section will be required, in its *Allocation Agreement*, to invest substantially all of its *QEI* proceeds in *Unrelated* entities. Please refer to the NMTC *Allocation Application* FAQ document for more information about what is considered an *Unrelated* entity transaction.

| Question Number | Question Text | Response | Question Notes | Field Type |
|--|--|---|--|---------------|
| 23. Investments in Unrelated Entities | Does the <i>Applicant</i> intend to use substantially all of the proceeds of its <i>QEIs</i> to make <i>QLICIs</i> in one or more businesses in which persons <i>Unrelated</i> to the <i>Applicant</i> hold the majority equity interest? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| 24. Notable Relationships | Describe any potential situations in which the <i>Applicant</i> , its <i>Affiliates</i> (including the <i>Controlling Entity</i>) or its personnel (including governing or advisory board members, consultants, etc.) involved in identifying NMTC investments or making investment decisions on behalf of the <i>Applicant</i> will also receive financial benefits from the <i>QALICBs</i> , <i>Affiliates</i> of <i>QALICBs</i> , <i>QEI</i> investors, and/or other participants in the transactions resulting in the <i>Applicant's QLICIs</i> . | | <p>Question 24 will not be evaluated and scored in Phase I of Allocation Application reviews. Therefore, this question will not be used to determine whether an Applicant scored highly enough to receive consideration for an NMTC Allocation.</p> <p>If the <i>Applicant</i> describes instances where the <i>Applicant</i>, <i>Affiliates</i>, or personnel will receive financial benefits from the <i>QALICBs</i> financed, the <i>Applicant</i> will be evaluated favorably in Phase II if it demonstrates that these relationships would provide clear benefits (e.g. cost savings, lower lease rates or fees) for unaffiliated end-users (e.g., <i>QALICBs</i>, tenant businesses, or residents) in <i>Low-Income Communities (LICs)</i>.</p> <p>The <i>Applicant</i> does not need to answer “Yes” to items (a)-(e) below if the financial benefits are derived solely due to the <i>Applicant</i> or its <i>Affiliates</i> serving as a leverage debt lender for a <i>QLICI</i> or providing an equity <i>QLICI</i>.</p> | |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|---|---|---|
| | (a) Will the <i>Applicant</i> , its <i>Affiliates</i> or its personnel own more than a 1% interest in the <i>QALICB</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | | Text Entry | If “Yes” was selected, describe such situations, including the individuals (and their respective organizations) involved in identifying NMTC investments or making investment decisions. Also describe the source and amount of any financial benefit to the <i>Applicant</i> , its <i>Affiliates</i> , or personnel (including governing or advisory board members, consultants, etc.). Provide an example and quantify how such relationships will create cost savings for <i>QALICBs</i> and/or benefits to unaffiliated end-users, such as tenant businesses, or residents of <i>Low-Income Communities</i> . | Text box Maximum Response Length: 2,000 characters |
| | (b) Will the <i>Applicant</i> , its <i>Affiliates</i> or its personnel be lessees at property developed with the <i>QLICI</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | | Text Entry | If “Yes” was selected, describe such situations, including the individuals (and their respective organizations) involved in identifying NMTC investments or making investment decisions. Also describe the source and amount of any financial benefit to the <i>Applicant</i> , its <i>Affiliates</i> , or personnel (including governing or advisory board members, consultants, etc.). Provide an example and quantify how such relationships will create cost savings for <i>QALICBs</i> and/or benefits to unaffiliated end-users, such as tenant businesses, or residents of <i>Low-Income Communities</i> . | Text box Maximum Response Length: 2,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--|---|---|---|
| | (c) Will the <i>Applicant</i> , its <i>Affiliates</i> or its personnel be a party to a business transaction financed with the <i>QLICIs</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | | Text Entry | | Text box Maximum Response Length: 2,000 characters |
| | (d) Will the <i>Applicant</i> , its <i>Affiliates</i> or its personnel (including governing or advisory board members, consultants, etc.) provide professional services (project development, real estate agent, property manager, general contractor, etc.) or capital outside of the <i>QLICI</i> for the QALICB, including <i>Affiliates</i> of the QALICB and/or other participants in the transactions resulting in the <i>Applicant's QLICIs</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | | Text Entry | If "Yes" was selected, described the fees for such professional services. Are the services and/or products required to be provided by the <i>Applicant</i> as a condition of receiving the <i>QLICI</i> ? Explain how rates and fees for products and/or services to <i>QALICBs</i> compare with what is typically offered by the <i>Applicant</i> (or its <i>Controlling Entity</i>) <u>and</u> by other providers in the <i>Applicant's</i> service area. Provide a specific example and quantify how such relationships will create cost savings for <i>QALICBs</i> and/or benefits to unaffiliated end-users, such as tenant businesses, or residents of <i>Low-Income Communities</i> . | Text box Maximum Response Length: 2,000 characters |
| | (e) Are there other financial benefits that the <i>Applicant</i> , its <i>Affiliates</i> or its personnel may receive, but are | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--------------------------------------|------------|---|---|
| | not included in items (a)-(d) above? | Text Entry | If "Yes" was selected, describe such situations, including the individuals (and their respective organizations) involved in identifying NMTC investments or making investment decisions. Also describe the source and amount of any financial benefit to the <i>Applicant</i> , its <i>Affiliates</i> , or personnel (including governing or advisory board members, consultants, etc.). Provide an example and quantify how such relationships will create cost savings for <i>QALICBs</i> and/or benefits to unaffiliated end-users, such as tenant businesses, or residents of <i>Low-Income Communities</i> . | Text box Maximum Response Length: 2,000 characters |

PART II: COMMUNITY OUTCOMES

Information in Part II is scored during the Phase I stage of the Application review. Total Maximum Points for Part II: 25 points. Information provided in this section will also be evaluated during the Phase II stage of the Application review. For more information on the NMTC Allocation Application review process, please consult the *NOAA*.

NOTE: The CDFI Fund will review the extent to which the *Applicant's* strategy will have positive community outcomes. An *Applicant* will generally score well under this section to the extent that:

- (a) it is working in particularly economically distressed or otherwise underserved communities;
- (b) it shows that its projected financing activities will generate demonstrable community outcomes; and
- (c) it demonstrates meaningful engagement with community stakeholders when vetting potential NMTC investments.

NOTE: The CDFI Fund does not expect that each and every investment will be in an area identified in Question 25.

A. Targeting the Use of *QLICs*

| Question Number | Question Text | Response | Question Notes | Field Type |
|--|--|----------|----------------|------------|
| 25. Areas to be Served by the Applicant | Identify all of the areas to be served by the <i>Applicant</i> (check all that apply): | | | |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|-------------------------------------|---|--|---------------|
| | 1. SEVERE DISTRESS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Census tracts with poverty rates greater than 30%; OR Census tracts with, if located within a non-Metropolitan Area, have a median family income that does not exceed 60% of statewide median family income, or, if located within a Metropolitan Area, have a median family income that does not exceed 60% of the greater of the statewide median family income or the Metropolitan Area median family income; OR Census tracts with unemployment rates at least 1.5 times the national average. | Dropdown Menu |
| | 2. NATIVE AREAS | <input type="checkbox"/> Yes <input type="checkbox"/> No | <i>Federal Indian Reservations, Off-Reservation Trust Lands, Hawaiian Home Lands, and Alaska Native Village Statistical Areas.</i> | Dropdown Menu |
| | 3. U.S. TERRITORIES | <input type="checkbox"/> Yes <input type="checkbox"/> No | Island Areas of the United States as determined by the United States Census Bureau including Puerto Rico, U.S. Virgin Islands, Guam, the Commonwealth of the Northern Mariana Islands, and American Samoa. | Dropdown Menu |
| | 4. <i>NON-METROPOLITAN COUNTIES</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | Qualifying census tracts that are located in counties not contained within a Metropolitan Statistical Area (MSA), as defined in OMB Bulletin No. 20-01 (Revised Delineations of Metropolitan Statistical Areas, Micropolitan Statistical Areas, and Combined Statistical Areas, and Guidance on Uses of the Delineations of These Areas) and applied to the 2020 census tracts. | Dropdown Menu |
| | 5. <i>TARGETED POPULATIONS</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | As permitted by IRS and related CDFI Fund guidance materials, projects serving Targeted Populations to the extent that: (a) such projects are 60% owned by <i>Low-Income Persons (LIPs)</i> ; or (b) at least 60% of employees are <i>LIPs</i> ; or (c) at least 60% of the <i>QALICBs'</i> gross income is derived from sales, rentals, services, or other transactions to customers who are <i>LIPs</i> . | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|---|---|---------------|
| | 6. 25% POVERTY/70% MEDIAN FAMILY INCOME/1.25 UNEMPLOYMENT RATE | <input type="checkbox"/> Yes <input type="checkbox"/> No | Census tracts with one of the following: (i) poverty rates greater than 25%; or (ii) if located within a non-Metropolitan Area, median family income that does not exceed 70% of statewide median family income, or, if located within a Metropolitan Area, median family income that does not exceed 70% of the greater of the statewide median family income or the Metropolitan Area median family income; or (iii) unemployment rates at least 1.25 times the national average. | Dropdown Menu |
| | 7. BROWNFIELD SITES | <input type="checkbox"/> Yes <input type="checkbox"/> No | As defined under 42 U.S.C. 9601 (39). | Dropdown Menu |
| | 8. ARC AND/OR DRA AREAS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Areas designated as distressed by the Appalachian Regional Commission or Delta Regional Authority. | Dropdown Menu |
| | 9. COLONIAS AREAS | <input type="checkbox"/> Yes <input type="checkbox"/> No | As designated by the U.S. Department of Housing and Urban Development. | Dropdown Menu |
| | 10. FEDERAL MEDICALLY UNDERSERVED AREAS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Federally designated medically underserved areas, to the extent <i>QLIC</i> activities will support health related services. | Dropdown Menu |
| | 11. FEMA DISASTER AREAS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Counties for which the Federal Emergency Management Agency (FEMA) has issued a “major disaster declaration” and made a determination that such County is eligible for both “individual and public assistance”; provided that the initial investment will be made within 36 months of the disaster declaration. | Dropdown Menu |
| | 12. HEALTHY FOODS FINANCING INITIATIVE (HFFI) DESIGNATED <i>FOOD DESERTS</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | Census tracts identified as Food Deserts under the HFFI definition (USDA-ERS), to the extent <i>QLIC</i> activities will increase access to healthy food. | Dropdown Menu |
| | (a) Will the <i>Applicant</i> commit to providing at least 85% of its <i>QLICs</i> (in terms of aggregate | <input type="checkbox"/> Yes | | Dropdown Menu |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|---|-----------------------------|--|---|
| | <p>dollar amounts) in areas that are either: (1) characterized by at least one of items 1-5 on the above list for each <i>QLIC</i>; or (2) characterized by at least two of items 6-12 on the above list for each <i>QLIC</i>?</p> | <input type="checkbox"/> No | | |
| | <p>(b) Discuss how the <i>Applicant</i> will target <i>QLICs</i> to areas marked by the specific indicators of higher distress selected in Question 25(a). In particular, please describe the criteria used to prioritize <i>QLICs</i>, assuming the <i>Applicant</i> has greater investment opportunities than available Allocation Authority.</p> | Text Entry | <p>An <i>Applicant</i> that checks “Yes” to Question 25(a) above will generally score more favorably. If the <i>Applicant</i> receives an <i>NMTC Allocation</i>, it will be required to meet the percentage figure identified above, and such requirement will be a term of its Allocation Agreement.</p> | Text box Maximum Response Length: 3,000 characters |

B. Community Outcomes - Prior Performance and Projections

NOTE: An *Applicant* may score higher to the extent that its projected activities will generate clear and well supported outcomes for the *Low-Income Communities and/or Low-Income Persons* affected, the CDFI Fund's assessment is not simply based on the sheer number of outcomes selected in Question 26.

NOTE: For purposes of the NMTC Application, a community outcome is a benefit to the *LIC*, including *LIC* residents or *Low-Income Persons*, as a direct result of an *Applicant's* loans or investments referenced in Exhibit A (Projected Activities) and Exhibit B (Track Record) of this Application.

NOTE: An *Applicant* will score well in this sub-section to the extent that:

- (a) It (or its *Controlling Entity*) has a track record of producing quantitative community outcomes similar to those expected to be achieved;
- (b) Its projected community outcomes are supported by clear and sound methods and metrics for each outcome selected;
- (c) The projected community outcomes are highly likely to result from the proposed financing activities described in Question 17;
- (d) The projected community outcomes will clearly benefit *Low-Income Persons* and residents of *Low-Income Communities* (LICs). Note that the location in a LIC in and of itself is not sufficient to demonstrate benefit to LIC residents/*LIPs*.

NOTE: If an *Applicant* selects a Community Outcome in Table A5 (row p), then the *Applicant* is expected to complete the narrative section for the selected Community Outcome in Question 26(a).

NOTE: If an *Applicant* selects one Job related outcome will result from their *QLICI* activity, then a narrative response is required for all three Job related outcomes.

