

CAPITAL MAGNET FUND

CAPITAL MAGNET FUND

FY 2020 APPLICATION
INSTRUCTIONS



OMB Approval No. 1559-0036

Paperwork Reduction Act Notice.

This submission requirements package is provided to Applicants for awards under the Capital Magnet Fund (CMF). Applicants are not required to respond to this collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The estimated average burden associated with this collection of information is 100 hours per Applicant. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Program Manager, Capital Magnet Fund, Department of the Treasury, Community Development Financial Institutions Fund, 1500 Pennsylvania Avenue, Washington, D.C. 20220.

All materials are available on the CDFI Fund Website: www.cdfifund.gov.

Catalog of Federal Domestic Assistance Number: 21.011

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GENERAL APPLICATION INSTRUCTIONS

The Capital Magnet Fund (CMF) is administered by the Community Development Financial Institutions Fund (CDFI Fund). Through the CMF, the CDFI Fund provides financial assistance grants to Certified Community Development Financial Institutions (CDFIs) and to qualified Nonprofit Organizations that have the development or management of affordable housing as one of their principal purposes.

In order to understand the requirements of CMF, including eligible uses of financial assistance grants, potential Applicants should review the Interim Regulations ([12 C.F.R. 1807](#)). In addition, prospective Applicants should review and become familiar with the FY 2020 CMF Notice of Funds Availability (NOFA) prior to beginning this Application. Capitalized terms not defined in this Application (other than titles) shall have the meanings set forth in the CMF Interim Regulations or the FY 2020 CMF NOFA. Both the CMF Interim Regulations and the FY 2020 CMF NOFA are available on the CDFI Fund's website: www.cdfifund.gov/cmfi.

This document provides a detailed explanation of how to apply for a CMF Award under the FY 2020 round. It covers Applicant eligibility requirements, as well as the content and form for submitting an Application. Please be aware that the CDFI Fund reserves the right to request supplemental documentation verifying any of the information submitted in the FY 2020 CMF Application. The Applicant should also be aware that any of the information submitted in its Application may be incorporated into its Assistance Agreement, if selected for a CMF Award.

Applicant Eligibility

At the time that an entity submits its Application, it must be a duly organized and validly existing legal entity under the laws of the jurisdiction (including a Tribal jurisdiction) in which it is incorporated or otherwise established. All Applicants (regardless of entity type) must demonstrate that they have been in existence as a legally formed entity for a period of at least three years prior to the online CMF Application due date.

Further, in order to be deemed eligible to apply for a CMF award, an organization must be either:

- (1) Certified as a CDFI by the CDFI Fund (as of the publication date of the FY 2020 NOFA), or
- (2) A Nonprofit Organization having as one of its principal purposes the development or management of affordable housing.

In order to be deemed an eligible Nonprofit Organization under item (2) above, the organization must be able to demonstrate both of the following:

- (a) Its articles of incorporation, by-laws, or other board-approved documents evidence that the development or management of affordable housing are among the organization's principal purposes;
- (b) At least 33 and one-third percent of the organization's total assets are dedicated to the development or management of affordable housing.

As part of the Application, all Nonprofit Organizations (that are not Certified CDFIs) must submit supporting documentation to demonstrate that they meet these requirements. The CDFI Fund reserves the right to collect additional information from all Applicants (regardless of entity type) in order to verify that the Applicants have met these requirements.

NOTE: The Applicant entity must meet the eligibility requirements on its own behalf and may not rely on any Affiliates or Subsidiaries to meet this requirement.

Other Eligibility Criteria: Please note, as outlined in the FY 2020 Capital Magnet Fund NOFA (Section III), an Applicant will not be eligible to receive a CMF Award if the Applicant fails to demonstrate in its Application that its CMF Award will result in Eligible Project Costs that equal at least 10 times the amount of the CMF Award. For additional information on Applicant eligibility factors, please refer to the FY 2020 Capital Magnet Fund NOFA, particularly Section III.

Application Submission Requirements and Deadlines

CMF Application documents must be submitted electronically through Grants.gov and the CDFI Fund’s web-based Award Management Information System (AMIS), as described in Table 1 below. This Application Instruction document serves only as a guide for completing the CMF Application documents, and this document is not meant to be submitted via Grants.gov or AMIS. **DO NOT SUBMIT THIS DOCUMENT.** See Table 1 for more information on submitting the application components.

APPLICATION COMPONENTS

A complete FY 2020 CMF Application must include submission of each part listed in the table below:

Table 1 – Application Components

Application Component	Submission Method	Required?
<p>SF-424 Mandatory Form (Application for Federal Assistance):</p> <ul style="list-style-type: none"> All Applicants are required to have an active System for Award Management (SAM) account in order to submit the SF-424 through Grants.gov. By completing the SF-424, Applicants are certifying the CMF Assurances and Certifications provided on pages 65-70 of this document. The Assurances and Certifications document is provided for review and reference purposes and do not need to be submitted separately through Grants.gov. 	Submit electronically via Grants.gov	Required for All Applicants
<p>CMF Online Application Form</p> <ul style="list-style-type: none"> Includes Attachments (listed below), Assurances and Certifications, Environmental Review Form, and 501(c)4 Questionnaire (if applicable) 	Submit electronically via AMIS	Required for All Applicants

APPLICATION ATTACHMENTS	Submission Method	Required?
Audited Financial Statements for the two (2) most recently completed fiscal years prior to the publication date of the NOFA (for additional guidance see FAQ)	Submit electronically via AMIS	Required for All Applicants
Management Letters related to the audited financial statements for the 2 most recently completed fiscal years prior to the publication date of the NOFA	Submit electronically via AMIS	Required for All Applicants
State charter, articles of incorporation, or other establishing documents designating that the Applicant is a nonprofit or not-for-profit entity under the laws of the organization's State of formation	Submit electronically via AMIS	Required only for Applicants that are <u>not</u> Certified CDFIs
A certification or determination letter demonstrating tax-exempt status from the IRS¹	Submit electronically via AMIS	Required only for Applicants that are <u>not</u> Certified CDFIs
Articles of incorporation, by-laws or other establishing documents demonstrating the Applicant has a principal purpose of managing or developing affordable housing	Submit electronically via AMIS	Required only for Applicants that are <u>not</u> Certified CDFIs

APPLICATION SUBMISSION DEADLINES

The submission deadlines for the FY 2020 Application are listed in Table 2 below. Please note the different submission deadlines for materials that must be submitted through Grants.gov and those that must be submitted through AMIS.

Table 2 - FY 2020 CMF Program Funding Round Deadlines

Description	Deadline	Time (Eastern Time – ET)	Submission Method
SF-424 Mandatory Form	June 26, 2020	11:59 p.m. ET	Electronically via Grants.gov
Create an AMIS Account (if the Applicant does not already have one)	July 2, 2020	11:59 p.m. ET	Electronically via AMIS
CMF Online Application and Required Attachments	July 27, 2020	5:00 p.m. ET	Electronically via AMIS

SUBMISSION REQUIREMENTS

GRANTS.GOV AND SAM.GOV: The SF-424 for the Application must be submitted through Grants.gov before the rest of the Application may be submitted through AMIS. Applicants must first have an active System for Awards

¹For Applicants that are governmental instrumentalities only, and as long as all other eligibility requirements are met, the Applicant must submit a legal opinion from counsel, in form and substance acceptable to the CDFI Fund, opining that the Applicant is exempt from Federal income tax, if the Applicant does not otherwise have such determination in a document from the IRS.

Management (SAM) account in order to submit the SF-424 via Grants.gov. Each Applicant is advised to first make sure its SAM account is active and valid before beginning its preparation of the other Application materials. The SAM website is: www.SAM.gov.

1. Please be advised that, in order to register in SAM.gov, an Applicant must have a current and valid Dun and Bradstreet Data Universal Numbering System (DUNS) number and Employer Identification Number (EIN). The CDFI Fund advises Applicants to allow sufficient time to obtain this information. A DUNS number is required for SAM registration and for Grants.gov submission. Additionally, when accessing SAM.gov, users will be asked to create a login.gov user account (if they don't already have one). Going forward, users will use their login.gov username and password every time when logging into SAM.gov.
2. If the Applicant does not currently have an active SAM registration, an original signed notarized letter identifying the authorized Entity Administrator for the entity associated with the DUNS number is required by SAM and must be mailed to the Federal Service Desk. This requirement is applicable to new entities registering in SAM, as well as existing entities with registrations being updated or renewed in SAM. It may take a three weeks or more to register with SAM or reactivate a SAM registration, so Applicants should allow ample time to complete the entire registration and submission process well in advance of the SF-424 submission deadline.
3. Applicants unable to submit their SF-424 via Grants.gov by the deadline due to failure to obtain a DUNS number and/or SAM registration confirmation will not be allowed to submit the SF-424 after the deadline has passed.

If the SF-424 is not successfully submitted to Grants.gov by the deadline in Table 2 above, the Applicant will not be able to submit materials in AMIS, and the Application will be deemed ineligible. Thus, Applicants are strongly encouraged to submit the SF-424 as early as possible in the Grants.gov portal since submission issues may impact the ability to submit the overall Application.

If an Applicant has any questions related to the registration or submission process in Grants.gov or SAM.gov, it should contact these systems directly. Contact information can be found on their websites. The CDFI Fund does not manage Grants.gov or SAM.gov and is unable to respond to any questions related to these systems.

Note: The SF-424 must be successfully submitted by the deadline in order to submit an AMIS Application. However, the SF-424 is only one part of the Application package. If an Applicant does not submit the required materials in AMIS by the AMIS Application deadline, their SF-424 Application will be deemed incomplete and the Applicant will not be considered for a FY 2020 CMF Award.

AWARDS MANAGEMENT INFORMATION SYSTEM (AMIS): Each Applicant must register as an organization in AMIS by the deadline in Table 2 above. Applicants who fail to register as an organization in AMIS by the appropriate deadline will be deemed ineligible. Additional guidance on creating an AMIS account can be found on the AMIS Homepage: <https://amis.cdfifund.gov/s/AMISHome>.

Each Applicant must also submit the required Application materials through the AMIS portal by the deadline in Table 2. In order to submit the required Application materials, the Authorized Representative and Application point(s) of contact **must be included as "Contacts"** in the Applicant's AMIS account. The Authorized Representative **must also be a "user" for the Applicant in AMIS** and must electronically sign the Application prior to submission through AMIS. An Applicant that fails to properly register and update its AMIS account may miss important communications from the CDFI Fund or fail to submit an Application successfully.

ENSURING THAT THE APPLICATION PACKAGE IS COMPLETE

A complete Application Package is one that includes all required materials listed in the above Table 1, including the specified attachments. Please note that a complete Application package must contain two years of audited financial statements for all Applicants. Please be aware that an Application that does not include audited financial statements from the Applicant’s two most recently completed fiscal years will not be deemed a complete Application and will be considered ineligible. If the Applicant fails to submit either the SF-424 Mandatory Form through Grants.gov, register their organization in AMIS, or submit the CMF Online Application through AMIS by the required deadlines, the CDFI Fund will not accept the Application.

Contacting the CDFI Fund, SAM, and Grants.gov

The CDFI Fund will respond to Application related questions between the hours of 9:00 a.m. and 5:00 p.m. ET, through July 23, 2020 (two business days before the AMIS Application deadline). The CDFI Fund will not respond to phone calls, program-related Service Requests, or e-mail inquiries that are received after 5:00 p.m. ET on July 23, 2020, until after the AMIS Application deadline. The CDFI Fund will respond to technical issues related to AMIS through 5:00 p.m. ET, on July 27, 2020. Please note that these are not toll free numbers.

Table 3 – CDFI Fund Contact Information

Area	Topic	Phone	E-mail
CMF Program	How to complete Application materials.	202-653-0421	Submit a Service Request in AMIS or email cmf@cdfi.treas.gov
CDFI Certification	Status of CDFI Certification.	202-653-0423	Submit a Service Request in AMIS or email ccme@cdfi.treas.gov
Compliance Monitoring and Evaluation	Status of compliance with other awards, including outstanding reports.	202-653-0423	Submit a Service Request in AMIS or email ccme@cdfi.treas.gov
IT Support	Technical issues related to the CDFI Fund’s Award Management Information System (AMIS).	202-653-0422	Submit a Service Request in AMIS or email AMIS@cdfi.treas.gov

If an Applicant has any questions related to the registration or submission process in Grants.gov or SAM.gov, it should contact these systems directly. Contact information can be found on their websites. The CDFI Fund does not manage Grants.gov or SAM.gov and is unable to respond to any questions related to these systems.

Table 4 – Contacting SAM and Grants.gov

System	Website	Phone	E-mail
System for Awards Management (SAM)	https://www.sam.gov	See website	See website
Grants.gov	https://www.grants.gov	See website	See website

SERVICE REQUESTS

A Service Request is the preferred way to contact the CDFI Fund about your Application. To submit a Service Request, you need an AMIS user account. Log into AMIS and click on “Service Requests” tab on the top; then, click on “Create New Service Request” button. For a CMF Application question, select “Capital Magnet Fund” for the program and clearly state the topic in the subject line. For a CDFI Certification question, select “Certification.” For a Compliance question, select “Compliance & Reporting.” For Information Technology, select “Technical Issues.” Failure to select the appropriate program for the Service Request could result in a delayed response to your question.

If an Applicant has any questions related to the registration or submission process in Grants.gov or SAM.gov, it should contact these systems directly. Contact information can be found on their websites. The CDFI Fund does not manage Grants.gov or SAM.gov and is unable to respond to any questions related to these systems.

GRANTS.GOV (SF-424 MANDATORY FORM) INSTRUCTIONS

In accordance with federal regulations, the CDFI Fund requires Applicants to submit the initial component of their FY 2020 CMF Program Application using the [Grants.gov](https://www.grants.gov) portal, the official website for federal grant information and applications. The Grants.gov registration process alone can take several days to complete. Contact the Grants.gov support staff if you have any questions about the process. The Grants.gov help desk can be reached at 1-800-518-4726 or via email at support@grants.gov. If you experience any technical difficulties submitting the Application via Grants.gov, do not contact the CDFI Fund. Contact the Grants.gov help desk instead.

The only component of the CMF Application submitted via Grants.gov is the Standard Form (SF)-424 Mandatory Form. The SF-424 Mandatory Form (SF-424) is required for all Applicants. Electronically signing and submitting the SF-424 Mandatory Form certifies that the Applicant attests that the information in its CMF Application is true, complete, and accurate and also certifies that the Applicant will comply with the Assurances and Certifications, if selected for an Award. The Assurances and Certifications are provided in Appendix 8 of this document. Details for completing the SF-424 Mandatory Form are provided below.

STANDARD FORM (SF)-424 MANDATORY (APPLICATION FOR FEDERAL ASSISTANCE) INSTRUCTIONS

The SF-424 Mandatory form is located in the ‘Mandatory Documents’ box of the downloaded Grant Application Package in Grants.gov. To access the form, select SF- 424 Mandatory, then click on the ‘Move Form’ to ‘Complete’ button. The SF- 424 Mandatory will move to the ‘Mandatory Documents for Submission’ box. Click on the ‘Open Form’ button to open the form.

Please note: Only the fields highlighted in yellow on the form in Grants.gov are required for submission. These fields are also marked as “Required” in Table 5 below. The Instructions column in Table 5 provides guidance on how CMF Applicants should complete their SF-424 Mandatory Form for submission through Grants.gov.

Please note: Applicants’ AMIS record and Grants.gov record are linked by the Organizational DUNS (Field 7.c) and Employer/Taxpayer Identification Number (Field 7.b.). Please ensure these numbers match in both systems to ensure that AMIS will be able to retrieve the SF-424 from Grants.gov.

Table 5 – SF-424 Mandatory Form Instructions & Field Descriptions

Field	Required	Instructions
1.a. Type of Submission:	Yes	‘Application’ is automatically selected.
1.b. Frequency:	Yes	‘Annual’ is automatically selected.
1.c. Consolidated Application/Plan/Funding Request:	Yes	‘No’ is automatically selected.
1.d. Version	Yes	‘Initial’ is automatically selected.
2. Date Received::	Yes	Automatically filled by the system upon submission–no entry necessary.
3. Applicant Identifier:	No	Not Applicable–leave blank.
4.a. Federal Entity Identifier:	No	Not Applicable–leave blank.
4.b. Federal Award Identifier:	No	Enter 21.011.
5. Date Received by State	No	State use only: Not Applicable–leave blank.
6. State Application Identifier	No	State use only: Not Applicable–leave blank.
7.a. Applicant Information: Legal Name	Yes	Enter the legal name of the Applicant.
7.b. Employer/Taxpayer Identification Number (EIN/TIN):	Yes	Enter the Applicant’s EIN/TIN. Must match what’s in the Applicant’s AMIS organization profile.

Field	Required	Instructions
7.c. Organizational DUNS:	Yes	Enter the Applicant's DUNS. Must match what's in the Applicant's AMIS organization profile.
7.d. Address:	Yes	Complete all fields with Applicant's mailing address. Include 9-digit zip.
7.e. Organizational Unit:	No	Not Applicable—leave blank.
7.f. Name and contact information of person to be contacted on matters involving this Application:	Yes	Enter a Contact Person who can answer questions about the submission. The Contact Person (name and contact information) identified here must match a Contact Person information in the Applicant's AMIS account. Organizational Affiliation: leave blank.
8.a. Type of Applicant:	Yes	Select the most appropriate description from list of dropdown options.
8.b. Additional Description:	No	Not Applicable—leave blank.
9. Name of Federal Agency:	Yes	Pre-filled—no entry necessary.
10. Catalog of Federal Domestic Assistance Number / CFDA Title:	No	Pre-filled—no entries necessary. If not, enter 21.011.
11. Descriptive Title of Applicant's Project:	Yes	Indicate whether the Applicant plans to use a CMF Award to finance (i) Affordable Housing Activities, (ii) Economic Development Activities, or (iii) Both Affordable Housing Activities and Economic Development Activities.
12. Areas Affected by Funding:	No	Not Applicable—leave blank.
13. Congressional Districts Of: (a) Applicant; and (b) Program/Project	Yes	See www.house.gov to find congressional district where the Applicant is headquartered. Use same district for both boxes.
14. Funding Period: (a) Start Date; and (b) End Date	Yes	Start Date: enter 1/31/2021. End Date: enter 3/31/2026.
15. Estimated Funding:	Yes	Enter total Award request in the Federal (\$) field; enter zeroes in the Match (\$) field. Note: Applicants may revise their award request in the AMIS Application after submitting the SF-424. The amount entered in the AMIS Application is considered the official award request.
16. Is Submission Subject to Review by State:	Yes	Select option C.
17. Is the Applicant Delinquent on Any Federal Debt:	Yes	Answer, and provide Explanation if 'Yes' selected.
18. Applicant Certification/ Authorized Representative:	Yes	Click the 'I Agree' button. Complete all fields for Authorized Representative information.
Worksheet: Consolidated Application/Plan/Funding Request Explanation	No	Not Applicable—leave blank.
Worksheet: Applicant Federal Debt Delinquent Explanation	No	Complete if applicable.