| Question Number | Question Text | Response | Question Notes | Field Type |
|---|--|----------|---|------------|
| 26. Community Development Outcomes | (a) Select the outcome(s) the <i>Applicant</i> expects to achieve as a result of the projected <i>QEs</i> described the Business Strategy section. | | <p>Select all that apply and for each outcome selected, please:</p> <ul style="list-style-type: none"> • Quantify the <i>Applicant's</i> projected community outcomes; • Considering the <i>Applicant's</i> planned NMTC financing/investments described in Question #17, explain how the <i>Applicant</i> quantified the potential outcomes that would result from receiving an <i>NMTC Allocation</i>; • Describe and quantify (to the extent possible) the <i>Applicant's</i> track record of achieving each selected outcome through past financings/investments. Discuss how the track record of achieving outcomes compares with projected outcomes. | |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|-----------------------------|---|---|--|
| | 1. JOB CREATION / RETENTION | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify, as best as possible, the number of direct jobs (either in the aggregate or on average for each project financed) that will be created or retained through the <i>Applicant's</i> planned <i>QEI</i> s. Be sure to discuss both temporary jobs (e.g., construction) and permanent jobs (<i>Full-Time Equivalent</i>). | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |
| | 2. QUALITY JOBS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify (e.g., provide the number and/or percentage of total jobs) and discuss the extent to which jobs created or retained by the <i>Applicant's</i> planned <i>QEI</i> s represent quality jobs. Quality jobs are jobs that provide living wages (e.g., the minimum hourly wage necessary for an individual to meet basic needs, including housing, nutrition, daily living expenses and other incidentals such as clothing, for an extended period of time) and/or employment benefits (e.g., health insurance, retirement benefits, employee stock ownership, etc.). Also, discuss the extent to which jobs created through the <i>Applicant's</i> <i>QEI</i> s will provide opportunities for training and advancement (particularly for low-skilled workers). Quantify and describe how temporary and permanent jobs will meet the <i>Applicant's</i> criteria for quality jobs. | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |
| | 3. ACCESSIBLE JOBS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify (e.g., provide the number and/or percentage of total jobs) and discuss the extent to which the jobs created or retained by the <i>Applicant's</i> planned <i>QEI</i> s will be targeted and/or available to <i>Low-Income Persons</i> , residents of LICs, people with lower levels of formal education, and people who face other barriers to employment (e.g., longer term unemployed, displaced workers, ex-convicts, limited language proficiency, etc.). Quantify and describe how temporary and permanent jobs will meet the <i>Applicant's</i> criteria for accessible jobs. | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--|---|---|--|
| | 4. COMMERCIAL GOODS OR SERVICES TO <i>LOW-INCOME COMMUNITIES</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify (e.g., number of residents of <i>Low-Income Communities</i> or <i>Low-Income Persons</i> expected to be served, square footage built, lower rents provided to tenant businesses, etc.) and describe the extent to which the <i>Applicant's</i> planned <i>QEs</i> will result in the provision of and access to commercial goods or services to residents of <i>Low-Income Communities</i> or <i>Low-Income Persons</i> , the types of commercial goods and services (e.g., access to retail, grocery stores, farmer's markets, restaurants, or pharmacies, etc.) expected to be provided, and how they will benefit residents of <i>Low-Income Communities</i> or <i>Low-Income Persons</i> . | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |
| | 5. COMMUNITY GOODS OR SERVICES TO <i>LOW-INCOME COMMUNITIES</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify (e.g. number of people served, square footage built, lower rents provided to tenant businesses, etc.) and describe the extent to which the <i>Applicant's</i> planned <i>QEs</i> will result in the provision of and access to high quality community goods or services for residents of <i>Low-Income Communities</i> or <i>Low-Income Persons</i> (e.g., food pantries, healthcare, social services, educational, cultural, etc.). | Dropdown Menu/ Text box Maximum Response Length: 6,000 characters |
| | 6. FINANCING MINORITY BUSINESSES | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify and describe the extent to which the <i>Applicant's</i> planned <i>QEs</i> will finance Minority-owned or Minority-controlled <i>CDEs</i> or businesses, including (in the case of Real Estate Activities) developers, project-sponsors, tenant businesses, or contractors/subcontractors that are Minority-Owned or Minority-Controlled. | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |
| | 7. FINANCING NATIVE AMERICAN BUSINESSES | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify and describe the extent to which the <i>Applicant's</i> planned <i>QEs</i> will finance Native American-owned or Native American-controlled <i>CDEs</i> or businesses, including (in the case of Real Estate Activities) developers, project-sponsors, tenant businesses, or contractors/subcontractors that are Native American-Owned or Native American-Controlled. | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
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| | | | | 5,000 characters |
| | 8. HOUSING UNITS | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify (e.g. number of units, percentage of affordable units) and describe the extent to which the <i>Applicant</i> will provide housing opportunities for <i>Low-Income Persons</i> or residents of <i>Low-Income Communities</i> ; the extent to which housing will be offered in areas of high affordable housing need, including communities with high concentrations of vacancies or foreclosures or communities where housing costs are high; and/or the extent to which the housing development adheres to principles of “smart growth”, including transit-oriented development. | Dropdown Menu/ Text box Maximum Response Length: 5,000 characters |
| | 9. ENVIRONMENTALLY SUSTAINABLE OUTCOMES | <input type="checkbox"/> Yes <input type="checkbox"/> No | Quantify (e.g. amount of reduced energy or water use by QALICB, amount of reduced energy costs by end users, etc.) and describe the extent to which the <i>Applicant</i> will finance projects which remediate environmental contamination (including addressing environmental health in <i>Low-Income Communities</i>); meet Leadership in Energy & Environmental Design (LEED) certification or similar green building standards; and/or directly support the production or distribution of renewable energy resources (e.g., biomass, hydro, geothermal, solar, wind, etc.). | Check box / Text box Maximum Response Length: 5,000 characters |
| | (b) Describe the <i>Applicant’s</i> track record of establishing and monitoring community outcomes. Describe how the <i>Applicant</i> will track and document the community outcomes <i>QALICBs</i> are expected to achieve as a result of the <i>Applicant’s</i> <i>QLICIs</i> | Text Entry | An <i>Applicant</i> that describes a thorough track record of establishing and documenting past community outcomes and a methodology for tracking future community outcomes will score more highly on this question. | Text box Maximum Response Length: 5,000 characters |
| 27. Community Accountability and Involvement | (a) Complete Table C1. Please describe the <i>Applicant’s</i> process for evaluating the community benefits of potential <i>QLICIs</i> and the extent to which the | Table Text Entry | All <i>CDEs</i> are required to maintain accountability to <i>Low-Income Communities</i> . An <i>Applicant</i> that can articulate meaningful involvement in <i>Low-Income Communities</i> and with a variety of <i>Low-Income Community</i> stakeholders, as well as a track record of community engagement (either | Table C1 Text box Maximum Response |

| Question Number | Question Text | Response | Question Notes | Field Type |
|-----------------|--|------------|--|---|
| | <p><i>Applicant's</i> Advisory Board, <i>Low-Income Persons</i>, and/or residents of <i>Low-Income Communities</i> participate in this process. Be sure to discuss:</p> <ul style="list-style-type: none"> • The <i>Applicant's</i> process for determining if a proposed investment aligns with <i>Low-Income Community</i> priorities and how this process affects investment decisions. • The number and percentage of <i>Low-Income Community</i> representatives on the <i>Applicant's</i> Advisory and/or Governing Board. • The role, formal or otherwise, these individuals play in setting investments parameters, formulating the <i>Applicant's</i> pipeline of investments, and approving the <i>Applicant's</i> investment decisions. Provide examples where possible. | | directly or through its <i>Controlling Entity</i>) will be evaluated favorably under this question. | Length: 5,000 characters |
| | (b) Discuss the extent of the <i>Applicant's</i> (or <i>Controlling Entity's</i>) track record of project-specific community engagement related to past investment decisions. Please note that simply consulting with the Advisory Board is not an example of community engagement. Provide 2–3 examples. | Text Entry | | Text box Maximum Response Length: 3,000 characters |

| Question Number | Question Text | Response | Question Notes | Field Type |
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| | <p>(c) Discuss the extent of the <i>Applicant's</i> (or <i>Controlling Entity's</i>) track record of making investments in projects that were part of a broader community or economic development strategy (e.g., neighborhood revitalization plan, county or state economic development plans, etc.). Provide 2–3 examples</p> | Text Entry | | Text box Maximum Response Length: 3,000 characters |
| | <p>(d) Discuss the portion of the <i>Applicant's</i> planned NMTC financings/investments described in Question 17 that are part of a broader community or economic development strategy (e.g., neighborhood revitalization plan, county or state economic development plans, local strategies to remediate environmental contamination or reduce greenhouse gases, etc.). Please describe how one or more of the <i>Applicant's</i> planned <i>QLICs</i> will contribute to the goals of such strategies or initiatives.</p> | Text Entry | | Text box Maximum Response Length: 3,000 characters |

PART III: MANAGEMENT CAPACITY

Information in Part III is not scored during the Phase I stage of the Application review. Information provided in this section will be evaluated during the Phase II stage of the Application review. For more information on the *NMTC Allocation* Application review process, please consult the *NOAA*.

| Question Number | Question Text | Response | Question Notes | Field Type |
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| 28. Organizational Chart and Key Personnel | <p>(a) Submit organizational chart(s) that depict the following:</p> <ul style="list-style-type: none"> • The <i>Applicant's</i> relationship to its <i>Controlling Entity</i> as well as any <i>Affiliate</i>, Subsidiary entities, or any entities with an ownership interest in the <i>Applicant</i> (if applicable); and • The <i>Applicant's</i> staffing structure (including names of key personnel that will have a role in managing the <i>NMTC Allocation</i>), including names of the <i>Applicant's</i> Advisory Board and Governing Board members, key board committees, and consultants; and • The names of <i>Controlling Entity</i> Governing Board members, and names of staff members shared with <i>Affiliates</i>, including <i>Controlling Entity</i> | Upload attachment | Be sure to refer to the <i>Applicant</i> Instructions (page ii) for information regarding the submission of these documents. All attachments must be submitted electronically through the <i>Applicant's</i> AMIS account. An organizational chart is a required document and failure to provide it may impact the evaluation of the <i>Allocation Application</i> . | Attachment |
| | <p>(b) Complete <u>Table C2</u>. Identify the <i>Applicant's</i> (and <i>Controlling Entity's</i>) personnel, including consultants and board members</p> | Table | Be sure to identify any and all consultants that will have a key role in assisting the <i>Applicant</i> in managing an NMTC line of business, including consultants who assisted in preparing the <i>Allocation Application</i> . | Table C2 |

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| | <p>(if applicable) that will have a key role in:</p> <ul style="list-style-type: none"> • Providing <i>QLICs</i>– identifying and underwriting transactions; structuring NMTC loans and <i>Equity Investments</i>; and/or providing <i>FCOS</i>; • Raising Capital from Investors – including raising tax credit equity and leveraged debt if the <i>Applicant</i> will use the leveraged investment model; • Asset and Risk Management; and NMTC Program Compliance. | | <p>NOTE: The CDFI Fund will only review the first 15 individuals listed in Table C2.</p> | |
| <p>29. Providing <i>QLICs</i></p> | <p>(a) Referencing information from Table C2 as necessary, describe the current roles and responsibilities of the <i>Applicant's</i> (and <i>Controlling Entity's</i>) key personnel (including staff, Governing or Advisory board members, and consultants) in:</p> <ul style="list-style-type: none"> • Identifying borrowers or investees and evaluating their ability to remain financially viable and operational for the term of the <i>QLIC</i>; • Structuring its current loans and/or Equity and providing Financial Counseling and Other Services (if applicable). • Please indicate the percentage of work currently performed by consultants, | <p>Text Entry</p> | <p>The CDFI Fund expects the <i>Applicant's</i> personnel to have relevant experience in the types of activities the <i>Applicant</i> intends to pursue with its <i>NMTC Allocation</i> – particularly in situations where the <i>Applicant</i> (or its <i>Controlling Entity</i>) lacks prior organizational performance in providing loans or <i>Equity Investments</i> and related functions (e.g. monitoring loan repayments or dividend payments, managing disbursement of construction draws, etc.).</p> <p>An <i>Applicant</i> will be evaluated more favorably under this sub-section if it can also demonstrate that its personnel have experience identifying borrowers or investees in <i>LICs</i>: evaluating business to determine long-term sustainability; and structuring <i>QLICs</i> or providing <i>FCOS</i> that meet the needs of <i>LIC</i> borrowers/investees.</p> | <p>Text box (Maximum Response Length: 5,000 Characters)</p> |

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| | internal staff, and board members on the activities referenced in this question. | | | |
| | <p>(b) Describe how the <i>Applicant</i> will manage the addition of NMTC financing activities into its current portfolio of activities, specifically:</p> <ul style="list-style-type: none"> • If the roles and responsibilities described in Question 29(a) will change, be sure to describe such changes; • Indicate the percentage of work to be performed by consultants, internal staff, and/or board members; and • Whether additional staff (or consultants) will need to be hired. | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |
| | <p>(c) Based on the activities in Exhibit B, describe the types of due diligence that the <i>Applicant</i> (or its <i>Controlling Entity</i>) conducted when determining whether to provide financing or investment (including typically required documents from borrowers/investees and the criteria for determining the financial viability of the business).</p> | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |
| 30. Asset and Risk Management Experience | <p>(a) Describe the current roles and responsibilities of the <i>Applicant's</i> (and <i>Controlling Entity's</i>) key personnel,</p> | Text Entry | Each <i>Applicant</i> must demonstrate that it has the capacity and relevant experience to manage the types of assets it intends to invest in with the requested <i>NMTC Allocation</i> , as well as monitor the <i>QALICB's</i> use of NMTC proceeds (e.g., | Text box (Maximum Response Length: |

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| | <p>consultants and board members in managing the assets to be financed with an <i>NMTC Allocation</i> and associated risks. The <i>Applicant</i> should reference personnel's prior experience from Table C2 as necessary. Be sure to indicate the percentage of work completed or expected to be completed by consultants, internal staff, and board members.</p> | | <p>construction, equipment purchase, etc.) and control associated risks (e.g., loan repayments, cash distributions to the investment fund, leverage lenders, etc.)</p> <p>An <i>Applicant</i> will be evaluated favorably under this subsection if it has experienced personnel and appropriate procedures and systems in place to successfully manage a loan and/or investment portfolio, including informational and performance aspects of administering such assets or pools of similar assets.</p> | <p>5,000 Characters)</p> |
| | <p>(b) Describe how the <i>Applicant</i> will manage the addition of NMTC assets into its current portfolio of assets, including whether additional staff (including consultants, third-party firms, or other <i>CDEs</i>) will need to be hired and whether any of the roles and responsibilities of the <i>Applicant's</i> (and <i>Controlling Entity's</i>) key personnel, consultants and board members described in Question 30(a) would change.</p> | <p>Text Entry</p> | | <p>Text box (Maximum Response Length: 2,000 Characters)</p> |
| | <p>(c) For each major product line, describe how the <i>Applicant</i> (or <i>Controlling Entity</i>) monitors financial assets.</p> <ul style="list-style-type: none"> • Explain how the organization will ensure that <i>QLICI</i> proceeds are used to finance the assets for which they are intended and identifies borrowers at greater risk (e.g., risk rating system for a loan portfolio, <i>QALICB</i> | <p>Text Entry</p> | | <p>Text box (Maximum Response Length: 5,000 Characters)</p> |

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| | <p>reporting, etc.) and how the <i>Applicant</i> responds when assets are at greater risk.</p> <ul style="list-style-type: none"> • Indicate if the <i>Applicant</i> (or <i>Controlling Entity</i>) has written asset management and collection policies and whether it has ever deviated from those policies in the past five years and, if so, why. • Address the <i>Applicant's</i> strategy for minimizing defaults and managing delinquencies to mitigate against write-downs or write-offs going forward. | | | |
| | <p>(d) For the <i>Applicant</i> (or <i>Controlling Entity</i>), complete Table D1 (Investment Portfolio) and discuss the <i>Applicant's</i> (or <i>Controlling Entity's</i>) delinquency rate(s) as of the <i>Allocation Application</i> release date for each major asset class as well as its default rate (write-offs) over the past three years for each major asset class. Also:</p> <ul style="list-style-type: none"> • Describe the trends in delinquencies, write-offs, and defaults as shown in Table D1. • Explain the reasons for any negative results such as an increase or unusual spikes in delinquencies or write-offs that have occurred. | Table | | Table D1 |
| | | Text Entry | <p>Delinquency rate means the percentage of loan payments and mandatory dividend payments, on a dollar basis, that were 90 days past due (i.e., the combined dollar amount of principal, interest and mandatory dividend payments, 90 days or more past due divided by the total dollar amount of loans and <i>Equity Investments</i> outstanding).</p> | Text box (Maximum Response Length: 7,500 Characters) |

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| | <ul style="list-style-type: none"> Describe the measures the <i>Applicant</i> (or its <i>Controlling Entity</i>) has taken to address delinquencies, including loan restructurings, and write-offs. If the <i>Applicant</i>, or its <i>Controlling Entity</i>, is a regulated financial institution, please compare delinquency and default rates with the appropriate peer group. | | | |
| | <p>(e) Discuss any delinquent, defaulted, or impaired loans or <i>Equity Investments</i> from prior NMTC investments in the last ten years, specifically:</p> <ul style="list-style-type: none"> Provide the total value of each investment, the allocation year, as well as the total number of days delinquent and the amount charged off, if applicable. Discuss the <i>Applicant's</i> strategies for managing these troubled investments, including any work-out strategies (e.g., restructuring, forbearance agreements, etc.), as well as any administrative changes implemented to minimize future delinquencies and write-offs. | Text Entry | | Text box (Maximum Response Length: 5,000 Characters) |
| 31. Program Compliance Experience | (a) Describe the current and planned roles and responsibilities of the <i>Applicant's</i> (and <i>Controlling</i> | Text Entry | Each <i>Allocatee</i> must have the capacity to remain in compliance with NMTC Program requirements. An <i>Applicant</i> will be evaluated favorably in this sub-section to the extent that it can: 1) demonstrate experience with similar regulatory | Text box (Maximum Response Length: |

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| | <p><i>Entity's</i>) key personnel, consultants and board members in managing the <i>Applicant's</i> regulatory and tax compliance. The <i>Applicant</i> should reference information from Table C2 as necessary. Be sure to indicate the percentage of work completed or expected to be completed by consultants, internal staff, and board members</p> | | <p>compliance requirements, including compliance under other tax credit programs; and 2) articulate a specific strategy for ensuring that its NMTC-related investments will qualify at the time of investment and throughout the seven-year credit period.</p> | <p>3,000 Characters)</p> |
| | <p>(b) Discuss how the <i>Applicant's</i> (or <i>Controlling Entity's</i>) systems and procedures (e.g., portfolio monitoring, reporting, investment/re-investment strategies) will ensure ongoing compliance with NMTC Program requirements. Specifically, be sure to indicate how the <i>Applicant</i> will ensure that:</p> <ul style="list-style-type: none"> • At least 85% of the proceeds of the <i>QEs</i> are invested in <i>QLICs</i> in accordance with the <i>NMTC Program Income Tax Regulations</i>. If the <i>Applicant</i> is providing loans or investments to another <i>CDE</i>, how will it ensure that the secondary <i>CDE</i> fulfills its investment requirements? • The businesses that the <i>Applicant</i> invests in are <i>QALICBs</i>, in accordance with the <i>NMTC Program Income Tax Regulations</i>. If purchasing a portfolio of | <p>Text Entry</p> | | <p>Text box (Maximum Response Length: 10,000 Characters)</p> |