GRANTS.GOV SUBMISSION INFORMATION

Each Applicant will receive an e-mail from Grants.gov immediately after submitting the SF-424 confirming that the submission has entered the Grants.gov system. This e-mail will contain a tracking number for the submitted SF-424. Within 48 hours, the Applicant will receive a second e-mail which will indicate if the submitted SF-424 was either successfully validated or rejected with errors. However, Applicants should not rely on the e-mail notification from Grants.gov to confirm that their SF-424 were validated. Applicants are strongly encouraged to

use the tracking number provided in the first e-mail to closely monitor the status of their SF-424 by checking Grants.gov directly. The SF-424 will not be officially accepted by the CDFI Fund until Grants.gov has validated the SF-424. In the Grants.gov Workspace function, please note that the Application package has not been submitted if you have not received a tracking number.

AMIS APPLICATION INSTRUCTIONS

Registering an Organization in AMIS

All CMF Applicants in the FY 2020 Round must ensure that their organization is registered in AMIS by the deadline in Table 2. The Applicant organization registered in AMIS must be the same one that submitted the SF-424 through Grants.gov, and the EIN and DUNS number on the SF-424 must match the EIN and DUNS number in the organizational information in AMIS. Organizations who have previously applied for CDFI Fund programs through AMIS likely already meet this requirement, but should verify that their information is accurate in AMIS prior to the deadline.

Applicants for the FY 2020 CMF Round who do not already have their organization registered in AMIS must complete organization registration by the deadline in Table 2. Instructions for registering an organization in AMIS can be found in the “Getting Started – Navigating AMIS” Training Manual on the CDFI Fund’s AMIS Website: <https://amis.cdfifund.gov/s/Training>.

AMIS Application Overview

The remainder of this document provides the full question text and related guidance for the information that should be entered into the CMF Application in AMIS. For technical details on how to use and navigate AMIS, see the “CMF AMIS Application Navigation Guide” at <https://amis.cdfifund.gov/s/Training>. This manual will be available after the Application is opened in AMIS.

In order to facilitate the crosswalk between the online AMIS Application and this Question Text/Guidance document, here are a few tips:

- Prepare narrative responses to questions outside of AMIS. Once your narratives are finalized, you can copy and paste the final versions into the appropriate fields in AMIS.
- Prior to submitting the Application and required attachments through AMIS, be sure that the information is correct. The CDFI Fund will not accept any revisions or amendments to the CMF Application once it has been submitted.

Please be sure that all data entered into AMIS is accurate and complete. As part of the CMF Application review process, information entered in AMIS will be used to score and rank the Applicants (as outlined in the FY 2020 NOFA). Applicants will not be able to revise information entered into AMIS after Application submission. Failure to provide complete and accurate information may negatively impact the evaluation of an Applicant’s FY 2020 CMF Application. The CDFI Fund reserves the right to reject an Application if information submitted through AMIS is determined to be inaccurate.

In order to facilitate the crosswalk between this Application guidance document and AMIS, each Application question in this document will be presented in a Table that contains the following information:

- Full question text
- Response
- Notes/guidance relevant to that specific question or sub-question
- AMIS Field Type

AMIS FIELD TYPES

Below is an overview of the eight field types you will encounter in completing the Application in AMIS.

- **Auto-populated:** These fields will be automatically populated in AMIS based on other data inputs. No data entry is required for fields that are marked “auto-populated.”
- **Currency:** These fields allow the Applicant to enter currency data points and have a dollar sign in front. For example, Award Request Amount: \$2,000,000.
- **Look-up:** These fields allow the Applicant to search and select data fields for an existing list in the AMIS database. For example, when entering geographic areas, the Applicant can “look-up” counties or states.
- **Narrative:** These fields allow the Applicant to enter text (non-numeric data). These fields will also have a character limit as indicated in each question.
- **Numeric:** These fields allow the Applicant to enter a number (that is not a dollar figure or a percentage). For example, the number of hours to complete the Application: 100.
- **Percentage:** These fields allow the Applicant to enter a percentage. For example, percentage of CMF Award that will be used as a Loan Loss Reserve: 23%.
- **Picklist:** These fields allow the Applicant to select an option from a suite of choices (e.g. a dropdown of “Yes” or “No”).
- **Text:** These are short text fields that allow the Applicant to enter up to 255 characters. They are used for names and short descriptions.

Program Profile and Creating an AMIS Application

Once your organization is registered in AMIS, the first step in completing the AMIS Application is to ensure that your CMF Program Profile is up-to-date. You can navigate to your CMF Program Profile from your Organization Page in AMIS. Click on the Program Profile Name (P-XXXXXX) to navigate to the CMF Record Type.

On the Program Profile, you must make sure the field “Entity Type” is completed in order to create an Application. This selection will trigger certain validations on the AMIS Application. The options are listed below:

- Financing Entity
- Affordable Housing Developer/Manager

A **Financing Entity** is an entity whose predominant business activity is the provision of arm’s length transactions and services to independent, unrelated parties, each acting in its own best interest. Such transactions support and promote affordable housing and/or community development through the provision of financial products that serve low income communities, individuals or families with low incomes or underserved markets or communities.

An **Affordable Housing Developer/Manager** is a Nonprofit Organization whose primary mission is the construction, development, redevelopment, preservation or management of affordable housing. The Affordable Housing Developer may own the housing that is developed; may own it in part, such as a limited partnership; may sell the homeownership housing it develops once completed; or may sell but continue to manage the housing if rental housing.

All Certified CDFI Applicants will be categorized as CMF Financing Entities. Applicants that are eligible Nonprofit Organizations should select whether they are best categorized as a Financing Entity or an Affordable Housing Developer/Manager based on their predominant business activity and the definitions above. Note, a nonprofit

instrumentality of a state established to provide financing for affordable housing activities owned or managed primarily by third parties, such as a state Housing Finance Agency (HFA), must select CMF Financing Entity.

Once you select your Entity Type, please be sure to click “Save.” After you have verified the information in your Program Profile, you can create an FY 2020 Application in AMIS. To do so, click the button for “New CMF Application.” This will bring you to an initial screen where you enter the data from the Applicant Information section described on page 11.

Linking SF-424 to AMIS Application

After your SF-424 Mandatory Form is accepted in Grants.gov, a copy of the form will automatically be transferred into your Organization Profile in AMIS. The Applicant must **then link** the SF-424 to its CMF Application. For detailed instructions on how to do this, please refer to the [CMF AMIS Application Navigation Guide](https://amis.cdfifund.gov/s/Training) at <https://amis.cdfifund.gov/s/Training>.

Forms and Certifications

All CMF Applicants must complete the Environmental Review Form and Assurances and Certifications as part of their AMIS online Application submission. Any Applicant that is a 501(c)(4) must also complete the 501(c)(4) form as part of their AMIS online Application submission. You will complete these forms by entering data in the Applicant Information screen in AMIS. For the full text and questions for the Environmental Review form, Assurances and Certifications, and 501(c)(4) Questionnaire, see [Appendix 9](#). If an Applicant is unable to respond “Yes” to all Assurances and Certifications, it must attach a statement that contains an explanation.

Applicant Information

The first section in the Application is the Application Information section. Certain information in these questions may be auto-populated in AMIS based on data from the Applicant's organizational profile. If you need to edit any of the auto-populated fields, you must edit the information directly in the organizational profile.

Question 1 – Organization Information			
All fields in this question are auto-populated in AMIS based on the Applicant's AMIS Organizational Profile. If you need to edit any of the information in these fields, you need to do so in the Organizational Profile. You won't be able to edit in the Application itself.			
Question Text	Response	Notes/Guidance	Field Type
a. Organization Name	Auto-populated	This must be the formal name of your organization as it appears on all relevant legal documents such as the Articles of Incorporation. Please make sure punctuation, capitalization and spelling are correct. If the name that is currently listed in this field is not your organization's legal name, please contact the CDFI Fund through a Service Request.	Auto-populated
b. Address	Auto-populated	If the address populating in this field is not correct, you will need to change it on your organizational record in AMIS.	Auto-populated
c. Employer Identification Number (EIN)	Auto-populated	Must match what's on your SF-424 in Grants.gov.	Auto-populated
d. Dun & Bradstreet Data Universal Numbering System (DUNS) Number	Auto-populated	Must match what's on your SF-424 in Grants.gov.	Auto-populated
e. Applicant's Date of Incorporation	Auto-populated	As specified in the FY 2020 CMF NOFA, only Applicants that have been in existence as a legal entity for at least three years prior to the Application deadline are eligible to apply for funding. In order to be eligible to apply for a CMF award in the FY 2020 round, the Applicant must have been in existence as a legal entity on or before July 27, 2017.	Auto-populated
f. Applicant's fiscal year end (month/day)	Auto-populated	Your organization's fiscal year end.	Auto-populated
g. Depository Institution Holding Company (DHIC) Subsidiary Name	_____	If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it must identify the name and EIN of this Certified CDFI Subsidiary depository institution. This field is optional.	Text
h. Depository Institution Holding Company (DHIC) Subsidiary EIN	_____	See previous note. This field is optional but must be completed if an entry has been made in (g) above.	Numeric

Question 2 – Requested Award			
Question Text	Response	Notes/Guidance	Field Type
a. What is the total dollar amount of award requested in this Application?	\$ _____	<ul style="list-style-type: none"> The Applicant should request an amount that it can use to finance eligible activities with total Eligible Project Costs at least 10 times the amount of the CMF Award. The Applicant should also request an award amount that it is confident can be Committed for use within two years of the Effective Date of the Assistance Agreement, and achieve Project Completion within five years of the Effective Date of the Assistance Agreement. The Applicant may not request an amount below \$500,000. The Applicant may not request an amount above \$26 million. AMIS will require that the award amount requested be rounded to the nearest thousand (e.g. \$615,000 instead of \$615,123). 	Currency
b. Is there an absolute minimum amount below which the Applicant would be unwilling to accept a CMF award?	Yes/No	<ul style="list-style-type: none"> Having a minimum request will not affect the scoring or evaluation of your application. At the conclusion of the CDFI Fund’s review process, if the Applicant is recommended to receive less than the minimum amount identified in Question 2(c), the CDFI Fund <u>will not</u> provide a CMF Award to the Applicant. An Applicant with a minimum award request will need to demonstrate that it can deploy the minimum amount of capital requested in a timely manner, that it will likely achieve its proposed impacts, and that it could not successfully implement its business strategy without this minimum award amount. Applicants should only respond “Yes” if their minimum request is greater than \$500,000. 	Picklist
c. If Yes to (b), provide the minimum amount:	\$ _____	<ul style="list-style-type: none"> The CDFI Fund reserves the right to offer awards smaller than the Applicant’s request in Question 2(a), but the CDFI Fund will not offer an award less than the Applicant’s minimum request in Question 2(c). 	Currency
d. If Yes to (b), how was the minimum amount in (c) determined?	<i>Narrative – 2,000 characters</i>	<ul style="list-style-type: none"> Applicant should articulate why its business strategy would not be feasible with an award that is less than the minimum request. 	Narrative

Question 3 – States Served			
Question Text	Response	Notes/Guidance	Field Type
a. Identify the type of Service Area requested for this Award.	___ <i>Statewide (or territory-wide)</i> — <i>Multi-State (more than one state or territory)</i>	<ul style="list-style-type: none"> Applicants proposing to serve a portion of a single state, should select a Statewide Service Area. An Applicant that proposes to serve a Service Area that includes metropolitan areas in more than one state (e.g., the Philadelphia and Boston metropolitan areas) should select “Multi-state Service Area.” The largest service area an Applicant can request is a multi-state Service Area with up to 15 states. 	Picklist
b. Identify the particular states where the Applicant will deploy its CMF Award.	_____	<ul style="list-style-type: none"> In the search field, you can search by state name and then select the states. A statewide Service Area will cover one state/territory. Applicants planning to serve localities within just one state should select this option. 	Look-up

Question Text	Response	Notes/Guidance	Field Type
		<ul style="list-style-type: none"> • A Multi-State Service Area must cover at least 2 states/territories but no more than 15 states/territories. • If you are a Certified CDFI, please note that the CMF Service Area <u>does not</u> need to be the same as your CDFI Target Market. • If the Applicant is selected for a CMF Award and has a Multi-State Service Area, it may be held to financing/developing <u>at least one Project</u> in any specific state(s) within its multi-state Service Area. Thus, the Applicant should only select geographic areas where it is confident it can deploy some of its CMF Award. 	

Question 4 – Application Contacts			
Question Text	Response	Notes/Guidance	Field Type
a. Select your first Application Point of Contact from your Organization’s AMIS contacts.	_____	When you select an Application Point of Contact in AMIS, their email and phone number will populate. Please ensure this information is accurate or you may miss important information about your Application.	Look-up
b. Select a second Application Point of Contact from your Organization’s AMIS contacts.	_____	You must provide at least two different Application contacts and your second Application Point of Contact <u>must be different</u> than the first Application Point of Contact.	Look-up
c. Select a third Application Point of Contact from your Organization’s AMIS contacts.	_____	You don’t have to select a third point of contact, but it is recommended. Adding more individuals makes it less likely your organization will miss a communication.	Look-up

Question 5 – Applicant Eligibility Criteria			
Question Text	Response	Notes/Guidance	Field Type
a. Is the Applicant a Certified CDFI as of the date of the NOFA publication?	Yes/No	The Applicant’s CDFI Certification status should auto-populate in AMIS for the Applicant’s Organization Profile. If it does not, please contact the CDFI Fund as soon as possible to resolve the issue.	Auto-populated
b. If (a) is “Yes”, what is the CDFI Certification Number?	Auto-populated	The Applicant’s CDFI Certification number should pre-populate in AMIS for the Applicant’s Organization Profile. If it does not, please contact the CDFI Fund as soon as possible to resolve the issue.	Auto-populated
c. Does the Applicant have any Affiliates that are also applying for a FY 2020 CMF Award?	Yes/No	The answer to this question must be “No.” Per the FY 2020 NOFA, if an Applicant and its Affiliate(s) wish to apply for CMF, they must do so through one of the Affiliated entities, in one Application; an Applicant and its Affiliates may not submit separate Applications. If Affiliates submit multiple or separate Applications, the CDFI Fund may, at its discretion, reject all such Applications received or select only one of the submitted Applications to deem eligible. See the CMF Interim Regulations (12 C.F.R. 1807.104) for the definition of Affiliate. If the organization has closely held Affiliates, the Applicant should be careful to select the most appropriate entity to carry out the proposed activities under this grant. Note that the Applicant entity must meet the CMF eligibility requirements on its own.	Picklist

Question Text	Response	Notes/Guidance	Field Type
d. Is the Applicant a Non-Profit?	Yes/No	<ul style="list-style-type: none"> The Applicant's nonprofit status should pre-populate in AMIS for the Applicant's Organization Profile. If it does not, please contact the CDFI Fund as soon as possible to resolve the issue. If the Applicant is <u>relying on its Nonprofit Organization status for eligibility</u> (i.e., it is not a Certified CDFI), it must attach the following documentation to its AMIS Application: <ul style="list-style-type: none"> State charter, articles of incorporation, or other establishing document stating the Applicant is a nonprofit; A certificate or determination letter demonstrating tax exempt status from the IRS;² and Articles of incorporation, by-laws, or other organizational establishing documents demonstrating the Applicant has a principal purpose of managing or developing affordable housing. <i>AMIS Note: This question will only appear in the AMIS Application if the Applicant is not a Certified CDFI.</i> 	Auto-populated
e. Are at least 33 and 1/3 percent of the Applicant's total assets dedicated to the development or management of affordable housing?	Yes/No	<ul style="list-style-type: none"> Total assets are the sum of the value of all of the organization's assets. If the Applicant is relying on its Nonprofit Organization status for Eligibility, it must indicate it meets this test. <i>AMIS Note: This question will only appear in the AMIS Application if the Applicant is not a Certified CDFI.</i> 	Picklist

Question 6 – Total Estimated Hours to Complete the Application			
Question Text	Response	Notes/Guidance	Field Type
Estimate the number of hours required to complete the entire Application package:	_____ hours	For the purpose of estimating Application completion hours, Applicants should focus only on the amount of time it took to complete and populate the questions asked in the Application materials. 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., identifying a project/lending pipeline, developing a strategic plan or marketing plan, etc.) should not be included in this estimate. This question will not be scored.	Numeric

Question 7 – Executive Summary			
Question Text	Response	Notes/Guidance	Field Type
Summarize the key elements of the CMF Proposal, including: <ul style="list-style-type: none"> The challenge/need you are trying to address with a CMF Award. Your vision to address this challenge, strategy for achieving it, and the anticipated outcomes that will result from your strategy. 	<i>Narrative – 3,000 character limit</i>	This is a high-level summary of your Application strategy/vision. This will not be scored in the External Review phase.	Narrative

² For Applicants that are governmental instrumentalities only, and as long as all other eligibility requirements are met, the Applicant must submit a legal opinion from counsel, in form and substance acceptable to the CDFI Fund, opining that the Applicant is exempt from Federal income tax, if the Applicant does not otherwise have such determination in a document from the IRS.

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> • How you determined the size of your CMF Award request. • Why receiving the requested CMF Award will allow you to do things you would otherwise not be able to do. 			