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| | <p>loans, how will the <i>Applicant</i> ensure that it purchases loans that are <i>QLICs</i>?</p> <ul style="list-style-type: none"> • Payments of, or for, capital, equity, or principal by its borrowers or investees are re-invested into <i>QLICs</i> within applicable reinvestment periods. If providing loans to or investments in another <i>CDE</i>, how will it ensure that the secondary <i>CDE</i> fulfills its re-investment requirements? | | | |
| 32. CRA and Regulatory Information | <p>(a) If the <i>Applicant</i>, its <i>Controlling Entity</i>, or any of its <i>Affiliates</i> is an insured financial institution that receives Community Reinvestment Act (CRA) ratings from regulators, has the organization received CRA ratings within the past five years?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | | Dropdown Menu |
| | <p>If yes to Question 32(a), and the most recent CRA rating is less than “Outstanding”, please describe:</p> <ol style="list-style-type: none"> the conditions or circumstances that led to the rating; the steps the institution is taking to achieve an “Outstanding” rating; and the role that NMTC activities are expected to play in helping the institution to | Text Entry | Text box (Maximum Response Length: 2,000 Characters) | |

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| | achieve an “Outstanding” rating. | | | |
| | (b) Is the <i>Applicant, Controlling Entity</i> , or any <i>Affiliate</i> a federally-regulated thrift, bank, bank holding company, or credit union (Y/N)?” If “Y” is selected, please complete the following chart Q. 32c, below: | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | | Dropdown Menu |
| | (c) Regulated Entity Information: | | Report all federally regulated entities that are <i>Affiliated</i> with the <i>Applicant</i> . Use ‘Add Row’ to list as many as applicable. | |
| | Record No. | Text Entry | Enter a number to identify the Entry - Example 1,2,3,4 etc. | Numerical (Maximum Response Length: 5 Characters) |
| | Regulated Entity (ex. <i>Affiliate, Controlling Entity, Applicant</i>) | <input type="checkbox"/> <i>Applicant</i> <input type="checkbox"/> <i>Controlling Entity</i> <input type="checkbox"/> <i>Affiliate</i> | | Dropdown Menu |
| | Organization Name | Text Entry | | Text box (Maximum Response Length: 100 Characters) |
| | Is this entity a Holding Company? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | State | Select State or US Territory | | Dropdown Menu |

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| | City | Text Entry | | Text box (Maximum Response Length: 50 Characters) |
| | Federal Regulator | <input type="checkbox"/> FDIC <input type="checkbox"/> FRB <input type="checkbox"/> NCUA <input type="checkbox"/> OCC | | Dropdown Menu |
| | FDIC/NCUA/FRB Certification # | Text Entry | | Text box (Maximum Response Length: 50 Characters) |
| 33. Financial Health | Answer the following questions regarding the <i>Applicant's</i> (or the <i>Controlling Entity's</i>) financial health. Indicate if the responses are (check one): | <input type="checkbox"/> For the <i>Applicant</i> (if it has incurred operating expenses). <input type="checkbox"/> For the Controlling Entity (if the <i>Applicant</i> has not yet incurred operating expenses). <input type="checkbox"/> Not applicable (neither the <i>Applicant</i> nor the <i>Controlling Entity</i> has incurred operating expenses). | | Dropdown Menu |

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| | (a) Have the financial statements for the last complete fiscal year been independently audited or is an audit underway? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | | Dropdown Menu |
| | Please provide fiscal year end date for the last completed independent audit (mm/dd/yyyy). | Text Entry | | Text box (Maximum Response Length: 10 Characters) |
| | If no audit has been completed or is underway for the last complete fiscal year, please explain why and what steps the <i>Applicant</i> , or its <i>Controlling Entity</i> , is taking to obtain audited financials in the future: | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |
| | (b) If “Yes”, have any of the <i>Applicant’s</i> , and its <i>Controlling Entity’s</i> , completed audits within the past three years (or, if shorter, for the period from inception) indicated any of the following: 1. An opinion other than unqualified? 2. A going-concern paragraph? 3. Repeated findings of reportable conditions? 4. Material weaknesses in internal controls? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | If “Yes” to any of the above, indicate the fiscal years of the | Text Entry | | Text box |

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| | occurrences and describe the circumstances and corrective action(s) being taken: | | | (Maximum Response Length: 2,000 Characters) |
| | (c) Have the <i>Applicant's</i> , and its <i>Controlling Entity's</i> financial statements shown positive net income (or if a non-profit, positive change in net assets) for each of the last three years, or if in business for less than three years, for the period of time it has operated? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/a | | Dropdown Menu |
| | If "No", please explain the circumstances, indicate the fiscal year in which this occurred, and describe the corrective action being taken: | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |
| | (d) Is the <i>Applicant</i> (and <i>Controlling Entity</i>) aware of any non-compliance issues cited since the issuance of its most recent audited financial statements or Management's Annual Report on Internal Controls Over Financial Reporting? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Check box |
| | If "Yes", please explain the circumstances and describe the corrective action being taken: | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |

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| | (e) If the <i>Applicant</i> identified a <i>Controlling Entity</i> in Question 3, please indicate if the <i>Controlling Entity</i> will provide financial support to address any operating deficit (e.g.. full support, partial support) and under what circumstances. | Text Entry | | Text box (Maximum Response Length: 1,000 Characters) |
| 34. Fee Structure | (a) Complete Table D2: Based on the projections in Exhibit A, for each Financial Product identified in Question 14, provide an itemized list of the individual fees that represent the Fee Structure the <i>Applicant</i> anticipates will typically apply to the proposed NMTC investments and result in compensation to the <i>Applicant</i> (or <i>Controlling Entity</i>), <i>Affiliates</i> , <i>Subsidiary CDEs</i> , or unaffiliated third-parties. | Table | In Table D2, <i>Applicants</i> must disclose all fees for each proposed financial product listed in Question 14(a), regardless of the expected source and/or recipient. | Table D2 |
| | (b) Description of Table D2: In the narrative below, for each Financial Product identified in Question 14, explain how the <i>Applicant</i> determined that the Fee Structure and Average Fee Percentage are appropriate for the investment strategy described in this <i>Allocation Application</i> . | Text Entry | Provide a brief description of any and all fees, payments, loans, or other remuneration (type, usage), whether paid or directed to the <i>CDE</i> , a <i>CDE Affiliate</i> , or other third parties, and describe the timing of such fees in relation to the <i>QEI</i> . For example, indicate whether the fee will be reserved, charged when the <i>Applicant</i> commits to an NMTC investment, charged prior to, during or after the compliance period; retained from Investment Fund proceeds, paid from the <i>QEI</i> proceeds, paid from <i>QLICI</i> proceeds, or retained from the tax credit equity at the end of the NMTC compliance period. Applicants that plan to charge exit fees must quantify the amount and describe the circumstances that determine when such fees will be charged as well as the frequency these events will occur. | Text box (Maximum Response Length: 4,000 Characters) |

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| | | | Applicants that plan to retain all or a portion of the tax credit equity at the end of the NMTC compliance period must quantify the amount as well as describe the circumstances and frequency. | |
| | <p>(c) Complete Table D3 based on the projected activities reflected in Exhibit A and fees described in Question 34(b) and Table D2.</p> <p>Based on the projections in Table D3:</p> <ul style="list-style-type: none"> Describe the <i>Applicant's</i> projected sources of income and expense(s) associated with administering the <i>Applicant's</i> NMTC line of business and how the <i>Applicant</i> will be able to sustain this line of business, consistent with its overall business strategy, including its timeline for making investments. <i>QLICI</i> interest and dividend payments should be described as income. If all or a portion of the <i>QLICI</i> interest or dividend payments will be passed through the investment fund to investors or leverage lenders, then describe those payments as an off-setting expense. If the <i>Applicant</i> will use existing resources (e.g., accumulated cash balances), third parties as a source of | Table | The narrative response in Question 34(c) should <u>clearly</u> describe the assumptions and calculations used to derive each income and expense line from Table D3 in a way that CDFI Fund staff will be able to easily understand, quantify, and evaluate. The <i>Applicant</i> should indicate whether it is using cash or accrual methods of accounting. Table D3 should be completed using the <i>Applicant's</i> fiscal year indicated in Question 2(h) (see the Application FAQ). | Table D3 |
| | | Text Entry | If the <i>Applicant</i> has engaged (or intends to engage) any third parties (e.g., consulting firms) that will receive any NMTC related income from the <i>Applicant</i> , <i>QEI</i> proceeds, <i>QALICBs</i> , or investors, the <i>Applicant</i> must disclose, describe and include this compensation as an offsetting income and expense of the <i>Applicant</i> in Table D3. It must also be clearly described in the response to Question 34(c). | Text box (Maximum Response Length: 5,000 Characters) |

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| | <p>operating income (e.g., grants or loans), or in-kind contributions (e.g. use of personnel, back office systems), describe the <i>Applicant's</i> progress in securing firm commitments;</p> <ul style="list-style-type: none">• Explain how the <i>Applicant</i> would address any operating deficit. (e.g., income or loan from <i>Affiliates</i> or alternate sources, reduce scope of activities, use reserves, etc.). | | | |
|--|--|--|--|--|

PART IV: CAPITALIZATION STRATEGY

Information in Part IV is not scored during the Phase I stage of the Application review. Information provided in this section will be evaluated during the Phase II stage of the Application review. For more information on the *NMTC Allocation Application* review process, please consult the *NOAA*.

A. Investor Strategy

NOTE: An *Applicant* that demonstrates a track record of raising capital from investors (including market rate capital) consistent with the Allocation request and, if applicable, a high level of investor *Commitment* will be evaluated favorably under this sub-section. If an *Applicant* is seeking investments from investors that have not yet provided capital, the *Applicant* may be evaluated favorably if it presents a strong strategy for raising capital from such investors.

| Question Number | Question Text | Response | Question Notes | Field Type |
|--|--|------------|--|---|
| 35. Track Record of Raising Capital | Complete Table E1 and describe the track record of the <i>Applicant</i> (or its <i>Controlling Entity</i>) raising capital from third-party sources, particularly equity capital at market or near-market rates. Be sure to distinguish between raising capital from profit-motivated investors; from government or philanthropic sources of capital; or using tax credits as an incentive. <i>Applicants</i> may also discuss the experience of key personnel, consultants, and board members in raising capital. Reference information provided in Table C2 as appropriate. | Table | Table E1 must only contain the data of the <i>Applicant</i> (or its <i>Controlling Entity</i>). | Table |
| | | Text Entry | Also, the <i>Applicant</i> should only discuss its track (or its <i>Controlling Entity</i>) in Question 35. The <i>Applicant</i> may also refer to the qualifications and five-year capital-raising track record of individuals (e.g., staff, <i>Principals</i> , consultants) listed in Table C1 for organizations other than the <i>Applicant</i> (or its <i>Controlling Entity</i>) in Question 35. | Text box (Maximum Response Length: 5,000 Characters) |

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| 36. Investment Partnerships | (a) Does the <i>Applicant</i> intend to secure investments from partnership entities that will leverage non- <i>Equity Investments</i> (e.g., debt, grant dollars) from outside of the partnership to increase the tax credit yield for members of the partnership? (Please note: <u><i>Applicants</i> planning to use the leverage model to raise <i>QEI</i>s for all or a portion of their allocation should select “Yes” below</u>). | <input type="checkbox"/> Yes <input type="checkbox"/> No | <i>Applicants</i> that answer Yes to Question 36(a) and complete Table E3 are required to submit, along with their applications, documentation demonstrating proof of the interest of the equity investors <u>and</u> debt providers (e.g., letter indicating intent of equity or debt investor to provide capital to the partnership entity that will provide the <i>QEI</i> to the <i>Applicant</i>). Be sure to follow the directions in the <i>Applicant</i> Instructions section for information regarding the submission of these documents. | Dropdown Menu |
| | (b) If Yes, provide the percentage of equity versus non-equity investments for all such investor partnerships based on the <i>Applicant’s</i> requested <i>NMTC Allocation</i> . | _____% Equity Investments _____% Non-Equity Investments | | |
| 37. Investment Strategy | (a) Has the <i>Applicant</i> or its <i>Affiliates</i> , either directly or through subsidiary <i>CDE(s)</i> , received <i>QEIs</i> from investors in amounts <u>equal to or greater than the Allocation request in Question 1</u> between January 1, 2018 and the release date for the <i>NMTC Allocation Application</i> (specified in the <i>NMTC Application FAQ</i> document)? | <input type="checkbox"/> Yes, complete Table E2 and question 37(c). <input type="checkbox"/> No, complete question 37(b) and Table E2 will not apply. | <p><i>Applicants</i> (or <i>Affiliates</i>) who have received <i>QEIs</i> from investors in amounts <u>equal to or greater than the Allocation request in Question 1</u> between January 1, 2018 and the release date for the <i>NMTC Allocation Application</i> (specified in the <i>NMTC FAQ</i> document) are required to complete Table E2. See the <i>FAQ</i> document (Capitalization Strategy Section) for additional details.</p> <p>However, <i>Applicants</i> (or <i>Affiliates</i>) that have received <i>QEIs</i> in amounts <u>less than the Allocation request in Question 1</u> between January 1, 2018 and the release date for the <i>NMTC Allocation Application</i> are required to complete Table E3 and should not complete Table E2. If the <i>Applicant</i> provided investor letters as evidence of its ability to raise capital, then the <i>Applicant</i> should respond to Question 37(c). If the <i>Applicant</i> did not provide investor letters, it should respond to Question 37(d). See the <i>FAQ</i> document (Capitalization Strategy Section) for additional details.</p> | Dropdown Menu |

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| | <p>(b) If “No” to Question 37(a) above, has the <i>Applicant</i> provided investor <i>Commitments</i> or <i>Letters of Intent/Interest</i> for investors listed in Table E3?</p> | <p><input type="checkbox"/> Yes, complete Table E3 and Question 37(c).</p> <p><input type="checkbox"/> No, complete Question 37(d) and table E3 will not apply.</p> <p><input type="checkbox"/> N/A if “yes” to Question 37(a).</p> | <p>All <i>Applicants</i> that respond “Yes” to Question 37(b) are required to submit, along with their applications, documentation demonstrating proof of investor interest (e.g., <i>Commitment</i> letters; <i>Letters of Intent/Intent</i>). Investor letters should identify whether the investor will make a direct investment in the <i>CDE</i> or into a partnership.</p> | <p>Dropdown Menu</p> |
| | <p>(c) If the <i>Applicant</i> responded “Yes” to Question 37(a) or Question 37(b), discuss the extent to which the <i>Applicant</i> may raise capital from equity and/or debt investors not listed in Table E2 or E3.</p> <ul style="list-style-type: none"> • <i>Applicants</i> that intend to raise <i>QEs</i> using the leverage structure must also describe potential sources of leveraged debt related to their planned NMTC investments (described in Question 17), including the percentage of leverage debt that is anticipated to be sourced from the <i>QALICB</i> or <i>Affiliates</i> of the <i>QALICB</i>. • If Table B1 includes non-NMTC direct loans/investments deployed by the <i>Applicant</i> or <i>Controlling Entity</i>, describe the three largest sources of capital used for such | <p>Text Entry</p> | <p>If the <i>Applicant</i> answered “Yes” to Question 36(a) and plans to source non-<i>Equity Investments</i> from sources that are specific to particular <i>QALICBs</i>, the <i>Applicant</i> should discuss this strategy in the response to Question 37(c) to the extent that it may invest in <i>QALICBs</i> that have not yet been identified at the time of the <i>Allocation Application</i>.</p> | <p>Text box (Maximum Response Length: 5,000 Characters)</p> |

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| | loans/investments and the types of businesses financed. | | | |
| | <p>(d) If the <i>Applicant</i> responded “No” to Question 37(a) and Question 37(b) above, discuss the <i>Applicant’s</i> strategy for securing NMTC investor Commitments:</p> <ul style="list-style-type: none"> • The <i>Applicant’s</i> strategy for identifying additional equity investors or non-equity providers (i.e., leveraged debt), including the extent to which the <i>Applicant</i> will be utilizing community alliances or strategic partners to raise investment capital and/or whether leverage debt will be sourced from the <i>QALICB</i> or <i>Affiliates</i> of the <i>QALICB</i>. • The <i>Applicant’s</i> timeline for securing investments from equity investors and/or leveraged debt if the <i>Applicant</i> answered yes to Question 36(a) and, any risks that may preclude the <i>Applicant</i> from closing such investments, and how the <i>Applicant</i> is mitigating such risks. • If the <i>Applicant</i> is using a third-party investment banker to raise capital, describe whether a contract is in place, the terms (actual or proposed) of the contract, and the progress to date that the banker has made in securing | Text Entry | | Text box (Maximum Response Length: 8,000 Characters) |

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| | Commitments from investors. Do NOT list these investment bankers in Table E3. | | | |
| 38. Investors Identifying Transactions | (a) Will one or more of the <i>Applicant's</i> current or prospective investor(s) originate or otherwise identify transactions in which the <i>Applicant</i> will invest? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | (b) Will the <i>Applicant</i> receive any <i>QEs</i> from <i>Affiliates</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | (c) If the answer to (a) or (b) is yes, provide narrative detailing: <ul style="list-style-type: none"> • The name of each such equity investor or non-equity provider; • The role of each equity investor or non-equity provider with respect to locating, underwriting, and structuring each investment; • Whether each equity investor or non-equity provider offers similar products or services already; and • If applicable, the extent to which the <i>Applicant</i> will offer products with more favorable rates or terms than those currently offered by the equity investor or non-equity provider and/or will target its activities to areas of greater economic distress than those | Text Entry | <p>If the <i>Applicant</i> has obtained or plans to obtain investments from organizations that also will identify or originate transactions for the <i>Applicant</i> or organizations that are <i>Affiliated</i> with the <i>Applicant</i>, it will be evaluated favorably if:</p> <p>a) the <i>Applicant's</i> transactions are more targeted to areas of greater economic distress than those areas that investors are already reaching with their investments or loan originations; or b) the <i>Applicant's</i> products and services are offered with more favorable rates or terms than those offered by the investor.</p> | Text box (Maximum Response Length: 2,000 Characters) |

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| | currently targeted by the equity investor or non-equity provider. | | | |
| 39. Distribution of Benefits | <p>(a) Quantify as best you can, for each anticipated investment type, how economic benefits of the <i>QEI</i> will be apportioned amongst:</p> <ul style="list-style-type: none"> i. the investors (equity and leverage debt sources), through economic returns (e.g. interest income, investor IRR); ii. the <i>Applicant</i> (or its <i>Subsidiaries/Affiliates</i>), through economic returns (including fees). iii. the <i>QALICB</i> investees/borrowers, through lower costs of capital; iv. if applicable, the unaffiliated end-users through lower costs (e.g., lower tenant lease rates). | Text Entry | The CDFI Fund expects <i>Applicants</i> to quantify this information and to be able to demonstrate that there is appropriate sharing between the investor, <i>CDE</i> , and borrowers/investees. | Text box (Maximum Response Length: 5,000 Characters) |
| | <p>(b) To the extent there may be any tax credit equity remaining at the end of the seven-year credit period, be sure to address how the residual value will be apportioned amongst investors, <i>QALICBs</i> (<i>and/or QALICB Affiliate</i>), the <i>Applicant</i> and/or its <i>Affiliates</i>. Address any terms or conditions the <i>QALICB</i> must</p> | Text Entry | | Text box (Maximum Response Length: 3,000 Characters) |

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| | meet as a term of the distribution. | | | |
| | (c) If the <i>Applicant</i> generates a profit from its overall NMTC activities, discuss how this profit will be used (e.g., dollar amount or percentage of profit that will be distributed to investors or shareholders, support additional NMTC or non-NMTC <i>Low-Income Community</i> investments, support other activities of the <i>Applicant</i> or <i>Affiliates</i> , etc.). | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |
| | (d) If at least one proposed investment will involve two or more unaffiliated <i>CDEs</i> , please describe the total number of planned co-investments with other <i>CDEs</i> . Please describe the factors that lead to co-investing with other <i>CDEs</i> and benefits to the <i>QALICB</i> and/or unaffiliated end-users. | Text Entry | | Text box (Maximum Response Length: 2,000 Characters) |

B. Sources and Uses of Capital

NOTE: In this sub-section, the CDFI Fund seeks to understand both how efficiently the *Applicant* will use *QEI* proceeds and how well it is leveraging other sources of financing in conjunction with the activities undertaken with its *QEI* proceeds. An *Applicant* that intends to invest/re-invest more than 85% of its *QEI* proceeds in *QLICs* will be evaluated more favorably, provided that the *Applicant* can reasonably demonstrate that it has other mechanisms in place to support its costs of operations.

| Question Number | Question Text | Response | Question Notes | Field Type |
|--|---|---|--|-----------------------------|
| 40. Percent of QEIs Invested as QLICs | Will more than 85% of the <i>QEI</i> proceeds be invested/re-invested in <i>QLICs</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown Menu |
| | If yes, what percentage? | ____% of the <i>QEI</i> proceeds | An <i>Applicant</i> that indicates in Question 40 “yes” and provides a percentage greater than 85% will be required to meet the percentage identified above, and such requirement will be a term of its <i>Allocation Agreement</i> . | Numerical-Percentage |
| 41. Minimum Request Amounts | Is there an absolute minimum amount below which the <i>Applicant</i> would be unwilling to accept an <i>NMTC Allocation</i> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | At the conclusion of the CDFI Fund’s review process, if the <i>Applicant</i> is recommended to receive less than the minimum amount of allocation authority identified in Question 41, the CDFI Fund will not provide an <i>NMTC Allocation</i> to the <i>Applicant</i> . An <i>Applicant</i> with a high minimum allocation request will need to demonstrate that it can raise and deploy the <i>NMTC Allocation</i> requested in a timely manner; that it will likely achieve significant community impacts or production innovations; and that it could not successfully implement its business strategy without this minimum allocation amount. | Dropdown Menu |
| | If yes, please provide the amount. | \$_____ | | Numerical-Dollar Amount |
| | Describe how this amount was determined. Be sure to address why | Text Entry | | Text box (Maximum Response) |

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| | the <i>Applicant</i> could not administer a smaller award. | | | Length: 1,000 Characters) |
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PART V: INFORMATION REGARDING PREVIOUS AWARDS

Information in Part V is not scored during the Phase I stage of the Application review. Information provided in this section will be evaluated during the Phase II stage of the Application review. For more information on the *NMTC Allocation* Application review process, please consult the *NOAA*.

NOTE: Receipt of a prior award or allocation through any of the CDFI Fund's programs will not affect the likelihood of an *Applicant* receiving an *NMTC Allocation* in this round. The CDFI Fund will examine the compliance status of *Applicants* (or their *Affiliates*) that have previously received CDFI Fund awards or allocations.

NOTE: The CDFI Fund will review transaction-level data submitted by *Applicants* that are prior year *Allocatees* through AMIS and may seek additional information from *Applicants* to determine whether activities and the *QLICs* made were consistent with the transactions and activities proposed in the relevant prior-year *Allocation Application(s)*.

| Question Number | Question Text | Response | Question Notes | Field Type |
|----------------------------|---|----------------------------------|--|--------------|
| 42. CDFI Fund Award Status | Has the <i>Applicant</i> and/or any of its <i>Affiliates</i> previously received a financial award (not including an <i>NMTC Allocation</i>) from the CDFI Fund? | | <p>If Yes, please ensure that the award(s) is listed in the table. If an <i>Affiliate</i> of the <i>Applicant</i> has received a financial award and it is not listed in the table, please return to the <i>Applicant's</i> Organization Profile in AMIS and ensure that the <i>Affiliate</i> is listed in the <i>Affiliate</i> section. Please see the CY 2023 <i>NMTC Program</i> AMIS Navigation Guide (Section 6.0) on how to associate <i>Affiliates</i> with your AMIS Organization Profile.</p> <p>The following three fields are prepopulated in AMIS. There are separate entries for every financial award received from the CDFI Fund.</p> | |
| | Name of Award Recipient | Name of Award Recipient Displays | This field is prepopulated from the AMIS Profile and locked. | Prepopulated |

| | | | | |
|-----------------------------------|---|---|--|---------------|
| | Award Control Number | Award Control Number Displays | This field is prepopulated from the AMIS Profile and locked. | Prepopulated |
| | Total Award Amount | Award Amount Displays | This field is prepopulated from the AMIS Profile and locked. | Prepopulated |
| | Is the Award information complete? | <input type="checkbox"/> Yes <input type="checkbox"/> No | You must select Yes to the question for this sub-section to be marked as complete. | Dropdown Menu |
| 43. NMTC Allocation Status | Has the <i>Applicant</i> and/or any of its <i>Affiliates</i> received an <i>NMTC Allocation</i> from the CDFI Fund in a prior allocation round? | | <p>If Yes, please ensure that the allocation(s) is listed in the table. If an <i>Affiliate</i> of the <i>Applicant</i> has received an <i>NMTC Allocation</i> and it is not listed in the table, please return to the <i>Applicant's</i> Organization Profile in AMIS and ensure that the <i>Affiliate</i> is listed in the <i>Affiliate</i> section. Please see the CY 2023 NMTC Program AMIS Navigation Guide (Section 6.0) on how to associate <i>Affiliates</i> with your AMIS Organization Profile. You must select Yes to the question below for this sub-section to be marked as complete.</p> <p>Please note that <i>Applicants</i> and/or any <i>Affiliates</i> that have shared <i>Control</i> of a <i>CDE</i> (or <i>Subsidiary</i> of a <i>CDE</i>) that is a prior round <i>Allocatee</i> should answer "Yes" to Question 45 and provide requested responses.</p> <p><i>Applicants</i> providing responses to Question 45 need only make one entry per <i>Allocatee</i>, per award for which the <i>Applicant</i> has provided <i>QEs</i> regardless of the number of individual <i>QEs</i> made to that <i>Allocatee</i> under a single award. For example, if an <i>Applicant</i> has made 10 <i>QEs</i> in <i>Allocatee X</i> under its second round allocation, then the <i>Applicant</i> would provide the aggregate amount of those 10 <i>QEs</i> in its response to Question 45.</p> | |

| | | | | |
|--|--|---|---|--|
| | | | The following three fields are prepopulated in AMIS. There are separate entries for every <i>NMTC Allocation</i> received from the CDFI Fund. | |
| | Name of Allocatee | Name of Allocatee Displays | This field is prepopulated from the AMIS Profile and locked. | Prepopulated |
| | Award Control Number | Award Control Number Displays | This field is prepopulated from the AMIS Profile and locked. | Prepopulated |
| | Total Allocation Amount | Total Allocation Amounts Displays | This field is prepopulated from the AMIS Profile and locked. | Prepopulated |
| | Is the Award information complete? | <input type="checkbox"/> Yes <input type="checkbox"/> No | You must select Yes to the question for this sub-section to be marked as complete. | Dropdown menu |
| 44. Allocatee Justification for Additional Allocation | Have you received previous allocations?* | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Dropdown menu |
| | <p>If the <i>Applicant</i> answered Yes to Question 43, <u>briefly</u> explain the current status of its previous allocation award(s). Be sure to address:</p> <p>(a) If the <i>Applicant</i> has made <i>QLICs</i>, describe the types of transactions that have been financed to date. The <i>Applicant</i> must discuss the projects that received the largest <i>QLICs</i> in each of the <i>Applicant's</i> three most recent Allocations, as of the Allocation Application release date. If a single project</p> | Text Entry | <p>For each project identified, describe how NMTC proceeds were used, including:</p> <ul style="list-style-type: none"> • How the <i>CDE</i> ensured that the NMTCs allocated did not exceed the amount necessary to assure project feasibility. • Efforts to secure alternative sources of capital in the marketplace in order to complete the project. • Any community outcomes or benefits that were generated as a result of the transaction. • The source(s) and amount(s) of leveraged debt from all sources (including the percentage of leverage sources derived from the <i>QALICB</i>, <i>Affiliates</i> of the <i>QALICB</i> and/or <i>Project Sponsor</i>), if any. | Text Box Maximum Response Length: 10,000 characters |

| | | | |
|--|------------|---|---|
| <p>received the <i>QLICs</i> from more than one of the past three awards, see the FAQ Document (Information Regarding Previous Awards Section) for more details. If the <i>Applicant</i> has received less than three Allocations, it should discuss the three projects that received the largest investments in the last five years. See Application FAQ for additional guidance.</p> | | <ul style="list-style-type: none"> Any investment-related fees and third-party expenses paid by the <i>QALICB</i> or the <i>QALICB's Affiliates</i> that were paid either to the <i>Applicant</i>, its <i>Affiliates</i>, <i>QEI</i> investors or directly to any other parties in connection with consideration or receipt of the <i>QLIC</i> investment(s) (e.g., <i>CDE</i> upfront and on-going fees, fees and expenses associated with leverage debt, accounting, legal, on-going asset management, loan servicing, back-end fees, etc.). | |
| <p>(b) If the <i>Applicant</i> co-invested in a project(s) with two or more unaffiliated <i>CDEs</i>, explain what actions the <i>CDE</i> took to control expenses paid by <i>QALICBs</i> and investors (e.g., Co-investing <i>CDEs</i> used one set of documents, shared professional expenses, etc.).</p> | Text Entry | | Text box Maximum Response Length: 3,000 characters |
| <p>(c) Discuss whether the activities undertaken with the NMTC dollars were consistent (with respect to product offerings; <i>QALICB</i> type; fees and markets served; etc.) with the business strategy presented in the relevant Allocation Application. If the activities were not consistent with the relevant Allocation Application, describe the inconsistencies.</p> | Text Entry | | Text box Maximum Response Length: 3,000 characters |
| <p>(d) To the extent the <i>Applicant's</i> past transactions have been structured to allow <i>QALICBs</i> to acquire a portion of <i>QLICs</i> through a put/call option at the</p> | Text Entry | | Text box Maximum Response Length: 2,000 characters |

| | | | | |
|---|---|---|---|---|
| | end of the seven-year credit period, please quantify the value of the investment acquired by the <i>QALICBs</i> at the end of the seven-year credit period both as a dollar amount and as a percentage of total <i>QLICs</i> . | | | |
| | (e) Discuss whether the activities undertaken with the NMTC dollars were consistent with the Notable Relationships presented in the relevant <i>Allocation Application</i> . If the activities were not consistent with the relevant <i>Allocation Application</i> , describe the inconsistencies | Text Entry | | Text box Maximum Response Length: 2,000 characters |
| 45. Investment or Control of Previous Allocatees | Has the <i>Applicant</i> and/or any of its <i>Affiliates</i> assumed <i>Control</i> (not resulting from unwinding of a transaction) of one or more <i>CDEs</i> (or <i>Subsidiary CDEs</i>) that received an <i>NMTC Allocation</i> in a prior round? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <p>If 'Yes', list the allocation(s) and total <i>QEs</i> invested per allocation in the table above. Only include those <i>CDEs</i> (or <i>Subsidiary CDEs</i>) where the <i>Allocatee</i> and/or any of its <i>Affiliates</i> assumed <i>Control</i> not resulting from the unwinding of a transaction. The <i>Applicant</i> may use additional space as necessary.</p> <p>Report every <i>CDE</i> that the <i>Applicant</i> has assumed <i>Control</i> of. Use 'Add Row' to list as many as applicable.</p> | Check box |
| | Record Number | Text Entry | . | Text box Maximum Response Length: 5 characters |
| | Name of <i>Allocatee</i> | Text Entry | | Text box Maximum Response |

| | | | | |
|--|----------------------------------|------------|--|--|
| | | | | Length: 50 characters |
| | Award Control Number | Text Entry | | Text box Maximum Response Length: 11 characters |
| | Total <i>QEI</i> Amount Invested | Text Entry | | Numeric Maximum Response Length: 14 characters |

EXHIBIT A: PROJECTED ACTIVITIES

Instructions for Exhibit A: All *Applicants* must complete the tables in Exhibit A based on the *QLIC* activities checked in Question 13 (b). Tables A1-A4 should be consistent with the information provided in Question 13(b). All *Applicant* entries into Table A5 must align with selections made in Question 13(b) and the narrative provided in Question 17.