Part 1: Business Strategy and Leveraging Strategy

Total Maximum Points for Business and Leveraging Strategy: 40 points

An Applicant will generally be scored more favorably in this section to the extent that it: (i) presents a quality strategy on how its proposed CMF Award activities address the affordable housing needs and financing gaps it identifies; (ii) demonstrates that its strategy and activities will result in more favorable financing rates and terms; (iii) demonstrates that its projected activities are achievable based on the Applicant’s strategy, a credible pipeline, and its organizational track record; (iv) describes a clear process for locating projects and proposes activities that have a clear need for CMF financing; (v) presents a realistic schedule for deploying the CMF Award and any Program Income where risk has been appropriately considered; (vi) has a clear strategy for and track record of leveraging private capital; (vii) will attract new, Enterprise-Level private capital; (viii) has a clear strategy for and demonstrates a track record of leveraging funds at the Enterprise-Level, through re-investments, and/or at the Project-Level (as applicable); and (ix) whether the strategy is adaptable to changing market conditions. Additionally, an Applicant will score slightly more favorably if it is proposing to serve Alaska, North Dakota, South Carolina, American Samoa, Guam, the Northern Mariana Islands, or the U.S. Virgin Islands.

Proposed Uses of a CMF Award

Questions 8(a), 8(b), 8(c) and 9 address how the Applicant plans to use the CMF Award.

Question 8(a) – Eligible Activities			
Please estimate the percentage of <u>CMF Award dollars</u> that will be used for each of the CMF eligible uses (numbers must add up to 100%). As a condition of their Assistance Agreement, Applicants will be restricted to using their CMF Award for the eligible activities selected in Q. 8(a).			
Question Text	Response	Notes/Guidance	Field Type
i. Capitalize Loan Loss Reserves	_____ %	Loan Loss Reserves means proceeds from the CMF Award the Applicant plans to set aside in the form of cash reserves, or through accounting-based accrual reserves, to cover losses on loans, accounts, and notes receivable for Affordable Housing Activities and/or Economic Development Activities.	Percentage
ii. Capitalize a Revolving Loan Fund	_____ %	Revolving Loan Fund means a pool of funds managed by the Applicant wherein repayment on loans for Affordable Housing Activities or Economic Development Activities are used to provide additional loans.	Percentage
iii. Capitalize an Affordable Housing Fund	_____ %	Affordable Housing Fund means a loan, grant or equity investment fund that is managed by the Applicant and that uses its capital to finance Affordable Housing Activities.	Percentage
iv. Capitalize a fund to support Economic Development Activities	_____ %	A fund to support the development, preservation, acquisition and/or rehabilitation of Community Service Facilities and/or other physical structures. Must be In Conjunction With Affordable Housing Activities.	Percentage

Question Text	Response	Notes/Guidance	Field Type
v. Make Risk-Sharing Loans	_____ %	Risk-Sharing Loans mean loans for Affordable Housing Activities and/or Economic Development in which the risk of borrower default is shared by the Applicant with other lenders (e.g., participation loans).	Percentage
vi. Provide Loan Guarantees	_____ %	Loan Guarantee means the use of the CMF Award to support an agreement to indemnify the holder of a loan all or a portion of the unpaid principal balance in case of default by the borrower. The proceeds of the loan that is guaranteed with the CMF Award must be used for Affordable Housing Activities and/or Economic Development Activities. Examples include arrangements where the Applicant will assume or repay all or a portion of the debt if the borrower defaults.	Percentage
vii. For Direct Administrative Expenses	_____ %	The Applicant may use no more than 5% of its CMF Award for Direct Administrative Expenses. For the FY 2020 CMF Round, the CDFI Fund will allow all Recipients to use up to 5 percent of their CMF Award for Direct Administrative Expenses. Any portion of the amount available for Direct Administrative Expenses may be used for direct costs related to the effective tracking and evaluation of program or evidence-based outcomes for CMF-assisted Projects.	Percentage

Question 8(b) – Financing Types			
Please estimate the percentage of <u>CMF Award dollars (and any Program Income earned during the 5 year Investment Period)</u> that will be used for each of the following types of financing. Please exclude any portion to be retained for Direct Administrative Expense. Percentages must add up to 100%.			
Question Text	Response	Notes/Guidance	Field Type
i. Predevelopment Financing	_____ %	Refers to costs related to determining the feasibility of a particular project, such as the costs of preliminary financial applications, legal fees, architectural fees, and engineering fees.	Percentage
ii. Property/Site Acquisition Financing	_____ %	This category refers to financing any costs associated with obtaining control of the site.	Percentage
iii. Construction Financing	_____ %	This category refers to financing costs associated with the construction of a Project.	Percentage
iv. Bridge Loans or Other Similar Short-Term Financing	_____ %	This category is for short term financing that doesn't fit into the categories in (i) – (iv).	Percentage
v. Permanent Financing (1 st Lien)	_____ %	This category refers to permanent financing (1 st Lien).	Percentage
vi. Permanent Financing (2 nd Lien or lower)	_____ %	This category refers to permanent financing (2 nd Lien or lower).	Percentage
vii. Refinancing	_____ %	This category refers to refinancing.	Percentage
viii. Loan Loss Reserves or Loan Guarantees	_____ %	See question 8(a) for the definitions of these terms.	Percentage
ix. Equity	_____ %	This category refers to equity investments.	Percentage

Question 8(c) – Proposed Uses

Please estimate the percentage of CMF Award dollars (and any Program Income earned during the 5 year Investment Period) that will be directed towards each of the following proposed uses. Please exclude any portion to be retained for Direct Administrative Expenses. All percentages must add up to 100%. Applicants will be restricted in the Assistance Agreement to using the CMF Award for Homeownership, rental housing, and/or Economic Development Activities based on the selections in Q. 8(c).

Question Text	Response	Notes/Guidance	Field Type
i. Homeownership (Development)	_____ %	Development includes any combination of land acquisition, demolition of existing facilities, and construction of new facilities for Homeownership units for Affordable Housing.	Percentage
ii. Homeownership (Rehabilitation)	_____ %	Rehabilitation includes any repairs and/or capital improvements related to Homeownership units for Affordable Housing.	Percentage
iii. Homeownership (Mortgage finance)	_____ %	If you plan to use CMF to provide mortgage finance assistance to eligible Families to purchase Homeownership units.	Percentage
iv. Homeownership (Purchase assistance)	_____ %	Purchase assistance means providing down payment or closing cost assistance to home buyers to assist with the purchase of a unit.	Percentage
v. Rental Housing (Development)	_____ %	Rental development includes any combination of land acquisition, demolition of existing facilities, and construction of new facilities for rental Affordable Housing units.	Percentage
vi. Rental Housing (Rehabilitation)	_____ %	Rental Rehabilitation includes any repairs and/or capital improvements related to rental Affordable Housing.	Percentage
vii. Rental Housing (Preservation)	_____ %	Preservation includes acquisition, with or without rehabilitation of at-risk affordable rental housing (already subsidized and restricted), as well as recapitalization of expiring LIHTC properties. Note, in this scenario, the existing affordability and use restrictions must be extended by a minimum of 10 years. Preservation also includes using CMF to convert non-restricted rental housing, such as “naturally occurring affordable housing” to Affordable Housing (with or without rehabilitation).	Percentage
viii. Economic Development Activities (including Community Service Facilities)	_____ %	No more than 30% of the CMF Award may be used for Economic Development Activities. If you would like to use your CMF Award to finance/support Economic Development Activities, this percentage must be greater than 0%, and your proposed Economic Development Activities must be clearly explained in your Application.	Percentage

Question 9 – Market Gaps and Proposed Strategy and Activities			
Question Text	Response	Notes/Guidance	Field Type
<p>a. Describe the challenges facing the Low-Income Families and communities within your Service Area. Your discussion should address:</p> <ul style="list-style-type: none"> The nature and extent of the affordable housing needs and, if applicable, the economic development/community service needs; Your vision of how you will use your CMF Award to address these needs. 	<p><i>Narrative – 5,000 characters</i></p>	<ul style="list-style-type: none"> Support your narrative with relevant data where possible. For example, metrics of demand for affordable housing, whether this unmet demand is more acute among certain subsets of the population, income characteristics of Families in your Service Area, the extent of unemployment in your Service Area (if applicable), etc. Be sure to cite the sources of any metrics you use in your narrative. Be sure to address whether you are planning on targeting more specific areas within your broader Service Area (e.g., you have a statewide Service Area but plan to target your activities in 5 key cities, or Rural Areas within a statewide Service Area). If so, discuss these areas, their needs and your vision to address their needs in detail. If the Applicant will use a CMF Award to finance/support Economic Development Activities, it must address community needs relevant to these activities. 	<p>Narrative</p>
<p>b. What financing gaps in your market are contributing to the challenges described in Q. 9(a)? Describe what types of financing are missing or not available at the appropriate rates and terms, and why this financing is unavailable in the private marketplace.</p>	<p><i>Narrative – 4,000 character limit</i></p>	<ul style="list-style-type: none"> Support your description with relevant data where possible (e.g., metrics related to financing gaps, examples of unaffordable/unavailable financing, etc.). Be sure to cite the sources of any metrics you use in your narrative. If the Applicant will use a CMF Award to finance/support Economic Development Activities, it must address financing gaps relevant to these activities. 	<p>Narrative</p>
<p>c. Describe your financing strategy – how you will use a CMF Award to address the challenges and financing gaps you have identified in Q. 9(a) and 9(b). Specifically, describe the financing activities/products that the CMF Award will support (as listed in Q. 8b). For each financing activity/financial product, discuss:</p> <ul style="list-style-type: none"> The rates and terms of the proposed financing activity/financial product; 	<p><i>Narrative – 5,000 character limit</i></p>	<p>This question is where the Applicant’s CMF financing strategy should be described in in detail.</p> <ul style="list-style-type: none"> If the Applicant is an Affordable <u>Housing Developer/Manager</u> who will use the CMF Award to finance its own projects, it should clearly describe how the CMF Award dollars will be delivered to the project (e.g., grant, loan, etc.), and what phase of project financing they will support. If the Applicant will use the CMF Award for <u>Loan Loss Reserves (LLR) or Loan Guarantees</u>, quantify the anticipated loss rate that these reserves/guarantees will cover and how this was arrived. Indicate if the LLR will be used for loans originated and held by the Applicant or if the LLR or Guarantee will be used for loans of a third party lender. Be sure to also 	<p>Narrative</p>

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> How these rates and terms compare with what is otherwise available in your market, including the extent to which they are more favorable; Why the CMF Award is needed to be able to pursue/offer this financing activity; What will be the spread between the cost of capital and the interest rate that you intend to charge? 		<p>describe the rates/terms of the loans that will be guaranteed/reserved against and how these rates/terms compare to market.</p> <ul style="list-style-type: none"> If the Applicant is proposing to provide <u>homeownership second mortgages/down-payment assistance</u>, be sure to discuss the rates and terms of the first mortgage and how the Applicant will ensure these mortgages are affordable for Low-Incomehomebuyers. If the Applicant will use a CMF Award <u>to finance/support Economic Development Activities</u>, you must separately describe the financing activities for Economic Development and Affordable Housing in this narrative. The Applicant’s cost of capital is the blended rate of the CMF Award (0%) and the cost of any other Enterprise-Level Capital that is combined with the CMF Award prior to making a loan. 	

Track Record and Projections

Questions 10 and 11 focus on the Applicant’s track record and projections. These questions elaborate on the data requested in the Track Record and Projections related list which can be found in Appendix 2.

Question 10 – Track Record			
Question Text	Response	Notes/Guidance	Field Type
a. Provide data on the Applicant’s track record for 2015-2019 in Appendix 1, Tables A1, B1, and C1 (as applicable) .	See Appendix 1, Tables A1, B1, and C1 .	See Appendix 1, Tables A1, B1, and C1 .	See Appendix 1, Tables A1, B1, and C1 .
<p>b. Describe the Applicant’s track record relevant to its proposed financial products and activities. Be sure to address:</p> <ul style="list-style-type: none"> The Applicant’s experience serving its proposed Service Area; The Applicant’s experience undertaking activities similar to what it proposes to undertake with its CMF Award. 	<i>Narrative – 5,000 characters</i>	<ul style="list-style-type: none"> Please be sure to limit your answer to activities that have occurred since January 1, 2015. If you are proposing to undertake activities that are new to you and not reflected in your track record, indicate how your experience or other circumstances (such as partnerships; new staff resources, etc.) have prepared you to undertake such activities. Be clear about which entity (the Applicant entity or its Subsidiaries) conducted the activities listed in the Appendix 1. 	Narrative

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> How the Applicant's track record supports its ability to carry out the proposed CMF Award activities. 			

Question 11 – Projected Performance and Pipeline			
Question Text	Response	Notes/Guidance	Field Type
a. Provide data on the Applicant's projected CMF Award performance and financing activities for 2021 – 2025 in Appendix 1, Tables A2, B2, and C2 (as applicable) .	See Appendix 1, Tables A2, B2, and C2 .	See Appendix 1, Tables A2, B2, and C2 .	See Appendix 1, Tables A2, B2, and C2 .
<p>b. Describe the Applicant's projections in Tables A2, B2, C2 (as applicable) and the types of Affordable Housing and Economic Development Activities that will be financed/supported with a CMF Award. Be sure to address the following factors:</p> <ul style="list-style-type: none"> How your projected outputs (e.g., units produced, dollars of financing) address the housing and economic development (if applicable) gaps identified in Q. 9(a); How the projections were developed, including the extent to which your projections are based on an identified pipeline of potential projects/investments. Any risks that may impact your ability to achieve projections and steps to mitigate those risks. Describe how you are addressing and mitigating these risks and the role of CMF, if any, in the mitigation. To the extent you are projecting increased level of activities compared to your track record or expansion to new geographic areas, describe why 	<i>Narrative – 5,000 characters</i>	<ul style="list-style-type: none"> Assume that you will receive a CMF Award no earlier than January 1, 2021 (if selected). To the extent the Applicant is proposing a significant increase in activities compared with its track record, be sure to describe why this increase is reasonable and achievable. If your projections rely on investments in LIHTC projects that have not yet received credit allocations, be sure to discuss your risk management strategy for this issue. Indicate the extent to which the projections are comprised of projects currently in your pipeline. For <u>Homeownership</u>, be sure to quantify estimated demand for your Purchase assistance or mortgage products (if applicable) and discuss how this level of demand supports your projections. If you have established partnerships which will facilitate creating a solid pipeline of projects, please discuss. If applicable, indicate whether such partnerships will result in a greater number of units produced (how many) and the extent to which such partnerships will allow you to serve geographic areas you would not otherwise be able to reach. 	Narrative

Question Text	Response	Notes/Guidance	Field Type
these projections are reasonable and note any established partnerships with borrowers/developers that will help you achieve these projections.			
<p>c. Describe your current project/borrower pipeline and how you will build a pipeline of multiple suitable projects that will be able to meet the CMF Award requirements. Be sure to address:</p> <ul style="list-style-type: none"> The factors you look for when selecting and prioritizing potential CMF Projects/borrowers. How any established partnerships with borrowers, developers, or others will be utilized to assist you in sourcing CMF Projects/borrowers. How you will determine the need for CMF financing/support. 	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> Describe your CMF project pipeline, describe it in terms of number of projects, units, total estimated cost, etc. If you intend to pursue different types of activities or financing types (e.g. rental housing and economic development, or pre-development and construction lending), be sure to discuss how you will approach each type. An Applicant will generally score more favorably to the extent it has more than one project that it plans to use a CMF Award to finance/support and has some other financing sources committed, awarded or funded. If the Applicant intends to use a CMF Award to support <u>Homeownership</u> mortgages or Purchase assistance, please describe how many loans your organization plans to make to homebuyers per year, the estimated demand for your proposed product(s), and how you plan to identify potential borrowers. 	Narrative
d. Provide a description of your pipeline Projects in Appendix 2 .	See Appendix 2	See Appendix 2 .	See Appendix 2

Leveraging the CMF Award

The CMF authorizing statute requires that Recipients use the CMF Award to finance/support Projects with Eligible Project Costs totaling at least ten times the CMF Award amount. The CDFI Fund refers to this as “leveraging” the CMF Award. Questions 12-16 ask the Applicant to detail its strategy for leveraging the CMF Award.

Question 12 – Overall Leverage Summary			
In this question, please provide information on your overall plans for leveraging your CMF Award.			
Question Text	Response	Notes/Guidance	Field Type
a. Your organization’s CMF Award Request:	Auto-Calculated	This will auto-populate based on your response to Q. 2(a).	Auto-Calculated

Question Text	Response	Notes/Guidance	Field Type
b. What portion of your CMF Award do you plan to use for Direct Administrative Expenses	Auto-Calculated	This will auto-populated based on your response to Q. 2(a) and Q. 8(a)(vii)	Auto-Calculated
c. What are the total Eligible Project Costs that will be financed/supported with your CMF Award?	\$_____	Enter the Eligible Project Costs (EPC) that will be financed/supported by the CMF Award. Further guidance on what counts as Eligible Project Costs is available in the Application FAQs. <u>Note, the Eligible Project Costs for a Project will not exceed the total development cost for that Project.</u>	Currency
d. Your Organization’s projected Leverage Multiplier:	Auto-Calculated	Projected Leverage Multiplier = Projected Eligible Project Costs ÷ CMF Award Amount Requested	Auto-Calculated
e. How much do you anticipate generating in Leveraged Costs with your CMF Award?	Auto-Calculated	<ul style="list-style-type: none"> • <u>Leveraged Costs</u> means costs for Affordable Housing Activities and Economic Development Activities that exceed the dollar amount of the CMF Award, as further described in CFR 1807.500. • Your Leverage Costs are calculated by subtracting your CMF Award (less any portion of the Award used for Direct Administrative Expenses) from your EPC. 	Auto-Calculated
f. How much of (e) above will be financed/supported by private sources?	\$_____	<ul style="list-style-type: none"> • 12(f) +12(g) must equal 12(e). • Private Leverage Capital is investments or loans to the Applicant, or to Projects financed and/or supported by the Applicant, received from private entities that are not a unit of federal, state, or local government. Examples include private activity bonds, LIHTC equity, other equity investments, lines of credit, loans or other investments from private sources, such as banks, private investors or philanthropic entities that are made to the Applicants or Projects. 	Currency
g. How much of (e) above will be financed/supported by public sources?	\$_____	<ul style="list-style-type: none"> • 12(f) + 12(g) must equal 12(e). • Do not include your CMF Award in this figure. 	Currency

Question 13 – Enterprise-Level Leverage (if applicable)

The questions below focus on the Applicant’s plans to use its CMF Award to leverage “Enterprise-Level Capital.” **“Enterprise-Level Capital” is capital earned, borrowed, or raised by the Applicant or its Affiliates, which is designated for use and ultimately used to pay for Leveraged Costs but is not initially restricted for use for specific properties at the time the capital is earned, borrowed or raised.** Enterprise-Level Capital can include, but is not limited to, Program-Related Investments (PRIs), loans from third parties, and the organization’s own contributed capital (equity or retained earnings).