NOTE for Exhibit A:

- 1) If the *Applicant* intends to transfer all or part of its *NMTC Allocation* to its *Subsidiaries*, combine the activities of the *Applicant* and its *Subsidiaries*. Only include those activities to be carried out by the *Applicant* and its *Subsidiaries* relating to equity raised with NMTCs.
- 2) Only include amounts the *Applicant* (or its *Subsidiaries*) will itself originate (e.g., do not include participation amounts that will be originated by third parties). The *Applicant* may separately discuss amounts it will leverage or facilitate in the narrative to Question 17, but should clearly distinguish these amounts. The *Applicant* can enter the amount of non-NMTC financing included in the total project cost in row h of Table A5.
- 3) The data included in the Tables A1 – A4, in the aggregate, should not exceed the *Applicant's* total allocation request unless the *Applicant* intends to invest interest, dividends, or other profits received from *QEI* proceeds into additional *QLICs*. If the *Applicant* is pursuing such a strategy of reinvestment, it should be further described in the narrative to Question 17, and listed separately in lines 5-8 of Tables A1 and A2; lines 5-6 of Table A3; and line 4 of Table A4. **Do not consolidate reinvestment data into lines 1-4 in A1-A3 and lines 1-3 in A4, where the *Applicant* should only discuss original *QLICs*.**
- 4) Only include investment activities explained in Question 17 in Table A5. *Applicants* must enter zero or greater for rows (f), (g), (h), and (i). *Applicants* should check the options that most closely align with the intended financing for rows (n), (o) and (p). The CDFI Fund does not have a preference for one selection over another selection.
- 5) *Applicants* intending to use their *NMTC Allocation* for a Small Dollar and/or Revolving Loan/Equity fund (row m) are required to report the transactions in one aggregate entry in Table A5.

TABLE A1: PROJECTED QLICI LOANS/INVESTMENTS TO QALICBS (ESTIMATED)

| Calendar Year(s) | | 2024 | 2025 | 2026 | 2027 | 2028 | Total |
|------------------|--|------|------|------|------|------|-------|
| 1 | Total # transactions to be financed | | | | | | |
| 2 | Total \$ amount of financing | \$ | \$ | \$ | \$ | \$ | \$ |
| 3 | \$ Amount of financing (debt) | \$ | \$ | \$ | \$ | \$ | \$ |
| 4 | \$ Amount of financing (equity) | \$ | \$ | \$ | \$ | \$ | \$ |
| 5 | Total # of reinvestment transactions | | | | | | |
| 6 | Total \$ amount of reinvested financing | \$ | \$ | \$ | \$ | \$ | \$ |
| 7 | \$ Amount of reinvested financing (debt) | \$ | \$ | \$ | \$ | \$ | \$ |
| 8 | \$ Amount of reinvested financing (equity) | \$ | \$ | \$ | \$ | \$ | \$ |

TABLE A2: PROJECTED QLICI/ LOANS/INVESTMENTS IN OTHER CDES (ESTIMATED)

| Calendar Year(s) | | 2024 | 2025 | 2026 | 2027 | 2028 | Total |
|------------------|--|------|------|------|------|------|-------|
| 1 | Total # transactions to be financed | | | | | | |
| 2 | Total \$ amount of financing | \$ | \$ | \$ | \$ | \$ | \$ |
| 3 | \$ Amount of financing (debt) | \$ | \$ | \$ | \$ | \$ | \$ |
| 4 | \$ Amount of financing (equity) | \$ | \$ | \$ | \$ | \$ | \$ |
| 5 | Total # of reinvestment transactions | | | | | | |
| 6 | Total \$ amount of reinvested financing | \$ | \$ | \$ | \$ | \$ | \$ |
| 7 | \$ Amount of reinvested financing (debt) | \$ | \$ | \$ | \$ | \$ | \$ |
| 8 | \$ Amount of reinvested financing (equity) | \$ | \$ | \$ | \$ | \$ | \$ |

TABLE A3: PROJECTED QLICI/ LOAN PURCHASES FROM OTHER CDES (ESTIMATED)

| Calendar Year(s) | | 2024 | 2025 | 2026 | 2027 | 2028 | Total |
|------------------|---|------|------|------|------|------|-------|
| 1 | Total # selling CDEs | | | | | | |
| 2 | Total # of loan portfolios purchased | | | | | | |
| 3 | Total # of loans purchased | | | | | | |
| 4 | Total \$ amount of loan purchases | \$ | \$ | \$ | \$ | \$ | \$ |
| 5 | Total # of loans purchased via reinvested financing | | | | | | |
| 6 | Total \$ amount of loans purchased via reinvested financing | \$ | \$ | \$ | \$ | \$ | \$ |

TABLE A4: PROJECTED *FINANCIAL COUNSELING AND OTHER SERVICES* TO BUSINESSES AND ENTREPRENEURS IN *LOW-INCOME COMMUNITIES* (ESTIMATED)

| Calendar Year(s) | | 2024 | 2025 | 2026 | 2027 | 2028 | Total |
|------------------|---|------|------|------|------|------|-------|
| 1 | Total # of businesses/entrepreneurs served through counseling or other services | | | | | | |
| 2 | Total estimated hours spent counseling or providing other services per year | | | | | | |
| 3 | Total \$ amount to be spent on counseling or providing other services | \$ | \$ | \$ | \$ | \$ | \$ |
| 4 | Total \$ amount of reinvestment to be spent on counseling or providing other services | \$ | \$ | \$ | \$ | \$ | \$ |

Instructions for Table A5: Applicants must complete Table A5 in its entirety for each sample transaction it plans to make investments in, or loans to, QALICBs or other CDEs with its requested NMTC Allocation. The sum of the Total Applicant QEIs (row g) for all transactions listed in Table A5 must correspond to the total amount of NMTC Allocation requested in Question 1 (Except if, Purchases of loans from other CDEs or FCOS is selected in Question 13). When completing Table A5:

- a) Applicants should provide a description of the transaction which links to the narrative transaction description in Question 17.
- b) Applicants should provide the city and state where the QALICB will be located.
- c) Provide the census tract if the exact location of the QALICB has been determined.
- d) Applicants should identify if the transaction is located in a Non-Metropolitan County census tract.
- e) Applicants must select the timeframe which the QLICI is expected to close.
- f) Applicants must enter the Total Projects Costs, which include NMTC and non-NMTC related financing.
- g) Applicants must enter the amount of QEI it intends to invest into the QALICB with its requested allocation.
- h) Applicants must enter the amount of QLICIs it intends to invest into the QALICB with its requested allocation
- i) Applicants must enter the total amount of non-NMTC financing needed to support the QALICB.
- j) Applicants must enter the total amount of investments it expects CDEs Unrelated to the Applicant to provide.
- k) Applicant should provide the total number of CDE(s) Unrelated to the Applicant expected to co-invest with.
- l) Applicant should indicate whether the transaction is an Investment in, or loan to, a QALICB, or an Investment in, or loan to, another CDE,
- m) Applicants must identify if the transaction will be used for Small Dollar and/or Revolving Loan Fund.
- n) Applicants must select all business types that apply. If “other” is selected, please provide brief explanation in (a).
- o) Applicants must select all planned uses of financing by the QALICB or CDE. If “other” is selected, please provide brief explanation in (a).
- p) Applicants must select all target community outcomes that apply for the transaction and align with those community outcomes selected in Question 26.

Rows n through p, Applicants must select each option that applies to the transaction.

TABLE A5: PROPOSED TRANSACTIONS

Transaction 1

| | |
|--|---|
| (a) Business Name and Description | (500 characters) Note: For guidance on completing this narrative, please see the NMTC Application FAQ Document. |
| (b) Address | City [Text] |

TABLE A5: PROPOSED TRANSACTIONS

| | | |
|---|---|----------------------|
| | State [Picklist] | |
| (c) Census Tract (required only if discrete project pipeline is selected; Census Tract number not required for Multi-Tract projects) | (11-digit number) (Single-Tract or Multi-Tract) | |
| (d) Located in a <i>Non-Metropolitan County</i>? | [Yes/No] | |
| (e) Projected <i>QLICI</i> Closing Date | [Drop Down: 2024, 2025, 2026, 2027, 2028, 2029] | |
| (f) Total Project Costs | \$ | |
| (g) Total <i>Applicant QEI</i> | \$ | |
| (h) Total <i>Applicant QLICIs</i> | \$ | |
| (i) Total <i>Non-QLICI</i> Sources | \$ | |
| (j) Total <i>QEIs</i> from unaffiliated <i>CDEs</i> | \$ | |
| (k) Total number of unaffiliated <i>CDE(s)</i> anticipated | | |
| (l) Activity Type | [Drop Down: Investment in, or loan to, <i>QALICB</i> , Investments in, or loans to, other <i>CDEs</i>] | |
| (m) Small Dollar and/or Revolving Loan Fund | [Yes/No] | |
| (n) Business Type | [Check all that apply] | -Hospitality/Tourism |

TABLE A5: PROPOSED TRANSACTIONS

| | | |
|--|--|---|
| | <ul style="list-style-type: none"> -Cultural -Education -Healthcare -Multi-Service Community Organization -For-sale Housing | <ul style="list-style-type: none"> -Manufacturing/Industrial -Mixed-use real estate -Office space -Retail -Utilities/Infrastructure -Other _____ |
| <p>(o) What are the planned uses of financing by the QALICB or CDE?</p> | <p>[Check all that apply]</p> <ul style="list-style-type: none"> -Acquisition -Construction -Rehabilitation -Working Capital | <ul style="list-style-type: none"> -Leasehold Improvements/Buildouts -Equipment Purchase and Installation -Inventory Purchase -Other _____ |
| <p>(p) Targeted Community Outcomes</p> | <p>[Check all the apply]</p> <ul style="list-style-type: none"> - Job Related - Commercial Goods or Services to <i>Low-Income Communities</i> | <ul style="list-style-type: none"> - Community Goods or Services to <i>Low-Income Communities</i> - Financing Minority Businesses - Financing Native Businesses - Housing Units - Environmentally Sustainable Outcomes |

EXHIBIT B: TRACK RECORD OF ACTIVITIES

Instructions for Exhibit B: *Applicants* must complete the Tables B1-B3 in Exhibit B for the *Applicant's* (or *Controlling Entity's*) track record of loans and/or equity investments to Real Estate and *Operating Businesses* (excluding *Restricted NMTC Business Activities*), loans or *Equity* investments to *CDEs*, or purchasing loans from *CDEs*. *Applicants* must complete Table B4 for any loans/investments that do not directly correspond to the activities in Question 13 (e.g., *Restricted NMTC Business Activities*, loans and/or investments in NMTC investment funds or non-*CDE* financial institutions, personal or consumer loans, and residential mortgages). If the *Applicant's* or the *Controlling Entity's* track record includes the provision of grants to entities, including real estate, *Operating Businesses*, and/or *CDEs*, do not include these activities in Tables B1-B4 or discuss in the narratives for Questions 20 or 21.

When completing a given table, for each annual column, *Applicants* should report on the totality of historical loans and equity investments for the period 2018-2023 YTD. Please be aware of the allowable financing activities for each table in Exhibit B. All types of business lending, except for *Restricted NMTC Business Activities*, should be listed in Tables B1-B3, regardless of the size of the investment or geographic location of the investment. Similarly, the *Applicant's* track record of *Financial Counseling and Other Services (FCOS)* provided to businesses should be described in the narrative response to Question 20. Per the 2023 *Allocation Application* glossary, *FCOS* is advice provided by a *CDE* relating to the organization or operation of a trade or business. See 26 CFR 1.45D-1(d) (7) for more guidance. In the columns "Total to DBCs (2018-2023)," *Applicants* should report the amount of their overall loans or Equity Investment that are directed to *Disadvantaged Businesses* and/or *Disadvantaged Communities*.

An *Applicant* must provide information for the years referenced in the tables or for as many years as the *Applicant* (or *Controlling Entity*) has been in operation, if it has been in operation for fewer than five years. An *Applicant*, at its discretion, may choose to rely upon the track record of its *Controlling Entity*. **In order to list the track record of the *Controlling Entity* in Exhibit B, the *Applicant* must designate a *Controlling Entity* in Question 3. If the *Applicant* chooses to complete the tables in Exhibit B with information from the *Controlling Entity*, it must also use the *Controlling Entity* for populating Table D1 and Table E1.**

NOTE for Exhibit B, Tables 1-4:

- 1) Where indicated in Table B1, enter the dollar amount of debt financing provided by the *Applicant* (or *Controlling Entity*) in row 2a. In row 2b, enter the dollar amount of equity financing provided by the *Applicant* (or *Controlling Entity*). Enter all financing from other sources (excluding grant dollars) in row 3. Row 2 will automatically calculate based on your entries in rows 2a and 2b. The *Applicant* may discuss in Question 20 any role the *Applicant* (or *Controlling Entity*) played in leveraging or facilitating financing for which it did not provide direct financing.
- 2) Grants provided by the *Applicant* (or *Controlling Entity*) must be excluded from Tables B1 – B4. *Equity investments* into non-profit organizations are considered grants (per the definition of *Equity Investment* in the application glossary).
- 3) Do not include tax credit equity raised as *QEs* from investors in Table B1 or Table B2. Row 2(b) in Table B1 should only include equity financing provided to Real Estate and *Operating Businesses* (excluding *NMTC Restricted Business Activities*). Row 4 in Table B2 should only include equity financing provided to other *CDEs*.
- 4) For the purpose of completing Tables B1-B4, the *Applicant* must choose to either use its own track record or that of its *Controlling Entity*. If the *Applicant* chooses to use its own track record it must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Applicant* and may not include any of the *Controlling Entity's* activities. However, if the information in Tables B1-B4 reflects the activities of the *Controlling Entity*, the information must include, in the aggregate, the financing track record of **all** *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*. The *Applicant* must discuss track records of both the *Applicant* and *Controlling Entity* in the narrative to Questions 20 or 21 (as applicable). The narrative should clearly distinguish between the track records of each entity.
- 5) The *Applicant* must distinguish between direct financing provided by the *Applicant* or its *Controlling Entity*, as entered in Table B1, row 2 and Table B4, row 1 and indirect financing (financing provided by third-party sources), entered in Table B1, row 3 and Table B4, row 2. *Applicants* should not enter the same data in more than one row.
- 6) Tables B1-B4 should be mutually exclusive. *Applicants* should not enter the same data in more than one Table in Exhibit B.
- 7) In the Column titled “2023 Year to Date (YTD),” the *Applicant* can only enter information on activities closed by the *Applicant* or *Controlling Entity* on or before the release date of the *Allocation Application* (specified in the NMTC FAQ Document). The *Applicant* **may not** enter information on activities planned or projected to close after the *Allocation Application* release date, including issued *QEs* that have not resulted in *QLICs* closed by the release date of the *Allocation Application*. For additional details on completing Exhibit B, please refer to the NMTC Application FAQ document.

The Tables in Exhibit B reflect the activities of (check one): Applicant Controlling Entity

| TABLE B1: TRACK RECORD OF LOANS/EQUITY INVESTMENTS TO REAL ESTATE AND OPERATING BUSINESSES (EXCLUDING RESTRICTED NMTC BUSINESS ACTIVITIES) | | | | | | | | | | |
|--|---|------|------|------|------|------|----------|--------------------|---|---|
| Calendar Year(s) | | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 YTD | Totals (2018-2023) | Totals to DBCs ³ (2018-2023) | Totals to Non-Metro Counties ⁴ (2018-2023) |
| 1 | Total # businesses financed | | | | | | | | | |
| 2 | Total \$ amount of direct financing provided by the Applicant to Real Estate Activities and Operating Businesses | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| | (a) \$ Amount of debt financing provided by Applicant | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| | (b) \$ Amount of equity financing provided by Applicant | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 3 | \$ Amount of financing provided by other sources (including QALICB owner equity) to Real Estate Activities and Operating Businesses | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

³ Disadvantaged Businesses and Communities, see Glossary for a full definition.

⁴ Non-Metropolitan Counties, see Glossary for a full definition.

TABLE B2: TRACK RECORD OF LOANS/EQUITY INVESTMENTS TO OTHER CDES

| Calendar Year(s) | | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 YTD | Totals (2018- 2023) | Totals to <i>DBC</i> s (2018- 2023) | Totals to <i>Non- Metro Counties</i> (2018- 2023) |
|------------------|---------------------------------|------|------|------|------|------|----------|---------------------------|--|--|
| 1 | Total # <i>CDE</i> s financed | | | | | | | | | |
| 2 | Total \$ amount of financing | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 3 | \$ Amount of financing (debt) | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 4 | \$ Amount of financing (equity) | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

TABLE B3: TRACK RECORD OF LOAN PURCHASES FROM OTHER CDES

| Calendar Year(s) | | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 YTD | Totals (2018-2023) | Totals to DBC's (2018-2023) | Totals to Non-Metro Counties (2018-2023) |
|------------------|------------------------------------|------|------|------|------|------|----------|-----------------------|-----------------------------------|---|
| 1 | Total # of loans purchased | | | | | — | | | | |
| 2 | Total \$ amount of loans purchased | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

Table B4: TRACK RECORD OF LOANS/EQUITY INVESTMENTS THAT DO NOT DIRECTLY CORRESPOND TO THE SELECTIONS IN QUESTION 13 (e.g., RESTRICTED NMTC ACTIVITIES, LOANS OR INVESTMENTS IN NMTC INVESTMENT FUNDS, NON-CDE FINANCIAL INSTITUTIONS OR INVESTMENT FUNDS, PERSONAL OR CONSUMER LOANS, AND RESIDENTIAL MORTGAGES)

| Calendar Year(s) | | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 YTD | Totals (2018-2023) | Totals to DBC's (2018-2023) | Totals to Non-Metro Counties (2018-2023) |
|------------------|--|------|------|------|------|------|----------|-----------------------|-----------------------------------|---|
| 1 | Total \$ amount of direct financing provided by the Applicant | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 2 | \$ Amount of financing provided by other sources (including QALICB owner equity) | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

EXHIBIT C: STAFF AND BOARD QUALIFICATIONS

Instructions for Tables C1 and C2: The *Applicant* should complete Table C1 and Table C2 in their entirety. Please note that Table C2 allows the *Applicant* to identify key personnel that have experience in multiple management areas. *Applicants* should be sure to discuss key personnel's experience specific to *Low-Income Communities*, where relevant. *Applicants* are to list no more than 15 individuals in Table C2. The CDFI Fund will only evaluate the initial 15 individuals listed in Table C2. For each narrative response in Questions 29-31 and their corresponding sub-sections, reference and discuss the combined management experience of all individuals listed in Table C2 as it relates to the *Applicant's* management capacity in that given area. An *Applicant* must also identify any consultant(s) contracted to write either portions or the entirety of their *Allocation Application*.

TABLE C1: LOW-INCOME COMMUNITY ACCOUNTABILITY

| Board Member Name | Firm | Title at Firm | Advisory or Governing Board Member? | Yrs. on Board | Indicate how the individual is Representative of <i>Low-Income Communities</i> ? | Description of the Individual's Qualifications as an LIC representative, including related LIC community affiliations or experiences. |
|-------------------|------|---------------|--|---------------|--|--|
| | | | <input type="checkbox"/> Advisory <input type="checkbox"/> Governing <input type="checkbox"/> Both | | <input type="checkbox"/> Resident <input type="checkbox"/> Small business owner <input type="checkbox"/> Employee or board member of a non- <i>Affiliated</i> community-based or charitable organization <input type="checkbox"/> Religious leader whose congregation is based in a <i>Low-Income Community</i> <input type="checkbox"/> Employee of a governmental agency or department that principally serves <i>Low-Income Communities</i> <input type="checkbox"/> An elected official (or works for one) whose constituency is comprised principally of residents of <i>Low-Income Communities</i> <input type="checkbox"/> Other (specify): _____ | Description should focus on the representative's years and depth of experience serving, working, living in, or operating a business in LICs. (Maximum Response Length: 2000 characters) |

TABLE C2: MANAGEMENT CAPACITY

| Name | Firm | Title at Firm | Type of activity with <i>Applicant</i> in each Capacity (Select all that apply) | Yrs. with (or years providing services to) the <i>Applicant</i> | Position with <i>Applicant</i> (Select all that apply) | Description of Individuals Qualifications |
|------|------|---------------|---|---|--|--|
| | | | <input type="checkbox"/> NMTC Application Preparation/Review <input type="checkbox"/> Capital-raising <input type="checkbox"/> Capital deployment <input type="checkbox"/> Sourcing or loan underwriting <input type="checkbox"/> Asset management <input type="checkbox"/> Loan servicing <input type="checkbox"/> NMTC Program compliance <input type="checkbox"/> Provision of services to <i>QALICBs</i> / residents (including <i>FCOS</i>) <input type="checkbox"/> Community Outreach <input type="checkbox"/> Legal services <input type="checkbox"/> Other (specify): _____ | | <input type="checkbox"/> Governing board (GB) chair <input type="checkbox"/> GB member on loan/investment committee <input type="checkbox"/> Other GB member <input type="checkbox"/> Advisory board member <input type="checkbox"/> Executive Director or equivalent <input type="checkbox"/> Chief Financial Officer or equivalent <input type="checkbox"/> Dir. of Lending/investing or equivalent <input type="checkbox"/> Other key management <input type="checkbox"/> Loan/investment Officer or equivalent <input type="checkbox"/> Compliance Officer <input type="checkbox"/> Other finance staff <input type="checkbox"/> Contracted consultant <input type="checkbox"/> Other (specify): _____ | Description of Individual's qualifications should include years of relevant experience and how this experience is similar to the individual's role in managing the <i>Applicant's</i> NMTC program. (Maximum Response Length: 2000 characters) |

EXHIBIT D: ASSET MANAGEMENT / INCOME & OPERATING EXPENSES

Instructions for Table D1: Table D1 should closely reflect the direct financing indicated in Exhibit B. For each of the fiscal years, indicate the total number and dollar amount of loans and *Equity Investments* that are referenced in Question 20, Question 21 and Exhibit B as part of your track record and is outstanding to both real estate and *Operating Businesses*. For each fiscal year end, report in rows 4 and 9 the percentage of loans and mandatory dividend payments, on a dollar basis, that were 90 days past due (e.g., the combined dollar amount of principal, mandatory dividend, and interest payments 90 days or more past due / the total dollar amount of loans and *Equity Investments* outstanding at fiscal year-end). In rows 5 and 10, enter the total dollar amount of capital from loans and *Equity Investments* written off during the fiscal year (e.g., total dollar value of loans and/or *Equity Investments* written off less capital recovered).

If the *Applicant* (or *Controlling Entity*) has not made loans to either real estate or *Operating Businesses*, check the corresponding “N/A” box. If the *Applicant* (or *Controlling Entity*) has no delinquencies at the end of a particular fiscal year, indicate “0” in lines 4 and 9, as appropriate. If the *Applicant* (or *Controlling Entity*) has had no write offs of loans and/or equity during a particular fiscal year, indicate “0” in lines 5 and 10, as appropriate.

Even if the *Applicant* has experienced zero delinquencies and write-offs in the past three years, it still needs to complete Table D1. In this case, the *Applicant* should simply list the number and dollar amount of loans & equity investments outstanding at each fiscal year end and enter “0” for the delinquency rates and write-offs. **Applicants should not select “N/A” for Table D1 in this scenario.**

If the *Applicant* chooses to complete any table in Exhibit A with information from the *Controlling Entity*, it must do so for all Tables where *Controlling Entity* is an option, including Table D1. If the *Applicant* completes Table D1 for the *Applicant*, the information must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Applicant* and may not include any of the *Controlling Entity*’s activities. However, if the *Applicant* completes Table D1 for the *Controlling Entity*, the information must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*.

Applicants should select their most recently completed Fiscal Year in Colum 3. The options are ‘2022’ or ‘2023’. Columns 1 and 2 will auto-populate based on this selection.

The information in Table D1 reflects the activities of (check one): *Applicant* *Controlling Entity*

TABLE D1: INVESTMENT PORTFOLIO

| | | 1 | 2 | 3 |
|----------------|--|-------------------------|-------------------------|---------------------|
| Fiscal Year(s) | | Year 1 (Auto-populated) | Year 2 (Auto-populated) | Select 2022 or 2023 |
| 1. | Operating Businesses Loans & <i>Equity Investments</i> Delinquent or written-off <input type="checkbox"/> N/A | | | |
| 2. | # of loans & <i>Equity Investments</i> outstanding | | | |
| 3. | Total \$ Amount of loans & <i>Equity Investments</i> outstanding | \$ | \$ | \$ |
| 4. | Delinquency rate associated with operating businesses | ____% | ____% | ____% |
| 5. | Total \$ Amount of write-offs of loans & <i>Equity Investments</i> to operating businesses | \$ | \$ | \$ |
| 6. | Real Estate Loans & <i>Equity Investments</i> Delinquent or written-off <input type="checkbox"/> N/A | | | |
| 7. | # of loans & <i>Equity Investments</i> outstanding | | | |
| 8. | Total \$ Amount of loans & <i>Equity Investments</i> outstanding | \$ | \$ | \$ |
| 9. | Delinquency rate associated with real estate | ____% | ____% | ____% |
| 10. | Total \$ Amount of write-offs of loans & <i>Equity Investments</i> to real estate | \$ | \$ | \$ |

Instructions for Table D2: Based on the proposed transactions listed in Question 17 and Table A5, provide an itemized list of the individual fees that represent the Fee Structure the *Applicant* anticipates will typically apply to investments closed with the requested *NMTC Allocation* and result in compensation to the *Applicant (or Controlling Entity)*, an *Affiliate* or an unaffiliated third-party. *Applicants* should report the Fee Structure for every financial product listed in Question 14(a) that the *Applicant* intends to offer with capital raised from an *NMTC Allocation*. *Applicants* must disclose any and all fees, regardless of the expected source and recipient, when in the NMTC investment lifecycle the fee is expected to be charged, and where in relation to the *QEI* it is expected to be charged. *Applicants* must not include transaction costs such as legal, financial modeling/projections, audit, tax preparation, and accounting expenses that are not part of the *Applicant's* fee structure. *Applicants* should assume that they will receive the full amount of the requested *NMTC Allocation* and fund each of the proposed transactions listed in Question 17 and Table A5.

1. Select 'Type' based on the time in the NMTC investment lifecycle the fee is expected to be charged:
 - a. Select 'Upfront Fee' for any fee that is expected to be charged before or at the time the *QLICI* is closed. This category includes but is not limited to, fees such as origination, placement, sub-allocation or syndication fees. *Applicants* should note this includes any fee that will be charged before the *QEI* is made. An 'Upfront Fee' is a one-time charge and not recurring.
 - b. Select 'Ongoing Fee' for any fee that is expected to be charged after the *QLICI* is closed and during the seven-year compliance period. This category includes but is not limited to, fees such as asset management fees, interest income that will be received, etc. An 'Ongoing Fee' is a not a one-time charge and is recurring--which means that it is expected to be charged more than once during the seven-year compliance period.
 - c. Select 'Backend Fee' for any fee that is expected to be charged at the end of or after the seven-year compliance period. This category includes, but is not limited to, fees such as backend, exit, or success fees. *Applicants* that plan to retain all or a portion of the tax credit equity at the end of the seven-year compliance period should report this as 'Backend Fee'. A 'Backend Fee' is a one-time charge and not recurring.
2. Select the 'Source (Payer)' to indicate the entity responsible for paying the fee. The options include:
 - a. Investor or Investor *Affiliate* – Compensation and profits charged to investors.
 - b. *QALICB* or *QALICB Affiliate* fees – Compensation and profits charged to borrowers through fees.
 - c. *QALICB* or *QALICB Affiliate* interest – Compensation and profits charged to borrowers through interest, Ordinary interest or dividend payments passed through to investors or leverage lenders should not be included.
 - d. Other – Compensation and profits charged to any other party to the transaction.
3. Select the 'Recipient (Payee)' to indicate the entity that will receive the fee. The options include:
 - a. *Applicant* or *Applicant Affiliate* – Compensation and profits received by the *Applicant CDE* and/or *Affiliates* including the *Controlling Entity* and *Subsidiary CDEs*.
 - b. Investor or Investor *Affiliate* – Compensation and profits received by the Investor or Investor *Affiliate*.

- c. Unaffiliated Third-Party – Compensation and profits received by entities *Unrelated* to the *Applicant*. *Applicants* should include any costs incurred for activities related to managing requested *NMTC Allocation* (e.g., preparing or assisting in the preparation of the *Applicant*'s Allocation Application, identifying and underwriting transactions, managing a portfolio of QLICs, and Allocation Agreement compliance). *Applicants* should not select this option to report transaction costs such as legal financial modeling/projections, audit, tax preparation, and accounting expenses associated with closing an NMTC transaction.
4. Complete the 'Amount in Percent' field:
- a. *Applicants* should provide the best estimate of the 'Amount in Percent' of the requested *NMTC Allocation*, on average, that is expected to be charged for all of the proposed transactions listed in Question 17 and Table A5. Percentages must be entered with two decimal places (i.e. 1.00).
- b. For an Ongoing Fee, *Applicants* should report the total, in the aggregate, that will be charged over the seven-year compliance period.
5. *Applicants* are required to enter a brief description of the fee in the 'Description' field. Additionally, *Applicants* who selected 'Other' for the 'Type', 'Source (Payer)', and/or 'Recipient (Payee)' must describe their selection(s) in the 'Description' field.
6. The 'Average Fee Percentage' is calculated automatically and is the total of the 'Amount in Percent' fields entered by the *Applicant* for each fee in the table.

| TABLE D2 – FEE STRUCTURE | | | | | |
|--------------------------|---|---|--|-------------------------------------|--|
| Financial Product 1 | Type | Source (Payer) | Recipient (Payee) | Amount in Percent (% of Allocation) | Description of the fee (Required). |
| | Upfront Fee, Ongoing Fee, Backend Fee, Other. | Investor or Investor <i>Affiliate</i> , QALICB or QALICB <i>Affiliate</i> fee, QALICB or QALICB <i>Affiliate</i> interest, Other. | <i>Applicant</i> or <i>Applicant Affiliate</i> , Unaffiliated Third-Party, Investor or Investor <i>Affiliate</i> . | 0.00% | Additional information to explain the fee. If 'Other' is selected, the <i>Applicant</i> must provide an explanation using this space. (Maximum Response Length: 50 characters) |
| | Average Fee Percentage | | | 0.00% | |

| TABLE D2 – FEE STRUCTURE | | | | | |
|-------------------------------|---|---|--|-------------------------------------|--|
| Financial Product 2 | Type | Source (Payer) | Recipient (Payee) | Amount in Percent (% of Allocation) | Description of the fee (Required). |
| | Upfront Fee, Ongoing Fee, Backend Fee, Other. | Investor or Investor <i>Affiliate</i> , <i>QALICB</i> or <i>QALICB Affiliate</i> fee, <i>QALICB</i> or <i>QALICB Affiliate</i> interest, Other. | <i>Applicant</i> or <i>Applicant Affiliate</i> , Unaffiliated Third-Party, Investor or Investor <i>Affiliate</i> . | 0.00% | Additional information to explain the fee. If 'Other' is selected, the <i>Applicant</i> must provide an explanation using this space. (Maximum Response Length: 50 characters) |
| Average Fee Percentage | | | | 0.00% | |

| TABLE D2 – FEE STRUCTURE | | | | | |
|-------------------------------|---|---|--|-------------------------------------|--|
| Financial Product 3 | Type | Source (Payer) | Recipient (Payee) | Amount in Percent (% of Allocation) | Description of the fee (Required). |
| | Upfront Fee, Ongoing Fee, Backend Fee, Other. | Investor or Investor <i>Affiliate</i> , <i>QALICB</i> or <i>QALICB Affiliate</i> fee, <i>QALICB</i> or <i>QALICB Affiliate</i> interest, Other. | <i>Applicant</i> or <i>Applicant Affiliate</i> , Unaffiliated Third-Party, Investor or Investor <i>Affiliate</i> . | 0.00% | Additional information to explain the fee. If 'Other' is selected, the <i>Applicant</i> must provide an explanation using this space. (Maximum Response Length: 50 characters) |
| Average Fee Percentage | | | | 0.00% | |

Instructions for Table D3: All *Applicants* must complete Table D3. *Applicants* should ensure that data entered into Table D3 takes into consideration the projected loans and investments listed in Exhibit A: Projected Activities. *Applicants* should assume that *NMTC Allocation* awards will be made in the fall of 2024. *Applicants* must provide an explanation of Table D3 in response to Question 34(c). The information in Table D3 must reflect the projected income and operating expense of the *Applicant*.