Example: An Applicant requests a \$2 million CMF Award which it intends to leverage 10 times to create a \$20 million Affordable Housing Fund. The Affordable Housing Fund will be comprised of the requested \$2 million in CMF Award and \$18 million in leveraged funds. Of the \$18 million, \$16 million is from private sources (\$15 million in a new bank line of credit to be received on October 15, 2020 and \$1 million from an existing foundation

Program Related Investments (PRI) received on December 1, 2019). The Affordable Housing Fund also includes \$1 million in funds from the city (not restricted to a specific project) and the Applicant is contributing \$1 million of its own funds. The total Enterprise-Level Capital in this example is \$18 million. \$17 million is private Enterprise-Level Capital and \$15 million is new, private capital.

Note: If the Applicant does not plan to leverage its CMF Award at the Enterprise-Level, it should respond \$0 to Questions 13(a) – (c). The Applicant only needs to respond to Questions 13(e), 13(f) and 13(g) if any of 13(a) – 13(c) are greater than 0. Questions 13(e) – 13(g) will not appear in AMIS if 13(a) – 13(c) are all 0.

Question Text	Response	Notes/Guidance	Field Type
a. How much Enterprise-Level Capital will you raise from private sources with your CMF Award?	\$ _____	Any capital designated by the capital provider for a specific, identified project cannot be included here.	Currency
b. How much of the private, Enterprise-Level Capital in Q. 13(a) will be “new capital” to the organization?	\$ _____	<ul style="list-style-type: none"> 13(b) must be less than or equal to 13(a). New Capital is capital raised or projected to be raised by the Applicant after January 1, 2020 that will used to leverage the proposed CMF Award. 	Currency
c. How much Enterprise-Level Capital will you raise from public sources with your CMF Award?	\$ _____	Any capital designated by the capital provider for a specific, identified project cannot be included here. Do not include your CMF Award request in this field.	Currency
d. Total amount of Enterprise-Level Capital you plan to leverage.	Auto-Calculated	<ul style="list-style-type: none"> Calculated by adding 13(a) +13(c). Must be less than or equal to 12(e). 13(d) + 14(a) + 14(b) + 15(c) must equal 12(e) 	Auto-Calculated
e. Describe your strategy to leverage your CMF Award by using it to attract Enterprise-Level Capital, particularly new private capital for the organization.	Narrative – 3,000 characters	<ul style="list-style-type: none"> AMIS Note: If 13(d) is 0, 13(e), (f), (g) will not populate as they are not applicable. Existing capital sources may be tapped as leverage for the CMF Award, but please note where you will be raising NEW private Enterprise-Level Capital as a result of the CMF Award. In your narrative, reference the information in Appendix 3 as appropriate. Be specific about how the CMF Award will enable you to attract Enterprise-Level Capital for Affordable Housing and related Economic Development Activities. 	Narrative
f. Discuss your organization’s prior relevant experience raising and deploying funds from the sources you are targeting for Enterprise-Level Capital (or similar sources).	Narrative – 3,000 characters	<ul style="list-style-type: none"> AMIS Note: If 13(d) is 0, 13(e), (f), (g) will not populate as they are not applicable. 	Narrative
g. If you have identified potential sources of Enterprise-Level Capital to leverage with your CMF Award, provide the information in Appendix 3 .	See Appendix 3	<ul style="list-style-type: none"> See Appendix 3. If you don’t plan to leverage Enterprise-Level Capital, you will not complete Appendix 3. Otherwise, you must provide at least one potential source of Enterprise-Level Capital in Appendix 3. 	See Appendix 3

Question 14 – Reinvestment (if applicable)

The questions below focus on the Applicant’s plans to leverage its CMF Award by reinvesting CMF Award dollars and/or Enterprise-Level Capital. If the Applicant does not anticipate redeploying CMF Award dollars within the 5-year Investment Period, the amount entered in 14(a) and 14(b) should be zero. Program Income in the form of principal and equity repayments of the CMF Award earned during the Investment Period must be reinvested by the Recipient. The required conditions for that reinvestment of Program Income will be specified in the Assistance Agreement and may vary depending on whether the Applicant intends to leverage the CMF Award through reinvestment, as indicated in their response to this question.

Note: The Applicant only needs to respond to Questions 14(d) and 14(e) if Questions 14(a) – 14(c) are greater than 0. Questions 14(d) – 14(e) will not appear in AMIS if 14(a) – 14(c) are all 0.

Question Text	Response	Notes/Guidance	Field Type
a. How much of your CMF Award will be reinvested into additional Projects which will be completed during the five year Investment Period?	\$ _____	<ul style="list-style-type: none"> Only list capital that will be reinvested by the Applicant. Enter “0” if you are not planning to reinvest the CMF Award within the 5-year Investment Period. Only include reinvestment in Projects which will be completed within the 5-year investment period. 13(d) + 14(a) + 14(b) + 15(c) must equal 12(e) 	Currency
b. How much of your Enterprise-Level Capital will be reinvested into additional Projects during the five year Investment Period?	\$ _____	<ul style="list-style-type: none"> Only list capital that will be reinvested by the Applicant. If 14(b) is greater than 0, 14(a) must also be greater than 0. Enter “0” if you are not planning to reinvest any Enterprise-Level Capital within the 5-year Investment Period or if 13(d) is \$0. Only include reinvestment in Projects which will be completed within the 5-year investment period. 13(d) + 14(a) + 14(b) + 15(c) must equal 12(e) 	Currency
c. Based on the responses to 14(a) and 14(b), please outline how much your organization plans to reinvest every year during the 5-year Investment Period.	Yr 1: \$ _____ Yr 2: \$ _____ Yr 3: \$ _____ Yr 4: \$ _____ Yr 5: \$ _____	The sum of reinvestment in Years 1-5 (Investment Period) must to equal Q. 14(a) + 14(b). Only include reinvestment in Projects which will be completed within the 5-year investment period.	Currency
d. If your response to Q. 14(a) and/or Q. 14(b) was greater than \$0, describe your strategy for reinvesting your CMF Award and any Enterprise-Level Capital. In particular, discuss: <ul style="list-style-type: none"> How much capital you anticipate will be repaid during the 5-year Investment Period and how you developed the schedule for reinvestment in 14(c); 	Narrative – 3,000 characters	<ul style="list-style-type: none"> AMIS Note: Questions 14(d) – 14(e) will not appear in AMIS if 14(a) – 14(c) are all 0. If you need to reinvest your CMF Award to reach the 10:1 leverage multiplier, be sure to indicate that in this narrative. 	Narrative

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> How you mitigate risks that repayment may occur not on your anticipated schedule; How you plan to identify eligible projects to reinvest your CMF Award and any Enterprise-Level Capital and ensure the Projects will be completed within the 5-year investment period. 			
e. If your response to Q. 14(a) was greater than \$0, discuss your track record of managing the repayment and reinvesting of capital.	<i>Narrative – 3,000 characters</i>	<i>AMIS Note: Questions 14(d) – 14(e) will not appear in AMIS if 14(a) – 14(c) are all 0.</i>	Narrative

Question 15 – Project-Level Leverage (if applicable)

Project-Level leverage is the difference between the total Eligible Project Costs of the Project and the amount of financing or capital provided to the Project by the Applicant. It is capital used to pay Leveraged Costs that is restricted to a specific project when it is raised. Project-Level leverage can, among other things, include mortgages secured by the property, proceeds from the sale of bonds, equity investment raised through LIHTC, deferred developer fees, loans and grants from local and state government made directly to a specific Project. Project-Level leverage does not include Enterprise-Level Capital or Reinvestments. Here are two examples:

- Example 1: The Applicant is using a CMF Award to support a multi-family rental Project with total Eligible Project Costs of \$2.5 million. In total, the Applicant will be providing \$500,000 in financing from their own funds (Enterprise-Level) and \$500,000 from its CMF Award to the project. \$1 million will be funded by a private lender mortgage and the city has awarded \$500,000 for that specific Project. The amount of Project-Level leverage in this example is \$1.5 million, with \$1 million from private sources and \$500,000 from public sources.
- Example 2: The Applicant is using a CMF Award to seed an Affordable Housing Fund that will provide soft second mortgages to Low-Income Families. This fund provides a second mortgage of \$10,000 (\$5,000 of its own funds and \$5,000 in CMF) to a homebuyer to help finance a home purchase of \$100,000. The balance of \$90,000 is funded by a private mortgage. The amount of Project-Level leverage is \$90,000.

Note: The Applicant only needs to respond to Questions 15(d) and 15(e) if Questions 15(c) is greater than 0. Questions 15(d) – 15(e) will not appear in AMIS if 15(c) is 0.

Question Text	Response	Notes/Guidance	Field Type
a. How much capital do you plan to leverage at the Project-Level from private sources?	\$ _____	Examples may be a mortgage secured by the property or equity investment raised through LIHTC.	Currency

Question Text	Response	Notes/Guidance	Field Type
b. How much capital do you plan to leverage at the Project-Level from public sources?	\$ _____	Examples may be grants or loans from local or state government.	Currency
c. Total amount of Project-Level leverage	Auto-Calculated	This field will be auto-calculated. It is the sum of 15(a) and 15(b).	Auto-Calculated
d. Describe your approach to leveraging at the Project-Level. Be sure to discuss, on average, how much of the Eligible Project Costs the Applicant will fund and how much will be funded by third party, Project-Level sources. If you plan to fund projects that have not secured all the necessary sources of financing, be sure to discuss your strategy for managing the risk that these other sources will not be available.	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> • <i>AMIS Note: Questions 15(d) – 15(e) will not appear in AMIS if 15(c) is 0.</i> • As part of this narrative, be sure to identify likely sources of Project-Level leverage (e.g., bank loan, LIHTC equity, etc.). • If you are relying on competitive sources of financing (e.g. LIHTC) to provide a portion of your Project-Level leverage, be sure to discuss how you plan to mitigate any risk associated with the possibility of not receiving the anticipated funds. 	Narrative
e. Discuss the Applicant’s track record in the last five years of providing financing that leverages project costs beyond the Applicant’s financing.	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> • <i>AMIS Note: Questions 15(d) – 15(e) will not appear in AMIS if 15(c) is 0.</i> • Be sure to quantify the amount of Project-Level leverage raised in past projects/activities. Discussion should be thorough, descriptive, and provide quantitative as well as qualitative information. 	Narrative

Question 16 – Private Leverage			
Question Text	Response	Notes/Guidance	Field Type
a. Your organization’s overall Private Leverage Multiplier:	Auto-Calculated	This multiplier is calculated by dividing Q. 12(f) by your CMF Award request. If selected for a CMF Award, your organization will be held to this multiplier in your Assistance Agreement. If your projected multiplier is greater than 10, your organization will be held to a multiplier of 10 in your Assistance Agreement.	Auto-Calculated
b. Describe how the Applicant will use the CMF Award to attract private capital for Affordable Housing and Economic Development Activities. Also, discuss any relevant track record in the last five years of raising private capital for these types of activities.	<i>Narrative – 3,000 characters</i>	Be sure to discuss any risks of not meeting your projected private leverage multiplier listed in Q. 16(a) and your plans to mitigate those risks.	Narrative

Potential Adjustments

Question 17 – Potential Adjustments			
Question Text	Response	Notes/Guidance	Field Type
<p>If the Applicant receives less than its proposed CMF Award request, how will it adjust its business strategy and leveraging strategy? For example, what activities will be prioritized? Will the leverage amount remain the same? Will income targeting change?</p>	<p><i>Narrative – 2,000 character limit</i></p>	<p>If the Applicant is recommended to receive a CMF Award less than its request, the CDFI Fund may reduce the number of allowable activities in the Applicant’s Assistance Agreement (if the Applicant proposed more than one). In that situation, the CDFI Fund will use the Applicant’s response to this question as a basis for those adjustments. If the Applicant doesn’t present clear priorities, the CDFI Fund will adjust as it sees fit.</p>	<p>Narrative</p>

Part 2: Community Impact

Total Maximum Points for Community Impact: 35 Points

The Applicant will generally score more favorably in this section to the extent that it: (i) demonstrates how its business strategy will result in one or more of the Affordable Housing and/or Economic Development Activities impacts identified in the Application and the extent to which it has articulated and quantified measurements and evidence to support these impacts; (ii) demonstrates a clear and compelling strategy for financing and/or supporting housing units targeted to Low-Income Families (for Homeownership) and Very-Low Income Families (for rental); (iii) presents a strong ability to finance and/or support Affordable Housing in Areas of Economic Distress; (iv) has community engagement and partnerships that will lead to greater unit production, or allows the Applicant to serve geographic areas it otherwise could not reach, and/or result in identified community impacts that benefit Affordable Housing residents; and (v) for Economic Development Activities, demonstrates how its proposed Economic Development Activities fit within a Concerted Strategy and will benefit the residents of the nearby Affordable Housing. The Applicant will also score more favorably to the extent that it: commits to producing a higher percentage and/or number of rental housing units targeted to Very Low-Income Families (if proposing to use CMF for rental housing); commits to producing a higher percentage and/or number of Homeownership units targeted to Low-Income Families (if proposing to use CMF for Homeownership); commits to financing and/or supporting Economic Development Activities in Low-Income Areas or Underserved Rural Areas only (if proposing to use CMF for Economic Developments Activities); and commits to producing a higher percentage of units in Areas of Economic Distress. Applicants will also score slightly more favorably in this section if they are willing to commit to investing 10 percent or more of their CMF Award in Rural Areas and a track record of investing in Rural Areas that supports this projection.

Potential Outcomes and Impacts

Question 18 – Housing and Economic Development Impacts			
Question Text	Response	Notes/Guidance	Field Type
<p>a. Specifically address which of the following six impacts you expect will result from your CMF Award strategy. Select one or more impact to discuss.</p> <p>For each impact selected, describe how <u>your strategy will lead to this desired impact</u>. If you have any evidence (e.g. 3rd party studies, your own data) to support your contention that your CMF Award strategy will achieve a particular impact, please provide that citation from the studies, and/or any relevant data or information.</p>	<p><i>Narrative – 5,000 character limit</i></p>	<ul style="list-style-type: none"> Applicants will score higher if they provide evidence to support that the strategy will achieve the selected impact(s), such as third-party studies or your own evaluations. Applicants won't receive a scoring advantage for selecting more than one impact and should only discuss the one(s) that are the best fit for their strategy. 	<p>Narrative</p>

Question Text	Response	Notes/Guidance	Field Type
<p>Also discuss what metrics you will track over time to evaluate whether your strategy is achieving the impact. The Affordable Housing impact options are:</p> <ol style="list-style-type: none"> 1. Improved financial well-being and stability for Low-Income Families. 2. Improved health outcomes for Low-Income individuals and Families, particularly seniors, children, formerly homeless and those with disabilities. 3. The Preservation of existing Affordable Housing, especially where it will result in reduced displacement of Low-Income Families. 4. Improved quality of housing for Low-Income Families. 5. The revitalization of economically distressed communities or neighborhoods. 6. Assist in the long term recovery and rebuilding of affordable housing in federally designated disaster areas through disaster-prevention or disaster-resistant design. 			
<p>b. If you intend to finance/support Economic Development Activities, describe which of the three impacts below will result from your Economic Development Activities.</p> <p>For each impact selected, describe how your strategy will lead to this desired impact. If you have any evidence (e.g. 3rd party studies, your own data) to support your contention that your CMF Award strategy will achieve a particular impact, please provide the citations for the studies, and/or any relevant data or information.</p> <p>Also discuss what metrics track over time to evaluate whether your strategy is achieving the impact. The Economic Development impact options are:</p> <ol style="list-style-type: none"> 1. The revitalization of economically distressed areas or neighborhoods. 2. Increased access to goods and services for Low-Income Families especially community and educational services. 3. Increased economic opportunity for Low-Income Families, especially those in Areas of Economic Distress. 	<p><i>Narrative – 5,000 character limit</i></p>	<ul style="list-style-type: none"> • Applicants will score higher if they provide evidence to support that the strategy will achieve the selected impact(s), such as third-party studies or your own evaluations/data. • Applicants won't receive a scoring advantage for selecting more than one impact and should only discuss the one that is the best fit for their strategy. • <i>AMIS Note:</i> This question will only appear in the AMIS if the Applicant indicates in Q. 8(c) that it plans to use a portion of its Award for Economic Development Activities. 	<p>Narrative</p>

Question Text	Response	Notes/Guidance	Field Type
c. Will the Applicant commit that it will use its CMF Award to finance/support Economic Development Activities located only in Low-Income Areas or Underserved Rural Areas?	Yes/No	<ul style="list-style-type: none"> • If the Applicant proposes to finance/support Economic Development Activities, it will score more favorably to the extent it selects “Yes” in Question #20(c). This commitment will become a condition of the Applicant’s Assistance Agreement. • Low-Income Areas and Underserved Rural Areas are defined in 12 CFR § 1807.104 and further described in the Application FAQ. • <i>AMIS Note:</i> This question will only appear in the AMIS if the Applicant indicates in Q. 9(c) that it plans to use a portion of its Award for Economic Development Activities. 	Picklist

Economic Distress and Income Targeting

Question 19 – Areas of Economic Distress			
Question Text	Response	Notes/Guidance	Field Type
a. What is the minimum percentage of the Applicant’s total CMF-financed/supported housing units that will be located in Areas of Economic Distress?	_____ %	<ul style="list-style-type: none"> • Areas of Economic Distress are census tracts: (a) where at least 20 percent of households that are Very Low-Income (50% of AMI or below) spend more than half of their income on housing; or (b) that are designated Qualified Opportunity Zones; or (c) that are Low-Income Housing Tax Credit Qualified Census Tracts; or (d) where greater than 20 percent of households have incomes below the poverty rate and the rental vacancy rate is at least 10 percent; or (e) where greater than 20 percent of the households have incomes below the poverty rate and the homeownership vacancy rate is at least 10 percent; or (f) are Underserved Rural Areas as defined in the CMF Interim Rule (as amended February 8, 2016; 12 CFR Part 1807). • The CDFI Fund will use the information obtained from Q.19 to help ensure that the CMF Program achieves its statutory goal of funding activities in geographically diverse Areas of Economic Distress, including Metropolitan and Underserved Rural Areas. The CDFI Fund plans to achieve the goal of promoting investment in Areas of Economic Distress by holding Applicants to their minimum commitment to produce units in Areas of Economic Distress (which includes Underserved Rural Areas). 	Percent