1. When entering income data by source, the *Applicant* must include any and all fees and other sources of compensation that the *Applicant* and/or its *Affiliates* will charge:
 - a. **Investors** (including investment partnership funds, if using the leverage structure). Be sure to include any income generated prior to the *QEI* being made, any *QEI* proceeds retained by the *Applicant*, *Controlling Entity* or its *Subsidiary CDEs*;
 - b. **QALICBs** (i.e. borrowers/investees) fees and other sources of compensation paid directly to the *CDE*, including interest income;
 - c. **Affiliates**, including the *Controlling Entity* or *Subsidiary CDEs*; and
 - d. **Other sources** of revenue, including grants, contributions, consulting, other line(s) of business, etc.
2. When entering expenses:
 - a. **Fixed Expenses** are expenses incurred by *Applicant* that are unlikely to vary regardless of the amount of the *NMTC Allocation* award or size and number of *QLICs* considered or made. For example, staff, facilities, Board/Insurance, *CDE* audit, etc.
 - b. **Variable Expenses** are all other expenses incurred by the *Applicant*, including compliance, accounting, tax returns, sub-*CDE* audits, loan servicing, etc.
3. Data should be stated in dollars by fiscal year, starting with the fiscal year 2024.

TABLE D3: INCOME AND OPERATING EXPENSES

| Fiscal Year | 2024 | 2025 | 2026 | 2027 | 2028 | 2029 | 2030 | After 2030 |
|-----------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------------|
| 1. Income by source: | | | | | | | | |
| (a) Investor(s) | | | | | | | | |
| (b) QALICBs or Affiliates | | | | | | | | |
| (c) CDE's Affiliates | | | | | | | | |
| (d) Other Sources | | | | | | | | |
| Total Income | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 2. Expenses: | | | | | | | | |
| (a) Fixed | | | | | | | | |
| (b) Variable | | | | | | | | |
| Total Expenses | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Profit/(Loss) | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

EXHIBIT E: INVESTOR STRATEGY

NOTE for Exhibit E:

- 1) In Table E1, an *Applicant* may, at its discretion, rely upon the track record of its *Controlling Entity*. **In order to list the track record of the *Controlling Entity* in Table E1, the *Applicant* must designate a *Controlling Entity* in Question 3.** If the information reflects the *Controlling Entity*, it must include in aggregate the track record of all *Subsidiaries* of the *Controlling Entity*, including the *Applicant*. **If the *Applicant* chooses to complete one table with information from the *Controlling Entity*, it must do so for all Tables where *Controlling Entity* is an option.** If the *Applicant* chooses to complete Table E1 for the *Applicant*, the information must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Applicant* and may not include any of the *Controlling Entity's* activities. However, if the *Applicant* chooses to complete Table E1 for the *Controlling Entity*, the information must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*.
- 2) In Table E1, in the Column titled “2023 Year to Date (YTD),” the *Applicant* can only enter information on capital raised by the *Applicant* or *Controlling Entity* **on or before** the release date of the *Allocation Application*. The *Applicant* may not enter information on capital projected to be raised after the *Application* release date.
- 3) Complete Table E2, if the *Applicant* (or *Affiliates*) received *QEI*s from investors in equal to or greater than the Allocation requested in Question 1, between January 1, 2018 and the release date for the *NMTC Allocation Application* specified in the *NMTC Application FAQ* document.
- 4) Complete Table E3, if the *Applicant* (or *Affiliates*) received *QEI*s from investors in amounts less than the Allocation requested in Question 1, between January 1, 2018 and the release date for the *NMTC Allocation Application*. *Applicants* completing Table E3 are required to submit, along with their applications, documentation demonstrating proof of investor interest (e.g., proof of *QEI* issuance; *Commitment* letters; *Letters of Interest/Intent*). For examples of acceptable documentation for the required information, refer to the CDFI Fund's *NMTC Allocation Application FAQ Document*. Be sure to refer to the *Electronic Application Instructions* for information regarding the submission of these documents.

TABLE E1: TRACK RECORD OF RAISING CAPITAL FROM INVESTORS

The information in Table E1 reflects the activities of (check one): *Applicant* *Controlling Entity*

| Calendar Year(s) | | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 YTD | Total |
|------------------|---|------|------|------|------|------|----------|-------|
| 1 | Total # of investments | | | | | | | |
| 2 | Total \$ Amount of investments | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 3 | Total # of grants ¹ | | | | | | | |
| 4 | Total \$ Amount of grants ² | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 5 | Total # of below market rate loans ¹ | | | | | | | |
| 6 | Total \$ Amount of below market rate loans ² | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 7 | Total # of market rate loans ¹ | | | | | | | |
| 8 | Total \$ Amount of market rate loans ² | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| 9 | Total # of <i>Equity Investments</i> ¹ | | | | | | | |
| 10 | Total \$ Amount of <i>Equity Investments</i> ² | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

¹ Values should be a subset of Line 1.

² Values should be a subset of Line 2.

Instructions for Table E2:

- 1) In the first column, *Applicants* should only list the names of the investors that have provided capital to fund *QEIs* received by the *Applicant* (or a *Subsidiary CDE*). If the *Applicant* has used the leveraged structure to receive *QEIs* from investment funds or partnerships, it should provide the names of the equity and non-equity (e.g. debt, grant dollars) investors who provided the upper-tier capital to the investment fund or partnership. It **must not** provide the name of the investment funds or partnerships. All investments received from individual investors should be aggregated and listed under the name “Individual Investors.” **Do not** list the names of individuals in Table E2.
- 2) Only enter information on *QEIs* raised on or before the release date of the *NMTC Allocation Application* (specified in the NMTC Application FAQ document). The *Applicant* may not enter information on planned *QEIs* or *QEIs* projected to close.
- 3) In the third column, indicate whether the investment was provided as a direct *QEI* or if it was provided to an investment fund or partnership that in turn made the *QEI*.
- 4) In the fourth column, indicate whether the investor was an *Affiliate* of the *Applicant* or *Controlling Entity*.
- 5) In the fifth column, indicate whether the investor was an *Affiliate* of the *QALICB* that received *QLIC(s)* with *QEI* proceeds.
- 6) In the sixth column, provide the total aggregate dollar amount of investment provided by the identified investor between January 1, 2018 and the release date of the *NMTC Allocation Application*.

| TABLE E2: RECENT <i>QEI</i> INVESTORS FOR PREVIOUS ALLOCATEES | | | | | | |
|---|------------------|---------------------------------|---------------------------|---|---|---------------------------------------|
| | Name of Investor | Type of Investment ² | Using Leverage Structure? | Affiliate of the Applicant or Controlling Entity? | Affiliate of the QALICB or Project Sponsor? | Total Funding Provided from 2018-2023 |
| 1 | | | Yes/No | Yes/No | Yes/No | \$ |
| 2 | | | Yes/No | Yes/No | Yes/No | \$ |
| 3 | | | Yes/No | Yes/No | Yes/No | \$ |
| 4 | | | Yes/No | Yes/No | Yes/No | \$ |
| 5 | TOTAL | N/A | N/A | N/A | N/A | \$ |

¹ If the *Applicant* received investments from individuals (rather than organizations), please enter these investments, in the aggregate, as provided by “Individual Investors.”

² Debt, equity, both debt and equity, or grant.

Instructions for Table E3: In Table E3, *Applicants* should only list the names of actual or prospective investors that have provided *Equity Investments* (in accordance with applicable IRS rulings regarding the issuance of *QEIs* prior to notification of an allocation), *Commitments*, or *Letters of Interest/Intent* in connection with a potential *NMTC Allocation*. To the extent an *Applicant* has or intends to secure investments from partnership entities that will leverage non-*Equity Investments* (e.g., debt, grant dollars), such investments should be separately reported under “Type of Investment”. **If an *Applicant* plans to engage an investment banker (or other third-party) to raise equity capital on the *Applicant’s* behalf, DO NOT INCLUDE** such third-party organizations in this table.

TABLE E3: IDENTIFICATION OF INVESTMENTS AND INVESTOR COMMITMENTS

| | Name of Investor | Type of Investment ¹ | Using Leverage Structure? | Affiliate of the Applicant? | Previous Investor? ² | Total Funding Provided from 2018-2023 (if previous investor) | Dollar Amount Sought | Status of Request ³ | Estimated or Actual Date for Receipt of Funds |
|---|------------------|---------------------------------|---------------------------|-----------------------------|---------------------------------|--|----------------------|--------------------------------|---|
| 1 | | | Yes/No | Yes/No | Yes/No | \$ | \$ | | |
| 2 | | | Yes/No | Yes/No | Yes/No | \$ | \$ | | |
| 3 | | | Yes/No | Yes/No | Yes/No | \$ | \$ | | |
| 4 | | | Yes/No | Yes/No | Yes/No | \$ | \$ | | |
| 5 | TOTAL | N/A | N/A | N/A | N/A | \$ | \$ | N/A | N/A |

¹ Debt, equity, both debt and equity, or grant.

² A previous investor is any investor that has invested in the *Applicant*, its *Controlling Entity*, or any *Subsidiary* entities since 2018.

³ Funds have been received; investor provided *Commitment*; investor issued *Letter of Interest/Intent*.

GLOSSARY OF TERMS

| | |
|---|--|
| Affiliate | Any legal entity that <i>Controls</i> , is <i>Controlled</i> by, or is under common <i>Control</i> with, the <i>Applicant</i> . |
| Alaska Native Village Statistical Areas | Areas that represent the more densely settled portion of Alaska Native Villages (ANVs). The ANVs constitute associations, bands, clans, communities, groups, tribes, or villages recognized pursuant to the Alaska Native Claims Settlement Act of 1971 (Public Law 92-203). |
| Allocatee | An <i>Applicant</i> that receives an <i>NMTC Allocation</i> . |
| Allocation Agreement | An agreement to be entered into by the CDFI Fund and a <i>CDE</i> , relating to the <i>NMTC Allocation</i> , pursuant to IRC §45D(f)(2). |
| Allocation Application | The application form, issued by the CDFI Fund pursuant to a <i>Notice of Allocation Availability (NOAA)</i> , to be completed and submitted by an <i>Applicant</i> in order to be considered for an <i>NMTC Allocation</i> . |
| Applicant | Any legal entity that is applying to the CDFI Fund for the receipt of an <i>NMTC Allocation</i> . This term includes any <i>Subsidiary</i> of the <i>Applicant</i> , which may receive a transfer of all or part of an <i>NMTC Allocation</i> from the <i>Applicant</i> . |
| Application Contact Person | The individual that the CDFI Fund may contact during the course of the <i>Allocation Application</i> review with questions or requests for additional information regarding the <i>Allocation Application</i> . |
| Assistance Agreement | A written agreement between the CDFI Fund and an entity receiving assistance under the <i>CDFI Program</i> and Native American <i>CDFI Assistance (NACA) Program</i> , specifying the terms and conditions of assistance including, without limitation, performance and financial soundness goals, if applicable. See 12 CFR §1805.104(f). |
| Authorized Representative | An officer, or other individual, who has the actual authority of the Governing Board (or equivalent) to sign for and make representations on behalf of the <i>Applicant</i> . This person will also be the primary point of contact for the <i>Applicant</i> . |
| CDE Certification Application | The application form, issued by the CDFI Fund, to be completed and submitted by an entity in order to be certified as a <i>CDE</i> . |
| Commitment | A document in which an investor commits to make an investment in the <i>Applicant</i> in a specified amount and on specified terms. |

| | |
|---|---|
| Community Development Entity (CDE) | <p>Under IRC §45D(c)(1), any domestic corporation or partnership if:</p> <ol style="list-style-type: none"> (1) The primary mission of the entity is serving, or providing investment capital for, <i>Low-Income Communities</i> or <i>Low-Income Persons</i>; (2) The entity maintains accountability to residents of <i>Low-Income Communities</i> through their representation on any governing board of the entity or on any advisory board to the entity; and (3) The entity is certified by the CDFI Fund as a <i>CDE</i>. <i>Specialized Small Business Investment Companies (SSBICs)</i> and <i>Community Development Financial Institutions (CDFIs)</i> are deemed to be <i>CDEs</i> in the manner set forth in Guidance published by the CDFI Fund (66 Federal Register 65806, December 20, 2001). |
| Community Development Financial Institution (CDFI) | <p>An entity that has been certified by the CDFI Fund as meeting the criteria set forth in section 103 of the Community Development Banking and Financial Institutions Act of 1994 (12 U.S.C. 4702). For further details, refer to the CDFI Program regulations set forth at 12 CFR 1805.201.</p> |
| AMIS Compliance and Performance Reporting System (ACPR) | <p>A web-based data collection system that CDFIs and <i>CDEs</i> will use to submit their Institution-Level Reports and Transaction-Level Reports to the CDFI Fund.</p> |
| Control | <p>For purposes of this application is defined as:</p> <ol style="list-style-type: none"> (1) Ownership, control, or power to vote more than 50% of the outstanding shares of any class of voting securities of any entity, directly or indirectly or acting through one or more other persons; or (2) Control in any manner over the election of a majority of the directors, trustees, or general partners (or individuals exercising similar functions) of any other entity; or (3) Power to exercise, directly or indirectly, a controlling influence over the management policies or investment decisions of another entity, as determined by the CDFI Fund. |

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| Controlling Entity | <p>For <i>CDEs</i> that received <i>Allocations</i> under the CY2013 Round through the CY2020 Round:</p> <p>An entity that at the time of Application and throughout the term of the <i>Allocation Agreement</i> (if the <i>CDE</i> is selected to receive an Allocation), <i>Controls</i> an <i>Applicant</i>, and has a controlling influence over the day-to-day management and operations (including investment decisions) of the <i>Applicant</i> and of any Subsidiary entities to which the <i>Applicant</i> may transfer its allocation of tax credit authority.</p> <p>For <i>CDEs</i> that did not receive Allocations under the CY2013 through the CY2020 Round:</p> <p>A <i>Controlling Entity</i> is an entity that, at the time of Application and throughout the term of the <i>Allocation Agreement</i> (if the <i>CDE</i> is selected to receive an Allocation), <i>Controls</i> the <i>CDE</i> as follows:</p> <ol style="list-style-type: none"> a. For-profit <i>CDEs</i>: <ol style="list-style-type: none"> (i) ownership, <i>Control</i>, or power to vote more than 50% of the outstanding shares of any class of voting securities of the <i>CDE</i> and (ii) <i>Control</i> in any manner over the election of a majority of the directors, trustees, or general partners (or individuals exercising similar functions) of the <i>CDE</i>, including <i>Control</i> over the appointment and removal of the <i>CDE</i>'s Executive management team (e.g. CEO, COO, CFO); and (iii) Approval authority over the management policies and investment decisions of the <i>CDE</i>. b. Not-for-profit <i>CDEs</i>: <ol style="list-style-type: none"> (i) <i>Control</i> in any manner over the election of a majority of the directors, trustees, or general partners (or individuals exercising similar functions) of the <i>CDE</i>, including <i>Control</i> over the appointment and removal of the <i>CDE</i>'s Executive management team (e.g. CEO, COO, CFO); and (ii) Approval authority over the management policies and investment decisions of the <i>CDE</i>. |
| Controlling Entity Representative | <p>An officer, or other individual, who has the actual authority to sign for and make representations on behalf of the <i>Controlling Entity</i>. This person will also be the primary point of contact for the <i>Controlling Entity</i>, should the CDFI Fund need to confirm representations made about the relationship between the <i>Applicant</i> and <i>Controlling Entity</i>.</p> |
| Disadvantaged Business | <p>A business that is (a) located in a <i>Low-Income Community</i>; (b) <i>Low-Income Person-owned or -controlled</i>; or (c) a business that has inadequate access to investment capital.</p> |
| Disadvantaged Community | <p>This term has the same meaning as a <i>Low-Income Community</i>.</p> |