Question Text	Response	Notes/Guidance	Field Type
		<ul style="list-style-type: none"> • If the Applicant is selected to receive a CMF Award, it will be required to produce the percentage of housing units listed in Q. 19 as a condition of its Assistance Agreement. • The Applicant will also project the percentage of units that will be located in Areas of Economic Distress in Appendix 1 - Table B2. The percentage entered in Q. 19 as your commitment must be less than or equal to the projection in Table B2. • An Excel file of census tracts that qualify as Areas of Economic Distress for the FY 2020 Round will be available at www.cdfifund.gov/cmfi under Step 2: Apply. 	
b. Please discuss the extent to which your planned CMF activities will occur in Areas of Economic Distress. In particular, discuss how you will identify projects in Areas of Economic Distress, how your proposed activities will address economic distress in these areas, and your track record in these areas in the past five years.	<i>Narrative – 3,000 character limit</i>	<ul style="list-style-type: none"> • Areas of Economic Distress are defined above. • Reference the data in Tables B1 and B2, as appropriate. • If there is a particular category of distress the Applicant plans to target (e.g. Opportunity Zones), please state that in this narrative. 	Narrative

Question 20 – Affordable Housing Activities Targeting LI, VLI, and ELI Populations			
Question Text	Response	Notes/Guidance	Field Type
a. Discuss the extent to which your CMF Award will enable you to finance/produce more units of Affordable Housing and/or target lower income groups than would otherwise be possible without a CMF Award. Compare your planned level of Affordable Housing finance/production and income targeting with a CMF Award to what would be possible without a CMF Award.	<i>Narrative – 3,000 character limit</i>	<ul style="list-style-type: none"> • Be sure to quantify how a CMF Award will allow you to increase your level of housing finance/production and/or pursue targeting units for Families with lower incomes than would otherwise be possible. • Reference the data in Tables A2, B2, and C2, as appropriate. 	Narrative
b. If you are proposing to finance rental housing with a CMF Award, indicate the number and minimum percentage of the total number of rental housing units that the Applicant will commit to financing for each of the following income groups:		<ul style="list-style-type: none"> • If applicable, an Applicant will generally be scored more favorably to the extent it commits to produce a greater number and/or portion of total rental units set aside for Very Low-Income and/or Extremely Low-Income Families. Applicants will be held to achieving this commitment as a condition of their Assistance Agreement. 	Percentage

Question 20 – Affordable Housing Activities Targeting LI, VLI, and ELI Populations

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> Extremely Low-Income Families (30% or below the area median income) Very Low-Income Families (31-50% of the area median income) Low-Income Families (51-80% of the area median income) Eligible-Income Families (81%-120% of the area median income) 	<p>____%</p> <p>____%</p> <p>____%</p> <p>____%</p>	<ul style="list-style-type: none"> Please refer to the definitions for Affordable Housing Activities and Affordable Housing laid out in section 1807.104 of the Interim Regulations (12 C.F.R. 1807). Units <u>not restricted to 120% of AMI or below</u> – even if they will serve Families with incomes at 120% AMI or below -- should not be included as they cannot be supported with a CMF Award. Note that greater than 50% of the total Eligible Project Costs (CMF Award plus Leveraged Costs) must be attributable to housing units that meet the CMF affordability qualifications for Low-Income, Very Low-Income, or Extremely Low-Income Families. Additionally, per the FY 2020 NOFA, a minimum of 20% of the total <u>rental housing</u> units financed/supported with a FY 2020 CMF Award must be targeted to Very Low-Income or Extremely Low-Income Families. <i>AMIS Note: These questions will only appear in the AMIS Application if the Applicant indicates in Q. 8(c) that it plans to use a portion of its Award for rental Housing.</i> 	
<p>c. If you are proposing to finance Homeownership with a CMF Award, indicate the minimum percentage of the total number of Affordable Homeownership units that the Applicant will commit to financing for each of the following income groups:</p> <ul style="list-style-type: none"> Extremely Low-Income Families (30% or below the area median income) Very Low-Income Families (31-50% of the area median income) Low-Income Families (51-80% of the area median income) Eligible-Income Families (81%-120% of the area median income) 	<p>____%</p> <p>____%</p> <p>____%</p> <p>____%</p>	<ul style="list-style-type: none"> See note above about definitions. Note that greater than 50% of the total Eligible Project Costs (CMF Award plus Leveraged Costs) must be attributable to housing units that meet the CMF affordability qualifications for Low-Income, Very Low-Income, or Extremely Low-Income Families. Additionally, per the FY 2020 NOFA, a minimum of 20% of <u>homeownership</u> units financed/supported with a CMF Award must be targeted to Low-Income, Very Low-Income or Extremely Low-Income Families. Units <u>not restricted to 120% of AMI or below</u> – even if they will serve Families with incomes at 120% AMI or below -- should not be included, as they cannot be supported with a CMF Award. If applicable, an Applicant will generally be scored more favorably to the extent it commits to produce a greater number and/or portion of total Homeownership units available to Low-Income Families. <i>AMIS Note: These questions will only appear in the AMIS if the Applicant indicates in Q. 8(c) that it plans to use a portion of its Award for Homeownership.</i> 	Percentage

Community Engagement and Strategy Alignment

Question 21 – Community Partnerships			
Question Text	Response	Notes/Guidance	Field Type
Describe partnerships with other organizations (e.g. housing developers, lenders, community organizations) that will enhance the Applicant’s strategy and impact for Low-Income Families. In particular, please describe if you are working with a state or local jurisdiction that has innovative land use and affordable housing policies, expedited processing, or is waiving certain regulatory requirements which will reduce overall development costs for your projects.	<i>Narrative – 3,000 character limit</i>	Potential areas of partnership include, but are not limited to: a) partnerships that facilitate supportive services for residents of CMF-financed Affordable Housing; b) partnerships that will allow the Applicant to reach new markets, significantly increase its Affordable Housing production, or undertake new activities; c) partnerships/engagement with local or state jurisdictions whose land use policies or other regulations will have the effect of reducing development costs for your affordable housing project(s).	Narrative

Question 22 – Concerted Strategy Alignment (if Economic Development Activities are proposed in Q.8(c))			
Question Text	Response	Notes/Guidance	Field Type
If the Applicant intends to finance Economic Development Activities, describe how the Applicant will ensure that its activities are certified as being part of a <u>Concerted Strategy</u> to stabilize or revitalize a Low-Income Area or Underserved Rural Area In Conjunction with Affordable Housing.	<i>Narrative – 3,000 character limit</i>	<ul style="list-style-type: none"> This is a regulatory requirement if the Applicant intends to use its CMF Award to finance/support Economic Development Activities. CMF Interim Rule (12 CFR § 1807.104) <i>Concerted Strategy</i> means a formal planning document that evidences the connection between Affordable Housing Activities and Economic Development Activities. Such documents include, but are not limited to, a comprehensive, consolidated, or redevelopment plan, or some other local or regional planning document adopted or approved by the jurisdiction. <i>AMIS Note:</i> This question will only appear in the AMIS Application if the Applicant indicates in Q. 8(c) that it plans to use a portion of its Award for Economic Development Activities. 	Narrative

Rural Areas

Question 23 – Rural Areas

The CDFI Fund is dedicated to achieving geographic diversity across Metropolitan and Rural Areas in the United States, and encourages Applicants to serve Rural Areas as a way to ensure that diversity. An Applicant is therefore required to provide the percentage of CMF dollars that it is willing to commit to investing in Rural Areas.

Rural Areas is defined per 12 CFR § 1282.1 (Enterprise Duty To Serve Final Rule) as (i) A census tract outside of a Metropolitan Statistical Area as designated by the Office of Management and Budget; or (ii) A census tract in a Metropolitan Statistical Area as designated by the Office of Management and Budget that is outside of the Metropolitan Statistical Area’s Urbanized Areas, as designated by the U.S. Department of Agriculture’s (USDA) Rural-Urban Commuting Area (RUCA) Code #1, and outside of tracts with a housing density of over 64 housing units per square mile for USDA’s RUCA Code #2. The CDFI Fund has published a dataset indicating which census tracts are designated as Rural Areas for the FY 2020 Round on its [website](#).

If the Applicant’s response to Question 23(a) is greater than zero, the Applicant will be held to using a required percentage of CMF Award dollars in Rural Areas as a condition of its Assistance Agreement. The required percentage will equal the response to Question 23(a).

Note: These questions will only appear in AMIS if the Applicant indicates that it is willing to commit to using a portion of its CMF Award in Rural Areas.

Question Text	Response	Notes/Guidance	Field Type
a. Indicate the percentage of CMF Award dollars that the Applicant is willing to commit to deploy in Rural Areas:	_____ %	<ul style="list-style-type: none"> The percentage entered must be between 0 and 100. 	Percentage
b. If the response to (a) is greater than 0%, briefly describe the Applicant’s track record of serving Rural Areas. Be sure to indicate, both in dollar amount and as a percentage of the Applicant’s overall activities, the amount of loans, investments or related activities the Applicant has undertaken in Rural Areas.	<i>Narrative – 3,500-character limit</i>	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	Narrative
c. For the Applicant’s activity between 2015 and 2019 provide the following information for housing units targeted to <u>0-30% area median income (AMI) Families in Rural Areas</u> : <ul style="list-style-type: none"> Total project costs financed/supported Total units produced 	\$ _____ Costs _____ Units	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric
d. For the Applicant’s activity between 2015 and 2019, provide the following information for housing units targeted to <u>31-50% AMI Families in Rural Areas</u> : <ul style="list-style-type: none"> Total project costs financed/supported 	\$ _____ Costs _____ Units	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> Total units produced 			
<p>e. For the Applicant’s activity between 2015 and 2019, provide the following information for housing units targeted to <u>51-80% AMI Families in Rural Areas</u>:</p> <ul style="list-style-type: none"> Total project costs financed/supported Total units produced 	<p>\$___Costs ___Units</p>	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric
<p>f. For the Applicant’s activity between 2015 and 2019, provide the following information for housing units targeted to <u>81-120% AMI Families in Rural Areas</u>:</p> <ul style="list-style-type: none"> Total project costs financed/supported Total units produced 	<p>\$___Costs ___Units</p>	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric
<p>g. For the Applicant’s activity between 2015 and 2019, provide the following information for housing units targeted to <u>over 120% AMI Families in Rural Areas</u>:</p> <ul style="list-style-type: none"> Total project costs financed/supported Total units produced 	<p>\$___Costs ___Units</p>	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric
<p>h. For the Applicant’s activity between 2015 and 2019, provide the following information based on the total housing units produced <u>in Areas of Economic Distress</u> located in <u>Rural Areas</u>:</p> <ul style="list-style-type: none"> Total project costs financed/supported Total units produced 	<p>\$___Costs ___Units</p>	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric

Part 3: Organization Capacity

Total Maximum Points for Organization Capacity: 25 Points

The CDFI Fund will evaluate the Applicant’s organizational capacity and ability to successfully undertake its proposed CMF activities and maintain compliance with its Assistance Agreement. The Applicant will generally be scored more favorably to the extent that it has: (i) strong qualifications of its key personnel with respect to their skills and experience in identifying investments, underwriting or developing similar projects (as applicable), managing a portfolio of similar activities and ensuring compliance with program requirements; (ii) success in administering prior CMF Awards, CDFI and/or other Federal program awards; (iii) ability to meet Federal award management standards; (iv) strong financial health; and (v) solid portfolio performance (as applicable).

Question 24 – Management Team and Key Staff			
Question Text	Response	Notes/Guidance	Field Type
a. Complete Appendix 4 for Key Personnel (no more than 10) who will be integral to the implementation of the Applicant’s proposal. You may include members of the Applicant’s staff, management team, consultants or contractors.	See Appendix 4	<ul style="list-style-type: none"> See Appendix 4 	See Appendix 4
b. Describe the roles and responsibilities that the key personnel listed in Appendix 4 will play in managing your CMF Award and planned CMF activities. Specifically, address the following functions: <ul style="list-style-type: none"> Building a pipeline of Affordable Housing/economic development projects and/or borrowers Underwriting, financing, or developing Affordable Housing and/or Economic Development Activities (as applicable) Asset / portfolio / construction management (as applicable) Managing program compliance 	Narrative – 5,000 character limit	<ul style="list-style-type: none"> Do not repeat the experience of any personnel listed in the “Key Personnel” Appendix 4 in this narrative. Discuss the functions that are appropriate to your organization type (Financing Entity or Affordable Housing Developer/Manager), and CMF Award strategy. 	Narrative

Question 25 – Previous Federal Awards			
Question Text	Response	Notes/Guidance	Field Type
a. Complete Appendix 5 for all Federal government awards that the Applicant and/or any Affiliates have received in the <u>past 3 years</u> .	See Appendix 5	<ul style="list-style-type: none"> See Appendix 5. Only include awards received in the last 3 years in the Appendix 5. 	See Appendix 5
b. If the Applicant has received other Federal awards since January 1, 2017, discuss the following:	Narrative – 4,000 characters	<ul style="list-style-type: none"> Previous CMF Recipients must clearly discuss the status of 	Narrative

Question Text	Response	Notes/Guidance	Field Type
<ul style="list-style-type: none"> In the past 3 years, has the Applicant or its Affiliates been deemed noncompliant with a Federal award from the CDFI Fund or other agencies, experienced any compliance issues, or been the subject of an unresolved OIG investigation? If the Applicant has received a CMF Award in the FY 2017, FY 2018, or FY 2019 Round, indicate how much of each Award has been Committed and disbursed to Projects/borrowers as of the Application submission date. Indicate if any Projects under these Awards have achieved Project Completion. If the Applicant has not received any Federal awards in the past 3 years, discuss any other experience that the Applicant has in administering awards from other entities (e.g., state or local governments, foundations), particularly large monetary awards with substantial compliance requirements and describe how this experience will enable the Applicant to successfully administer a CMF Award. 		Awards from the FY 2017, 2018, and 2019 Rounds, as applicable.	

Question 26 – Financial Health			
Question Text	Response	Notes/Guidance	Field Type
a. Enter the Applicant’s relevant financial data in Appendix 6 . Note which fields are relevant for your entity type.	See Appendix 6	For reference, see Appendix 6 .	See Appendix 6
b. Have any of the Applicant’s completed audits within the past 3 years indicated negative Net Income?	Yes/No	Net Income, also known as Earnings, is Revenue less Expenses.	Picklist
c. Have any of the Applicant’s completed audits within the past 3 years included an opinion other than unqualified/unmodified?	Yes/No	An unqualified opinion is an independent auditor's judgment that a company's financial records and statements are fairly and appropriately presented, and in accordance with Generally Accepted Accounting Principles (GAAP). An unqualified/unmodified opinion is the most common type of auditor's report.	Picklist
d. Have any of the Applicant’s completed audits within the past 3 years included a “going-concern paragraph” or qualification?	Yes/No	The going concern principle is that you assume a business will continue in the future, unless there is evidence to the contrary. When an auditor conducts an examination of the accounting records of a company, he or she has an obligation to review its ability to continue as a going concern; if the assessment is that there is a substantial doubt regarding the company's ability to continue in the future (which is defined as the following year), a	Picklist

Question Text	Response	Notes/Guidance	Field Type
		going concern qualification must be included in his or her opinion of the company's financial statements.	
e. Have any of the Applicant's audits for the 3 most recently completed fiscal years (as of the date of the NOFA), including any Single Audits for those years, contained repeated findings of reportable conditions?	<i>Yes/No</i>	Reportable condition is a matter coming to the auditor's attention relating to significant deficiencies in the design or operation of the internal control that could adversely affect an entity's ability to fulfill future obligations and/or the satisfaction of liabilities.	Picklist
f. Have any of the Applicant's completed audits with the past 3 years, including its Single Audit, indicated material weaknesses in internal control?	<i>Yes/No</i>	Material weakness in internal controls means that it could lead to a material misstatement in a company's financial statements.	Picklist
If "Yes" to any of (b)-(f) above, indicate the fiscal years of the occurrence, and describe the circumstances and corrective action taken.	<i>Narrative – 2,000 character limit</i>	Be as thorough as possible in describing the circumstances around the occurrence and any corrective steps take to address the issue.	Narrative
<p>g. Provide a narrative responding to the following questions on the Applicant's financial health:</p> <ul style="list-style-type: none"> • Discuss financial health over the past 3 years prior to the date of the NOFA, noting key trends and circumstances and how they shape organizational performance and business strategy. • Be sure to discuss any recent material changes to the Applicant's financial health that are not reflected in the audited financial statement for the most recently completed fiscal year. • Has the Applicant ever filed for bankruptcy or otherwise defaulted on financial obligations to a third party? • If yes, please explain the circumstances, indicate the fiscal year in which they occurred, and describe the corrective action being taken. • Is the Applicant delinquent with respect to any obligations owed by the Applicant to an investor or lender? If yes, please explain the circumstances and describe the corrective action being taken. • Acknowledge any other areas of material weakness and/or deficiencies in the Applicant's financial health, viability, and capacity as well as financial statement and Single Audit 	<i>Narrative – 4,000 characters</i>	The CDFI Fund reserves the right to contact other governmental organizations to review the Applicant's award status and reserves the right to obtain additional audited or interim financial statements from an Applicant to review its financial condition, prior to making a final award determination. Failure on the part of the Applicant to acknowledge issues related to the financial health of the organization in Question #26 above or elsewhere in the Application could result in the Application being deemed ineligible, dismissed from a subsequent stage of review, or in termination of an Award.	Narrative

Question Text	Response	Notes/Guidance	Field Type
findings (as applicable). Discuss how the Applicant is trying to improve in those areas.			

Question 27 –Portfolio Health			
Question Text	Response	Notes/Guidance	Field Type
<p>Discuss the Applicant’s portfolio performance. Describe key trends or changes in the portfolio for the 3 most recently completed fiscal years and the current fiscal year-to-date.</p> <p><u>For Applicants who are Financing Entities</u>, discuss the Applicant’s loan portfolio, referring to the loan portfolio data entered in Table E as necessary. Explain any weaknesses, especially those related to delinquencies or net loan losses and discuss how the Applicant is trying to improve those areas. Compare your performance with industry benchmarks where appropriate.</p> <p><u>For Applicants who are Affordable Housing Developers/Managers</u>, discuss the Applicant’s property portfolio, including the total number of properties and units. Explain any weaknesses, especially those related to vacancies or negative cash flow and discuss how the Applicant is trying to improve those areas. Compare your performance with industry benchmarks where appropriate.</p>	<p><i>Narrative – 3,000 character limit</i></p>	<ul style="list-style-type: none"> • Financing Entity-Applicants should complete this question as it relates to your loan portfolio. • Affordable Housing Developer/Manager- Applicants should complete this question as it relates to your property portfolio. • Affordable Housing Developer/Managers-Applicants must include the following information in their narrative, for <u>its 3 most recently completed fiscal years (as of the date of the NOFA)</u>. If this information is not included in the narrative, the Applicant will be scored less favorably: <ul style="list-style-type: none"> ➤ Number of properties and units (#) ➤ Average portfolio vacancy rate (%) ➤ Total percentage of rents collected (%) ➤ Gross rental income for the entire portfolio (\$) ➤ Total net operating income (NOI) for the entire portfolio (\$) ➤ Total debt coverage ratio (#) ➤ Total number of properties with a HUD Real Estate Assessment Center (REAC) score below 60 (#) 	<p>Narrative</p>

Appendix 1: Track Record and Projections

Instructions for Completing Track Record Tables (Tables A1, B1, and C1)

Instructions for Tables A1, B1, and C1: Please provide the requested information on the Applicant’s track record of deployment and production track record in Tables A1, B1, and C1, as applicable. Tables A1, B1, and C1 (as applicable) should be completed based solely on activities undertaken by the Applicant, any Subsidiaries, and any Limited Partnerships or Limited Liability Corporations where the Applicant holds the controlling interest over the management, credit or investment decisions, or policies of the company. Do not include the activities of Affiliates that are not Subsidiaries of the Applicant in these tables (e.g. “parent” organizations or other organizations under a common “parent” that are not Controlled by the Applicant). If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it must provide track record information only for its Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award.

Instructions for Completing Projections Tables (Tables A2, B2, and C2)

Instructions for Tables A2, B2, and C2: Please provide the information requested about the Applicant’s projected deployment and production related to its CMF Award request in Tables A2, B2, and C2, as applicable. Tables A2, B2, and C2 (as applicable) should only contain data for activities undertaken as a result of the Applicant’s requested CMF Award. Do not include data on activities unrelated to the Applicant’s requested CMF Award. Your projections in Tables A2 and B2 will be used to determine a minimum number of units to be produced with your CMF Award. This unit target will become a condition of your Assistance Agreement. If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it should include data on projected capital to be deployed by the Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award.

Table A1: Track Record by Housing/Economic Development Activity Type

Data entered in Table A1 should be based on the date the project was completed (e.g. for homeownership, title transferred to homeowner or for rental, certificate of occupancy). For example, if new development financing was closed in 2015, and the building was completed in 2017, then the Applicant should put the total development cost and units produced under 2017. Under the fields for Cost (\$), the Applicant should enter the total project cost (inclusive of the Applicant’s financing and financing from other entities) as of the date the project was completed. Under the fields for units, for Homeownership and rental housing, list the total number of units produced in each category. For Economic Development Activities, enter the total number of facilities produced in each category (i.e. one building is one unit for Economic Development Activities).

Table A1 – Track Record by Activity Type			Track Record (in \$) by Activity Type and Calendar Year					
AMIS Field Name	Notes/Guidance	Field Type	2015	2016	2017	2018	2019	Total
Track Record of Rental Housing Activity Type								
New Development Cost (Rental)	Enter the costs for rental housing new Development for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
New Development Units (Rental)	Enter the units for rental housing new Development for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Rehabilitation Cost (Rental)	Enter the costs for rental housing Rehabilitation for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Rehabilitation Units (Rental)	Enter the units for rental housing Rehabilitation for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Preservation Cost (Rental)	Enter the costs for rental housing Preservation for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Preservation Units (Rental)	Enter the units for rental housing Preservation for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Total Rental Housing Costs	Totals for rental housing costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Rental Housing Units	Totals for rental housing units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Track Record of Homeownership Activity Type								
New Development Cost (HO)	Enter the costs for new Development Homeownership for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
New Development Units (HO)	Enter the units for new Development Homeownership for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Rehabilitation Cost (HO)	Enter the costs for Rehabilitation Homeownership for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Rehabilitation Units (HO)	Enter the units for Rehabilitation Homeownership for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Homebuyer Mortgage Finance Cost	Enter the costs for homeowner mortgage finance for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Homebuyer Mortgage Finance Units	Enter the units for homeowner mortgage finance for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Purchase Assistance Cost	Enter the costs for down payment and/or closing cost assistance for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Purchase Assistance Units	Enter the units for down payment and/or closing cost assistance for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>

Table A1 – Track Record by Activity Type			Track Record (in \$) by Activity Type and Calendar Year					
AMIS Field Name	Notes/Guidance	Field Type	2015	2016	2017	2018	2019	Total
Total Homeownership Costs	Totals for Homeownership costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Homeownership Units	Totals for Homeownership units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Track Record of Economic Development Activity Type (Complete if Applicable)								
Community Service Facilities Costs	Enter the costs for Community Service Facilities for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Community Service Facilities Units	Enter the number of Community Service Facilities for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Other Econ. Dev. Activities Costs	Enter the costs for any other Economic Development Activities for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Other Econ. Dev. Activities Units	Enter the number of other Economic Development Activity facilities for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Total Economic Development Costs	Total Economic Development Activity costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Economic Development Units	Total Economic Development Activity units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Track Record Activity Type Totals								
Total Cost	Total costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Units	Total units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>

Table A2: Projected Housing/Economic Development Activity Type

Data entered in Table A2 should be based on the date the Project will achieve Project Completion. For example, if a Development loan will be closed in 2021, and the building will achieve Project Completion in 2022, then the Applicant should enter the total projected Eligible Project Costs and units produced under the record for 2022. In this table, only provide data for activities undertaken as a result of the Applicant’s requested CMF Award. Do not include data on activities unrelated to the Applicant’s requested CMF Award.

In the fields for cost (\$), the Applicant must enter the projected total Eligible Project Costs (inclusive of financing by the Applicant and any other entity) as of the date the Project is projected to achieve Project Completion. Projected Total Costs in this table must equal the Eligible Project Costs entered in Q. 12c.

In the fields for units, for Affordable Housing Activities, list only the number of units that qualify as Affordable Housing under the CMF Program (i.e. units that comply with the affordability qualifications for Eligible-Income Families (120% of AMI or below). For Economic Development Activities, enter the projected number of facilities to be financed.

Table A2 – Projected Activity Type			Projected Amount (in \$) by Activity Type and Year					
AMIS Field Name	Notes/Guidance	Field Type	2021	2022	2023	2024	2025	Total
Projected Rental Housing Activity Type								
New Development Cost (Rental)	Enter the costs for rental housing new Development for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
New Development Units (Rental)	Enter the units for rental housing new Development for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Rehabilitation Cost (Rental)	Enter the costs for rental housing Rehabilitation for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Rehabilitation Units (Rental)	Enter the units for rental housing Rehabilitation for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Preservation Cost (Rental)	Enter the costs for rental housing Preservation for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Preservation Units (Rental)	Enter the units for rental housing Preservation for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Total Rental Housing Costs	Totals for rental housing costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Rental Housing Units	Totals for rental housing units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Projected Homeownership Activity Type								
New Development Cost (HO)	Enter the costs for new Development Homeownership for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
New Development Units (HO)	Enter the units for new Development Homeownership for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Rehabilitation Cost (HO)	Enter the costs for Rehabilitation Homeownership for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>

Table A2 – Projected Activity Type			Projected Amount (in \$) by Activity Type and Year					
AMIS Field Name	Notes/Guidance	Field Type	2021	2022	2023	2024	2025	Total
Rehabilitation Units (HO)	Enter the units for Rehabilitation Homeownership for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Homebuyer Mortgage Finance Cost	Enter the costs for homeowner mortgage finance for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Homebuyer Mortgage Finance Units	Enter the units for homeowner mortgage finance for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Purchase Assistance Cost	Enter the costs for down payment and/or closing cost assistance for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Purchase Assistance Units	Enter the units for down payment and/or closing cost assistance for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Total Homeownership Costs	Totals for Homeownership costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Homeownership Units	Totals for Homeownership units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Projected Economic Development Activity Type (Complete if Applicable)								
Community Service Facilities Costs	Enter the projected costs for Community Service Facilities for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Community Service Facilities Units	Enter the number of projected Community Service Facilities for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Other Econ. Dev. Activities Costs	Enter the projected costs for any other Economic Development Activity costs for each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Other Econ. Dev. Activities Units	Enter the projected number of other Economic Development Activity facilities for each year.	Numeric	_____	_____	_____	_____	_____	<i>Auto-Calc</i>
Total Economic Development Costs	Total Economic Development Activity costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Economic Development Units	Total Economic Development Activity units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Projected Activity Type Totals								
Total Cost	Total projected costs will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>
Total Units	Total projected units will be auto-calculated in this row.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>

Table B1: Track Record of Housing Units Production by Income Levels

Data entered in Table B1 should include projects completed in 2015-2019, based on Project Completion date. Applicants should enter the number of units for each income category. AMI stands for Area Median Income.

Areas of Economic Distress are census tracts: (a) where at least 20 percent of households that are Very Low-Income (50% of AMI or below) spend more than half of their income on housing; or (b) that are designated Qualified Opportunity Zones; or (c) that are Low-Income Housing Tax Credit Qualified Census Tracts; or (d) where greater than 20 percent of households have incomes below the poverty rate and the rental vacancy rate is at least 10 percent; or (e) where greater than 20 percent of the households have incomes below the poverty rate and the homeownership vacancy rate is at least 10 percent; or (f) Are Underserved Rural Areas as defined in the CMF Interim Rule (as amended February 8, 2016; 12 CFR Part 1807). A spreadsheet of Areas of Economic Distress is available at: <https://www.cdfifund.gov/programs-training/Programs/cmf/Pages/apply-step.aspx#step2>.

Table B1 – Track Record Housing Unit Production by Income Levels			Response
AMIS Field Name	Notes/Guidance	Field Type	2015-2019 5-Year Totals
Rental Housing			
0-30% AMI Units	Enter the number of units for 0-30% AMI.	Numeric	_____
31-50% AMI Units	Enter the number of 31-50% AMI units.	Numeric	_____
51-80% AMI Units	Enter the number of 51-80% AMI units.	Numeric	_____
81-120% AMI Units	Enter the number of 81-120% AMI units.	Numeric	_____
Total Rental Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
Homeownership Housing			
0-30% AMI Units	Enter the number of units for 0-30% AMI.	Numeric	_____
31-50% AMI Units	Enter the number of 31-50% AMI units.	Numeric	_____
51-80% AMI Units	Enter the number of 51-80% AMI units.	Numeric	_____
81-120% AMI Units	Enter the number of 81-120% AMI units.	Numeric	_____
Total Homeownership Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
All Housing			
Total - All Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
Areas of Economic Distress			
Housing Activity in Areas of Economic Distress Cost	Enter the costs for housing activity in Areas of Economic Distress. This figure should be a subset of Total Rental Costs and Total Homeownership Costs entered in Table A1.	Currency	_____

Table B1 – Track Record Housing Unit Production by Income Levels			Response
AMIS Field Name	Notes/Guidance	Field Type	2015-2019 5-Year Totals
Housing Activity in Areas of Economic Distress Units	Enter the number of units in Areas of Economic Distress. This figure should be a subset of Total Rental Housing Units and Total Homeownership Units entered in Table A1.	Numeric	_____

Table B2: Projected Housing Units Production by Income Levels

Data entered in Table B2 should be based on the date the Project will achieve Project Completion. In this table, only provide data for activities that will be financed and/or supported by the Applicant’s requested CMF Award that will achieve Project Completion in 2021-2025. Do not include data on activities unrelated to the Applicant’s requested CMF Award.

Areas of Economic Distress are census tracts: (a) where at least 20 percent of households that are Very Low-Income (50% of AMI or below) spend more than half of their income on housing; or (b) that are designated Qualified Opportunity Zones ; or (c) that are Low-Income Housing Tax Credit Qualified Census Tracts; or (d) where greater than 20 percent of households have incomes below the poverty rate and the rental vacancy rate is at least 10 percent; or (e) where greater than 20 percent of the households have incomes below the poverty rate and the homeownership vacancy rate is at least 10 percent; or (f) Are Underserved Rural Areas as defined in the CMF Interim Rule (as amended February 8, 2016; 12 CFR Part 1807). A spreadsheet of Areas of Economic Distress is available at: <https://www.cdfifund.gov/programs-training/Programs/cmf/Pages/apply-step.aspx#step2>.

Please note that the number of units projected in Areas of Economic Distress Units in this table cannot be less than the percentage indicated in Q. 19. In other words, if you are committing to locate 50% of the units in Areas of Economic Distress in Q. 19, and you are proposing a total of 100 units, the Housing Activity in Areas of Economic Distress Units in this table cannot be less than 50.

NOTE: As defined in part 1807.104 of the Interim Regulations (12 C.F.R. 1807), Affordable Housing Activities means the Development, Preservation, Rehabilitation, and/or Purchase of Affordable Housing, meaning that they comply with the affordability qualifications set forth for Eligible-Income Families. Also, per 12 CFR 1807.400, each Recipient that uses its CMF Award for Affordable Housing Activities must ensure that 100 percent of Eligible Project Costs are attributable to Affordable Housing; meaning, that they comply with the affordability qualifications for Eligible-Income Families (120% of AMI or below).

Table B2 – Projected Housing Units Production by Income Levels			Response
AMIS Field Name	Notes/Guidance	Field Type	2021-2025 5-Year Totals
Rental Housing			
0-30% AMI Units	Enter the number of units for 0-30% AMI.	Numeric	_____
31-50% AMI Units	Enter the number of 31-50% AMI units.	Numeric	_____
51-80% AMI Units	Enter the number of 51-80% AMI units.	Numeric	_____
81-120% AMI Units	Enter the number of 81-120% AMI units.	Numeric	_____
Total Rental Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
Homeownership Housing			
0-30% AMI Units	Enter the number of units for 0-30% AMI.	Numeric	_____
31-50% AMI Units	Enter the number of 31-50% AMI units.	Numeric	_____
51-80% AMI Units	Enter the number of 51-80% AMI units.	Numeric	_____
81-120% AMI Units	Enter the number of 81-120% AMI units.	Numeric	_____
Total Homeownership Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
All Housing			
Total - All Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
Areas of Economic Distress			
Housing Activity in Areas of Economic Distress Cost	Enter the costs for housing activity in Areas of Economic Distress. This figure should be a subset of Total Rental Costs and Total Homeownership Costs entered in Table A2.	Currency	_____
Housing Activity in Areas of Economic Distress Units	Enter the number of units in Areas of Economic Distress. This figure should be a subset of Total Rental Housing Units and Total Homeownership Units entered in Table A2.	Numeric	_____

Table C1: Track Record of Financing Activities/Products (to be completed by Financing Entities only)

Table C1 is only applicable for Financing Entities and will not appear in AMIS for Housing Developers/Managers. The table is focused only on the Applicant’s track record of providing financing to projects and should reflect dollar amounts that the Applicant has loaned or invested directly to third party entities. The dollar amounts should reflect only the loans or equity investments made by your organization. Financing from third parties to projects (e.g. LIHTC, project-specific grants or bank construction loans) should **not** be included in this table.

Data entered in Table C1 should be based on the date the financing transaction closed. In all cases, the transactions must have closed no earlier than 1/1/2015 and no later than 12/31/2019. For example, if a construction loan closed on 2/13/2015, the total dollar amount of the construction financing provided by the Applicant would be included in the column for 2015.

Table C1 – Track Record by Financing Activities/Products			Track Record (in \$) Directly Deployed/Spent by Calendar Year					
AMIS Field Name	Notes/Guidance	Field Type	2015	2016	2017	2018	2019	Total
Predevelopment	Enter dollar amount loaned or invested for predevelopment in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Acquisition	Enter dollar amount loaned or invested for acquisition in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Construction	Enter dollar amount loaned or invested for construction in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Bridge Loans or Similar	Enter dollar amount loaned or invested for bridge loans or similar in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Permanent Financing (1 st)	Enter dollar amount loaned or invested for permanent financing (1 st lien) in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Permanent Financing (2 nd or Lower)	Enter dollar amount loaned or invested for permanent financing (2 nd lien or lower) in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Refinancing	Enter dollar amount loaned or invested for refinancing in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Loan Loss Reserves or Loan Guarantees	Enter dollar amount allocated for loan guarantees and/or loan loss reserves in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Equity	Enter dollar amount invested or invested as equity in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Total Financing Deployment	Will sum automatically in AMIS.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>

Table C2: Projected CMF Financing Activities/Products (to be completed by Financing Entities only)

Table C2 is only applicable for Financing Entities and will not appear in AMIS for Housing Developers/Managers. Table C2 focuses only on the projected financing that the Applicant will provide to Projects as a result of the CMF Award. The dollar amounts should reflect only the loans or equity investments made by your organization. Financing from third parties to projects (e.g. LIHTC, project-specific grants or bank construction loans) should not be included in this table.

Data entered in Table C2 should be based on the date the financing transaction will close. For example, if a construction loan is projected to close on 2/13/2021, the total dollar amount of the construction financing provided by the Applicant would be included in the column for 2021.

Table C2 – Projected CMF Financing Activities/Products			Projected Amount (in \$) Directly Deployed by Year					
AMIS Field Name	Notes/Guidance	Field Type	2021	2022	2023	2024	2025	Total
Predevelopment	Enter projected dollar amount of financing for predevelopment in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Acquisition	Enter projected dollar amount of financing for acquisition in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Construction	Enter projected dollar amount of financing for construction in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Bridge Loans or Similar	Enter projected dollar amount of financing for bridge loans or similar in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Permanent Financing (1 st)	Enter projected dollar amount of financing for permanent financing (1 st lien) in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Permanent Financing (2 nd or Lower)	Enter projected dollar amount of financing for permanent financing (2 nd lien or lower) in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Refinancing	Enter projected dollar amount of refinancing activity in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Loan Loss Reserves or Loan Guarantees	Enter projected dollar amount to be allocated for Loan Guarantees and/or Loan Loss Reserves in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>
Equity	Enter projected dollar amount of financing for equity investments in each year.	Currency	\$_____	\$_____	\$_____	\$_____	\$_____	<i>Auto-Calc</i>

Table C2 – Projected CMF Financing Activities/Products			Projected Amount (in \$) Directly Deployed by Year					
AMIS Field Name	Notes/Guidance	Field Type	2021	2022	2023	2024	2025	Total
Total Deployment	AMIS will sum the fields automatically for each year.	Auto-Calculated	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>	<i>Auto-Calc</i>

Appendix 2: Pipeline Projects

Please provide the following information for your proposed pipeline of projects. Include at least two and up to eight projects, completing the following information for each project. In aggregate, the “\$ of CMF Financing Needed” for your pipeline projects should equal the amount of your CMF Award request or you must identify eight pipeline projects. While you will not be held to financing/supporting any of the specific projects listed in your pipeline if you receive a CMF Award, please only describe projects in your pipeline for which you realistically anticipate using your CMF Award. To that end, do not include projects that would be complete before January 2021.

- If you are planning on providing mortgage assistance/Purchase assistance to homebuyers, you may list the Homeownership program as one “project” in Appendix 2. In this scenario you should clearly describe the typical borrower credit profile, as well as the potential rates and terms and the source of other home purchase financing. If this Homeownership program would be your only “project”, list a “sample” borrower who is similar to the types of borrowers you anticipate assisting with a CMF Award as your second project in Appendix 2. **Do not include any personally identifiable information about the borrower (i.e. name, social security number, etc.).**
- If you are planning on using your CMF Award to finance/support Economic Development Activities, make sure you include at least one project of this type in your pipeline.

Pipeline Projects			
AMIS Field Name	Response	Notes/Guidance	Field Type
Project Description	<i>Narrative – 500 characters</i>	<p>Briefly describe each project/borrower. Indicate the timing for each project, including Commitment date, anticipated acquisition and/or start of construction, and projected completion date. Indicate the Applicant’s role in the project, for example, lender; equity investor; developer/owner; managing general partner, etc. Only list projects that will be completed after the anticipated CMF Award date of January 2021. For each project, be sure to provide the following information:</p> <ul style="list-style-type: none"> • City and State • Project Type (Rental / Homeownership / Economic Development / Mixed Use) • Total Number of Housing units and number of Affordable Housing units <p>If you are providing mortgage assistance/Purchase assistance to a homebuyer, briefly describe the type of property, characteristics/credit profile of the type of borrower that would receive CMF-assisted financing, as well as the potential rates and terms. Do not include any personally identifiable information on an identified borrower.</p>	Narrative

AMIS Field Name	Response	Notes/Guidance	Field Type
Need for CMF Financing	<i>Narrative – 500 characters</i>	Clearly explain the reason CMF Award dollars are needed to finance or support the project/borrower. Explain the role of CMF in the financing structure (e.g. permanent gap financing, subordinate second mortgage, etc.) and why other sources of capital are not readily available to provide this financing/support.	Narrative
\$ of CMF Financing Needed	\$ _____	This is the amount of the CMF Award that would be allocated to the project. In aggregate, the “\$ of CMF Financing Needed” for your pipeline projects should equal the amount of your CMF Award request or you must identify eight pipeline projects. If you are using your CMF Award for Loan Loss Reserves or Loan Guarantees where the CMF dollars are not going directly to the project, present the pro-rated amount of the CMF Award that will be held as Loan Loss Reserves or Loan Guarantees to support the projects. Indicate the percentage of loss the Reserves/Guarantees would cover.	Currency
Total Eligible Project Costs	\$ _____	Enter the projected Eligible Project Costs for the project.	Currency
Other Financing Sources	<i>Narrative – 500 characters</i>	Briefly describe other sources of financing for the project. Indicate sources of capital that are committed or secured. If you are planning on using LIHTC, please note that and indicate the type of credit (4 percent or 9 percent). Provide potential rates and terms if available. For Purchase assistance financing/second mortgage, be sure to discuss the rates and terms of the first mortgage.	Narrative

Appendix 3: Enterprise-Level Sources of Leverage

You will only be able to enter data in Appendix 3 if you indicated in Question 13 that you would use a CMF Award to leverage Enterprise-Level Capital. If you plan to leverage Enterprise-Level Capital, you must provide at least one potential source of Enterprise-Level Capital in this Appendix. You may add as many sources as necessary.

Note: Enterprise-Level Capital will only be considered “new” capital if it is raised or projected to be raised by the Applicant after January 1, 2020 and will be used to leverage the proposed CMF Award.

Enterprise-Level Sources of Leverage			
AMIS Field Name	Response	Notes/Guidance	Field Type
Name of Investor	_____	Enter the name of the investor.	Text
Dollar Amount Sought	\$ _____	Enter the dollar amount sought from the investor.	Currency
Previous Investor	Yes/No	Select whether it’s a previous investor.	Picklist
Related to Applicant	Yes/No	Select whether the investor is related to the Applicant.	Picklist
Type of Financing	Debt/Equity/Grant	Choose the financing type from the dropdown.	Picklist
Status of Request	Funds Received / Legal Commitment / Term Sheet / Letter of Interest / Application Pending / Estimate	Select the appropriate status of the identified financing. The CDFI Fund reserves the right to request documentation substantiating this status during the Application review process.	Picklist
Est. Date of Receipt of Funds	Date	Please provide the estimated date of receipt of funds.	Picklist

Appendix 4: Key Personnel

Applicants may enter up to 10 persons related to the Applicant’s affordable housing activities (from the management team, staff, consultants, or contractors) who are integral to the implementation of the Applicant’s proposal. Do not include members of the Board of Directors. The CDFI Fund will only evaluate the 10 individuals entered in the Key Personnel Appendix.

FOR CERTIFIED CDFI DEPOSITORY INSTITUTION HOLDING COMPANIES ONLY: If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, be sure to include information on key personnel of the Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award.

Key Personnel			
AMIS Field Name	Response	Notes/Guidance	Field Type
Name	_____	Enter the name of the key personnel.	Text
Title	_____	Enter the title of the key personnel.	Text
Firm	_____	Enter the name of the firm with which the key personnel is affiliated.	Text
Years in the Field	_____ years	Enter the number of years key personnel has worked in the field.	Numeric
Years with Applicant	_____ years	Enter the number of years key personnel has worked for the Applicant.	Numeric
Position Held with Applicant (select all that apply)	<input type="checkbox"/> Executive Director or Equivalent <input type="checkbox"/> Chief Financial Officer or Equivalent <input type="checkbox"/> Loan / Investment Officer or Equivalent <input type="checkbox"/> Development Officer <input type="checkbox"/> Compliance Officer <input type="checkbox"/> Contracted Consultant <input type="checkbox"/> Other Key Management <input type="checkbox"/> Other Position Held with the Applicant If Other, Please Specify _____	You may select more than one option if the person had held or holds more than one position with the Applicant.	Check Boxes
Duties to be Provided for the Applicant (select all that apply)	<input type="checkbox"/> Capital-raising <input type="checkbox"/> Asset Management (Loan Portfolio) <input type="checkbox"/> Asset Management (Property Portfolio) <input type="checkbox"/> Program Compliance <input type="checkbox"/> Real Estate Development	<ul style="list-style-type: none"> Select the duties the individual will perform relative to administering the requested CMF Award. 	Check Boxes

AMIS Field Name	Response	Notes/Guidance	Field Type
	<input type="checkbox"/> <i>Construction Management</i> <input type="checkbox"/> <i>Sourcing/Loan Underwriting</i> <input type="checkbox"/> <i>Real Estate Finance</i> <input type="checkbox"/> <i>Property Management</i> <input type="checkbox"/> <i>Loan Servicing</i> <input type="checkbox"/> <i>Community Outreach</i> <input type="checkbox"/> <i>Legal Services</i> <input type="checkbox"/> <i>Other Duty to be Provided</i> <i>If Other Duty to be Provided, Please Specify _____</i>	<ul style="list-style-type: none"> You may select more than one option if the person will perform more than one duty. 	
Description of Key Staff Qualifications	<i>Narrative – 1,000 characters</i>	Discuss the individual’s qualifications that support their ability to perform their duties in administering a CMF Award, including their overall number of years of experience with similar activities.	Narrative

Appendix 5: Previous Federal Awards

Provide the following information for each of the Federal government awards that the Applicant and/or any Affiliates have received **over the past three years** (as of the Application deadline).

- If your organization has received more than one award of the same type in the last 3 years, total the amount awarded and enter this information on one line with the “Award Date” being the date of the most recently received award.
- Only include Federal awards.

Previous Federal Awards			
AMIS Field Name	Response	Notes/Guidance	Field Type
Name of Award	_____	Enter the name of the award.	Text
Awarding Agency	_____	Enter the awarding agency.	Text
Award Amount	\$_____	Enter the award amount.	Currency
Award Date	<i>mm/dd/yyyy</i>	Do not include any award received more than 3 years before the Application due date.	Date
Control/Award Number	_____	Enter the Control/Award Number, if applicable.	Text

Appendix 6: Application Financial Data

- An Applicant must provide data for the three most recently completed fiscal years for which the Applicant has audited financials. FOR CERTIFIED CDFI DEPOSITORY INSTITUTIONS ONLY: Call Reports may be submitted in lieu of financial statements.
- When entering data, ensure that the Financial Data 3 column contains financial data for the most recently completed fiscal year. Data for the middle year should be entered in the Financial Data 2 column. Data for the least recent year should be entered in the Financial Data 1 column.
- Financial data may be provided on a consolidated or unconsolidated basis; however, the data in the Application must reflect the same basis as used in the audits attached to the Application. If submitting unconsolidated data for the Applicant entity only, it must be reflected in the attached audits. If your audit does not contain this unconsolidated data, you must enter consolidated data. If your attached audits contain both consolidated and unconsolidated financial information, you may choose which type to enter. However, you must enter the same type (consolidated/unconsolidated) for all 3 fiscal years. You will label the type of data submitted in AMIS. The data entered in Appendix 6 must match your attached audits.
- FOR CERTIFIED CDFI DEPOSITORY INSTITUTION HOLDING COMPANIES ONLY: If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it must enter the financial data for the Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award in Tables D and E.
- Definitions for the relevant terms are listed in Tables D and E below.
- For any items where a timing dependent valuation is required, that valuation should be based on the appropriate fiscal year end date.
- **AMIS Note:** *Affordable Housing Developers/Manager Applicants may put \$0 in the fields that are only required for Financing Entities in Table D, as AMIS requires that data be entered in these fields.*

Table D – Applicant Financial Data				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Fiscal Year	Select the Fiscal Year for which the data is provided.	Picklist	All Applicants	Least Recent Fiscal Year	Middle Fiscal Year	Most Recent Completed Fiscal
Financial Data Type	Select whether the financial information provided is Audited or Unaudited.	Picklist	All Applicants	Audited or Unaudited	Audited or Unaudited	Audited or Unaudited
Financial Data Consolidation	Select whether the financial data is on Consolidated or Unconsolidated basis.	Picklist	All Applicants	Consolidated or	Consolidated or	Consolidated or

Table D – Applicant Financial Data				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
				Unconsolidated	Unconsolidated	Unconsolidated
Single Audit Required?	Indicate whether the Applicant or its Affiliates were required to have a Single Audit completed in each of the Fiscal Years per 2 CFR 200.501.	Picklist	<i>All Applicants</i>	Yes or No	Yes or No	Yes or No
Assets						
Cash Restricted for Operations (\$)	The dollar amount of cash, if any, restricted by an organization to fund its operations. Restricted cash appears noted on an organization's balance sheet as either "restricted cash" or as "other assets" restricted for operations.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Unrestricted Cash and Cash Equivalents (\$)	The value of unencumbered assets that are cash or can be converted into cash within 3 months, such as bank accounts or marketable securities.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Other Real Estate Owned (OREO) (\$)	In general, real estate, including capitalized and operating leases, that is acquired through any means, in full or partial satisfaction of a debt previously contracted.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Current Assets (\$)	Current Assets are cash and other assets/resources commonly identified as those which are reasonably expected to be realized in cash or sold or consumed during the normal operating cycle of the business (or one year whichever is longer).	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Allowance for Loan and Lease Losses (\$)	Account value for unidentified Loan or Investment losses, inclusive of depository loss reserve as of the reporting period end. This appears as a contra asset on the balance sheet. Note, this field should be entered as a positive number.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Total Assets (\$)	The total value of the sum of all assets (current and non-current).	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Financing Capital (\$)	All capital either currently available or currently in use for financing activities. <i>Note: This data point includes "Available Financing Capital" and therefore should be equal to or greater than the value entered for "Available Financing Capital (\$)" below.</i>	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Available Financing Capital (\$)	Assets that can be used for lending and Equity Investments that have not already been committed, disbursed, or restricted for other purposes.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____

Table D – Applicant Financial Data				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Liabilities						
Current Liabilities (\$)	The total value of debts, obligations and payables due within 12 months. Current liabilities include, but are not limited to, short-term debt, accounts payable, accrued liabilities and other debts.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Liabilities (\$)	The total value of short-term and long-term outstanding debts, obligations, and payables.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Net Assets (Net Worth)						
Unrestricted Net Assets (\$)	The portion of Net Assets that is neither permanently restricted nor temporarily restricted by donor-imposed stipulations. Board designated unrestricted net assets should be considered Unrestricted Net Assets for the purposes of this Application.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Net Assets (\$)	Equal to Total Assets minus Total Liabilities as reported in an organization's balance sheet. Credit Unions and Bank Applicants: Enter "0" and complete Net Worth (Credit Unions) or Tier 1 Capital (Banks) as appropriate.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Net Worth (Credit Union Applicants Only) (\$)	As defined by the appropriate federal or state regulating agency.	Currency	<i>Credit Union Applicants</i>	\$_____	\$_____	\$_____
Tier 1 Capital (Bank Applicants Only) (\$)	In general, this term is used by financial institution regulators to assess capital adequacy and may include common Equity, noncumulative perpetual preferred stock, minority interests in consolidated Subsidiaries, less goodwill and other ineligible, intangible assets.	Currency	<i>Bank Applicants</i>	\$_____	\$_____	\$_____
Revenue and Expenses						
Interest Revenue (\$)	A financial measure calculated as the sum of money the institution earns in interest on its assets (commercial loans, personal mortgages, etc.). This figure is calculated by adding up the amount of interest earned on assets.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Fee/Rental Revenue (\$)	Revenue generated from fees collected for services that are associated with an organization's mission. If the organization earns	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____

Table D – Applicant Financial Data				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
	revenue from the rental of real property, include that amount here as well.					
Earned Revenue (\$)	Revenue generated by assets and activities, excluding grants and contributions.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Operating Revenue (\$)	Revenue generated by assets and activities, including grants and contributions.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Government Grants (\$)	Financial assistance provided by Federal, State and local agencies to carry out a public purpose authorized by law, not including subsidies, Loans, Loan Guarantees, or insurance.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Revenue (\$)	The total value of revenue from all sources within the current operating cycle.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Interest Expense (\$)	The cost incurred by an entity for borrowed funds. It is essentially calculated as the interest rate times the outstanding principal amount of the debt.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Operating Expense (\$)	Expenses related to everyday business operations, such as staff salaries, professional fees, and any other expenses directly related to the organization’s business operations.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Non-cash Expenses (\$)	Non-cash expenses are “paper” expenses and do not involve an outflow of cash. Such non-cash expenses include depreciation expense and allowance for loan and lease losses expense on the income statement.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Expenses (\$)	The total value of all operational and non-operational expenses (including Interest, financing cost, depreciation, amortization, and loan loss provision) incurred during the current reporting period, not including provision for income tax.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____

Table E

The data entered in items for the “On-Balance Sheet” data fields in Table E must be for the loan/investment portfolio maintained on the balance sheet of the Applicant entity. If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it should provide data on the loan/investment portfolio maintained on the balance sheet of its Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award. When entering data, ensure that the

Financial Data 3 column contains financial data for the most recently completed fiscal year. Data for the middle year should be entered in the Financial Data 2 column. Data for the least recent year should be entered in the Financial Data 1 column.

AMIS Note: This table is not required for Affordable Housing Developer/Manager Applicants and will not appear in the AMIS Application for these Applicants.

Table E – Portfolio				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Loan and Investment Portfolio						
Total On-Balance Sheet Loan Portfolio (\$)	The gross dollar amount (\$) of loans receivable as reported in an organization’s statement of financial condition or balance sheet. Gross loans receivable are the principal amount of loans receivable held by an organization that represents the amount still owed to the organization by its borrowers without giving effect to any allowance for the collectability thereof (i.e. before loan loss reserves are calculated).	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Total On-Balance Sheet Loan Portfolio (#)	The total number (#) of loans receivable as reported in an organization’s statement of financial condition or balance sheet.	Numeric	<i>Financing Entity</i>	_____	_____	_____
Commitments (\$)	The total dollar amount (\$) of loan or Equity Investment commitments made by an organization to borrowers or investees that have not yet been disbursed, but for which the organization has reserved cash, cash equivalents, or other assets to fund at a later date (e.g., a loan that is closed but not yet disbursed, a loan that has been provisionally approved but will not be closed or disbursed until a borrower meets certain terms and conditions; a loan that has been approved by a loan committee but not yet closed).	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Commitments (#)	The number (#) of loan or Equity Investment commitments.	Numeric	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Total Charge-offs (\$)	The dollar amount (\$) of a receivable, primarily a loan, that has been determined to be a loss or non-recoverable during the repayment cycle and that has been taken off the balance sheet as a loss during the reporting period. A direct reduction of the carrying amount of a financial asset measured at amortized cost resulting from the inability to collect the asset. A financial asset is considered uncollectible if the entity has no reasonable expectation of recovery.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____

Table E – Portfolio				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Total Charge-offs (#)	The total number (#) of receivables, primarily loans, that have been determined to be a loss or non-recoverable during the repayment cycle and that have been taken off the balance sheet as a loss during the reporting period.	Numeric	<i>Financing Entity</i>	_____ –	_____	_____
Troubled Debt Restructuring (\$)	The total dollar amount (\$) of all debt restructured during the reporting period by a creditor for economic or legal reasons related to the debtor’s financial difficulties and/or inability to pay and perform as agreed.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Troubled Debt Restructuring (#)	The total number (#) debt instruments restructured during the reporting period by a creditor for economic or legal reasons related to the debtor’s financial difficulties and/or inability to pay and perform as agreed.	Numeric	<i>Financing Entity</i>	_____	_____ –	_____
Recoveries (\$)	The total dollar amount (\$) of all gross recoveries on charged-off loans, less any related expenses, collected during the current reporting period.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Recoveries (#)	The total number (#) of loans with gross recoveries collected during the current reporting period.	Numeric	<i>Financing Entity</i>	_____ –	_____	_____
Loans 90 Days (or more) Past Due (\$)	The total dollar amount (\$) amount of all loans 90 or more days past due. Loans should be considered past due if any part of the payment is past due.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Loans 90 Days (or more) Past Due (#)	The total number (#) of loans 90 or more days past due. Loans should be considered past due if any part of the payment is past due.	Numeric	<i>Financing Entity</i>	_____ –	_____	_____
Loans Delinquent 61 to 89 days (\$)	The total dollar amount (\$) amount of all loans 61 to 89 days past due. Loans should be considered past due if any part of the payment is past due.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Loans Delinquent 61 to 89 days (#)	The total number (#) of all loans 61 to 89 days past due. Loans should be considered past due if any part of the payment is past due.	Numeric	<i>Financing Entity</i>	_____ –	_____	_____
Total Equity Investments Portfolio (\$)	The total dollar amount (\$) of Equity Investments held by an organization in portfolio companies in which it owns stock or other forms of ownership interest. Total Equity Investment portfolio should reflect the valuation of the organization’s interests after making adjustments for any investment gains or losses.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____

Table E – Portfolio				Responses (by Fiscal Year)		
AMIS Field Name	Notes/Guidance	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Total Equity Investments Portfolio (#)	The total number (#) of Equity Investments held by an organization in portfolio companies in which it owns stock or other forms of ownership interest.	Numeric	<i>Financing Entity</i>	\$_____	\$_____	\$_____

Appendix 7: AMIS Application Attachments

The following documents must be submitted as attachments as part of your organization’s AMIS Application. Please note that different Applicant types have different required attachments. Be sure to attach all required documents for your Applicant type or AMIS may prevent you from submitting the Application.

AMIS APPLICATION ATTACHMENTS	
<p>Audited Financial Statements (most recently completed 2 fiscal years as of the date of the NOFA)</p> <ul style="list-style-type: none"> • Data in the audited financial statements should correspond with the data entered in Tables D and E. • If the Applicant is a Certified CDFI Depository Institution, it may submit call reports. If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it must submit call reports for the Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award. • If the Applicant is unable to submit its two most recently completed fiscal years of audited financial statements, its Application will be deemed incomplete and ineligible. 	Required for All Applicants
<p>Any management letter related to the audited financial statements for the two most recently completed fiscal years as of the date of the NOFA</p>	Required for all Applicants
<p>State charter, articles of incorporation, or other establishing documents designating that the Applicant is a Nonprofit or not-for-profit entity under the laws of the organization’s State of formation</p>	Required only for Applicants that are <u>not</u> Certified CDFIs
<p>A certification or determination letter demonstrating tax-exempt status from the IRS³</p>	Required only for Applicants that are <u>not</u> Certified CDFIs
<p>Articles of incorporation, by-laws or other establishing document demonstrating the Applicant has a principal purpose of managing or developing affordable housing</p>	Required only for Applicants that are <u>not</u> Certified CDFIs

³ For Applicants that are governmental instrumentalities only, and as long as all other eligibility requirements are met, the Applicant must submit a legal opinion from counsel, in form and substance acceptable to the CDFI Fund, opining that the Applicant is exempt from Federal income tax, if the Applicant does not otherwise have such determination in a document from the IRS.

Appendix 8: Forms and Certifications

All CMF Applicants must complete the Environmental Review Form and Assurances and Certifications as part of their AMIS online application submission. Any Applicant that is a 501(c)(4) must complete the 501(c)(4) form as part of their AMIS online Application submission.

Environmental Review Form

TIP: This form must be completed in AMIS by all Applicants. It is available on the AMIS Application under the Forms and Certifications Appendix. Note, by selecting “No” for the questions, the Applicant indicates that it does not have any projects that may require environmental review.

The CDFI Fund’s environmental review requirements are set forth in 12 CFR Part 1815. The Applicant should review such regulations carefully before completing this section. In order to assure compliance with those regulations and other requirements related to the environment, the Applicant shall provide the following information:

Environmental Review Form	YES	NO
1. Are there any actions proposed in the Application that do not constitute a “categorical exclusion” as defined in 12 CFR 1815.110? If YES, would any of these actions normally require an environmental impact statement (see 12 CFR 1815.108)?		
2. Are there any activities proposed in the Application that involve:		
1. Historical or archaeological sites listed on the National Register of Historic Places, or that may be eligible for such listing?		
2. Wilderness areas designated or proposed under the Wilderness Act?		
3. Wild or scenic rivers proposed or listed under the Wild and Scenic Rivers Act?		
4. Critical habitats of endangered or threatened species?		
5. Natural landmarks listed on the National Registry of Natural Landmarks?		
6. Coastal barrier resource systems?		
7. Coastal Zone Management Areas?		
8. Sole Source Aquifer Recharge Areas designated by EPA?		
9. Wetlands?		
10. Flood plains?		
11. Prime and unique farmland?		
12. Properties listed or under consideration for listing on the Environmental Protection Agency’s List of Violating Facilities?		

If YES to any of the above questions, attach a detailed description of each action, clearly identifying the category in which the action falls.

Notification
<p>As stated in 12 CFR 1815.105, if the CDFI Fund determines that the Application proposes actions which require an environmental assessment or an environmental impact statement, any approval and funding of the Application will be contingent upon:</p> <ol style="list-style-type: none"> 1. The Applicant supplying to the CDFI Fund all information necessary for the CDFI Fund to perform or have performed any required environmental review; 2. The Applicant not using any CDFI Fund Financial Assistance to perform any of the proposed actions in the Application requiring an environmental review until approval is received from the CDFI Fund; and 3. The outcome of the required environmental review. <p>In addition, as stated in 12 CFR 1815.106, if the CDFI Fund determines that an Application, or any part thereof, is not sufficiently definite to perform a meaningful environmental review prior to approval of the Application, final approval and</p>

Notification

funding of the Application shall require supplemental environmental review prior to the taking of any action directly using CDFI Fund Financial Assistance for any action that is not a categorical exclusion.

Assurances and Certifications

AMIS TIP: In addition to signing the SF-424, an Applicant must indicate “Yes” that it is certifying the Assurances and Certifications in AMIS. It will do this under the area titled “Assurances and Certifications Form” on the Application main page in AMIS.

By signing the certification on the SF-424, the Applicant is certifying the Assurances and Certifications listed below. Certain Assurances and Certifications may not be applicable to the Applicant. An Applicant may not modify any of the Assurances and Certifications.

STANDARD FORM 424B: ASSURANCES – NON-CONSTRUCTION PROGRAMS

As the duly authorized representative of the Applicant, I certify that the Applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management, and completion of the project described in this Application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work (activities in Application) within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of Ohm’s Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L.88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C.1681-1683, 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C.794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C.6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L.91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C.3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which Application for Federal assistance is

- being made; and (j) the requirements of any other nondiscrimination statutes which may apply to the Application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
 8. Will comply with the provisions of the Hatch Act (5 U.S.C.1501-1508 & 7324-7328), which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. 276a to 276a-7), the Copeland Act (40 U.S.C. 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for federally assisted construction sub agreements.
 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L.91-190) and Executive Order 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. 1451et seq.); (f) conformity of Federal actions to State Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L.93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L.93-205).
 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or sub-awards under the award.

A. ADDITIONAL CERTIFICATIONS

In addition to the assurances and certifications provided by the Applicant pursuant to OMB Standard Form 424, the Applicant hereby assures and certifies that:

1. It is duly organized and validly existing under the laws of the jurisdiction in which it was incorporated or otherwise established, and is (or within 30 days will be) authorized to do business in any jurisdiction in which it proposes to undertake activities specified in this Application;
2. Its Board of Directors (or similar governing body) has by proper resolution or similar action authorized the filing of this Application, including all understandings and assurances contained herein, and directed and authorized the person identified as the authorized representative of the Applicant to act in connection with this Application and to provide such additional information as may be required;
3. It will comply with all applicable requirements of the Community Development Banking and Financial Institutions Act of 1994 (the Act) [12 U.S.C. 4701 et seq.], regulations implementing the Act and all other applicable Department of the Treasury regulations and implementing procedures (and any regulations or procedures which are later promulgated to supplement or replace them);
4. It will comply, as applicable and appropriate, with the requirements of 2 C.F.R. 200 and any regulations and circulars which are later promulgated to supplement or replace them, including standards for fund control and accountability;
5. It 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 Application or any related document, correspondence or communication. (The Applicant and its authorized representative should be 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); and
6. It has not had proceedings instituted against it in, by, or before any court, governmental agency, or administrative body, and a final determination made within the last 3 years as of the date of the NOFA indicating that the Applicant has violated any of the following laws: Title VI of the Civil Rights Act of 1964, as amended (42 U.S.C.2000d); Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); the Age Discrimination Act of 1975 (42 U.S.C. 6101-6107); Title VIII of the Civil Rights Act of 1968, as amended (42 U.S.C. 3601 et seq.); and Executive Order 13166, Improving Access to Services for Persons with Limited English Proficiency.
7. The information in this Application, and in these assurances and certifications in support of the Application, is true and correct to the best of the Applicant's knowledge and belief and the filing of this Application has been duly authorized.

B. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS – PRIMARY COVERED TRANSACTIONS: INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this Application, the prospective primary participant (the Applicant) is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in the denial of participation in this covered transaction. The prospective Applicant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the CDFI Fund's determination whether to enter into this transaction (approval and funding of the Application). However, failure of the Applicant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. This certification is a material representation of fact upon which reliance is placed when the CDFI Fund determines to enter into this transaction. If it is later determined that the Applicant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the CDFI Fund may terminate this transaction for cause or default.

4. The Applicant shall provide immediate written notice to the CDFI Fund if at any time the Applicant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. 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 clause (certification), have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the CDFI Fund for assistance in obtaining a copy of those regulations (31 C.F.R. part 19).
6. The Applicant agrees by submitting this Application that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the CDFI Fund.
7. The Applicant further agrees by submitting this Application that it will include the clause 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 C.F.R. part 19, Appendix B).
8. 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 debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. 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 No Procurement List.
9. 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 required by this clause. 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.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is 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 this transaction for cause or default.

C. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS – PRIMARY COVERED TRANSACTIONS

1. The prospective primary participant (the Applicant) certifies to the best of its knowledge and belief, that it and its principals:
 - a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - b) have not within a three-year period preceding this Application been convicted of or had a civil judgment rendered against them for 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; 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;
 - 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 paragraph (1)(b) of this certification; and
 - d) Have not within a three-year period preceding this Application had one or more public transactions (Federal, State or local) terminated for cause or default.
2. Where the Applicant is unable to certify to any of the statements in this certification, such Applicant shall attach an explanation to this proposal.

D. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

1. The Applicant certifies that it will provide a drug-free workplace by:
 - a) publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employee for violations of such prohibition;
 - b) establishing a drug-free awareness program to inform employees about:
 - (i) the dangers of drug abuse in the workplace;
 - (ii) the Applicant's policy of maintaining a drug-free workplace;
 - (iii) any available drug counseling, rehabilitation, and employee assistance program;
 - (iv) the penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
 - c) making it a requirement that each employee to be engaged in the performance of the award be given a copy of the statement required by subparagraph (a);
 - d) notifying the employee in the statement required by subparagraph (a) that, as a condition of employment in such grant, the employee will:
 - (i) abide by the terms of the statement; and
 - (ii) notify the employer of any criminal drug use statute conviction for a violation occurring in the workplace no later than five calendar days after such conviction;
 - e) notifying the granting agency in writing, within ten calendar days after receiving notice of a conviction under subparagraph (d) (ii) from an employee or otherwise receiving actual notice of such conviction;
 - f) taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(ii), with respect to any employee who is so convicted:
 - (i) taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (ii) requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency; and
 - g) making a good faith effort to continue to maintain a drug-free workplace through implementation of subparagraphs (a), (b), (c), (d), (e), and (f).
2. The Applicant may insert in the space provided below the site(s) for the performance of work (activities carried out by the Applicant) to be done in connection with the award (Place of Performance (Street Address, City, County, State and zip Code)): Not Applicable.

E. CERTIFICATION REGARDING LOBBYING

1. The Applicant certifies, to the best of its knowledge and belief, that:
 - (i) No Federal appropriated funds have been paid or will be paid, by or on behalf of the Applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;
 - (ii) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Application, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying" in accordance with its instructions; and

- (iii) The Applicant shall require that the language of this certification be included in the award documents for all sub-awards of all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.
- 2. This certification is a material representation of fact upon which reliance is placed when this transaction is made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

501(C)(4) Questionnaire

AMIS TIP: An Applicant must only complete this form in AMIS if it is recognized as a 501(c)(4) entity. No other Applicants should complete this form.

This questionnaire is necessary for the CDFI Fund to determine whether an Applicant with a 501(c)(4) designation from the IRS is eligible to receive an award from the Fund (see 2 U.S.C. 1601, et al.). Please read all definitions before responding to the questions and continue to refer to such definitions in responding to this questionnaire. If the answer to any question is yes, please describe in detail on a separate sheet(s) of paper the facts and circumstances, including: subject matter; date(s); names and titles of all individuals and their employers and their organizations. The CDFI Fund reserves the right to seek follow-up responses from an Applicant. Failure to complete this questionnaire and, if applicable, respond timely to follow-up questions, will delay the CDFI Fund's processing of the Application, and may result in the disqualification of the Application from further consideration. After submitting responses to this questionnaire, the Applicant is under a continuing obligation to: (1) supplement its responses upon a change in circumstances; and (2) revise or modify its responses within 10 business days of having actual or constructive knowledge that the responses previously submitted and certified are no longer complete, accurate, or true. You may contact the CDFI Fund's Office of Legal Counsel at (202) 653-0300 if you have any questions about this form.

Scope: The scope of this questionnaire is limited to activities on or after January 1, 1996.

QUESTIONS

1. Has any officer, employee, director, partner, proprietor, or board member contacted a Covered Executive Branch Official ⁱⁱ with regard to the formulation, modification, or adoption of Federal legislation (including legislative proposals)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Has any officer, employee, director, partner, proprietor, or board member contacted a Covered Executive Branch Official with regard to the formulation, modification, or adoption of a Federal rule, regulation, Executive Order, or any other program, policy, or position of the United States Government?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Has any officer, employee, director, partner, proprietor, or Board member contacted a Covered Executive Branch Official with regard to the administration or execution of a Federal program or policy (including the negotiation, award, or administration or a Federal contract, grant, loan, permit, or license)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Has any officer, employee, director, partner, proprietor, or Board member contacted a Covered Executive Branch Official with regard to the nomination or confirmation of a person for a position subject to confirmation by the United States Senate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Has any officer, employee, director, partner, proprietor, or Board member engaged in efforts supporting and coordinating the contact by others of a Covered Executive Branch Official including preparation and planning activities, research and other background work that was intended, at the time performed, for a purpose described in Questions 1-4?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Has any officer, employee, director, partner, proprietor, or Board member contacted a Covered Legislative Branch Official ⁱⁱⁱ with regard to the formulation, modification, or adoption of Federal legislation (including legislative proposals)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Has any officer, employee, director, partner, proprietor, or Board member contacted a Covered Legislative Branch Official with regard to the formulation, modification, or adoption of a Federal rule, regulation, Executive Order, or any other program, policy, or position of the United States Government?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Has any officer employee, director, partner, proprietor, or Board member contacted a Covered Legislative Branch Official with regard to the administration or execution of a Federal program or policy (including the negotiation, award, or administration of a Federal contract, grant, loan, permit, or license)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Has any officer, employee, director, partner, proprietor, or Board member contacted a Covered Legislative Branch Official with regard to the nomination or confirmation of a person for a position subject to confirmation by the United States Senate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Has any officer, employee, director, partner, proprietor, or Board member engaged in efforts supporting and coordinating the contact by others of a Covered Legislative Branch Official including preparation and planning activities, research and other background work that was intended, at the time performed, for a purpose described in Questions 6-9?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SIGNATURE

Signing the certification on SF-424 certifies that the answers to the 501(c)(4) Questionnaire and the written explanations attached thereto are true, accurate, and complete to the best of its information, knowledge, and belief and that, since January 1, 1996, the Applicant has not engaged in Lobbying Activities as defined in Section 3 (7) of the Lobbying Disclosure Act of 1995, P.L. 104-65, as amended.

ⁱ “Contacted” (or “contacted”) means any oral or written communication, including an electronic communication.

ⁱⁱ “Covered Executive Branch Official” means: (a) the President; (b) the Vice President; (c) any officer or employee, or any other individual functioning in the capacity of such an officer or employee, in the Executive Office of the President; (d) any officer or employee serving in an Executive Level I-V position, a “Schedule C” position, or any official in a Senior Executive Service position; (e) any member of the uniformed services serving at grade O-7 or above; or (f) any officer or employee serving in a position of a confidential, policy-determining, policy-making, or policy-advocating character described in section 7511(b)(2) of title 5, United States Code.

ⁱⁱⁱ “Covered Legislative Branch Official” means: (a) a member of Congress; (b) an elected officer of either House of Congress; (c) any employee of the House or Senate, including employees of Members, committees, leadership and working groups or caucuses organized to provide legislative services or other assistance to Members of Congress; and (d) any other legislative branch employee serving in a position described under section 109(13) of the Ethics in Government Act of 1978 (5 U.S.C. App.).