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| Enforcement Action | An action or administrative order, including but not limited to, consent order, cease and desist order, PCA directive, safety and soundness order, agreement, memorandum of understanding, commitment letter, taken by a federal regulator or agency (e.g., FDIC, OCC, NCUA, FRB, CFPB) when a regulated financial institution is found to be in an unsatisfactory condition (e.g. violations of laws, rules or regulations, final orders or conditions imposed in writing; unsafe or unsound practices; and for breach of fiduciary duty by institution- <i>Affiliated</i> parties). |
| Equity Equivalent Loan | A loan that has certain equity-like provisions, including required principal and interest payments only from cash flow and a flexible maturity date. Note that the definition of this term under the <i>CDFI</i> Program and NMTC Program is more flexible than the definition of the same term under the Bank Enterprise Award (BEA) Program. |
| Equity Investment | Under IRC §45D(b)(6) and the <i>NMTC Program Income Tax Regulations</i> , Equity Investment means any stock (other than nonqualified preferred stock as defined in IRC §351(g)(2)) in an entity that is a corporation and any capital interest in an entity that is a partnership. |
| Federal Indian Reservation | Area of land reserved for a tribe or tribes under treaty or other agreement with the United States, executive order, or federal statute or administrative action as permanent tribal homelands, and where the federal government holds title to the land in trust on behalf of the tribe. |
| Financial Counseling and Other Services (FCOS) | Advice provided by a <i>CDE</i> relating to the organization or operation of a trade or business. See 26 CFR 1.45D-1(d)(7). |
| Food Desert | A low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store. Census tracts qualify as <i>Food Deserts</i> if they meet low-income and low-access thresholds established by the USDA and can be found using the Food Access Research Atlas at http://www.ers.usda.gov/data-products/food-access-research-atlas.aspx |
| FTE | A full time equivalent (FTE) is at least a 35-hour work week. |
| Hawaiian Home Lands | Areas held in trust for Native Hawaiians by the state of Hawaii, pursuant to the Hawaiian Homes Commission Act of 1920, as amended. |

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| Letter of Interest/Intent | A document in which an investor expresses a preliminary interest in making an investment in the <i>Applicant</i> . |
| Low-Income Community (LIC) | <p>Under IRC §45D(e)(1), any population census tract if:</p> <ul style="list-style-type: none"> (1) The poverty rate for such tract is at least 20%, or (2) (a) In the case of a tract not located within a metropolitan area, the median family income for such tract does not exceed 80% of statewide median family income, or (b) in the case of a tract located within a metropolitan area, the median family income for such tract does not exceed 80% of the greater of statewide median family income or the metropolitan area median family income. <p>With respect to IRC §45D(e)(1)(B), possession-wide median family income shall be used (in lieu of statewide income) in assessing the status of census tracts located within a possession of the United States.</p> <p>Under IRC §45D(e)(2), <i>Targeted Populations</i> will also be treated as <i>Low-Income Communities</i>. See IRS Notice 2006-60.</p> <p>Under IRC §45D(e)(3), in the case of an area that is not tracted for population census tracts, the equivalent county divisions (as defined by the Bureau of the Census for purposes of determining poverty areas) shall be used for purposes of defining poverty rates and median family incomes. See IRC §45D(e) for additional criteria.</p> |
| Low-Income Person | <p>Any individual having an income, adjusted for family size, of not more than:</p> <ul style="list-style-type: none"> (1) For metropolitan areas, 80% of the area median family income; and (2) For non-metropolitan areas, the greater of (a) 80% of the area median family income or (b) 80% of the statewide non-metropolitan area median family income. |
| Low-Income Person-owned or Low-Income Person-controlled | <p>For-profit entity: A for-profit entity that has at least 51% of its equity ownership (or the equivalent in limited liability companies) interest being owned by one or more <i>Low-Income Person</i>.</p> <p>Not-for-profit entity: A not-for-profit entity with at least 51% of its Board of Directors (i.e. Governing Board) comprised of individuals who are <i>Low-Income Persons</i>.</p> |

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| Minority-owned or Minority-controlled | <p>A Minority-owned or Minority-controlled entity is a:</p> <ul style="list-style-type: none"> a. Minority-owned for-profit entity: A for-profit entity that is not a MDI and that has at least 51% of its equity ownership (or the equivalent in limited liability companies) interest being owned by individuals who identify themselves as American Indian or Alaskan Native, Asian, Black or African American, Hispanic or Latino, or Native Hawaiian or Other Pacific Islander; b. Minority-controlled not-for-profit entity: A not-for-profit entity with at least 51% of its Board of Directors (i.e. Governing Board) comprised of individuals who identify themselves as American Indian or Alaskan Native, Asian, Black or African American, Hispanic or Latino, or Native Hawaiian or Other Pacific Islander; or c. Minority Depository Institution (MDIs): An entity that is designated by the FDIC as a Minority Depository Institution. <p>The CDFI Fund will rely on the categories established by the 1997 Office of Management and Budget (OMB) standards to define Asian, Black or African American, Hispanic or Latino, and Native Hawaiian or Other Pacific Islander.</p> |
| Native American | <p>For the purpose of the NMTC Program this term shall include, members of Tribal entities recognized by the U.S. Department of the Interior, Bureau of Indian Affairs (BIA); and individuals having origins in any of the original peoples of Hawaii.</p> |
| Native American-owned or Native American-controlled | <p>For-profit entity: A for-profit entity, including an MDI, that has at least 51% of its equity ownership (or the equivalent in limited liability companies) interest being owned by individuals who are Native American.</p> <p>Not-for-profit entity: A not-for-profit entity with at least 51% of its Board of Directors (i.e. Governing Board) comprised of individuals who are Native American.</p> |
| New Markets Venture Capital Company (NMVCC) | <p>An entity designated as a NMVCC by the Small Business Administration under the New Markets Venture Capital Company Program. See 13 CFR 108.10 for more information.</p> |

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| Non-Metropolitan Counties | <p>Counties not contained within a Metropolitan Statistical Area, as such term is defined in OMB Bulletin No. 20-01 (Revised Delineations of Metropolitan Statistical Areas, Micropolitan Statistical Areas, and Combined Statistical Areas, and Guidance on Uses of the Delineations of These Areas) and applied to the 2020 census tracts.</p> <p>For guidance on Non-Metropolitan County designations, please see: New Markets Tax Credit 2016-2020 American Community Survey Census Transition FAQs</p> |
| Notice of Allocation Availability (NOAA) | <p>A document published by the CDFI Fund in the Federal Register that provides specific guidance on how a <i>CDE</i> may apply for an <i>NMTC Allocation</i>, the competitive procedure through which such allocations will be made, and the actions that will be taken by the CDFI Fund to ensure that proper allocations are made to appropriate entities. The <i>NOAA</i> published in conjunction with the <i>Allocation Application</i> will only apply to this Allocation Round.</p> |
| NMTC Allocation | <p>An allocation of tax credit authority pursuant to the New Markets Tax Credit Program.</p> |
| NMTC Program Income Tax Regulations | <p>The regulations promulgated by the Internal Revenue Service which provide guidance for taxpayers claiming the New Markets Tax Credit under IRC §45D. See 26 CFR 1.45D-1 for more information.</p> |
| Off-reservation Trust Lands | <p>Areas for which the United States holds title in trust for the benefit of a tribe that is located outside the boundaries of a <i>Federal Indian Reservation</i> but is always associated with a specific federally recognized reservation and/or tribal government.</p> |
| Operating Business | <p>Any business whose predominant business activity (i.e. activity that generates more than 50% of the business' gross income) does not include the development (including construction of new facilities and rehabilitation/enhancement of existing facilities), management, or leasing of real estate.</p> |
| Principal | <p>As defined by 31 C.F.R. Part 19.995. <i>Principal</i> means—(a) An officer, director, owner, partner, principal investigator, or other person within a participant with management or supervisory responsibilities related to a covered transaction; or(b) A consultant or other person, whether or not employed by the participant or paid with Federal funds, who—(1) Is in a position to handle Federal funds;(2) Is in a position to influence or control the use of those funds; or,(3) Occupies a technical or professional position capable of substantially influencing the development or outcome of an activity required to perform the covered transaction.</p> |

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| Project Sponsor | An entity that owns or <i>Controls</i> the <i>QALICB</i> . |
| Public Contact Person | The individual that will field public inquiries (i.e. from potential <i>QALICBs</i>) if the <i>Applicant</i> is selected to receive an <i>NMTC Allocation</i> . This contact information will be published as part of the Award Announcement for the <i>NMTC Allocation</i> round and available to the public in the CDFI Fund's monthly <i>QEI</i> Issuance Report. |
| Qualified Active Low-Income Community Business (QALICB) | <p>Under IRC §45D(d)(2), any corporation (including a non-profit corporation) or partnership if for any taxable year:</p> <ol style="list-style-type: none"> (1) At least 50% of total gross income of such entity is derived from the active conduct of a qualified business within any <i>Low-Income Community</i>; (2) A substantial portion of the use of the tangible property of such entity (whether owned or leased) is within any <i>Low-Income Community</i>; (3) A substantial portion of the services performed for such entity by its employees are performed in any <i>Low-Income Community</i>; (4) Less than 5% of the average of the aggregate unadjusted bases of the property of such entity is attributable to collectibles (as defined in IRC §408(m)(2)) other than collectibles that are held primarily for sale to customers in the ordinary course of such business; and (5) Less than 5% of the average of the aggregate unadjusted bases of the property of such entity is attributable to nonqualified financial property (as defined in IRC §1397C(e)). <p>Please refer to the NMTC Program Income Tax Regulations at 26 CFR 1.45D-1(d)(4) for more information.</p> |
| Qualified Equity Investment (QEI) | <p>Under IRC §45D(b)(1), any <i>Equity Investment</i> in a <i>CDE</i> if:</p> <ol style="list-style-type: none"> (1) Such investment is acquired by the investor at its original issue (directly or through an underwriter) solely in exchange for cash; (2) Substantially all of such cash is used by the <i>CDE</i> to make <i>QLICs</i>; and (3) The investment is designated for purposes of IRC §45D by the <i>CDE</i> as a <i>QEI</i>. <i>QEI</i> also includes an <i>Equity Investment</i> purchased from a prior holder, to the extent provided in IRC §45D(b)(4). <p><i>QEI</i> does not include any <i>Equity Investment</i> issued by a <i>CDE</i> more than five years after the date the <i>CDE</i> receives an <i>NMTC Allocation</i>. Please refer to the NMTC Program Income Tax Regulations at 26 CFR 1.45D-1(c) and related Internal Revenue Service notices for more information.</p> |

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| <p>Qualified Low-Income Community Investments (QLICI)</p> | <p>Under IRC §45D(d)(1), a <i>QLICI</i> is:</p> <ul style="list-style-type: none"> (1) Any capital or <i>Equity Investment</i> in, or loan to, any <i>QALICB</i> (as defined in IRC§45D(d)(2)); (2) The purchase from a <i>CDE</i> of any loan made by such entity that is a <i>QLICI</i>; (3) <i>Financial Counseling and Other Services</i> to businesses located in, and residents of, <i>Low-Income Communities</i>; and (4) Any <i>Equity Investment</i> in, or loan to, any <i>CDE</i>. <p>Please refer to the NMTC Program Income Tax Regulations at 26 CFR 1.45D-1(d)(1) for more information.</p> |
| <p>Real Estate Activities</p> | <p>Refers to the development (including construction of new facilities and rehabilitation/enhancement of existing facilities), acquisition, management or leasing of real estate by a business.</p> |
| <p>Restricted NMTC Business Activities</p> | <ul style="list-style-type: none"> 1. Certain businesses that engage in the rental of real property, if: <ul style="list-style-type: none"> a. The property is residential rental property as defined by IRC §168(e)(2)(A), or b. There are not substantial improvements on the property, or c. A lessee of the real property is an excluded business as described in 2(b) below. 2. Specific businesses and activities excluded under Treasury Regulation §1.45D-1(d)(5)(ii) and listed below: <ul style="list-style-type: none"> a. Trades or businesses consisting predominantly of the development or holding of intangibles for sale or license. b. Trades or businesses consisting of the operation of any private or commercial golf course, country club, massage parlor, hot tub facility, suntan facility, race track or other facility used for gambling, or any store for which the principle business is the sale of alcoholic beverages for consumption off the premises. <p>Farming (within the meaning of IRC §2032A(e)(5)(A) or (B)) if, as of the close of the taxable year of the taxpayer conducting such trade or business, the sum of the aggregate unadjusted basis (or, if greater, the fair market value) of the assets owned by the taxpayer that are used in such trade or business, and the aggregate value of the assets leased by the taxpayer that are used in such trade or business, exceeds \$500,000. Two or more trades or businesses will be treated as a single trade or business under rules similar to the rules of IRC §52(a) and (b).</p> |

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| Rural <i>CDE</i> | A Rural <i>CDE</i> is one that has a track record of at least three years of direct financing experience, has dedicated at least 50% of its direct financing dollars to <i>Non-Metropolitan Counties</i> over the past five years, and has committed that at least 50% of its NMTC financing dollars with this Allocation will be deployed in such areas. <i>Non-Metropolitan Counties</i> are counties not contained within a Metropolitan Statistical Area, as such term is defined in OMB Bulletin No. 20-01 (Revised Delineations of Metropolitan Statistical Areas, Micropolitan Statistical Areas, and Combined Statistical Areas, and Guidance on Uses of the Delineations of These Areas) and applied to the 2020 census tracts. |
| Small Business Investment Company (SBIC) | An entity defined in 15 USC 662(3). |
| Specialized Small Business Investment Company (SSBIC) | An entity defined in IRC §1044(c)(3). |
| Subsidiary | Any legal entity that is owned or <i>Controlled</i> directly or indirectly by an <i>Applicant</i> . This term includes series funds, which are separate investment funds <i>Controlled</i> by an <i>Applicant</i> . |
| Targeted Population | As defined in 12 U.S.C. 4702(20) and 12 C.F.R. 1805.201, the term “targeted population” means individuals, or an identifiable group of individuals, including an Indian Tribe, who (A) are <i>Low-Income Persons</i> ; or (B) otherwise lack adequate access to loans or investments. |
| Unrelated | Persons who are not related within the meaning of IRC §267(b) or IRC §707(b)(1). |

APPENDIX A: ATTESTATION AND SUBMISSION

NOTE: The *Authorized Representative* is required to sign the *Allocation Application* in AMIS. **DO NOT SUBMIT THIS SIGNATURE PAGE ALONG WITH YOUR APPLICATION.** The *Authorized Representative* is required to select a checkbox in AMIS that will represent the signature for the *Allocation Application*. The text below is a sample of the signature language the *Authorized Representative* will attest to in AMIS. *Applicants* can refer to the Electronic Application Instructions for additional guidance on how the *Authorized Representative* electronically signs the *Allocation Application*.

By selecting the checked box: I hereby consent to conducting this transaction by electronic means, and I hereby agree that I have executed an electronic process that constitutes, and provides the CDFI Fund with, my electronic signature, which shall be treated as an original signature and as having signed this Application, just the same as a pen-and-paper signature; I hereby acknowledge that all information contained in this Application and any attachments or supplements thereto will be subject to disclosure pursuant to the Freedom of Information Act (FOIA) 5 USC 552, et seq.; I hereby certify that all of the information that the *Applicant* has provided in this Application is true, correct, and complete to the best of my information, knowledge and belief; I hereby certify that the execution and submission of this Application has been duly authorized by the governing body of the *Applicant*; and hereby certify that I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, title 218, Section 1001); I hereby acknowledge that the CDFI Fund may provide this Application and any attachments or supplements thereto upon request to any appropriate federal, state, tribal, local, international, or foreign law enforcement agency or other appropriate authority charged with investigating or prosecuting a violation or enforcing or implementing a law, rule, regulation, or order.

Authorized Representative Signature: _____
Authorized Representative Title: _____
Date: _____

APPENDIX B: CONTROLLING ENTITY CERTIFICATION

Instructions: If the *Applicant* has a *Controlling Entity*, the *Controlling Entity Representative* is required to print and sign the *Controlling Entity Signature Page* and upload it as an attachment to the *Allocation Application* in AMIS. *Applicants* should refer to the Electronic Application instructions for guidance on how to print and upload the *Controlling Entity Representative Signature Page*. Below is a sample of the format and signature language the *Controlling Entity Representative* will attest to in AMIS. **DO NOT SUBMIT THIS SIGNATURE PAGE ALONG WITH YOUR APPLICATION.**

Controlling Entity's Certification

2023 NMTC Allocation Application

Applicant Name:

Control Number:

By signing this *Allocation Application*:

- I hereby certify that all of the information that the *Applicant* has provided in this *Allocation Application* and in the Assurances and Certifications in support of this *Allocation Application* is true, correct, and complete to the best of my knowledge, information and belief. The execution and submission of this *Allocation Application* has been duly authorized by the governing body of the *Applicant*.
- I hereby acknowledge that all information contained in this application and any attachments or supplements thereto will be subject to disclosure pursuant to the Freedom of Information Act (FOIA) 5 USC 552, et seq.
- I hereby certify that the *Controlling Entity* is indeed the *Controlling Entity* of the *Applicant* and supports this *Allocation Application*.

Controlling Entity Name:

Controlling Entity Representative Name:

Title at Controlling Entity (Print)

Controlling Entity Representative Signature:

Date:
