NMTC Allocation Application

OMB Approval No. 1559-0016

Paperwork Reduction Act Notice.

This submission requirements package is provided to A*pplicants* to apply for New Markets Tax Credits (NMTC) allocation authority through the NMTC Program. *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 277 hours per *Applicant*. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Program Manager, NMTC Program, Department of the Treasury, Community Development Financial Institutions Fund, 1500 Pennsylvania Avenue, Washington, D.C. 20220.

Table of Contents

*Applicant* Instructions ii

Assurances and Certifications v

*Applicant* Information 1

Signature Page 9

Part I: Business Strategy 10

Part II: Community Outcomes 25

Part III: Management Capacity 32

Part IV: Capitalization Strategy 39

Part V: Information Regarding Previous Awards 45

Exhibit A: Projected Activities 49

Exhibit B: Track Record of Activities 53

Exhibit C: Staff and Board Qualifications 58

Exhibit D: Asset Management and Income & Operating Expenses 61

Exhibit E: Investor Strategy 64

Glossary of Terms 68

# *Applicant* Instructions

* Read the relevant New Markets Tax Credit (NMTC) Program publications prior to completing the *Allocation Application*. For information on the calendar year (CY) **XXXX** NMTC Program allocation round (this Round), read the *Notice of Allocation Availability (NOAA)* and the *Community Development Financial Institutions* Fund’s (the CDFI Fund’s) document titled “*NMTC Allocation Application* Q&A Document.” For tax related information on the NMTC Program, read the final regulations issued by the Internal Revenue Service (26 CFR 1.45D-1) and related guidance. For information on *Community Development Entity (CDE)* certification, read the CDFI Fund’s document titled “*CDE* Certification Q&A Document.” All of these documents are available on the CDFI Fund’s website at [www.cdfifund.gov](http://www.cdfifund.gov). The CDFI Fund’s Q&A Document is periodically updated, so continue to check the website on a regular basis.
* Consult the Glossary of Terms when completing the *Allocation Application*. All terms and phrases that are in *Capitalized Italics* in the *Allocation Application* are defined in the Glossary of Terms.
* *A Subsidiary CDE***cannot submit an *Allocation Application.***
* If the *Applicant* has not been certified as a *CDE* by the CDFI Fund, it must submit its *CDE* *Certification Application* through the CDFI Fund’s Awards Management Information System (AMIS) **on or before XX/XX/XXXX at 5:00pm Eastern Time.** The *CDE* *Certification Application* is available on the CDFI Fund’s website at [www.cdfifund.gov](http://www.cdfifund.gov). Organizations whose *CDE Certification Applications* are not submitted in AMIS in a timely fashion will be considered ineligible for *NMTC Allocations* in this Round of the Program.

| **TIP:** The CDFI Fund cannot process a *CDE Certification Application* unless each entity seeking certification as a *CDE*: (a) is a legal entity, and is a domestic corporation or partnership for federal tax purposes; and (b) has a valid and distinct Employer Identification Number (EIN). *Applicants* or *Subsidiary Applicants* that have applied for, but not yet received, an EIN as of the date of the *Authorized Representative’s* signature on the *Allocation Application* will not be accepted. For more information on EINs and applying for an EIN, refer to the *CDE* Certification Q&A Document on the CDFI Fund’s website at [www.cdfifund.gov](http://www.cdfifund.gov). |
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* Carefully read the *Allocation Application* and the *NOAA* to determine whether the *Applicant* has the requisite eligibility, capacity, experience, and skills to compete for and administer an *NMTC Allocation,* execute the proposed business strategy and achieve the proposed community outcomes. Be sure also to review carefully the Assurances and Certifications provided in this document. By signing this *Allocation Application*, the *Applicant* is certifying to the truth, completeness, and correctness of this *Allocation Application*, including the items listed in the Assurances and Certifications.
* If the CDFI Fund determines that any portion of the *Allocation Application* is incorrect in any material respect, the CDFI Fund reserves the right, in its sole discretion, to reject the *Allocation Application*.
* As the *Applicant* prepares the *Allocation Application*, assume that the CDFI Fund’s *Allocation Application* reviewers are learning about the organization for the first time, even if the organization has previously submitted an application to the CDFI Fund under this or any of the other CDFI Fund programs.
* A start-up organization that does not have a track record of raising capital or offering products and services may reference the activities of its *Controlling Entity* in certain areas of the *Allocation Application*. However, a start-up may not reference the activities of individuals, including *Principal*s or board members, to demonstrate such track record. The activities and experiences of individuals may be addressed in the Management Capacity section.
* The term *Applicant* refers to the *CDE* applying for an *NMTC Allocation* as well as any other *Subsidiary* entities, whether already formed or in the process of formation, which may receive a transfer of all or a part of an *NMTC Allocation* from the *Applicant*. To the extent practicable, the *Applicant* may respond to each question in this *Allocation Application* collectively on behalf of all such entities. If responses vary for separate entities, be sure to clearly articulate which entity is being referenced in the narrative and tables.
* Be sure to keep each narrative brief: Please note that each narrative text response has a maximum character length, which, depending on font size, will range from about 1/3 of a page to about 2 pages). These character maximums include spaces, punctuation, and special characters. All text that exceeds the maximum set for a narrative text response (which is noted at the end of each question) will be truncated at the character limit.

**DO NOT SUBMIT THIS ALLOCATION APPLICATION**

* Use the online application: This version of the *Allocation Application* is a read-only version. Any organization interested in applying for an *NMTC Allocation* from the CDFI Fund is expected to submit an online *Allocation Application*. *Applicants* may access the online *Allocation Application* as soon as it is made available by logging in through AMIS on the CDFI Fund's website at [www.cdfifund.gov](http://www.cdfifund.gov/). *Applicants* who have not already done so are encouraged to register a user account through AMIS as soon as possible. Please contact the CDFI Fund's IT Help Desk at (202) 653-0422 or ithelpdesk@cdfi.treas.gov if you are having problems registering under AMIS. **The online *Allocation Application* must be received no later than 5:00 pm, Eastern Time, on XX/XX/XXXX.** Complete instructions regarding the electronic submission requirements will be posted on the CDFI Fund's website at [www.cdfifund.gov](http://www.cdfifund.gov/) when the online *Allocation Application* is made available.
* Required Investor Letters: *Applicants* completing Table E3 are required to submit *Commitment* letters or letters of interest from investors per the TIPs for Exhibit E. Please upload these documents electronically through the *Applicant*’s AMIS account. In doing so, an *Applicant* is also validating the following information: name of investor, dollar amount of equity sought or obtained (or dollar amount of debt, in the case of an investor partnership using debt capital), status of the investment request (e.g., funds received, *Commitment* of funds, *Letter of Interest/Intent*). For examples of acceptable documentation for the required information, refer to the CDFI Fund’s *NMTC Allocation Application* Q&A Document. *Applicants* that do not complete Table E3 should not submit investor letters.
* Submitting Signature Pages and Required Documents: All *Applicants* will be required to upload signature pages and other documents (Assurances and Certifications narrative (if applicable), *investor* letters (if applicable) and organizational charts) electronically through their AMIS accounts. An *Applicant* will be instructed on how to upload the aforementioned signature page and other documents (i.e., attachments) at the time the *Applicant* submits its *Allocation Application*. **All attachments must be uploaded by 11:59 pm, Eastern Time, on XX/XX/XXXX.** If the attachments are not received by the applicable deadline, they will not be given consideration as part of the review process. **Only those attachments requested by the CDFI Fund will be considered as part of the review process. Furthermore, the CDFI Fund will not accept any revisions or amendments to an application or the attachments once they have been submitted for review.**
* Part V - Information Regarding Previous Awards: All *Applicants* are required to complete Part V of the *Allocation Application*. *Applicants* that have not received previous *NMTC Allocations* or that have not received other CDFI Fund Awards (i.e. FA-TA, CMF, BEA) will simply need to respond “No” to Questions 41 and 42 and not respond to Question 43. *Applicants* that have not made *QEIs* into previous *Allocatees* or assumed *Control* of previous *Allocatees* should respond “No” to Question 44. Please note that Part V is not scored as part of the Phase I review process, and is only considered if the *Applicant* is ranked highly enough to proceed to Phase II of the application review process.
* Each *Applicant* should expect that if it receives an *NMTC Allocation*, information provided in this *Allocation Application* will be used to determine the terms of an *Allocation Agreement*.
* The contents of this *Allocation Application* are consistent with the Internal Revenue Code Section 45D (the Code) and the *NMTC Program Income Tax Regulations*. In the event of any inconsistency between the contents of this *Allocation Application* and the Code or the *NMTC Program Income Tax Regulations*, the provisions of the Code and the *NMTC Program Income Tax Regulations* shall govern.

| **TIP:** If you have programmatic questions about the contents of this *Allocation Application*, you may contact the CDFI Fund by mail to Program Manager, NMTC Program, Department of the Treasury, Community Development Financial Institutions Fund, 1500 Pennsylvania Avenue, Washington, D.C. 20220, by e-mail at cdfihelp@cdfi.treas.gov, by telephone at (202) 653-0421, by facsimile at (202) 508-0084, or visit the CDFI Fund’s website at [www.cdfifund.gov](http://www.cdfifund.gov). If you require information technology assistance in using the online *Allocation Application*, please call (202) 653-0422 or e-mail ithelpdesk@cdfi.treas.gov. The CDFI Fund will provide programmatic and information technology support related to the *Allocation Application* between 9:00 am and 5:00 pm, Eastern Time, through **XX/XX/XXXX**. **The CDFI Fund will not respond to phone calls or e-mails concerning the *Allocation Application* that are received after 5:00 pm, Eastern Time, on XX/XX/XXXX, until after the *Allocation Application* deadline of XX/XX/XXXX.** |
| --- |

# Assurances and Certifications

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

1. **General Certifications**

With regard to the General Certifications (below):

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

Please select “True” or “False” to each certification. By selecting “True” the *Applicant* is certifying that the corresponding statement is true.  By selecting “False” the *Applicant* is certifying that the corresponding statement is not true.

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

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

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* has the legal authority to apply for an *NMTC Allocation*, and the institutional, managerial, and financial capability to ensure proper use of such allocation as described in this *Allocation Application* and in accordance with IRC §45D and the *NMTC Program Income Tax Regulations*, and all applicable Department of the Treasury regulations and guidance documents.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant’s* governing body (e.g., Board of Directors) has by proper resolution or similar action authorized the signing and filing of this *Allocation Application*, including all understandings and assurances contained herein, and directed and authorized me as the *Authorized Representative* of the *Applicant* to act in connection with this *Allocation Application* and to provide such additional information as may be required.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* will give the Department of the Treasury, the Comptroller General of the United States, and if appropriate, the State of the *Applicant’s* incorporation, through any *Authorized Representative*, access to and the right to examine all records, books, papers, or documents related to the provision of an *NMTC Allocation*; and will establish a proper accounting system in accordance with generally accepted accounting standards; Office of Management and Budget (OMB) regulations, guidelines, and circulars; and Department of the Treasury regulations and directives.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* will establish safeguards to prohibit employees from using their positions for purposes that constitute or present personal or organizational conflicts of interest, or personal gain, either real or perceived.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* will comply with all applicable requirements of the Community Renewal Tax Relief Act of 2000 (26 U.S.C. 45D), and as amended, regulations implementing the NMTC Program and all other applicable Department of the Treasury regulations, guidance, and implementing procedures (and any regulations or procedures which are later promulgated to supplement or replace them).

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* will comply, as applicable and appropriate, with the requirements of OMB Circulars and any regulations and circulars which are later promulgated to supplement or replace them, including standards for fund control and accountability.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing the NMTC Program.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* has not knowingly and willfully made or used a document or writing containing any false, fictitious, or fraudulent statement or entry as part of this *Allocation Application* or any related document, correspondence, or communication. The *Applicant* and its *Authorized Representative* are aware that, under 18 U.S.C. 1001, whoever knowingly and willfully makes or uses such document or writing shall be fined or imprisoned for not more than five years, or both.

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The *Applicant* and its *Affiliates* have never filed for bankruptcy.

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The following entities are not federally regulated financial institutions currently under any *Enforcement Action* from any federal regulator.

 True False

 *Applicant* \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

 *Controlling Entity* \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

 *Affiliate* \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

* + - 1. Certifications for the *Controlling Entity:*
1. The *Controlling Entity* has not within a three-year period preceding the date of this *Allocation Application* been indicted, charged with or convicted of, or had a civil judgment rendered against it for commission of fraud or a criminal offense;

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. Certifications for the *Applicant:*
1. The *Applicant* has not within a three-year period preceding the date of this *Allocation Application* been convicted of or had a civil judgment rendered against it for commission of fraud or a criminal offense;

True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The following individuals or entities of the *Applicant*:
1. have not within a three-year period preceding the date of this Allocation Application been convicted of or had a civil judgment rendered against him/her for commission of fraud or a criminal offense.

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

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

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

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

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

* + - 1. Certifications for the *Applicant*:
1. The *Applicant* has not within a three-year period preceding the date of this *Allocation Application* been indicted for or charged with the commission of fraud or a criminal offense;

True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

 Applicant True\_\_\_\_\_\_ False\_\_\_\_\_\_

 Affiliate True\_\_\_\_\_\_ False\_\_\_\_\_\_

* + - 1. The following individuals or entities of the *Applicant*:
1. have not within a three-year period preceding the date of this *Allocation Application* been indicted for or charged with the commission of fraud or a criminal offense;

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

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

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

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

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

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

 True False

Officers \_\_\_\_\_ \_\_\_\_\_

Directors \_\_\_\_\_ \_\_\_\_\_

Majority Owners \_\_\_\_\_ \_\_\_\_\_

Key Employees \_\_\_\_\_ \_\_\_\_\_

* + - 1. The Applicant has never been delinquent on amounts due to the Internal Revenue Service or on any debts owed to Federal, State, or local government.

 True\_\_\_\_\_\_ False\_\_\_\_\_\_

**NOTE:** Where the *Applicant* is unable to answer “True” to one or more of the statements in items 10 through 17 of the General Certifications, the *Applicant* must submit a written explanation with this *Allocation Application* that clearly identifies the item number(s) and corresponding statement(s) it is unable to certify. The written explanation should also identify the applicable specific entity and/or individual by name. If the Applicant submits a written statement in response to items 12(c), 12(e), 13(c), 14(c) or 15(c), it should identify and summarize the litigation or regulatory matters typically disclosed in the applicable entity’s annual SEC filings for 2012 and 2013, 2014 and quarterly for 2015. Additionally, if the *Applicant* is unable to answer “True” to item 11, the *Applicant* must provide a copy of any regulatory enforcement orders that are currently in effect upon request by the CDFI Fund.

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

**With regard to the Certification Regarding Debarment, Suspension, and Other Responsibility Matters (below):**

* If the Applicant is unable to provide **any** of the Certifications in section B below; the *Applicant* must submit a **written explanation**. The CDFI Fund will consider the explanation provided and determine, in its sole discretion, whether the *Applicant* is eligible to apply for an *NMTC Allocation*.

* If the *Applicant* fails to furnish either the Certification or a written explanation, the *Applicant* is not eligible to apply for an *NMTC Allocation.*

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

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

*Applicant*  True\_\_\_\_\_\_ False\_\_\_\_\_\_

*Principals* True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

*Applicant* True\_\_\_\_\_\_ False\_\_\_\_\_\_

*Principals* True\_\_\_\_\_\_ False\_\_\_\_\_\_

1. 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;

*Applicant* True\_\_\_\_\_\_ False\_\_\_\_\_\_

*Principals* True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

*Applicant* True\_\_\_\_\_\_ False\_\_\_\_\_\_

*Principals* True\_\_\_\_\_\_ False\_\_\_\_\_\_

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

*Applicant* True\_\_\_\_\_\_ False\_\_\_\_\_\_

*Principals* True\_\_\_\_\_\_ False\_\_\_\_\_\_

**NOTE:** Where the *Applicant* is unable to certify to one or more of the statements above Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions, the *Applicant* must submit a written explanation with this *Allocation Application* thatclearly identifies the item number(s) and corresponding statement(s) it is unable to certify.

# *Applicant* Information

1. *Applicant NMTC Allocation* Request

Total dollar amount of *NMTC Allocation* requested in this *Allocation Application*: $\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Applicant* Information[[1]](#footnote-1):
2. *Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
3. *Applicant* Employer Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Structure of the *Applicant* (check all that apply):

|  |  |
| --- | --- |
| \_\_\_ For-profit | \_\_\_ Credit Union |
| \_\_\_ Non-profit | \_\_\_ Publicly Traded Company |
| *\_\_\_ Small Business Investment Company/Specialized Small Business Investment Company* | \_\_\_ Government-*Controlled* Entity |
| \_\_\_ Faith-Based Institution |
| \_\_\_ Tribal Entity |
| *\_\_\_ New Market Venture Capital Company* | \_\_\_ Thrift, Bank or Bank Holding Company |
| \_\_\_ Certified *CDFI*  | \_\_\_ Real Estate Development Company\_\_\_ Series of Funds  |

1. Is the *Applicant* *Minority-owned or Minority-controlled*? \_\_\_\_ Yes \_\_\_\_\_ No
2. If the *Applicant, or an Affiliate* (other than the *Controlling Entity*)*,* is a federally-regulated thrift, bank, bank holding company, or credit union, provide the name of the *Applicant’s*, or its *Affiliate’s,* primary federal regulator and FDIC/NCUA Certification Number.

*Applicant* Name of Primary Regulator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Applicant* Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Affiliate* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Affiliate* Name of Primary Regulator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Affiliate* Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Is the *Applicant* a domestic corporation or partnership for federal tax purposes?
(If the *Applicant* is not a domestic corporation or partnership for federal tax purposes, it is not eligible to apply for an *NMTC Allocation*):

|  |
| --- |
| \_\_\_\_ Domestic Corporation |
| \_\_\_\_ Domestic Partnership |

1. *Applicant’s* date of incorporation or formation (month/day/year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. *Applicant’s* total assets as of the date of this *Allocation Application*: $\_\_\_\_\_\_\_\_\_
3. *Applicant’s* fiscal year end (month/day) (update in AMIS): \_\_\_\_\_\_\_\_
4. Does the *Applicant* have any *Affiliates* that are applying for an *NMTC Allocation* in this Round? (check one): \_\_\_ Yes \_\_\_ No

| **TIP:** The answer to question 2(j) must be “No.” An *Applicant* and its *Affiliates* may collectively submit only one application for an *NMTC Allocation* under this Round of the NMTC Program. If separate *Allocation Applications* are received from multiple *Affiliated* entities, the CDFI Fund reserves the right to reject all such applications. Likewise*, Subsidiary CDEs* are ineligible to submit an *Allocation Application*. For the purposes of this requirement, in addition to assessing whether *Applicants* meet the definition of the term “*Affiliate*” found in the *Glossary of Terms* at the end of this *Allocation Application*, the CDFI Fund will consider, among other things: (i) whether different Applicants have the same individual(s), including the *Authorized Representative*, staff, board members and/or consultants, involved in day-to-day management, operations and/or investment responsibilities; (ii) whether *Applicants* have business strategies and/or proposed activities that are so similar or so closely related that, in fact or effect, may be viewed as a single entity; and/or (iii) whether the applications submitted by separate *Applicants* contain significant narrative, textual or other similarities such that they may, in fact or effect, be viewed as the substantially identical applications. In such cases, the CDFI Fund will reject all applications received from such entities. For more information regarding these requirements, please review the *NOAA* and *Allocation Application* Q&A Document on the CDFI Fund’s website at [www.cdfifund.gov](http://www.cdfifund.gov). If you have questions about whether two entities are *Affiliated*, you should contact the CDFI Fund within a week of the *NMTC Allocation Application* release date. |
| --- |

1. *Controlling Entity* Information:

Is the *Applicant* designating a *Controlling Entity*? \_\_\_\_ Yes \_\_\_\_\_ No

| **TIP:** A CDE may only designate **one** organization as a *Controlling Entity.* This entity must meet the definition of *Controlling Entity* set forth in the Glossary of Terms of this *Allocation Application*. Individuals cannot be deemed to be *Controlling Entities.* *Applicants* may use this *Controlling Entity* to assist in demonstrating an organizational track record and in completing the related exhibits. An *Applicant* may identify the parent organization or the company of its parent (i.e. “grandparent”) as its *Controlling Entity* to demonstrate an organizational track record, provided that the relationship between the “grandparent” and the *Applicant* conforms to the CDFI Fund’s definition of a *Controlling Entity*. Should the *Applicant* receive an *NMTC Allocation* in thisRound, the designated *Controlling Entity* **will need to continue in that capacity throughout the term of the *Allocation Agreement* and for any future *Allocation Agreements* with the CDFI Fund, should the *Applicant* apply and receive an allocation in a future round. Any *Applicant* that receives an *NMTC Allocation* in this Round must designate the same *Controlling Entity* as designated in this *Allocation Application* in any *Allocation Applications* for future rounds.** *Applicants* that received a *NMTC Allocation* in the CY2014 round or later rounds are expected to maintain the *Controlling Entity* stated in their Allocation Agreement in Question #3(a).Please see the Application Q&A for further guidance and information about exceptions to the above in the case of mergers, acquisitions, bankruptcy or similar legal actions the *Controlling Entity* may undertake.**TIP:** The *Controlling Entity* *Representative* is required to affirm, through submission of a signature page, that it is indeed the *Controlling Entity* of the *Applicant* and supports the *Applicant*’s *Allocation Application*.  |
| --- |

1. *Controlling Entity Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
2. *Controlling Entity* Employer Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. *Controlling Entity* Mailing Address (provide nine-digit zip code):

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1. Structure of the *Controlling Entity* (check all that apply):

|  |  |
| --- | --- |
| \_\_\_ For-profit  | \_\_\_ Credit Union |
| \_\_\_ Non-profit | \_\_\_ Publicly Traded Company |
| \_\_\_ *Small Business Investment Company/Specialized Small Business Investment Company* | \_\_\_ Government-*Controlled* Entity |
| \_\_\_ Faith-Based Institution |
| \_\_\_ Tribal Entity  |
| \_\_\_ *New Market Venture Capital Company* | \_\_\_ Thrift, Bank or Bank Holding Company |
| \_\_\_ Certified *CDFI*  | \_\_\_ Real Estate Development Company \_\_\_ Series of Funds |

1. Is the *Controlling Entity* *Minority-owned or* *Minority-controlled*? \_\_\_\_\_ Yes \_\_\_\_\_ No
2. If the *Controlling Entity* or an *Affiliate* is a federally-regulated thrift, bank, bank holding company, or credit union, provide the name of the *Controlling Entity’s* or *Affiliate’s* primary federal regulator and FDIC/NCUA Certification Number.

*Controlling Entity* Name of Primary Regulator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Controlling Entity* Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Affiliate* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Affiliate* Name of Primary Regulator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Affiliate* Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Total assets of *Controlling Entity*: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. *Applicant* Mailing Information:

Mailing address (provide nine-digit zip code):

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Address for overnight deliveries (if different from mailing address, include nine-digit zip code):

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| **TIP:** Representatives of the *Applicant* and *Controlling Entity* (if applicable), should not provide private, personal contact information in response to Question #5. Only official, public contact information should be provided. |
| --- |

1. *Applicant* and *Controlling Entity* Contact Information
2. *Applicant Authorized Representative* Information:

Name, title, and mailing address, if different from *Applicant*:

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| --- |
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|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number: |  |  Fax number: |  |
| E-mail address: |  |

1. *Controlling Entity* *Representative* Information:

 Name, title, and mailing address:

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| --- |
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|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number: |  |  Fax number: |  |
| E-mail address: |  |

1. *Application Contact Person* Information:

 Name, title, and mailing address, if different from *Applicant*:

|  |
| --- |
|  |
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|  |  |  |  |
| --- | --- | --- | --- |
| Telephone number: |  |  Fax number: |  |
| E-mail address: |  |

| **TIP:** In Question #5(c), the *Applicant* should provide contact information for the individual who the CDFI Fund should contact with questions related to the *Applicant*’s *NMTC Allocation Application*. It is recommended that the *Application* *Contact Person* listed is someone other than the *Applicant Authorized Representative.*  |
| --- |

1. *Public Contact Person* Information:

Name, title, and mailing address, if different from *Applicant*:

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| --- | --- | --- | --- |
| Telephone number: |  | Fax number: |  |
| E-mail address: |  |

1. *CDE* Certification Information:
2. Has the *Applicant* already been certified as a *CDE* by the CDFI Fund or submitted a *CDE Certification Application*?

\_\_\_ Yes, CDE Certification Control Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ No

*Subsidiary CDEs* are ineligible to submit *Allocation Application*s.

1. By the stated deadline in the *NOAA*, is the *Applicant* filing a service area amendment in connection with this application?

\_\_\_\_ Yes \_\_\_\_ No

| **TIP:** An *Applicant’s* *CDE Certification Application* must be submitted through AMIS **no later than 5:00 pm, Eastern Time, on XX/XX/XXXX** to be considered for an *NMTC Allocation* in this Round. The *CDE Certification Application* is available on the CDFI Fund’s website at [www.cdfifund.gov](http://www.cdfifund.gov). The CDFI Fund cannot process a *CDE Certification Application* unless each entity seeking certification as a *CDE*: a) is a legal entity and is a domestic corporation or partnership for federal tax purposes; and b) has a valid and distinct EIN. ***CDE* service area amendment requests will not be considered for purposes of this application unless filed by the deadline stated in this Round’s *NOAA*.** |
| --- |

1. Identify the type of service area that the *Applicant* will serve (check one). The service area identified here must be identical to the service area identified by the *Applicant* in its *CDE* *Certification Application* approved by the *CDFI* Fund:

|  |  |
| --- | --- |
|  | National service area |
|  | Multi-state service area |
|  | Statewide (or territory-wide) service area |
|  | Local service area (e.g., neighborhoods, cities, a county or contiguous counties, or metropolitan areas) within a state or territory |

| **TIP:** An *Applicant* serving a metropolitan area that crosses multiple states (e.g., the Washington, D.C. or Philadelphia metropolitan areas) should select “Multi-state service area.” **TIP:** If an *Applicant* would like to focus its investments in this *Allocation Application* on a subset of its certified service area, it may discuss this in the narrative response to Question #17. However, all *Applicants* must designate their entire certified service area (or if applicable, the entire service area for which certification or a service area amendment is pending) in response to Questions #7 and #8.  |
| --- |

1. Identify the specific state(s) or county(ies) that the *Applicant* will serve. *Applicants* with a national service area must identify at least one state and may identify up to six additional states for which they expect to receive the largest amount of projected activities:

|  |  |
| --- | --- |
| State(s): |  |
| County(ies): |  |
|  |  |

1. Estimate the percentage of activities, by dollar amount that will be directed to each of the following markets. The total percentage should add up to 100 percent of the *NMTC Allocation* amount.

|  |  |
| --- | --- |
|  | % Major urban areas (Counties in metropolitan area with a population equal to or greater than 1 million, including both central city and surrounding suburbs) |
|  |
|  | % Minor urban areas (Counties in metropolitan area with a population less than 1 million, including both central city and surrounding suburbs) |
|  |
|  | % *Non-metropolitan Counties*  |

1. Please indicate the *Applicant*’s predominant anticipated financing activity **(check only one)**:

|  |
| --- |
| \_\_\_\_ *Operating Business* financing |
| \_\_\_\_ Real Estate financing: (check only one accompanying sub-category) |
|  \_\_\_\_ Retail | \_\_\_\_ Office Space |
|  \_\_\_\_ Industrial/Manufacturing | \_\_\_\_ For-sale housing |
|  \_\_\_\_ Community Facilities | \_\_\_\_ Mixed-use (housing, commercial, or retail) |
|  \_\_\_\_ Other Real Estate Financing: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| \_\_\_\_ Financing of other *CDEs*\_\_\_\_ Loan purchase from other *CDEs*\_\_\_\_ *Financial Counseling and Other Services*  |

1. Executive Summary:
2. Provide a summary of the *Applicant’s* business strategy including the following: (Maximum Response Length: 5,000 characters)
* A brief summary of the *Applicant’s* service area, including the specific needs or problems that it intends to address with NMTCs.
* A brief summary of the types of projects and/or borrowers the *Applicant* will target and address why NMTCs are important for the identified projects and/or borrowers.
* A brief summary of the products that the *Applicant* will offer, including both financial products and technical assistance.
* A brief summary of how the NMTCs will enhance the *Applicant’s* product offerings.

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| **TIP**: Note that Question #11(a) is meant to be a brief summary of the *Applicant’s* overall business strategy, thus it is not necessary to provide a detailed discussion of items that will be specifically covered in detail in other parts of the Business Strategy section. *Applicants* may discuss the strategy of the *Controlling Entity* if one has been identified. |
| --- |

1. Provide a one or two sentence description of the types of investments the *Applicant* intends to make with the requested *NMTC Allocation*. *Applicants* will not be scored on this response. The information provided will be available on the CDFI Fund’s website to the public should the Applicant receive an *NMTC Allocation*. (Maximum Response Length: 500 Characters)

| **Sample:**XYZ CDE (XYZ) will use its *NMTC Allocation* to invest in commercial real estate and operating businesses that revitalize vacant properties and create living wage jobs in *Low-Income Communities* (*LIC*) that have experienced persistently high unemployment. The CDE intends to offer equity equivalent terms and conditions and senior debt. |
| --- |

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| **NOTE:** The CDFI Fund will supplement the information from Question #11(b) with responses to certain questions contained in the *Allocation Application*. This information will be shared with the general public via the CDFI Fund’s website if the *Applicant* is selected to receive an *NMTC Allocation*. For more on what information is included in this profile, please see the Application Q&A document.  |
| --- |

1. Estimate how long this *Allocation Application* form took to complete: \_\_\_\_\_\_\_\_ hours

| **TIP:** For the purpose of estimating hours, *Applicants* should focus only on the amount of time it took to complete the questions asked in this application. Other activities that are carried out in the normal course of business and are only indirectly related to the completion of this application (e.g., securing investor *Commitments*; developing a business strategy or marketing plan; etc.) should not be included in this estimation. **In the electronic on-line application form, you will not be able to answer this question until all other application questions are complete. You must answer this question in order to complete and submit the on-line application.** |
| --- |

# Signature Page

By signing this *Allocation Application*, the *Applicant* makes the Assurances and Certifications, set forth in the Assurances and Certifications (pages vi-xiii) of the *Allocation Application*, which Assurances and Certifications are made a part hereof and will continue in effect until the *Applicant* enters into an *Allocation Agreement* with the CDFI Fund.

I hereby acknowledge that all information contained in this application and any attachments or supplements thereto will be subject to disclosure pursuant to the Freedom of Information Act (FOIA) 5 USC 552, et seq.

I hereby certify that all of the information that the *Applicant* has provided in this *Allocation Application* and in the Assurances and Certifications in support of this *Allocation Application* is true, correct, and complete. The execution and submission of this *Allocation Application* has been duly authorized by the governing body of the *Applicant*.

|  |  |
| --- | --- |
| *Applicant* Name: |  |
| *Authorized Representative* Signature: |  |
|  |  |  |
| Name (print) |  | Title |
| Date: |  |  |

By signing this *Allocation Application*, the *Controlling Entity* certifies that it is indeed the *Controlling Entity* of the *Applicant* and supports this *Allocation Application*.

|  |  |
| --- | --- |
| *Controlling Entity* Name: |  |
| *Controlling Entity Representative* Signature: |  |
|  |  |  |
| Name (print) |  | Title |
| Date: |  |  |

| **NOTE:** **DO NOT SUBMIT THIS SIGNATURE PAGE ALONG WITH YOUR APPLICATION.** The electronic application will generate a signature page after you have submitted your *NMTC Allocation Application* online. You must submit a signed copy of the signature page generated by the electronic application system by the deadline stated in the *NOAA*.  |
| --- |

# Part I: Business Strategy

Total Maximum Points for Part I: 25 points, plus up to 10 additional “priority points” available under sub-sections B and E.

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

1. **Products, Services, and Investment Criteria**

| **TIP:** For the purposes of completing the Business Strategy section and all relevant exhibits, *Real Estate Activities* refers to the development (including construction of new facilities and rehabilitation/enhancement of existing facilities), acquisition, management, or leasing of real estate. Non-real estate activities refer to all other types of business activities.**TIP:** An *Applicant* will score well under the Products, Services, and Investment Criteria sub-section to the extent that it clearly describes its financial products and will deploy debt or equity capital, or offer products and services that feature more favorable rates, terms, structuring and non-traditional features when compared with market offerings. Please note, these criteria do not apply for an *Applicant* who intends to use its *NMTC Allocation* to pursue *Financial Counseling and Other Services (FCOS)* as their sole line of business. |
| --- |

| **TIP:** The *NOAA* states, “as a condition of eligibility for this Allocation Round, the Applicant will not be permitted the use of the proceeds of *Qualified Equity Investments* (*QEIs*) to make *Qualified Low-Income Community Investments* (*QLICIs*) in *Qualified Active Low-Income Community Businesses* (*QALICBs*) where *QLICI* proceeds are used to repay or refinance any debt or equity provider or a party related to any debt or equity provider whose capital was used to fund the *QEI* except if: (i) the *QLICI* proceeds are used to repay documented reasonable expenditures that are directly attributable to the qualified business of the *QALICB*, and such past expenditures were incurred no more than 24 months prior to the *QLICI* closing date; or (ii) no more than five percent of the *QLICI* proceeds are used to repay or refinance prior investment in the *QALICB*. Refinance includes transferring cash or property directly to any debt or equity provider or indirectly to a party related to any debt or equity provider.” If the *Applicant* selects “No” to Question #13(a), then the *Applicant* will not be eligible to submit this *NMTC* *Allocation Application*. If the *Applicant* selects “Yes” to Question #13(a), the *Applicant* will be held to this commitment as a condition of its *Allocation Agreement*. For additional information, please see the *NMTC* Compliance & Monitoring Frequently Asked Questions. |
| --- |

1. *QLICI* Uses and Activities
2. Will the *Applicant* commit that it will not permit the use of the proceeds of *Qualified Equity Investments* (*QEIs*) to make any *Qualified Low-Income Community Investments* (*QLICIs*) in *Qualified Active Low-Income Community Businesses* (*QALICB*s) where *QLICI* proceeds are used to repay or refinance any debt or equity provider or a party related to any debt or equity provider whose capital was used to fund the *QEI* except if: (i) the *QLICI* proceeds are used to repay documented reasonable expenditures that are directly attributable to the qualified business of the *QALICB*, and such past expenditures were made no more than 24 months prior to the *QLICI* closing date; or (ii) no more than five percent of the *QLICI* proceeds are used to repay or refinance prior investment in the *QALICB*? Refinance includes transferring cash or property directly to any debt or equity provider or indirectly to a party related to any debt or equity provider.

\_\_\_\_ Yes \_\_\_\_ No

1. Please indicate the types of *Qualified Low-Income Community Investments (QLICIs)* in which the *Applicant* intends to engage (check all that apply), and what percentage of allocations (by dollar amount) will be used for each activity. (Percentages for (a)-(d) should add up to 100 percent):
2. \_\_\_ % Investments in, or loans to, *Qualified Active Low-Income Businesses (QALICB)*.

Loans/investments will be used to finance: (these three percentages should add up to 100 percent by dollar amount)

|  |  |
| --- | --- |
| \_\_\_\_ % | Non-*Real Estate Activities*  |
| \_\_\_\_ % | *Real Estate Activities* where the real estate will be owned (either directly or through an *Affiliate*) and principally occupied by an *Operating Business*.  |
| \_\_\_\_ % | *Real Estate Activities* where the real estate will be principally leased to third party tenants or sold to a third party.  |

1. \_\_\_ % Investments in, or loans to, other *CDEs*.

Please indicate the percentage of each activity (by dollar amount) in which the final recipient *CDEs* intend to engage, using the proceeds of the NMTC investments provided by the *Applicant*. Percentages should add up to 100 percent.

|  |  |
| --- | --- |
|  | % Origination of loans, investment of capital, or equity to *QALICBs* |
|  |
|  | % *Financial Counseling and Other Services* |

1. \_\_\_ % Purchases of loans from other *CDEs*.
2. \_\_\_ % *Financial Counseling and Other Services*.

|  |  |
| --- | --- |
|  | In conjunction with financing (check, if applicable) |
|  | As a discrete line of business (check, if applicable) |

1. Products, rates and terms that the *Applicant* intends to offer:

| **TIP**: If an *Applicant* intends to utilize its requested *NMTC Allocation* to engage solely in either the purchase of loans from other *CDEs* or in the provision of *FCOS*, and not in the origination of loans or equity, it should skip Questions #14 and #15. |
| --- |

1. Indicate the number of financial products the *Applicant* intends to offer with capital raised from an *NMTC Allocation*. A financial product may consist of one or more financial notes. *Applicants* may describe up to three separate financial products.

\_\_\_\_\_ Financial Product 1

\_\_\_\_\_ Financial Product 2

\_\_\_\_\_ Financial Product 3

| **TIP:** If the Applicant indicates it will be providing more than one financial product in Question #14(a), the *Applicant* should provide a distinct and unique narrative description for each financial product. *Applicants* that use the same narrative text for different financial products will not be scored as favorably. To the extent the *Applicant* indicates a range of offerings within an item listed above (e.g., interest rates from 100 bps to 500 bps below market), it should describe what circumstances would dictate the specific rates or terms, and how often the best rates and terms would be offered. **TIP:** For each product, the Applicant should clearly discuss how the product is structured as well as benefits this structure provides to borrowers/investees. A financial product structured with multiple financial notes (e.g., an A and B note, or an A, B, and C note, etc.) must be described as one financial product. In this case, the rates and terms of the financial notes should be discussed on a blended basis. For additional guidance on calculating blended interest rates, see the Application Q&A*.* The individual financial notes should not be listed as separate products unless they will also be offered on a stand-alone basis. *Applicants* will not be scored as favorably if they do not follow these instructions. **TIP:** The number of financial products selected by the *Applicant* in Question 14(a) has no effect on the evaluation of the *Allocation Application*. TIP: The Applicant may discuss other flexible or non-traditional features of its financial products. Only the non-traditional and flexible features listed above are subject to reporting and only these features may be credited toward compliance.  |
| --- |

1. For each financial product selected in Question 14(a), provide a narrative that addresses the following elements:
* Indicate whether the product is debt, equity, or some combination of the two. If debt, describe if it will have any equity equivalent features (e.g. convertible debt, debt with warrants, etc.) and which of the following flexible or non-traditional features the *Applicant* intends to include as part of the financial product:
	+ - Below market interest rates (or rate of return in the case of *Equity Investments*)
		- Lower than standard origination fees
		- Longer than standard period of interest-only loan payments
		- Higher than standard loan-to-value ratio
		- Longer than standard amortization period
		- More flexible borrower credit standards
		- Non-traditional forms of collateral
		- Lower than standard debt service coverage ratio
		- Subordination
* Include a brief description of the rates and terms that will be offered and explain how these rates and terms compare with what is typically offered by the *Applicant* and in the *Applicant’s* service area.
* Provide an example of how the product will be used (alone or in conjunction with non-NMTC capital) to finance a projected NMTC investment identified in Question 17.

(Maximum Response Length: 5,000 characters)

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1. For an *Applicant* that indicated under Question #13(b) that it intends to finance other *CDEs*, describe the strategy by which the Applicant will ensure that those *CDEs* will pass along the NMTC benefits to their *QALICB* borrowers in the form of more favorable rates or terms. (Maximum Response Length: 2,000 characters)

|  |
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1. Choose one of the following options. (check only one)

The *Applicant* will commit that 100 percent of its *QLICI*s will:

\_\_\_ (a) be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 50 percent below market; or debt that otherwise satisfies at least 5 indicia of flexible or non-traditional rates and terms, as listed in Question 14.

\_\_\_ (b) be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 33 percent below market; or debt that otherwise satisfies at least 4 indicia of flexible or non-traditional rates and terms, as listed in Question 14.

\_\_\_ (c) be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 25 percent below market; or debt that otherwise satisfies at least 3 indicia of flexible or non-traditional rates and terms, as listed in Question 14.

\_\_\_ (d) be provided in the form of equity; equity-equivalent financing; debt with interest rates at least 15 percent below market; or debt that otherwise satisfies at least 2 indicia of flexible or non-traditional rates and terms, as listed in Question 14.

\_\_\_ (e) None of the above.

| **TIP:** *Applicants* will score better to the extent they commit to provide equity or equity-equivalent financing; greater interest rate reductions on their debt; and/or a higher number of flexible/non-traditional rates and terms. **An *Applicant* that checks one of the options a-d in Question #15 above should be aware that this commitment will be a condition of its *Allocation Agreement* with the CDFI Fund.** Please refer to the Application Q&A document for guidance on how to calculate below market interest rates.  |
| --- |

1. For an *Applicant* that indicated under Question #13(c) above that it plans to purchase qualifying loans from other *CDEs*:
	* 1. Will the *Applicant* require the *CDE* from which it purchases loans to reinvest all or a portion of the proceeds from the loan sales in *QLICIs*?

\_\_\_ Yes \_\_\_ No

If yes, identify the percentage: \_\_\_\_\_%; and briefly describe the *Applicant’s* mechanisms for enforcing this requirement:

(Maximum Response Length: 2,000 characters)

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| **TIP:** An *Applicant* purchasing loans from other *CDEs* generally will not score favorably in the Business Strategy section unless it indicates, in Question #16(a), that it will require the *CDE* from which it purchases loans to reinvest at least 85 percent of the proceeds from the loan sales in *QLICIs*. The higher the percentage identified in Question #16(a), the better the *Applicant* will score under the Business Strategy section. **However, if the *Applicant* receives an *NMTC Allocation*, it will be required to meet the percentage identified above, and such requirement will be a term of its *Allocation Agreement.*** |
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1. Describe the extent to which the *Applicant* intends to purchase loans that include rates, terms and/or with conditions that would not be possible without the benefit of an *NMTC Allocation*. (Maximum Response Length: 2,000 characters)

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1. **Projected Business Activities**

| **TIP:** Projected activities should be consistent with an *Applicant’s* request for an *NMTC Allocation* and the *QLICI* activities selected in Question 13(b). An *Applicant* that has a set of clearly-defined potential business activities will score well under this sub-section, as will an *Applicant* that can demonstrate an effective strategy for locating qualifying loans/investments in businesses and/or other eligible *QLICI* activities. |
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| **TIP:** *Applicant*s that plan to finance a single or discrete number of *QLICI*s are expected to provide a greater level of detail about their planned transactions in order to score well in comparison to those *Applicants* intending to fund a general pipeline. An *Applicant* that indicates in its application that it intends to finance a single or a discrete number of *QLICIs* as listed in Question #17 will be required to close such transactions, as a condition of the receipt of an *NMTC Allocation*, and such requirement will be a term of the *Allocation Agreement*. **TIP:** If the Applicant selects “general pipeline,” it must provide detailed sample transactions with total *QLICI* needs equivalent to the *Applicant*’s NMTC Allocation request in Question #1. These sample transactions should be representative of the types of projects that will be undertaken with an *NMTC Allocation*. If an Applicant intends to invest in a variety of business types (e.g., healthcare, manufacturing, mixed-use real estate, etc.), it should be sure to define the types of businesses and to provide a sample project for each business type in the narrative response to Question #17(c). An *Applicant* should also be sure to indicate whether pipeline transactions may involve multiple *CDEs*. **TIP:** Where a general pipeline of investments is planned, it is not expected that the *Applicant* will invest in all of the listed projects. Further, it is anticipated that the Applicant may invest in projects not included in Table A5. Note however that the CDFI Fund expects investments not presented in Table A5 will be clearly consistent with the Applicant’s business strategy. |
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1. Projected NMTC Investments

Complete Tables A1-A4, as applicable, according to the types of *QLICI* activities in which the *Applicant* intends to engage.

Complete Table A5 for each *QALICB* or NMTC activity to be financed using the *Applicant’s* requested *NMTC Allocation* in Question #1.

Please indicate if the *Applicant* plans to finance:

\_\_\_\_ A single or discrete number of investments

\_\_\_\_ A general pipeline of activities

Please write a narrative describing the *Applicant’s* planned investments:

**Single or discrete number of investments**: If the *Applicant* intends to invest in one or a few discrete projects only, provide a narrative below to describe the risks that may preclude the project(s) from being completed within the timeframes identified (e.g. source of leverage debt, permits, site control, etc).

**General pipeline of activities**: If the *Applicant* intends to support a general pipeline of activities that may or may not yet be identified, provide a narrative describing:

* The total number of businesses or *CDEs* already identified, including the total dollar amount of NMTC financing (e.g. *QEI* and *QLICI* amount) to be provided. Be sure to indicate what portion of the Applicant’s pipeline falls into different business or activity types (e.g. community facilities, retail, industrial, investments in *CDEs*, loan purchases from *CDEs*, etc).
* The *Applicant*’s strategy for identifying potential borrowers, investees, or other customers in *Low-Income Communities*;
* The extent to which the *Applicant* intends to invest interest, dividends or other profits received from *QLICI*s into additional *QLICI*s, and the timeline for doing so.

(Maximum Response Length: (10,000 characters)

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1. Innovative Uses of an *NMTC Allocation*

| **TIP:** Question #18 will not be evaluated and scored in Phase I of *Allocation Application* reviews. Therefore, this question will not be used to determine whether an Applicant scored highly enough to receive consideration for an *NMTC Allocation*. The response to this question will be considered in Phase II of the *Allocation Application* reviews and may affect the size of the Applicant’s *NMTC Allocation* (along with other evaluation criteria as discussed in the *NOAA*). For more information on the *Allocation Application* review process, please see the NMTC Program Application Presentation Slides on the NMTC page of the CDFI Fund’s website and the *NOAA*. **TIP:** If selecting the Innovative *QLICI*s option, note that no particular activity is preferred over another. Any proposed innovative *QLICI*s should be quantified as a percentage of the *Applicant’s* total *QLICIs*. If the *Applicant* receives an *NMTC Allocation*, it may be required to meet the percentage identified in Question #18 and such requirement may be a term of its *Allocation Agreement.* **TIP:**If the *Applicant* proposes to pursue innovative *QLICIs* by investing in states that have historically received fewer dollars of *QLICI*s, the *Applicant* should refer to the Application Q&A to find the list of 10 states (plus Puerto Rico) that have received the least *QLICI* investments through CY 2017, based on *Community Investment Impact System* (CIIS) reporting data.  |
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Does the Applicant intend to pursue any of the following innovative uses of an *NMTC Allocation*?

* Investing in *Unrelated CDEs* that do not have *NMTC Allocations*;
* Investing in states identified by the CDFI Fund as having received fewer dollars of *QLICIs* historically;
* Providing *QLICIs* where the total *QLICIs* received by the *QALICB* are $4 million or less;
* Making *QLICIs* as equity or debt with an original term less than or equal to 60 months; and
* Providing *QLICIs* for non-Real Estate Activities, such as working capital, inventory or equipment purchase.
* Investing in *Federal Indian Reservations*, *Off-Reservation Trust Lands*, *Hawaiian Home Lands*, and *Alaska Native Village Statistical Areas*.

\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_ No

If “Yes,” discuss how the *Applicant* will use the requested *NMTC Allocation* to engage in any of the innovative uses of an *NMTC Allocation* listed above*.* Be sure to clearly quantify the percentage of the requested *NMTC Allocation* that will be used for each activity selected. (Maximum Response Length: 5,000 characters)

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1. **Prior Performance**

| **TIP:** An *Applicant* that can demonstrate (either on its own or through its *Controlling Entity*) a strong, successful track record of providing products, services, or *FCOS* similar to those that it intends to provide with *Qualified Equity Investment (QEI)* proceeds will score well under this sub-section. Only the organizational track record of the *Applicant* or the *Controlling Entity* may be referenced. The track record of the *Controlling Entity* **must** include the financing activities (loans and *Equity Investments*) of all *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*. The track record of the *Applicant* must include the financing activities of ***all*** *Subsidiaries* of the *Applicant*. The track records of staff, *Principal*s, board members and other management individuals are not relevant for this sub-section. There will be an opportunity to discuss individual qualifications in the Management Capacity section of this application. |
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1. Track Record (Tables B1-B3)

Does the *Applicant*, or its *Controlling Entity*, have a track record of directly providing or otherwise facilitating loans or *Equity investments* to Real Estate and *Operating Businesses* (excluding *Restricted NMTC Business Activities*), loans or Equity investments to *CDEs*, or purchasing loans from *CDEs* which correspond to the activities in Question #13 and described in Question #17?

\_\_\_\_ Yes (complete Questions #19(a) and (b)) \_\_\_\_ No

| **TIP:** The NMTC Program authorizing statute requires the CDFI Fund to give priority to any *Applicant* that has a track record of successfully providing capital or technical assistance to *Disadvantaged Businesses or Communities*. An *Applicant* may receive up to five “priority points” for demonstrating such a track record. Responses to Question #19 and Question #20 as well as Exhibit B, are used to determine the amount of “priority points.” Only the organizational track record of the *Applicant* or the *Controlling Entity* may be referenced. Do not refer to the track record of individuals (e.g., staff, *Principal*s, consultants) associated with the *Applicant* or its *Controlling Entity*. **TIP:** The *Applicant* may reference, in the Tables in Exhibit B and in the narratives in Question #19(b) and Question #20(b) (if applicable), loans or *Equity Investments* that the *Applicant* (or its *Controlling Entity)* has itself financed and for which it has capital at risk (direct financing/investment). Only loans or *Equity Investments* may be included in the Tables in Exhibit B and in the narratives in Question #19(b) and Question #20(b). Grants provided by the *Applicant* or *Controlling Entity* may not be included. Please note that capital provided to non-profit businesses that are not in the form of a loan will be considered grants and should not be referenced in Question #19, Question #20 or included in Exhibit B. **TIP:** An*Applicant* that demonstrates a longer track record of providing similar direct financing/investments or *FCOS* to entities that are not *Affiliates* (either on its own or through its *Controlling Entity*) will generally score higher in this section than an *Applicant* that demonstrates a shorter track record of direct financing/investments or *FCOS.* An *Applicant (*either on its own or through its *Controlling Entity)* will score lower in this section if its track record is comprised primarily or exclusively providing indirect financing/investments, and/or a track record of primarily or exclusively financing *Affiliates*.**TIP:** If an *Applicant* intends to utilize its *NMTC Allocation* to engage in the provision of *FCOS* as a discrete line of business (as indicated in Question #13), it must include the following in its narrative response to Question #19(b): (1) the number of businesses/entrepreneurs to which the *Applicant* has provided counseling or other services in the last five years; and (2) the percentage of those businesses/entrepreneurs that were located in *Low-Income Communities*. This information will be used to evaluate the *Applicant’s* eligibility to receive “priority points” for demonstrating a track record of successfully providing capital or technical assistance to *Disadvantaged Businesses or Communities.* Please note that if an Applicant intends to use its *NMTC Allocation* to engage in the provision of *FCOS* as its sole line of business, and not in the purchase or origination of loans or *Equity Investments*, it does not need to complete Tables B1-B4.  |
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1. Complete Tables B1-B3, as applicable, based on the Applicant’s selections in Question 13.
2. Provide a narrative discussion of the organization’s track record relevant to each type of activity selected (including *FCOS*) in Question. #13, referencing data included in Tables B1-B3, as appropriate. *Applicants* that intend to use the NMTC allocation to make loans to or investments in QALICBs should describe the similarity between their track record and the types of businesses to which they plan to provide *QLICIs*. (Maximum Response Length: 10,000 characters)
* Be as specific as possible with respect to the uses of past financing (e.g. construction, new equipment purchase, etc.). Also indicate which activities were undertaken by the *Applicant*, as opposed to its *Controlling Entity* (including its *Subsidiaries*).
* Be sure to discuss whether the data in Exhibit B refers to the *Applicant’*s or *Controlling Entity’s* (including its *Subsidiaries*) direct financing (i.e., its own capital at risk) versus indirect financing (e.g., loan packaging, project development, etc.). Also, indicate the extent (including the number and dollar amount) that loans or investments were made to *Affiliates* of the *Applicant* or *Controlling Entity*.
* Focus the discussion specifically on the *Applicant*’s or its *Controlling Entity*’s experience targeting *Disadvantaged Businesses and Communities*. Be sure to include the number of years that the *Applicant* or *Controlling Entity* has served *Disadvantaged Businesses and Communities.*

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1. Track Record (Table B4)

| **TIP:** See the Application Q&A for additional guidance on the types of “Financing/Investment Activities that would not qualify as QLICI Activities.”  |
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1. Complete Table B4, if applicable. Does the *Applicant*, or *Controlling Entity*, have a track record of successfully providing loans, *Equity Investments*, and/or financial counseling that do not directly correspond to the selections in Question #13 (e.g. *Restricted NMTC Activities*, loans and/or investments in NMTC investment funds or non-*CDE* financial institutions, personal or consumer loans, and residential mortgages) but are relevant to the proposed NMTC activities?

\_\_\_\_ Yes \_\_\_\_ No

1. Referencing Table B4 as appropriate, describe the *Applicant*’s, or *Controlling Entity’s*, track record over the past five years of successfully providing the loans or *Equity Investments* and financial counseling included in Table B4 and how these activities are similar to the proposed NMTCactivities:

(Maximum Response Length: 5,000 characters)

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1. **Non-Metropolitan Counties**

| **TIP:** Question #21 will not be evaluated and scored in Phase I of *Allocation Application* reviews. Therefore, this question is not used to determine whether an Applicant scored highly enough to receive consideration for an *NMTC Allocation*. The response to this question will be considered in Phase II of the *Allocation Application* reviews and may affect the size of the Applicant’s *NMTC Allocation* (along with other evaluation criteria as discussed in the *NOAA*). For more information on the *Allocation Application* review process, please see the NMTC Program Application Presentation Slides on the NMTC page of the CDFI Fund’s website and the *NOAA*. **TIP:** As provided for in Section 102(b)(6) of the Tax Relief and Health Care Act of 2006 (Pub. L. 109-432), and described further in the *NOAA* and the Q&A document that accompanies this application, the CDFI Fund has established the goal that: (i) 20 percent of all *QLICI*s made by *Allocatees* under this Round are invested in *Non-Metropolitan Counties*; and (ii) a proportionate number of *Rural CDEs* (as defined in the *NOAA*) receive allocation awards. *Applicants* are therefore required to provide two target estimates below: (1) a minimum percentage of *QLICIs* the *Applicant* is willing to commit to provide to *Non-Metropolitan Counties*; and (2) the maximum percentage of *QLICI*s that the *Applicant* is willing to commit to providing to *Non-Metropolitan Counties*. At the discretion of the CDFI Fund, the *Applicant* may be required to deploy a percentage of its allocation at or above the minimum indicated in Question #21(b), but not more than the maximum percentage indicated in Question #21(c); and such requirement shall become a condition of its *Allocation Agreement* with the CDFI Fund. **TIP:** An *Applicant* that presents a minimum of a three-year track record of direct financing in Exhibit B, responds “Yes” to Question #21(a) (including an appropriate supporting narrative), and commits to a figure of 50 percent or greater in response to Question #21(c) may be deemed to be a “*Rural CDE”*, and may be eligible to receive special consideration for *an NMTC Allocation* in accordance with the process outlined in the *NOAA*. For more information, see the Application Q&A.An *Applicant* may receive a larger *NMTC Allocation* than would otherwise be the case, regardless of designation as a *Rural CDE,* if it: (i) makes a minimum commitment of 20 percent or greater in response to Question #21(b); (ii) has a track record of providing direct financing in *Non-Metropolitan Counties* and a strong strategy for deploying NMTC investments in these communities; and (iii) is ranked highly enough to be considered for an *NMTC Allocation*. In accordance with the *NOAA* for this round, in the event the CDFI Fund adds additional *Rural CDE*s to the *Allocatee* pool in order to achieve the targeted percentage of investment in *Non-Metropolitan Counties,* a formula reduction will be applied as uniformly as possible, to the allocation amount for all *Allocatee*s in the pool that have not committed to investing a minimum of 20 percent of their *QLICI*s in *Non-Metropolitan Counties.* |
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1. Non-Metropolitan Counties
2. Have at least 50 percent of the Applicant’s (or Controlling Entity’s) total direct financing dollars over the past five years, as shown in Exhibit B, been directed to *Non-Metropolitan Counties*?

\_\_\_\_\_\_ Yes \_\_\_\_\_\_ No

1. What is the minimum percentage of *QLICI*s that the *Applicant* is willing to commit to deploy in *Non-Metropolitan Counties?*

\_\_\_\_\_\_%

1. What is the maximum percentage of *QLICI*s that the *Applicant* is willing to commit to deploy in *Non-Metropolitan Counties*?
**(Note: this value must be equal to or greater than the value for Question #21(b)).**

\_\_\_\_\_\_ %

1. If the response to Question #21(c) above is greater than zero percent, referencing Exhibit B, briefly describe the *Applicant’s* (or its *Controlling Entity*’s) five-year direct financing track record in *Non-Metropolitan Counties* in Tables B1-B3 and Table B4*.* Specifically, describe the types of projects and the dollar amounts that the *Applicant* (or its *Controlling Entity*) provided directly to projects located in *Non-Metropolitan Counties*. See the Application Q&A.

(Maximum Response Length: 2,000 characters)

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| **TIP:** Applicants can and should list specific *Non-Metropolitan* transactions in response to Question #17 and Table A5. These transactions should be referenced in response to Question #21(c) as necessary to explain the *Applicant’s* strategy for deploying *QLICIs* in *Non-Metropolitan Counties*. |
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1. If the response to Question #21(c) above is greater than zero percent, and only to the extent not discussed elsewhere in the application, discuss the *Applicant’s* strategy for deploying *QLICI*s in *Non-Metropolitan Counties*.

(Maximum Response Length: 5,000 characters)

* Indicate the number and dollar amount of transactions that have already been identified in *Non-Metropolitan Counties*, for which underwriting is completed or underway.
* Reference sample transactions in the *Applicant’s* Non-Metropolitan pipeline included in Table A5.
* Discuss the key challenges the *Applicant* anticipates it will have providing *QLICIs* in *Non-Metropolitan Counties* and how the *Applican*t proposes to overcome those challenges.

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1. **Investments in Unrelated Entities**

| **TIP:** The NMTC Program legislation requires the CDFI Fund to give priority to *Applicants* that intend to use “substantially all” of their *QEI* proceeds to make investments in one or more businesses in which persons *Unrelated* to the *Applicant* hold the majority equity interest. An *Applicant* that answers “Yes” to Question #22 will be awarded five additional points. An *Applicant* that receives priority points under this sub-section will be required, in its *Allocation Agreement*, to invest substantially all of its *QEI* proceeds in *Unrelated* entities. Please refer to the *NMTC Allocation Application* Q&A document for more information about what is considered an *Unrelated* entity transaction. |
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1. Does the *Applicant* intend to use substantially all of the proceeds of its *QEIs* to make *QLICIs* in one or more businesses in which persons *Unrelated* to the *Applicant* hold the majority equity interest?

\_\_\_\_ Yes \_\_\_\_ No

1. Notable Relationships

Describe any potential situations in which the *Applicant,* its *Affiliates* (including the *Controlling Entity*) or its personnel (persons involved in identifying projects or making investment decisions on behalf of the *Applicant*, including governing or advisory board members), will receive financial benefits from the *QALICBs* financed with the *Applicant’s QLICIs*.

1. Will the *Applicant*, its *Affiliates* or its personnel own more than a one percent interest in the *QALICB*? \_\_\_\_Yes \_\_\_\_ No
2. Will the *Applicant*, its *Affiliates* or its personnel provide professional services (developer, real estate agent, property manager, or general contractor) for the *QALICB*? \_\_\_\_Yes \_\_\_\_ No
3. Will the *Applicant*, its *Affiliates* or its personnel be lessees at property developed with the *QLICI*? \_\_\_\_Yes \_\_\_\_ No
4. Will the *Applicant*, its *Affiliates* or its personnel be a party to a business transaction financed with the *QLICIs*? \_\_\_\_Yes \_\_\_\_ No
5. Are there other financial benefits that the *Applicant*, its *Affiliates* or its personnel may receive, but are not included in items (a)-(d) above?

\_\_\_\_Yes \_\_\_\_ No

For items (a)-(e) above for which “Yes” was selected, describe such situations:

(Maximum Response Length: 2,000 characters)

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1. Discuss and quantify how such relationships will create benefits (i.e. cost savings, lower fees) for *QALICBs* or unaffiliated end-users, such as tenant businesses, or residents of *Low-Income Communities*. (Maximum Response Length: 2,000 characters)

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# Part II: Community Outcomes

Total Maximum Points for Part II: 25 points

| **TIP:** The CDFI Fund will review the extent to which the *Applicant’s* strategy will have positive community outcomes. An *Applicant* will generally score well under this section to the extent that: 1. it is working in particularly economically distressed or otherwise underserved communities;
2. it shows that its projected financing activities will generate demonstrable community outcomes; and
3. it demonstrates meaningful engagement with community stakeholders when vetting potential NMTC investments.

TIP: The CDFI Fund does not expect that each and every investment will be in an area identified in Question #24. |
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1. **Targeting the Use of QLICIs**
2. Identify all of the areas to be served by the *Applicant* (check all that apply):

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| 1. \_\_\_\_ | [SEVERE DISTRESS] Census tracts with poverty rates greater than 30 percent; **OR** Census tracts with, if located within a non-Metropolitan Area, median family income that does not exceed 60 percent of statewide median family income, or, if located within a Metropolitan Area, median family income that does not exceed 60 percent of the greater of the statewide median family income or the Metropolitan Area median family income; **OR** Census tracts with unemployment rates at least 1.5 times the national average. |
| 2. \_\_\_\_\_ | [*NON-METROPOLITAN COUNTIES*] Qualifying census tracts that are located in counties not contained within a Metropolitan Statistical Area (MSA), as defined in OMB Bulletin No. 10–02 (Update of Statistical Area Definitions and Guidance on Their Uses) and applied to the 2010 census tracts.  |
| 3. \_\_\_\_ | *[TARGETED POPULATIONS]* As permitted by IRS and related CDFI Fund guidance materials, projects serving *Targeted Populations* to the extent that: (a) such projects are 60 percent owned by *Low-Income Persons* (*LIP*s); or (b) at least 60 percent of employees are *LIP*s; or (c) at least 60 percent of customers are *LIP*s. |
| 4. \_\_\_\_ | [25% POVERTY/70% MEDIAN FAMILY INCOME/1.25 UNEMPLOYMENT RATE] Census tracts with one of the following: (i) poverty rates greater than 25 percent; or (ii) if located within a non-Metropolitan Area, median family income that does not exceed 70 percent of statewide median family income, or, if located within a Metropolitan Area, median family income that does not exceed 70 percent of the greater of the statewide median family income or the Metropolitan Area median family income; or (iii) unemployment rates at least 1.25 times the national average. |
| 5. \_\_\_\_ | [Small Business Administration (SBA) Designated HUB ZONES] to the extent *QLICI*s will support businesses that obtain HUB Zone certification by the SBA. |
| 6. \_\_\_\_ | [BROWNFIELDS] Brownfield sites as defined under 42 U.S.C. 9601 (39). |
| 7. \_\_\_\_ | [HOPE VI REDEVELOPMENT] Areas encompassed by a HOPE VI redevelopment plan.  |
| 8. \_\_\_\_ | [FEDERAL NATIVE AREAS] Federally designated Native American, Alaskan Native areas, or Hawaiian Homelands.  |
| 9. \_\_\_\_ | [ARC/DRA AREAS] Areas designated as distressed by the Appalachian Regional Commission or Delta Regional Authority. |
| 10. \_\_\_\_ | [COLONIAS AREAS] as designated by the U.S. Department of Housing and Urban Development. |
| 11. \_\_\_\_ | [FEDERAL MEDICALLY UNDERSERVED AREAS] Federally designated medically underserved areas, to the extent *QLICI* activities will result in the support of health related services. |
| 12. \_\_\_\_ | [FEDERAL/STATE/LOCAL ZONES] Federally designated Promise Zones, Impacted Coal Counties, Base Realignment and Closure areas, State Enterprise zone programs, or other similar state/local programs targeted towards particularly economically distressed communities.  |
| 13. \_\_\_\_ | [FEMA DISASTER AREAS] Counties for which the Federal Emergency Management Agency (FEMA) has: issued a “major disaster declaration” and made a determination that such County is eligible for both “individual and public assistance”; provided that the initial investment will be made within 36 months of the disaster declaration.  |
| 14. \_\_\_\_ | [HEALTHY FOODS FINANCING INITIATIVE (HFFI) DESIGNATED FOOD DESERTS] Census tracts identified as *Food Deserts* under the HFFI definition (USDA-ERS), to the extent *QLICI* activities will increase access to healthy food.  |

Will the *Applicant* commit to providing at least 85 percent of its *QLICIs* (in terms of aggregate dollar amounts) in areas that are either: (1) characterized by at least one of items 1-3 on the above list for each *QLICI*; or (2) characterized by at least two of items 4-14 on the above list for each *QLICI*?

\_\_\_\_\_Yes \_\_\_\_\_No

| **TIP:** An *Applicant* that checks “Yes” to Question #24(a) above will generally score more favorably. If the *Applicant* receives an *NMTC Allocation,* it will be required to meet the percentage figure identified above, and such requirement will be a term of its *Allocation Agreement*.  |
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* 1. Discuss how the *Applicant* will target *QLICI*s to areas marked by the specific indicators of higher distress selected in Question #24(a). In particular, please describe the criteria used to prioritize *QLICIs,* assuming the *Applicant* has greater investment opportunities than available *Allocation Authority*. (Maximum Response Length: 3,000 characters)

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1. **Community Outcomes – Prior Performance and Projections**

| **TIP:** An *Applicant* may score higher to the extent that its projected activities will generate clear and well supported outcomes for the communities affected, not simply based on the sheer number of outcomes selected in Question #25.**TIP:** An *Applicant* will score well in this sub-section to the extent that:1. It (or its Controlling Entity) has a track record of producing quantitative and qualitative community outcomes similar to those expected to be achieved;
2. Its projected community outcomes are supported by clear and sound methods and metrics for each outcome selected;
3. The projected community outcomes are highly likely to result from the proposed activities described in Question #17;
4. The projected community outcomes will clearly benefit Low-Income Persons and residents of Low-Income Communities (LICs). Note that the location in a LIC in and of itself is not sufficient to demonstrate benefit to LIC residents/LIPs.

**TIP:** *Applicants* that select Job Creation/Retention as an outcome are also required to provide a response for Quality Jobs and Accessible Jobs. **TIP:** *Applicants* that select Community Goods and Services as an outcome must be sure to address how they will evaluate the effectiveness of the community service providers. |
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1. Community Outcomes
2. Select the outcome(s) the *Applicant* expects to achieve as a result of the projected *QLICI*s described the Business Strategy section. Select all that apply and for each outcome selected, please:
	* Quantify the *Applicant*’s projected community outcomes;
	* Considering the *Applicant*’s planned NMTC financing/investments described in Question #17, explain how the *Applicant* quantified the potential outcomes that would result from receiving an *NMTC Allocation*;
	* Describe and quantify (to the extent possible) the *Applicant*’s track record of achieving each selected outcome through past financings/investments. Discuss how the track record of achieving outcomes compares with projected outcomes.

(Maximum Response Length: 5,000 characters)

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| 1. |  | \_\_\_\_ | ACCESSIBLE JOBS. Quantify (e.g., provide the number and/or percentage of total jobs) and discuss the extent to which the jobs created or retained by the *Applicant’s* planned *QLICIs* will be targeted and/or available to *Low-Income Persons*, residents of *LIC*s, people with lower levels of education, and people who face other barriers to employment (e.g., longer term unemployed, ex-convicts, etc.). |
| 2. |  | \_\_\_\_ | COMMERCIAL GOODS OR SERVICES TO *LOW-INCOME COMMUNITIES*. Quantify (e.g., number of residents of *Low-Income Communities* or *Low-Income Persons* expected to be served, square footage built, etc.) and describe the extent to which the *Applicant’s* planned *QLICIs* will increase the provision of commercial goods or services to residents of *Low-Income Communities* or *Low-Income Persons,* the types of commercial goods and services (e.g., access to retail, restaurants, or pharmacies, etc.) expected to be provided, and how they will benefit residents of *Low-Income Communities* or *Low-Income Persons*.  |
| 3. |  | \_\_\_\_ | COMMUNITY GOODS OR SERVICES TO *LOW-INCOME COMMUNITIES*. Quantify (e.g. number of people served, square footage built, etc.) and describe the extent to which the *Applicant’s* planned *QLICIs*  will increase access to high quality community goods or services for residents of *Low-income Communities* or *Low-Income Persons* (e.g., healthcare, social services, educational, cultural, etc.). |
| 4. |  | \_\_\_\_ | ENVIRONMENTALLY SUSTAINABLE OUTCOMES. Quantify (e.g. amount of reduced energy or water use by QALICB, amount of reduced energy costs by end users, etc.) and describe the extent to which the Applicant will finance projects which remediate environmental contamination (including addressing environmental health in Low-Income Communities); meet Leadership in Energy & Environmental Design (LEED) certification or similar green building standards; and/or directly support the production or distribution of renewable energy resources (e.g., biomass, hydro, geothermal, solar, wind, etc.).  |
| 5. |  | \_\_\_\_ | FINANCING MINORITY BUSINESSES. Quantify and describe the extent to which the *Applicant’s* planned *QLICIs* will finance *Minority-owned or Minority-controlled* businesses, including (in the case of *Real Estate Activities*) developers, project-sponsors or contractors/subcontractors that are *Minority-Owned or Minority-Controlled*.  |
| 6. |  | \_\_\_\_ | FINANCING WOMEN-OWNED BUSINESSES. Quantify and describe the extent to which the *Applicant’s* planned *QLICIs* will finance Women-owned or Women-controlled businesses, including (in the case of *Real Estate Activities*) developers, project-sponsors or contractors/subcontractors that are Women-owned or Women-Controlled.  |
| 7.  |  | \_\_\_\_ | FINANCING VETERAN-OWNED BUSINESSES. Quantify and describe the extent to which the *Applicant’s* planned *QLICIs* will finance Veteran-owned or Veteran-controlled businesses, including (in the case of *Real Estate Activities*) developers, project-sponsors or contractors/subcontractors that are Veteran*-Owned or Veteran-Controlled*.  |
| 8. |  | \_\_\_\_ | FLEXIBLE LEASE RATES. To the extent the *Applicant* is financing *Real Estate Activities*, quantify (e.g. percentage below market, etc.) and describe the efforts the *Applicant* will make to ensure that tenant-businesses, specifically locally-owned businesses, *Minority-owned* or M*inority-controlled, Women-owned or controlled, Veteran-owned or controlled* businesses and non-profit organizations, will receive rent reductions or be able to purchase their properties.  |
| 9. |  | \_\_\_\_ | HEALTHY FOOD FINANCING. Quantify (e.g. number of people served, square footage built, etc.) and describe the extent to which the *Applicant’s* planned *QLICIs* will finance projects, particularly retail outlets such as grocery stores, supermarkets and farmer’s markets that increase access to fresh and healthy food for *Low-Income Persons* or *Low-Income Communities*. Indicate how the *Applicant* will identify and target areas that are *Food Deserts* or otherwise have demonstrated lack of access to fresh and healthy food.  |
| 10. |  | \_\_\_\_ | HOUSING UNITS. Quantify (e.g. number of units, percent of affordable units) and describe the extent to which the *Applicant* will provide housing opportunities for *Low-Income Persons* or residents of *Low-Income Communities*; the extent to which housing will be offered in areas of high housing need, including communities with high concentrations of vacancies or foreclosures; and/or the extent to which the housing development adheres to principles of “smart growth”, including transit-oriented development.  |
| 11. |  | \_\_\_\_ | JOB CREATION/RETENTION. Quantify, as best as possible, the number of directjobs (either in the aggregate or on average for each project financed) that will be created or retained through the *Applicant’s* planned *QLICI*s. Be sure to discuss both temporary jobs (e.g., construction) and permanent jobs.  |
| 12. |  | \_\_\_\_ | QUALITY JOBS. Quantify (e.g., provide the number and/or percentage of total jobs) and discuss the extent to which jobs created or retained by the *Applicant*’s planned *QLICIs* represent quality jobs. Quality jobs are jobs that provide living wages (e.g., the minimum hourly wage necessary for an individual to meet basic needs, including housing, nutrition, daily living expenses and other incidentals such as clothing, for an extended period of time) and/or employment benefits (e.g., health insurance, retirement benefits, employee stock ownership, etc.). Also, discuss the extent to which jobs created through the *Applicant*’s *QLICI*s will provide opportunities for training and advancement (particularly for low-skilled workers).  |
| 13. |  | \_\_\_\_ | OTHER. In the space provided, please quantify and describe any other community outcomes that the *Applicant* expects to achieve, not included in items 1-10 above. [*Applicants* will be able to enter up to two community outcomes in this section of the electronic *Allocation Application*.]  |

1. Describe the *Applicant’s* track record of establishing and monitoring community outcomes, if the *Applicant* has a track record. Describe how the *Applicant* will track and document the community outcomes *QALICBs* are expected to achieve as a result of the *Applicant*’s *QLICIs*. (Maximum Response Length: 5,000 characters)

| **TIP:** An *Applicant* that describes a thorough track record of establishing and documenting past community outcomes and a methodology for tracking future community outcomes will score more highly on this question. |
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1. Will the *Applicant* use NMTC dollars to finance projects that would result in developing or rehabilitating rental or for-sale housing?

\_\_\_\_Yes \_\_\_\_ No

| **TIP:** Please note that Question #25(c) includes activities directed to the development or rehabilitation of ALL housing, including housing units resulting from mixed-use projects. If the *Applicant* indicates “Yes” to Question #25(c) and receives an *NMTC Allocation,* it will be required to provide at least 20 percent of aggregate units as affordable housing units (e.g. affordable to persons with incomes less than 80 percent of AMI), and such requirement will be a term of its *Allocation Agreement***. If the *Applicant* indicates “No” to Question #25(c) and receives an *NMTC Allocation*, it will be prohibited from using NMTC dollars to finance ANY housing units (see the Application Q&A).** |
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1. If the *Applicant* responded “Yes” to Item 5 in Question #25(a), what percentage and dollar amount of the *Applicant’s* NMTC activities will focus on healthy food financing, including activities in *Food Deserts* (assuming the *Applicant* is awarded the total requested *NMTC Allocation*)?

| **TIP:** As part of the Healthy Food Finance Initiative (HFFI), the CDFI Fund is seeking to track the anticipated amount of NMTC healthy food financing investments, including those investments made in *Food Deserts*. This information is being collected and will be tracked for informational purposes. The *Applicant* will not be held to the commitments made in Question #25(d) below, nor will the information provided in Question #25(d) affect the scoring of the application. *Allocatees* that engage in these activities may be publicly acknowledged for participating in the HFFI. |
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\_\_\_\_\_\_\_\_% Minimum

$\_\_\_\_\_\_\_\_ Estimated Total Dollar Invested

\_\_\_\_\_\_\_\_ Estimated Number of Projects to Be Financed

1. Community Accountability and Involvement

| **TIP:** All *CDEs* are required to maintain accountability to *Low-Income Communities*. An *Applicant* that can articulate meaningful involvement in *Low-Income Communities* and with a variety of *Low-Income Community* stakeholders, as well as a track record of community engagement (either directly or through its *Controlling Entity*) will be evaluated favorably under this question. |
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* + - * 1. Complete Table C1. Please describe the *Applicant*’s process for evaluating the community benefits of potential *QLICI*s and the extent to which the *Applicant*’s Advisory Board, *Low-Income Persons*, and/or residents of *Low Income Communitie*s participate in this process. Be sure to discuss:

The *Applicant*’s process for determining if a proposed investment aligns with *Low-Income Community* priorities and how this process affects investment decisions.

The number and percentage of *Low-Income Community* representatives on the *Applicant*’s Advisory and/or Governing Board.

The role, formal or otherwise, these individuals play in setting investments parameters, formulating the *Applicant*’s pipeline of investments, and approving the *Applicant’s* investment decisions. Provide examples where possible.

(Maximum Response Length: 5,000 characters)

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* + - * 1. Discuss the extent of the *Applicant*’s (or *Controlling Entity’s*) track record of project-specific community engagement related to past investment decisions. Please note that simply consulting with the Advisory Board is not an example of community engagement. Provide 2– 3 examples. (Maximum Response Length: 3,000 characters)

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* + - * 1. Discuss the extent of the *Applicant*’s (or *Controlling Entity’s*) track record of making investments in projects that were part of a broader community or economic development strategy (e.g., neighborhood revitalization plan, county or state economic development plans, etc.). Provide 2– 3 examples. (Maximum Response Length: 3,000 characters)

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* + - * 1. Discuss the portion of the *Applicant*’s planned NMTC financings/investments described in Question #17 that are part of a broader community or economic development strategy (e.g., neighborhood revitalization plan, county or state economic development plans, etc.). Please describe how one or more of the *Applicant*’s planned *QLICIs* will contribute to the goals of such strategies or initiatives. (Maximum Response Length: 3,000 characters)

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| **TIP:** The *Applicant* may discuss supply-chain investments and other types of private investments that are expected to occur as a result of the proposed *QLICIs* described in the Business Strategy section. Only include those impacts that are anticipated to occur in *LICs*, as opposed to general economic effects.  |
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1. Additional Investment

Discuss the extent to which the *Applicant’s* proposed *QLICIs* described in the Business Strategy section are expected to stimulate additional private investment above and beyond the *QLICI*-related financing in *Low-Income Communities*. Please provide specific examples of the Applicant’s (or Controlling Entity’s) past investments that have spurred additional non-NMTC related private investment in *LIC*s. (Maximum Response Length: 5,000 characters)

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# Part III: Management Capacity

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

1. Organizational Chart and Key Personnel

Submit organizational chart(s) that depict the following:

* The *Applicant’s* relationship to its *Controlling Entity* as well as any *Affiliate* or *Subsidiary* entities (if applicable); and
* The *Applicant’s* staffing structure (including names of key personnel), including Advisory Board/Governing Board and key board committees.

| **TIP:** Be sure to refer to the *Applicant* Instructions for information regarding the submission of these documents. All attachments must be submitted **online** through the *Applicant*’s AMIS account. |
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Complete Table C2. Identify personnel, including consultants and board members (if applicable) that will have a key role in:

* Deploying Capital – identifying and underwriting transactions; structuring NMTC loans and *Equity Investments*; and/or providing *FCOS*;
* Raising Capital from Investors – including raising tax credit equity and leveraged debt if the Applicant will use the leveraged investment model;
* Asset and Risk Management;
* NMTC Program Compliance.

| **TIP:** Be sure to identify any and all consultants that will have a key role in assisting the *Applicant* in managing an NMTC line of business, including consultants who assisted in preparing the *Allocation Application*. **TIP:** The *CDFI* Fund will only review the first 15 individuals listed in Table C2.  |
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1. Deploying Capital or providing *FCOS*:

| **TIP:** The CDFI Fund expects the *Applicant’s* personnel to have relevant experience in the types of activities the *Applicant* intends to pursue with its *NMTC Allocation* – particularly in situations where the *Applicant* (or its *Controlling Entity*) lacks prior organizational performance in providing loans or *Equity Investments* and related functions (e.g. monitoring loan repayments or dividend payments, managing disbursement of construction draws, etc.). An *Applicant* will be evaluated more favorably under this sub-section if it can also demonstrate that its personnel have experience identifying borrowers or investees in *LICs*: evaluating business to determine long-term sustainability; and structuring QLICIs or providing *FCOS* that meet the needs of *LIC* borrowers/investees. |
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1. Describe the current and planned roles and responsibilities of key personnel, consultants and board members in deploying capital in *Low-Income Communities* including: identifying borrowers or investees; evaluating businesses and structuring loans and *Equity Investments*; and/or providing *Financial Counseling and Other Services.* The *Applicant* should reference information from Table C2 as necessary. Be sure to indicate the percentage of work completed or expected to be completed by consultants, internal staff, and board members.

(Maximum Response Length: 5,000 characters)

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1. Describe how the Applicant will manage the addition of NMTC activities into its current portfolio of activities, including whether additional staff (or consultants) will need to be hired. (Maximum Response Length: 2,000 characters)

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1. Asset and Risk Management Experience:

| **TIP:** Each *Applicant* must demonstrate that it has the capacity and relevant experience to manage the types of assets it intends to invest in with the requested *NMTC Allocation*, as well as monitor the *QALICB’s* use of NMTC proceeds (e.g., construction, equipment purchase, etc) and control associated risks (e.g., loan repayments, cash distributions to the investment fund, leverage lenders, etc.)**TIP:** An *Applicant* will be evaluated favorably under this sub-section if it has experienced personnel and appropriate procedures and systems in place to successfully manage a loan and/or investment portfolio, including informational and performance aspects of administering such assets or pools of similar assets. |
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1. Describe the current and planned roles and responsibilities of key personnel, consultants and board members in managing the assets to be financed with an *NMTC Allocation* and associated risks. The *Applicant* should reference personnel’s prior experience from Table C2 as necessary. Be sure to indicate the percentage of work completed or expected to be completed by consultants, internal staff, and board members.

(Maximum Response Length: 5,000 characters)

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1. Describe how the *Applicant* will manage the addition of NMTC assets into its current portfolio of assets, including whether additional staff (including consultants, third-party firms, or other CDEs) will need to be hired. (Maximum Response Length: 2,000 characters)

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1. For each major product line, describe how the *Applicant* (or *Controlling Entity*) monitors financial assets.
* Explain how the organization will ensure that QLICI proceeds are used to finance the assets for which they are intended and identifies borrowers at greater risk (e.g., risk rating system for a loan portfolio, QALICB reporting, etc) and how the *Applicant* responds when assets are at greater risk.
* Indicate if the *Applicant* (or *Controlling Entity*) has written asset management and collection policies and whether it has ever deviated from those policies in the past five years and, if so, why.
* Address the *Applicant*'s strategy for minimizing defaults and managing delinquencies to mitigate against write-downs or write-offs going forward.

(Maximum Response Length 5,000 characters)

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1. For the *Applicant* (or *Controlling Entity*), complete Table D1 (Investment Portfolio) and discuss the *Applicant*’s (or *Controlling Entity*’s) delinquency rate(s) as of the *Allocation Application* release datefor each major asset class as well as its default rate (write-offs) over the past three years for each major asset class. Also:
* Describe the trends in delinquencies, write-offs, and defaults as shown in Table D1.
* Explain the reasons for any negative results such as an increase or unusual spikes in delinquencies, write-offs or loan restructurings that have occurred.
* If the *Applicant*, or its *Controlling Entity*, is a regulated financial institution, please compare delinquency and default rates with the appropriate peer group.

(Maximum Response Length: 7,500 characters)

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| **TIP:** Delinquency rate means the percentage of loan payments and mandatory dividend payments, on a dollar basis, that were 90 days past due (i.e., the combined dollar amount of principal, interest and mandatory dividend payments, 90 days or more past due divided by the total dollar amount of loans and *Equity Investments* outstanding). |
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1. Discuss any delinquent, defaulted, or impaired loans or *Equity Investments* from prior NMTC investments. Note the total value of each investment, as well as the total number of days delinquent or the amount charged off. Discuss the *Applicant*’s strategies for managing these troubled investments, including any work-out strategies used, as well as any policy or procedure changes implemented to avoid future delinquencies and write-offs.(Maximum Response Length: 5,000 characters)

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1. Program Compliance Experience:

| **TIP:** Each *Allocatee* must have the capacity to remain in compliance with NMTC Program requirements. An *Applicant* will be evaluated favorably in this sub-section to the extent that it can: 1) demonstrate experience with similar regulatory compliance requirements, including compliance under other tax credit programs; and 2) articulate a specific strategy for ensuring that its NMTC-related investments will qualify at the time of investment and throughout the seven-year credit period. |
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1. Describe the current and planned roles and responsibilities of key personnel, consultants and board members in managing the *Applicant’s* regulatory and tax compliance. The *Applicant* should reference information from Table C2 as necessary. Be sure to indicate the percentage of work completed or expected to be completed by consultants, internal staff, and board members. (Maximum Response Length: 3,000 characters)

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1. Discuss how the *Applicant’s* systems and procedures (e.g., portfolio monitoring, reporting, investment/re-investment strategies) will ensure ongoing compliance with NMTC Program requirements. Specifically, be sure to indicate how the *Applicant* will ensure that: (Maximum Response Length: 10,000 characters)
* At least 85 percent of the proceeds of the *QEI*s are invested in *QLICI*s in accordance with the *NMTC Program Income Tax Regulations*. If the *Applicant* is providing loans or investments to another *CDE*, how will it ensure that the secondary *CDE* fulfills its investment requirements?
* The businesses that the *Applicant* invests in are *QALICB*s, in accordance with the *NMTC Program Income Tax Regulations*. If purchasing a portfolio of loans, how will the *Applicant* ensure that it purchases loans that are *QLICI*s?
* Payments of, or for, capital, equity, or principal by its borrowers or investees are re-invested into *QLICI*s within applicable reinvestment periods. If providing loans to or investments in another *CDE*, how will it ensure that the secondary *CDE* fulfills its re-investment requirements?

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1. If the *Applicant,* its *Controlling Entity,* or any of its *Affiliates* is an insured financial institution that receives Community Reinvestment Act (CRA) ratings from regulators, please indicate the CRA ratings that it has received over the past five years. If the most recent CRA rating is less than “Outstanding”, describe:
2. the conditions or circumstances that led to the rating;
3. the steps the institution is taking to achieve an “Outstanding” rating; and
4. the role that NMTC activities are expected to play in helping the institution to achieve an “Outstanding” rating.

(Maximum Response Length: 2,000 characters)

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1. Financial Health:

Answer the following questions regarding the *Applicant’s* (or the *Controlling Entity’s*) financial health. Indicate if the responses are (check one):

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| \_\_\_\_ For the *Applicant* (if it has incurred operating expenses). |
| \_\_\_\_ For the *Controlling Entity* (if the *Applicant* has not yet incurred operating expenses). |
|
| \_\_\_\_ Not applicable (neither the *Applicant* nor the *Controlling Entity* has incurred operating expenses). |

1. Have the financial statements for the last complete fiscal year been independently audited or is an audit underway? \_\_\_ Yes \_\_\_ No

Please provide fiscal year end date for the last completed independent audit (mm/dd/yyyy). If no audit has been completed or is underway for the last complete fiscal year, please explain why and what steps the *Applicant*, or its *Controlling Entity*, is taking to obtain audited financials in the future: (Maximum Response Length: 2,000 characters)

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1. If “Yes”, have any of the *Applicant’s*, or its *Controlling Entity’s*, completed audits within the past three years (or, if shorter, for the period from inception) indicated any of the following:

1. An opinion other than unqualified? \_\_\_ Yes \_\_\_ No

2. A going-concern paragraph? \_\_\_ Yes \_\_\_ No

3. Repeated findings of reportable conditions? \_\_\_ Yes \_\_\_ No

4. Material weaknesses in internal controls? \_\_\_ Yes \_\_\_ No

If “Yes” to any of the above, indicate the fiscal years of the occurrences and describe the circumstances and corrective action(s) being taken: (Maximum Response Length: 2,000 characters)

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1. Have the *Applicant’s*, or its *Controlling Entity’s* financial statements shown positive net income (or if a non-profit, positive change in net assets) for each of the last three years, or if in business for less than three years, for the period of time it has operated?

\_\_\_\_ Yes \_\_\_\_ No

If “No”, please explain the circumstances, indicate the fiscal year in which this occurred, and describe the corrective action being taken:

(Maximum Response Length: 2,000 characters)

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1. Is the *Applicant* (or *Controlling Entity*) aware of any non-compliance issues cited since the issuance of its most recent audited financial statements or Management’s Annual Report on Internal Controls Over Financial Reporting?

\_\_\_\_ Yes \_\_\_\_ No

If “Yes”, please explain the circumstances and describe the corrective action being taken: (Maximum Response Length: 2,000 characters)

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1. Complete Table D2 – Fee Structure
* Based on the projections in Exhibit A, provide a list of the fees that the *Applicant* (or *Controlling Entity*) anticipates will typically apply to investments closed with the requested *NMTC Allocation* and result in compensation to the *Applicant* (or *Controlling Entity*), its *Affiliates* or Unaffiliated Third-Parties.
* Describe the Fee Structure provided in Table D2 – Fee Structure in detail. Explain why the fee structure (e.g., the timing of Fees, the responsible party and amounts) and percentage are appropriate for the investment strategy described in this application and for the requested *NMTC Allocation.* (Maximum Response Length: 2,000 characters)

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1. Complete Table D3 based on the projected activities reflected in Exhibit B. Based on the projections in Table D3:
* Describe the *Applicant’s* projected sources of income and expense(s) associated with administering the *Applicant’s* NMTC line of business and how the *Applicant* will be able to sustain this line of business, consistent with its overall business strategy, including its timeline for making investments.
* Explain how the *Applicant* would address any operating deficit. (e.g., income or loan from *Affiliates* or alternate sources, reduce scope of activities, use reserves, etc.). If the *Applicant* identified a Controlling Entity in Question #3, please indicate what, if any, financial support will be provided by the Controlling Entity to address any operating deficit (e.g. full support, partial support, etc.).

(Maximum Response Length: 5,000 characters)

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| **TIP:** The narrative response in Question #33(f) should clearly describe the assumptions and calculations used to derive each income and expense line from Table D3 in a way that CDFI Fund staff will be able to easily understand, quantify, and evaluate. The *Applicant* should indicate whether it is using cash or accrual methods of accounting. Table D3 should be completed using the *Applicant’s* fiscal year indicated in Question #2(i) (see the Application Q&A).**TIP:** If the *Applicant* has engaged (or intends to engage) any third-parties (e.g., consulting firms) that will receive any NMTC related income from the *Applicant*, *QEI* proceeds, QALICBs, or investors, the *Applicant* must disclose, describe and include this compensation as an offsetting income and expense of the *Applicant* in Table D3. It must also be clearly described in the response to Question #33(f) below.  |
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# Part IV: Capitalization Strategy

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

1. **Investor Strategy**

| **TIP:** An *Applicant* that demonstrates a track record of raising capital from investors (including market rate capital) consistent with the Allocation request and, if applicable, a high level of investor *Commitment* will be evaluated favorably under this sub-section. If an *Applicant* is seeking investments from investors that have not yet provided capital, the *Applicant* may be evaluated favorably if it presents a strong strategy for raising capital from such investors. |
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1. Complete Table E1 and describe the track record of the *Applicant* (or its *Controlling Entity*) raising capital from third-party sources, particularly equity capital at market or near-market rates. Be sure to distinguish between raising capital from profit-motivated investors; from government or philanthropic sources of capital; or using tax credits as an incentive. *Applicant*s may also discuss the experience of key personnel, consultants, and board members in raising capital. Reference information provided in Table C2 as appropriate.

(Maximum Response Length: 5,000 characters)

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| **TIP:** While Table E1 must contain data only of the *Applicant* (or its *Controlling Entity*) and the track record of the *Applicant* (or its *Controlling Entity*) must be discussed in Question #35, the *Applicant* may refer in Question #35 to the qualifications and five-year capital-raising track record of individuals (e.g., staff, *Principal*s, consultants) listed in Table C1 for organizations other than the *Applicant* (or its *Controlling Entity*). |
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1. Investment Partnerships
	1. Does the *Applicant* intend to secure investments from partnership entities that will leverage non-*Equity Investments* (e.g., debt, grant dollars) from outside of the partnership to increase the tax credit yield for members of the partnership? (Please note: *Applicants* planning to use the leverage model to raise *QEI*s for all or a portion of their allocation should select “Yes” below).

\_\_\_\_\_Yes \_\_\_\_\_ No

* 1. If Yes, provide the percentage of equity versus non-equity investments for all such investor partnerships based on the *Applicant’s* requested *NMTC Allocation*.

\_\_\_\_\_\_\_\_\_\_\_% *Equity Investments*

\_\_\_\_\_\_\_\_\_\_\_% Non-*Equity Investments*

1. Investment Strategy
2. Has the *Applicant* or its *Affiliates*, either directly or through subsidiary *CDE(s)*, received *QEI*s from investors in amounts equal to or greater than the Allocation request in Question #1 between XX/XX/XXXX and XX/XX/XXXX (the release date for the *NMTC Allocation Application*)?

\_\_\_\_\_Yes, complete Table E2 and Question #36(c).

\_\_\_\_\_ No, complete Question #36(b).

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| **TIP:** *Applicants* (or *Affiliates*) who have received *QEIs* from investors in amounts equal to or greater than the Allocation request in Question #1 between XX/XX/XXXX and XX/XX/XXXX (the release date for the *NMTC Allocation Application*) are required to complete Table E2. These *Applicants* **should not** complete Table E3, submit investor letters, or respond to Question #36(d) below. However, *Applicants* (or *Affiliates*) that have received *QEI*s in amounts less than the Allocation request in Question #1 are required to complete Table E3 and should not complete Table E2. If the *Applicant* provided investor letters as evidence of its ability to raise capital, then the *Applicant* should respond to Question #36(c). If the *Applicant* did not provide investor letters, it should respond to Question #36(d). **TIP:** All *Applicants* that respond “Yes” to Question #36(b) are required to submit, along with their applications, documentation demonstrating proof of investor interest (e.g., *Commitment* letters; *Letters of Interest/Intent*). Investor letters should identify whether the investor will make a direct investment in the *CDE* or into a partnership. *Applicants* that answer Yes to Question #35(a) and complete Table E3 are required to submit, along with their applications, documentation demonstrating proof of the interest of the equity investors and debt providers (e.g., letter indicating intent of equity or debt investor to provide capital to the partnership entity that will provide the *QEI* to the *Applicant*). Be sure to follow the directions in the *Applicant* Instructions section for information regarding the submission of these documents.If the *Applicant* answered “Yes” to Question #35(a) and plans to source non-*Equity Investments* from sources that are specific to particular *QALICBs*, the *Applicant* should discuss this strategy in the response to Question #36(c) to the extent that it may invest in *QALICB*s that have not yet been identified at the time of the *Allocation Application*.  |
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1. If “No” to Question #36(a) above, has the *Applicant* provided investor *Commitments* or *Letters of Intent/Interest* for investors listed in Table E3?

\_\_\_\_\_Yes, complete Table E3 and Question #36(c).

\_\_\_\_\_ No, complete Question #36(d).

1. If the *Applicant* responded “Yes” to Question #36(a) or Question #36(b), discuss the extent to which the *Applicant* may raise capital from equity and/or debt investors not listed in Table E2 or E3. *Applicants* that intend to raise *QEI*s using the leverage structure must also describe potential sources of leveraged debt related to their planned NMTC investments (described in Question #17), including whether leverage debt will be sourced from the *QALICB* or *Affiliates* of the *QALICB*.

(Maximum Response Length: 5,000 characters)

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1. If the *Applicant* responded “No” to Question #36(b) above, discuss the *Applicant’s* strategy for securing NMTC investor *Commitment*s:
* The *Applicant’s* strategy for identifying additional equity investors or non-equity providers (i.e., leveraged debt), including the extent to which the *Applicant* will be utilizing community alliances or strategic partners to raise investment capital and/or whether leverage debt will be sourced from the *QALICB* or *Affiliates* of the *QALICB*.
* The *Applicant’s* timeline for securing investments from equity investors and/or leveraged debt if the *Applicant* answered yes to Question #35(a) and, any risks that may preclude the *Applicant* from closing such investments, and how the *Applicant* is mitigating such risks.
* If the *Applicant* is using a third-party investment banker to raise capital, describe whether a contract is in place, the terms (actual or proposed) of the contract, and the progress to date that the banker has made in securing *Commitments* from investors. Do NOT list these investment bankers in Table E3.

(Maximum Response Length: 8,000 characters)

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1. Please respond to the following questions:
2. Will one or more of the *Applicant’s* current or prospective investor(s) originate or otherwise identify transactions in which the *Applicant* will invest?

\_\_\_\_ Yes \_\_\_\_\_ No

1. Will the *Applicant* receive any *QEIs* from *Affiliates*?

\_\_\_\_\_ Yes \_\_\_\_\_ No

1. If the answer to (a) or (b) is yes, provide narrative detailing:
* The name of each such equity investor or non-equity provider;
* The role of each equity investor or non-equity provider with respect to locating, underwriting, and structuring each investment;
* Whether each equity investor or non-equity provider offers similar products or services already; and
* If applicable, the extent to which the *Applicant* will offer products with more favorable rates or terms than those currently offered by the equity investor or non-equity provider and/or will target its activities to areas of greater economic distress than those currently targeted by the equity investor or non-equity provider.(Maximum Response Length: 2,000 characters)

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| **TIP:** If the *Applicant* has obtained or plans to obtain investments from organizations that also will identify or originate transactions for the *Applicant* **or** organizations that are *Affiliated* with the *Applicant*, it will be evaluated favorably if: a) the *Applicant’s* transactions are more targeted to areas of greater economic distress than those areas that investors are already reaching with their investments or loan originations; or b) the *Applicant’s* products and services are offered with more favorable rates or terms than those offered by the investor. |
| --- |

1. Distribution of Benefits:
2. Quantify as best you can, for each anticipated investment type, how economic benefits of the *QEI* will be apportioned amongst:

1. the investors (equity and leverage debt sources), through economic returns (e.g. interest income, investor IRR);
2. the *Applicant* (or its *Subsidiaries/Affiliates*), through economic returns (including fees).
3. the *QALICB* investees/borrowers, through lower costs of capital;
4. if applicable, the unaffiliated end-users through lower costs (e.g., lower tenant lease rates).

 (Maximum Response Length: 5,000 characters)

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1. To the extent there may be any tax credit equity remaining at the end of the seven-year credit period, be sure to address how the residual value will be apportioned amongst investors, *QALICBs*, the *Applicant* and/or its *Affiliates*. Address any terms or conditions the *QALICB* must meet as a term of the distribution.

(Maximum Response Length: 3,000 characters)

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1. If the *Applicant* generates a profit from its overall NMTC activities, discuss how this profit will be used (e.g., dollar amount or percentage of profit that will be distributed to investors or shareholders, support additional NMTC or non-NMTC *Low-Income* *Community* investments, support other activities of the *Applicant* or *Affiliates*, etc.). (Maximum Response Length: 2,000 characters)

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1. **Sources and Uses of Capital**

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

\_\_\_\_ Yes \_\_\_\_ No If yes, what percentage: \_\_\_\_\_\_%.

| **TIP:** An *Applicant* that indicates in Question #40 “yes” and provides a percentage greater than 85 percent will be required to meet the percentage identified above, and such requirement will be a term of its *Allocation Agreement*.  |
| --- |

1. Minimum Request Amounts

Is there an absolute minimum amount below which the *Applicant* would be unwilling to accept an *NMTC Allocation*?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, provide the amount $\_\_\_\_\_\_\_. Describe how this amount was determined. Be sure to address why the *Applicant* could not administer a smaller award:
(Maximum Response Length: 1,000 characters)

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| **TIP:** At the conclusion of the CDFI Fund’s review process, if the *Applicant* is recommended to receive less than the minimum amount of allocation authority identified in Question #40, the CDFI Fund **will not** provide an *NMTC Allocation* to the *Applicant*. An *Applicant* with a high minimum allocation request will need to demonstrate that it can raise and deploy the *NMTC Allocation* requested in a timely manner; that it will likely achieve significant community impacts or production innovations; and that it could not successfully implement its business strategy without this minimum allocation amount.  |
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# Part V: Information Regarding Previous Awards

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

1. CDFI Fund Award Status:

Has the *Applicant* and/or any of its *Affiliates* previously received a financial award (not including an *NMTC Allocation*) from the CDFI Fund?

\_\_\_\_ Yes \_\_\_\_ No

If Yes, please list the award(s) in the table. The *Applicant* may use additional space as necessary:

|  |  |
| --- | --- |
| Name of Award Recipient: |  |
| Award control number: |  |
| Total award amount: |  |

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| Name of Award Recipient: |  |
| Award control number: |  |
| Total award amount: |  |

1. *NMTC Allocation* Status:

Has the *Applicant* and/or any of its *Affiliates* received an *NMTC Allocation* from the CDFI Fund in a prior allocation round?

\_\_\_\_ Yes \_\_\_\_ No

If No, please skip Question #44. If Yes, please list the allocation(s) in the table. The *Applicant* may use additional space as necessary:

| **TIP:** *Applicants* should only list *NMTC Allocations* that have been directly awarded to the *Applicant* and/or any of its *Affiliates*. Do not include information on *NMTC Allocations* awarded to *CDE*s if the *Applicant*’s only relationship to that *CDE* is through a *QEI* made into the *CDE* by the *Applicant* or an *Affiliate* of the *Applicant*. |
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| --- | --- |
| Name of *Allocatee*: |  |
| Award control number: |  |
| Total allocation amount: |  |

|  |  |
| --- | --- |
| Name of *Allocatee*: |  |
| Award control number: |  |
| Total allocation amount: |  |

| **TIP:** Receipt of a prior award or allocation through any of the CDFI Fund's programs will not affect the likelihood of an *Applicant* receiving an *NMTC Allocation* in this round. The CDFI Fund will examine the compliance status of *Applicants* (or their *Affiliates*) that have previously received CDFI Fund awards or allocations.  **TIP:** An *Applicant* that has received (or whose *Affiliates* have received) an *NMTC Allocation* under a previous allocation round is NOT eligible to receive allocations under this allocation round unless minimum threshold requirements regarding the issuance of *QEIs* have been met. Be sure to review the *NOAA* for additional *Applicant* eligibility information. **TIP:** The CDFI Fund will review transaction-level data submitted by *Applicants* that are prior year *Allocatees* through the *Community Investment Impact System (CIIS)* and may seek additional information from *Applicants* to determine whether activities and the *QLICI*s made were consistent with the transactions and activities proposed in the relevant prior-year *Allocation Application(s).* |
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1. If the *Applicant* answered Yes to Question #42, briefly explain the current status of its previous allocation award(s). Be sure to address:
2. If the *Applicant* has made *QLICI*s, describe the types of transactions that have been financed to date. The *Applicant* must discuss the projects that received the largest *QLICI*s in each of the *Applicant*’s three most recent Allocations, as of the *Allocation Application* release date. (If a single project received the *QLICI*s from more than one of the past three awards, substitute the second largest project from the more recent award). If the *Applicant* has received less than three Allocations, it should discuss the three projects that received the largest investments in the last five years. See Application Q&A for additional guidance.

For each project identified, describe how NMTC proceeds were used, including:

* How the CDE ensured that the NMTCs allocated did not exceed the amount necessary to assure project feasibility.
* Efforts to secure alternative sources of capital in the marketplace in order to complete the project.
* Any community outcomes or benefits that were generated as a result of the transaction.
* The source(s) and amount(s) of leveraged debt from all sources (including the percentage of leverage sources derived from the *QALICB*, *Affiliate*s of the QALICB and/or *Project Sponsor*), if any.
* Any investment-related fees and third-party expenses paid by the *QALICB* or the *QALICB’*s affiliates that were paid either to the *Applicant*, its *Affiliates, QEI* investors or directly to any other parties in connection with consideration or receipt of the *QLICI* investment(s) (e.g., CDE upfront and on-going fees, fees and expenses associated with leverage debt, accounting, legal, on-going asset management, loan servicing, back-end fees, etc.).

(Maximum Response Length: 10,000 characters)

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1. If the *Applicant* co-invested in a project(s) with other *CDEs*, explain what actions the *CDE* took to control expenses paid by *QALICBs* and investors (e.g., Co-investing *CDEs* used one set of documents, shared professional expenses, etc.).

(Maximum Response Length: 3,000 characters)

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1. Discuss whether the activities undertaken with the NMTC dollars were consistent (with respect to product offerings; markets served; rates and terms; etc.) with the business strategy presented in the relevant Allocation Application. If the activities were not consistent with the relevant Allocation Application, describe the inconsistencies.

(Maximum Response Length: 3,000 characters)

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1. To the extent the *Applicant’s* past transactions have been structured to allow QALICBs to acquire a portion of *QLICIs* through a put/call option at the end of the seven-year credit period, please quantify the value of the investment acquired by the QALICBs at the end of the seven-year credit period both as a dollar amount and as a percentage of total *QLICIs*.

(Maximum Response Length: 2,000 characters)

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| **TIP:** *Applicants* and/or any *Affiliates* that have shared *Control* of a *CDE* (or *Subsidiary* of a *CDE*) that is a prior round *Allocatee* should answer “Yes” to Question #44 and provide requested responses.**TIP:** *Applicants* providing responses to Question #44 need only make one entry per *Allocatee*, per award for which the *Applicant* has provided *QEI*s regardless of the number of individual *QEI*s made to that *Allocatee* under a single award. For example, if an *Applicant* has made 10 *QEI*s in *Allocatee* X under its second round allocation, then the *Applicant* would provide the aggregate amount of those 10 *QEI*s in its response to Question #44. |
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1. Has the *Applicant* and/or any of its *Affiliates* assumed *Control* of one or more *CDEs* (or *Subsidiary CDEs*) that received an *NMTC Allocation* in a prior round?

\_\_\_\_ Yes \_\_\_\_ No

If Yes, please provide responses to the following:

List the allocation(s) and total *QEIs* invested per allocation in the table. The *Applicant* may use additional space as necessary.

|  |  |
| --- | --- |
| Name of *Allocatee*: |  |
| Award control number: |  |
| Total *QEI* amount invested: |  |

|  |  |
| --- | --- |
| Name of *Allocatee*: |  |
| Award control number: |  |
| Total *QEI* amount invested: |  |

# Exhibit A: Projected Activities

| **Instructions for Exhibit A:** All *Applicants* must complete the tables in Exhibit A based on the *QLICI* activities checked in Question #13. Tables A1-A4 should be consistent with the information provided in Question #13.  |
| --- |

| **TIPs for Exhibit A:**1. If the *Applicant* intends to transfer all or part of its *NMTC Allocation* to its *Subsidiaries*, combine the activities of the *Applicant* and its *Subsidiaries*. Only include those activities to be carried out by the *Applicant* and its *Subsidiaries* relating to equity raised with NMTCs.
2. Only include amounts the *Applicant* (or its *Subsidiaries*) will itself originate (e.g., do not include participation amounts that will be originated by third-parties). The *Applicant* may separately discuss amounts it will leverage or facilitate in the narrative to Question #17, but should clearly distinguish these amounts and should not include them in the tables in Exhibit A.
3. The data included in the tables in Exhibit A, in the aggregate, should not exceed the *Applicant’s* total allocation request unless the *Applicant* intends to invest interest, dividends, or other profits received from *QEI* proceeds into additional *QLICIs*. If the *Applicant* is pursuing such a strategy of reinvestment, it should be further described in the narrative to Question #17, and listed separately in lines 5-8 of Tables A1 and A2; lines 5-6 of Table A3; and line 4 of Table A4. **Do not consolidate reinvestment data into lines 1-4 in A1-A3 and lines 1-3 in A4, where the *Applicant* should only discuss original *QLICIs*.**
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| Table A1: Projected Loans/Investments to *QALICB*s (Estimated) |
| --- |
| Calendar Year(s) | 2018 | 2019 | 2020 | 2021 | 2022 | Total |
| 1 | Total # transactions to be financed  |  |  |  |  |  |  |
| 2 | Total $ amount of financing | $ | $ | $ | $ | $ | $ |
| 3 | $ Amount of financing (debt)  | $ | $ | $ | $ | $ | $ |
| 4 | $ Amount of financing (equity)  | $ | $ | $ | $ | $ | $ |
| 5 | Total # of reinvestment transactions |  |  |  |  |  |  |
| 6 | Total $ amount of reinvested financing | $ | $ | $ | $ | $ | $ |
| 7 | $ Amount of reinvested financing (debt)  | $ | $ | $ | $ | $ | $ |
| 8 | $ Amount of reinvested financing (equity)  | $ | $ | $ | $ | $ | $ |

| Table A2: Projected Loans/Investments in Other *CDE*s (Estimated) |
| --- |
| Calendar Year(s) | 2018 | 2019 | 2020 | 2021 | 2022 | Total |
| 1 | Total # transactions to be financed  |  |  |  |  |  |  |
| 2 | Total $ amount of financing | $ | $ | $ | $ | $ | $ |
| 3 | $ Amount of financing (debt)  | $ | $ | $ | $ | $ | $ |
| 4 | $ Amount of financing (equity)  | $ | $ | $ | $ | $ | $ |
| 5 | Total # of reinvestment transactions |  |  |  |  |  |  |
| 6 | Total $ amount of reinvested financing | $ | $ | $ | $ | $ | $ |
| 7 | $ Amount of reinvested financing (debt)  | $ | $ | $ | $ | $ | $ |
| 8 | $ Amount of reinvested financing (equity)  | $ | $ | $ | $ | $ | $ |

| Table A3: Projected Loan Purchases from Other *CDE*s (Estimated) |
| --- |
| Calendar Year(s) | 2018 | 2019 | 2020 | 2021 | 2022 | Total |
| 1 | Total # selling *CDEs*  |  |  |  |  |  |  |
| 2 | Total # of loan portfolios purchased |  |  |  |  |  |  |
| 3 | Total # of loans purchased |  |  |  |  |  |  |
| 4 | Total $ amount of loan purchases | $ | $ | $ | $ | $ | $ |
| 5 | Total # of loans purchased via reinvested financing  |  |  |  |  |  |  |
| 6 | Total $ amount of loans purchased via reinvested financing | $ | $ | $ | $ | $ | $ |

| Table A4: Projected Financial Counseling and Other Services to Businesses and Entrepreneurs in *Low-Income Communities* (Estimated) |
| --- |
| Calendar Year(s) | 2018 | 2019 | 2020 | 2021 | 2022 | Total |
| 1 | Total # of businesses/entrepreneurs served through counseling or other services |  |  |  |  |  |  |
| 2 | Total estimated hours spent counseling or providing other services per year |  |  |  |  |  |  |
| 3 | Total $ amount to be spent on counseling or providing other services | $ | $ | $ | $ | $ | $ |
| 4 | Total $ amount of reinvestment to be spent on counseling or providing other services | $ | $ | $ | $ | $ | $ |

| **Instructions for Table A5:** *Applicants* must complete Table A5 for each transaction it intends to finance with the requested *NMTC Allocation*. The sum of the Total *Applicant QLICIs* (row h) for all transactions listed in Table A5 must correspond to the total amount of *NMTC Allocation* requested in Question #1.  |
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| **TABLE A5: Proposed Transactions** |
| **Transaction #1** |
| (a) Business Name and Description  | (500 characters) |
| (b) Address | Street, City, State, Zip CodeMultiple Addresses? [Yes/No] |
| (c) Census Tracts | (11 digit number) |
| (d) Located in a Non-Metropolitan County? | [Yes/No] |
| (e) Projected Close Date | [Drop Down: 2018, 2019, 2020, 2021, 2022, 2023] |
| (f) Total Project Costs | $ |
| (g) Total Applicant QLICIs | $ |
| (h) Total Non-QLICI Sources | $ |
| (i) Total QLICIs from Unaffiliated *CDEs* | $ |
| (j) Activity Type | [Drop Down]-Investment in *QALICB*s-Investment in, or loan to, other *CDE* |
| (k) Small Doller and/or Revolving Loan Fund | [Yes/No] | -Purchase of Loans from other *CDE*-*Financial Counseling and Other Services* |
| (l) Business Type | [Check all that apply]-Cultural-Education-Healthcare-Multi-Service Community Organization-For-sale Housing |
| (m) What are the planned uses of financing by the *QALICB* or *CDE*? | [Check all that apply]- Acquisition-non real estate- Acquisition-real estate-Construction -Working Capital | -Hospitality/Tourism-Manufacturing/Industrial-Mixed-use real estate-Office space-Retail -Utilities/Infrastructure-Other (e.g. energy generation, timberland, etc.) |
| (n) Targeted Community Outcomes | [Check all the apply]-Job Creation, -Quality Jobs-Jobs Accessible to *Low-Income Communities*-Commercial Goods or Services to *Low-Income Communities* | -Leasehold Improvements/Buildouts-Equipment Purchase-Inventory Purchase-Other |

# Exhibit B: Track Record of Activities

| **Instructions for Exhibit B:** *Applicants* must complete the Tables B1-B3 in Exhibit B for the Applicant’s (or *Controlling Entity’s*) track record of loans and/or equity investments to Real Estate and *Operating Businesses* (excluding *Restricted NMTC Business Activities*), loans or *Equity* investments to *CDEs*, or purchasing loans from *CDEs*. *Applicants* must complete Table B4 for any loans/investments thatdo not directly correspond to the activities in Question #13 (e.g. *Restricted NMTC Activities*, loans and/or investments in NMTC investment funds or non-*CDE* financial institutions, personal or consumer loans, and residential mortgages). If the *Applicant’s* or the *Controlling Entity’s* track record includes the provision of grants to entities, including real estate, *Operating Businesses,* and/or *CDE*s, do not include these activities in Tables B1-B4 or discuss in the narratives for Questions #19 or #20. An *Applicant* must provide information for the past five years or for as many years as the *Applicant* (or *Controlling Entity*) has been in operation, if it has been in operation for fewer than five years. An *Applicant,* at its discretion*,* may choose to rely upon the track record of its *Controlling Entity*. **In order to list the track record of the *Controlling Entity* in Exhibit B, the *Applicant* must designate a *Controlling Entity* in Question #3. If the *Applicant* chooses to complete the tables in Exhibit B with information from the *Controlling Entity*, it must also use the *Controlling Entity* for populating Table D1 and Table E1.** |
| --- |

| **TIPs for Exhibit B, Tables 1-4:**1. Where indicated in Table B1, enter the dollar amount of debt financing provided by the *Applicant* (or *Controlling Entity)* in row 2a*.* In row 2b, enter the dollar amount of equity financing provided by the *Applicant* (or *Controlling Entity*). Enter all financing from other sources (excluding grant dollars) in row 3. Row 2 will automatically calculate based on your entries in rows 2a and 2b. The *Applicant* may discuss in Question #19 any role the *Applicant* (or *Controlling Entity*) played in leveraging or facilitating financing for which it did not provide direct financing.
2. Grants provided by the *Applicant* (or *Controlling Entity*) must be excluded from Tables B1 – B4. *Equity investment*s into non-profit organizations are considered grants (per the definition of *Equity Investment* in the application glossary).
3. Do not include tax credit equity raised as QEIs from investors in Table B1 or Table B2. Row 2(b) in Table B1 should only include equity financing provided to Real Estate and *Operating Businesses* (excluding *NMTC Restricted Business Activities*). Row 4 in Table B2 should only include equity financing provided to other *CDEs*.
4. For the purpose of completing Tables B1-B4, the *Applicant* must choose to either use its own track record or that of its *Controlling Entity*. If the *Applicant* chooses to use its own track record it must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Applicant* and may not include any of the *Controlling Entity’s* activities. However, if the information in Tables B1-B4 reflects the activities of the *Controlling Entity*, the information must include, in the aggregate, the financing track record of ***all*** *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*. The *Applicant* must discuss track records of both the *Applicant* and *Controlling Entity* in the narrative to Questions #19 or #20 (as applicable). The narrative should clearly distinguish between the track records of each entity.
5. The *Applicant* must distinguish between direct financing provided by the *Applicant* or its *Controlling Entity*, as entered in Table B1, row 2 and Table B4, row 1 and indirect financing (financing provided by third party sources), entered in Table B1, row 3 and Table B4, row 2. *Applicants* should not enter the same data in more than one row.
6. Tables B1-B4 should be mutually exclusive. *Applicants* should not enter the same data in more than one Table in Exhibit B.
7. In the Column titled “2018 Year to Date (YTD),” the *Applicant* can only enter information on activities closed by the *Applicant* or *Controlling Entity* prior to the release date of the *Allocation Application*. The *Applicant* **may not** enter information on activities planned or projected to close after the *Allocation Application* release date.
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**The Tables in Exhibit B reflect the activities of (check one): \_\_\_\_*Applicant* \_\_\_\_\_*Controlling Entity***

| Table B1: Track Record of Loans/*Equity Investments* to Real Estate And *OPERATING Businesses* (Excluding *Restricted NMTC Business Activities*)  |
| --- |
| Calendar Year(s) | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 YTD | Totals (2013-2018) | Totals to *Disadvantaged Businesses and Communities* (2013-2018) | Totals to *Non-Metropolitan Counties*(2013-2018) |
| 1 | Total # businesses financed  |  |  |  |  |  |  |  |  |  |
| 2 | Total $ amount of direct financing provided by the *Applicant to* Real Estate *and Operating Businesses* | $ | $ | $ | $ | $ | $ | $ | $ | $ |
|  |  (a) $ Amount of debt financing  provided by *Applicant*  | $ | $ | $ | $ | $ | $ | $ | $ | $ |
|  |  (b) $ Amount of equity financing  provided by *Applicant*  | $ | $ | $ | $ | $ | $ | $ | $ | $ |
| 3 | $ Amount of financing provided by other sources (including *QALICB* owner equity) to Real Estate and Operating Businesses | $ | $ | $ | $ | $ | $ | $ | $ | $ |

| Table B2: Track Record of Loans/*Equity investments* to Other *CDE*s |
| --- |
| Calendar Year(s) | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 YTD | Totals (2013-2018) | Totals to *Disadvantaged Businesses and Communities* (2013-2018) | Totals to *Non-Metropolitan Counties*(2013-2018) |
| 1 | Total # *CDE*s financed |  |  |  |  |  |  |  |  |  |
| 2 | Total $ amount of financing | $ | $ | $ | $ | $ | $ | $ | $ | $ |
| 3 |  $ Amount of financing (debt) | $ | $ | $ | $ | $ | $ | $ | $ | $ |
| 4 |  $ Amount of financing (equity) | $ | $ | $ | $ | $ | $ | $ | $ | $ |

| Table B3: Track Record of Loan Purchases from Other *CDE*s |
| --- |
| Calendar Year(s) | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 YTD | Totals (2013-2018) | Totals to *Disadvantaged Businesses and Communities* (2013-2018) | Totals to *Non-Metropolitan Counties*(2013-2018) |
| 1 | Total # of loans purchased  |  |  |  |  |  |  |  |  |  |
| 2 | Total $ amount of loans purchased | $ | $ | $ | $ | $ | $ | $ | $ | $ |

| Table B4: Track Record of Loans/*Equity investments* that do not DIRECTLY correspond to the selections in Question #13 (e.g. Restricted NMTC Activities, LOANS OR investments in NMTC investment Funds, non-CDE financial institutions or investment funds, personal or consumer loans, and residential mortgages) |
| --- |
| Calendar Year(s) | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 YTD | Totals (2013-2018) | Totals to *Disadvantaged Businesses and Communities* (2013-2018) | Totals to *Non-Metropolitan Counties*(2013-2018) |
| 1. | Total $ amount of direct financing provided by the *Applicant* | $ | $ | $ | $ | $ | $ | $ | $ | $ |
| 2 | $ Amount of financing provided by other sources (including *QALICB* owner equity)  | $ | $ | $ | $ | $ | $ | $ | $ | $ |

# Exhibit C: Staff and Board Qualifications

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

| Table C1: *Low-Income Community* Accountability |
| --- |
| Board Member Name | Firm | Title at Firm | Advisory or Governing Board Member? | Yrs. on Board | Indicate how the individual is Representative of Low-Income Communities? | Description of the Individual’s Qualifications as an LIC representative, including related LIC community affiliations or experiences. |
|  |  |  | \_\_ Advisory\_\_ Governing |  | \_\_ Resident\_\_ Small business owner\_\_ Employee or board member of a non-*Affiliated* community-based or charitable organization\_\_ Religious leader whose congregation is based in a *Low-Income Community*\_\_ Employee of a governmental agency or department that principally serves *Low-Income Communities*\_\_ An elected official (or works for one) whose constituency is comprised principally of residents of *Low-Income Communities*\_\_ Other (specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Description should focus on the representative’s years and depth of experience serving, working, living in, or operating a business in LICs. (Maximum Response Length: 2000 characters) |

| Table C2: Management Capacity |
| --- |
| Name | Firm | Title at Firm | Type of activity with *Applicant* in each Capacity(Check all that apply) | Yrs. with (or years providing services to) the *Applicant* | Position with *Applicant*(Check all that apply) | Description of Individuals Qualifications |
|  |  |  | \_\_ NMTC Application Preparation/Review\_\_ Capital-raising \_\_ Capital deployment\_\_ Sourcing or loan underwriting\_\_ Asset management\_\_ Loan servicing\_\_ NMTC Program compliance\_\_ Provision of services to *QALICB*s / residents (including *FCOS*)\_\_ Community Outreach\_\_ Legal services\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_ Governing board (GB) chair\_\_ GB member on loan/investment committee \_\_ Other GB member\_\_ Advisory board member\_\_ Executive Director or equivalent\_\_ Chief Financial Officer or equivalent\_\_ Dir. of Lending/investing or equivalent\_\_ Other key management\_\_ Loan/investment Officer or equivalent\_\_ Compliance Officer\_\_ Other finance staff\_\_ Contracted consultant\_\_ Other (specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Description of Individual’s qualifications should include years of relevant experience and how this experience is similar to the individual’s role in managing the *Applicant’s* NMTC program. (Maximum Response Length: 2000 characters) |

# Exhibit D: Asset Management and Income & Operating Expenses

| **Instructions for Table D1**: For each of the past three fiscal years, indicate the total number and dollar amount of loans and *Equity Investments* outstanding to both real estate and *Operating Businesses*. For each fiscal year end, report in rows 4 and 9 the percentage of loans and mandatory dividend payments, on a dollar basis, that were 90 days past due (e.g., the combined dollar amount of principal, mandatory dividend, and interest payments 90 days or more past due / the total dollar amount of loans and *Equity Investments* outstanding at fiscal year-end). In rows 5 and 10, enter the total dollar amount of capital from loans and *Equity Investments* written off during the fiscal year (e.g., total dollar value of loans and/or *Equity Investments* written off less capital recovered). If the *Applicant* (or *Controlling Entity*) has not made loans to either real estate or *Operating Businesses*, check the corresponding “N/A” box. If the *Applicant* (or *Controlling Entity*) has no delinquencies at the end of a particular fiscal year, indicate “0” in lines 4 and 9, as appropriate. If the *Applicant* (or *Controlling Entity*) has had no write offs of loans and/or equity during a particular fiscal year, indicate “0” in lines 5 and 10, as appropriate. **If the *Applicant* chooses to complete any table in Exhibit A with information from the *Controlling Entity*, it must do so for all Tables where *Controlling Entity* is an option, including Table D1*.*** If the *Applicant* completes Table D1 for the *Applicant*, the information must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Applicant* and may not include any of the *Controlling Entity’s* activities. However, if the *Applicant* completes Table D1 for the *Controlling Entity*, the information must include, in the aggregate, the financing track record of all *Subsidiaries* of the *Controlling Entity*, including the *Applicant* if the *Applicant* is a *Subsidiary* of the *Controlling Entity*.  |
| --- |

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

| Table D1: Investment Portfolio |
| --- |
| Fiscal Year(s) | FYE 2015 | FYE 2016 | FYE 2017 |
| 1. | ***Operating Businesses*** Loans & *Equity Investments* Delinquent or written-off 🞎 N/A  |
| 2. | # of loans & *Equity Investments* outstanding |  |  |  |
| 3. | Total $ Amount of loans & *Equity Investments* outstanding | $ | $ | $ |
| 4. | Delinquency rate associated with operating businesses | \_\_\_\_% | \_\_\_\_% | \_\_\_\_% |
| 5. | Total $ amount of write-offs of loans & *Equity Investments* to operating businesses | $ | $ | $ |
| 6. | ***Real Estate*** Loans & *Equity Investments* Delinquent or written-off 🞎 N/A  |
| 7. | # of loans & *Equity Investments* outstanding |  |  |  |
| 8. | Total $ amount of loans & *Equity Investments* outstanding | $ | $ | $ |
| 9. | Delinquency rate associated with real estate  | \_\_\_\_% | \_\_\_\_% | \_\_\_\_% |
| 10. | Total $ amount of write-offs of loans & *Equity Investments* to real estate  | $ | $ | $ |

| Instructions for Table D2: Itemize the individual fees that represent the Fee Structure the Applicant (or Controlling Entity) anticipates will typically apply to investments closed with the requested *NMTC Allocation* and result in compensation to the *Applicant* or an Applicant *Affiliate* (or *Controlling Entity*), an Investor or Investor *Affiliate*, or an Unaffiliated Third-Party. The fees should be based on the Fee Structure (Type, Source, Recipient and Amount) that the *Applicant* expects it will apply, on average, to the proposed NMTC investments listed in Table A5. In completing this table, *Applicants* should assume that they will receive the full amount of the requested *NMTC Allocation. Applicants* must *s*elect the Type of Fee, the Source (Payer), the Recipient (Payee), the Amount, and provide a Description.  *Applicants* can add as many rows as necessary. * The Applicant must disclose every fee to the extent practicable, regardless of who the expected recipient is, when it is expected to be charged (e.g., upfront, on an ongoing basis or at investment exit), and where in relation to the *QEI* it is expected to be charged. For example, an Applicant using the leveraged model must include any fee that will be charged above the *QEI* at the Investment Fund level.
* The Applicant must not include routine transaction costs such as legal and accounting expenses that are not part of the Applicant’s fee structure.
* The Applicant must include any fee that will be charged to compensate an Unaffiliated Third-Party that will assist the Applicant in operating any aspect of its NMTC line of business.
* The Applicant must consider the entire NMTC investment lifecycle and as such, include: upfront Fees such as origination, placement, or sub-allocation fees; ongoing fees such as asset management fees, additional bps charged on leverage loan, etc.; and any backend, exit or success fees including the retention of the residual tax credit equity, etc.
* Include as fees any linked payments and donations, if such payments and donations were not part of the original scope of the project (e.g. a donation to a non-profit or a category of non-profit selected by the Applicant as a condition of making NMTC financing available to the project).
 |
| --- |

|  |
| --- |
| Table D2 – Fee Structure  |
| Type  | Source (Payer) | Recipient (Payee) | Amount in % | Description (maximum of 50 characters) |
|  Upfront Fee | Investor or Investor Affiliate | *Applicant* or Applicant Affiliate | 2.00% | Placement Fee |
|  Upfront Fee | Investor or Investor Affiliate | Unaffiliated Third-Party | 2.00% | Placement Fee |
| Ongoing Fee | *QALICB* or *QALICB* Affiliate | *Applicant* or Applicant Affiliate | 3.50% | Asset Management Fee |
| Ongoing Fee | *QALICB or QALICB* Affiliate | *Applicant* or Applicant Affiliate | 1.05% | Interest Income |
| Backend Fee | *QALICB or QALICB* Affiliate | *Applicant* or Applicant Affiliate | 1.00% | Exit Fee |
| Maximum Average Fee Percentage | 9.05% |  |

| **Instructions for Table D3:** All *Applicants* must complete Table D3. *Applicants* should ensure that data entered into Table D3 takes into consideration the projected loans and investments listed in Exhibit B: Projected Activities. *Applicants* should assume that *NMTC Allocation* awards will be made in late XXXX. *Applicants* must provide an explanation of Table D3 in response to Question #33(e). The information in Table D3 must reflect the projected income and operating expense of the *Applicant*.1. When entering income data by source, the *Applicant* must include any and all fees and other sources of compensation that the *Applicant* and/or its *Affiliates* will charge:
	1. **Investors** (including investment partnership funds, if using the leverage structure). Be sure to include any income generated prior to the *QEI* being made, any *QEI* proceeds retained by the *Applicant*, *Controlling Entity* or its *Subsidiary* *CDEs*;
	2. ***QALICBs***  (i.e. borrowers/investees) fees and other sources of compensation paid directly to the *CDE*, including interest income;
	3. ***Affiliates***, including the *Controlling Entity* or *Subsidiary* *CDEs*; and
	4. **Other sources** of revenue, including grants, contributions, consulting, other line(s) of business, etc.
2. When entering expenses:
	1. **Fixed Expenses** are expenses incurred by *Applicant* that are unlikely to vary regardless of the amount of the *NMTC Allocation* award or size and number of *QLICIs* considered or made. For example, staff, facilities, Board/Insurance, *CDE* audit, etc.
	2. **Variable Expenses** are all other expenses incurred by the *Applicant*, including compliance, accounting, tax returns, sub-*CDE* audits, loan servicing, etc.
3. Data should be stated in dollars by fiscal year, starting with the fiscal year 2019.
 |
| --- |

| Table D3: Income and Operating Expenses |
| --- |
| Fiscal Year  | 2019 | 2020 | 2021 | 2022 | 2023 | 2024 | 2025 | After 2025 |
| 1. Income by source: |
| (a)  Investor(s) |  |  |  |  |  |  |  |  |
| (b) *QALICBs or Affiliates* |  |  |  |  |  |  |  |  |
| (c) *CDE’s Affiliates*  |  |  |  |  |  |  |  |  |
| (d) Other Sources  |  |  |  |  |  |  |  |  |
| Total Income | $ |  $ | $ | $ | $ | $ | $ | $ |
| 2. Expenses: |  |  |  |  |  |  |  |  |
| (a) Fixed  |  |  |  |  |  |  |  |  |
| (b) Variable  |  |  |  |  |  |  |  |  |
| Total Expenses | $ |  $ | $ | $ | $ | $ | $ | $ |
| Profit/(Loss) | $  |  $ | $ | $ | $ | $ | $ | $ |

# Exhibit E: Investor Strategy

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

| Table E1: Track Record of Raising Capital from Investors |
| --- |
| This table reflect the activities of (check one): \_\_\_\_\_*Applicant*  \_\_\_\_\_*Controlling Entity* |
| **Calendar Year(s)** | **2013** | **2014** | **2015** | **2016** | **2017** | **2018 YTD** | **Total** |
| 1 | Total # of investments |  |  |  |  |  |  |  |
| 2 | Total $ amount of investments | $ | $ | $ | $ | $ | $ | $ |
| 3 | Total # of grants1 |  |  |  |  |  |  |  |
| 4 | Total $ amount of grants2 | $ | $ | $ | $ | $ | $ | $ |
| 5 | Total # of below market rate loans1 |  |  |  |  |  |  |  |
| 6 | Total $ amount of below market rate loans2 | $ | $ | $ | $ | $ | $ | $ |
| 7 | Total # of market rate loans1 |  |  |  |  |  |  |  |
| 8 | Total $ amount of market rate loans2 | $ | $ | $ | $ | $ | $ | $ |
| 9 | Total # of *Equity Investments*1 |  |  |  |  |  |  |  |
| 10 | Total $ amount of *Equity Investments* 2 | $ | $ | $ | $ | $ | $ | $ |

1 Values should be a subset of Line 1.

2 Values should be a subset of Line 2.

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

| Table E2: RECENT *QEI* INVESTORS FOR Previous Allocatees |
| --- |
|  | Name of Investor | Type of Investment2 | Using Leverage Structure? | *Affiliate* of the *Applicant* or *Controlling Entity*? | *Affiliate* of the *QALICB* or *Project Sponsor*? | Total Funding Provided from 2013-2018  |
| 1 |  |  | Yes/No | Yes/No | Yes/No | $ |
| 2 |  |  | Yes/No | Yes/No | Yes/No | $ |
| 3 |  |  | Yes/No | Yes/No | Yes/No | $ |
| 4 |  |  | Yes/No | Yes/No | Yes/No | $ |
| 5 | **TOTAL** | **N/A** | **N/A** | **N/A** | **N/A** | **$** |

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

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

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

| Table E3: Identification of Investments and Investor *Commitments* |
| --- |
|  | Name of Investor | Type of Investment1 | Using Leverage Structure? | Affiliate of the *Applicant*? | Previous Investor?2 | Total Funding Provided from 2013-2018 (if previous investor) | Dollar Amount Sought | Status of Request3 | Estimated or Actual Date for Receipt of Funds |
| 1 |  |  | Yes/No | Yes/No | Yes/No | $ | $ |  |  |
| 2 |  |  | Yes/No | Yes/No | Yes/No | $ | $ |  |  |
| 3 |  |  | Yes/No | Yes/No | Yes/No | $ | $ |  |  |
| 4 |  |  | Yes/No | Yes/No | Yes/No | $ | $ |  |  |
| 5 | **TOTAL** | **N/A** | **N/A** | **N/A** | **N/A** | **$** | **$** | **N/A** | **N/A** |

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

2 A previous investor is any investor that has invested in the *Applicant*, its *Controlling Entity*, or any *Subsidiary* entities since 2013.

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

# Glossary of Terms

|  |  |
| --- | --- |
| Affiliate | Any legal entity that *Controls*, is *Controlled* by, or is under common *Control* with, the *Applicant*. |
| Alaska Native Village Statistical Areas | Areas that represent the more densely settled portion of Alaska Native Villages (ANVs).  The ANVs constitute associations, bands, clans, communities, groups, tribes, or villages recognized pursuant to the Alaska Native Claims Settlement Act of 1971 (Public Law 92-203). |
| Allocatee | An *Applicant* that receives an *NMTC Allocation*. |
| Allocation Agreement | An agreement to be entered into by the CDFI Fund and a *CDE*, relating to the *NMTC Allocation*, pursuant to IRC §45D(f)(2). |
| Allocation Application | The application form, issued by the CDFI Fund pursuant to a *Notice of Allocation Availability (NOAA)*, to be completed and submitted by an *Applicant* in order to be considered for an *NMTC Allocation*. |
| Applicant | Any legal entity that is applying to the CDFI Fund for the receipt of an *NMTC Allocation*. This term includes any *Subsidiary* of the *Applicant*, which may receive a transfer of all or part of an *NMTC Allocation* from the *Applicant*. |
| Application Contact Person | The individual that the CDFI Fund may contact during the course of the *Allocation Application* review with questions or requests for additional information regarding the *Allocation Application*. |
| Assistance Agreement | A written agreement between the CDFI Fund and an entity receiving assistance under the *CDFI* Program and Native American *CDFI* Assistance (NACA) Program, specifying the terms and conditions of assistance including, without limitation, performance and financial soundness goals, if applicable. See 12 CFR §1805.104(f). |
| Authorized Representative | An officer, or other individual, who has the actual authority to sign for and make representations on behalf of the *Applicant*. This person will also be the primary point of contact for the *Applicant*. |
| CDE Certification Application | The application form, issued by the CDFI Fund, to be completed and submitted by an entity in order to be certified as a *CDE*. |
| Commitment | A document in which an investor commits to make an investment in the *Applicant* in a specified amount and on specified terms. |
| Community Development Entity (CDE) | Under IRC §45D(c)(1), any domestic corporation or partnership if: 1. The primary mission of the entity is serving, or providing investment capital for, *Low-Income Communities* or *Low-Income Persons*;
2. The entity maintains accountability to residents of *Low-Income Communities* through their representation on any governing board of the entity or on any advisory board to the entity; and
3. The entity is certified by the CDFI Fund as a CDE. *Specialized Small Business Investment Companies (SSBICs)* and *Community Development Financial Institutions (CDFIs*) are deemed to be CDEs in the manner set forth in Guidance published by the CDFI Fund (66 Federal Register 65806, December 20, 2001).
 |
| Community Development Financial Institution (CDFI) | An entity that has been certified by the CDFI Fund as meeting the criteria set forth in section 103 of the Community Development Banking and Financial Institutions Act of 1994 (12 U.S.C. 4702). For further details, refer to the CDFI Program regulations set forth at 12 CFR 1805.201. |
| Community Investment Impact System (CIIS) | A web-based data collection system that CDFIs and CDEs will use to submit their Institution-Level Reports and Transaction-Level Reports to the CDFI Fund. |
| Control  | For purposes of this application is defined as:1. Ownership, control, or power to vote more than 50 percent of the outstanding shares of any class of voting securities of any entity, directly or indirectly or acting through one or more other persons; or
2. Control in any manner over the election of a majority of the directors, trustees, or general partners (or individuals exercising similar functions) of any other entity; or
3. Power to exercise, directly or indirectly, a controlling influence over the management policies or investment decisions of another entity, as determined by the CDFI Fund.
 |
| Controlling Entity | An entity that Controls an Applicant, and has a controlling influence over the day-to-day management and operations (including investment decisions) of the Applicant and of any Subsidiary entities to which the Applicant may transfer its allocation of tax credit authority.  When describing past activities of the Controlling Entity, the activities of the Applicant may be considered as part of the track record of the Controlling Entity.   |
| Controlling Entity Representative | An officer, or other individual, who has the actual authority to sign for and make representations on behalf of the *Controlling Entity*. This person will also be the primary point of contact for the *Controlling Entity*, should the CDFI Fund need to confirm representations made about the relationship between the *Applicant* and *Controlling Entity*. |
| Disadvantaged Business | A business that is (a) located in a *Low-Income Community*; or (b) is owned by a *Low-Income Person*; or (c) a business that has inadequate access to investment capital. |
| Disadvantaged Community | This term has the same meaning as a *Low-Income Community.* |
| Enforcement Action | A legally enforceable action or administrative order taken by a federal regulator (FDIC, OCC, NCUA) when a regulated financial institution is found to be in an unsatisfactory condition (e.g. violations of laws, rules or regulations, final orders or conditions imposed in writing; unsafe or unsound practices; and for breach of fiduciary duty by institution-affiliated parties). |
| Equity Equivalent Loan | A loan that has certain equity-like provisions, including required principal and interest payments only from cash flow and a flexible maturity date. Note that the definition of this term under the *CDFI* Program and NMTC Program is more flexible than the definition of the same term under the Bank Enterprise Award (BEA) Program. |
| Equity Investment | Under IRC §45D(b)(6) and the *NMTC Program Income Tax Regulations*, Equity Investment means any stock (other than nonqualified preferred stock as defined in IRC §351(g)(2)) in an entity that is a corporation and any capital interest in an entity that is a partnership.  |
| Federal Indian Reservation | Area of land reserved for a tribe or tribes under treaty or other agreement with the United States, executive order, or federal statute or administrative action as permanent tribal homelands, and where the federal government holds title to the land in trust on behalf of the tribe. |
| Financial Counseling and Other Services (FCOS) | Advice provided by a *CDE* relating to the organization or operation of a trade or business. See 26 CFR 1.45D-1(d)(7). |
| Food Desert | A low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store. Census tracts qualify as food deserts if they meet low-income and low-access thresholds established by the USDA and can be found using the Food Access Research Atlas at <http://www.ers.usda.gov/data-products/food-access-research-atlas.aspx> |
| FTE | A full time equivalent (FTE) is at least a 35-hour work week.  |
| HawaiianHome Lands | Areas held in trust for Native Hawaiians by the state of Hawaii, pursuant to the Hawaiian Homes Commission Act of 1920, as amended.   |
| Letter of Interest/Intent | A document in which an investor expresses a preliminary interest in making an investment in the *Applicant*. |
| Low-Income Community (LIC) | Under IRC §45D(e)(1), any population census tract if:1. The poverty rate for such tract is at least 20 percent, or
2. (a) In the case of a tract not located within a metropolitan area, the median family income for such tract does not exceed 80 percent of statewide median family income, or (b) in the case of a tract located within a metropolitan area, the median family income for such tract does not exceed 80 percent of the greater of statewide median family income or the metropolitan area median family income.

With respect to IRC §45D(e)(1)(B), possession-wide median family income shall be used (in lieu of statewide income) in assessing the status of census tracts located within a possession of the United States.Under IRC §45D(e)(2), *Targeted Populations* will also be treated as *Low-Income Communities*. See IRS Notice 2006-60.Under IRC §45D(e)(3), in the case of an area that is not tracted for population census tracts, the equivalent county divisions (as defined by the Bureau of the Census for purposes of determining poverty areas) shall be used for purposes of defining poverty rates and median family incomes. See IRC §45D(e) for additional criteria. |
| Low-Income Person | Any individual having an income, adjusted for family size, of not more than:1. For metropolitan area*s*, 80 percent of the area median family income; and
2. For non-metropolitan areas, the greater of (a) 80 percent of the area median family income or (b) 80 percent of the statewide non-metropolitan area median family income.
 |
| Minority-owned or Minority-controlled | Minority-owned for-profit entity: A for-profit entity that is not a MDI and that has at least 51 percent of its equity ownership interest being owned by individuals who identify themselves as Black American, Asian American, Hispanic American, or Native American. Minority-controlled not-for-profit entity: A not-for-profit entity with at least 51 percent of its Board of Directors comprised of individuals who identify themselves as Black American, Asian American, Hispanic American, or Native American. Minority Depository Institution (MDIs): An entity that is designated by the FDIC as a Minority Depository Institution.  |
| New Markets Venture Capital Company (NMVCC) | An entity designated as a NMVCC by the Small Business Administration under the New Markets Venture Capital Company Program. See 13 CFR 108.10 for more information. |
| Non-Metropolitan Counties | Counties not contained within a Metropolitan Statistical Area, as such term is defined in OMB Bulletin No. 10–02 (Update of Statistical Area Definitions and Guidance on Their Uses) and applied to the 2010 census tracts.  |
| Notice of Allocation | Notification to the *Allocatee* from the CDFI Fund which informs the *Allocatee* of its receipt of an *NMTC Allocation* subject to the terms and conditions set forth in the notice (see applicable *NOAA*). |
| Notice of Allocation Availability (NOAA) | A document published by the CDFI Fund in the Federal Register that provides specific guidance on how a *CDE* may apply for an *NMTC Allocation*, the competitive procedure through which such allocations will be made, and the actions that will be taken by the CDFI Fund to ensure that proper allocations are made to appropriate entities. The *NOAA* published in conjunction with the 2014 *Allocation Application* will only apply to the Round. |
| NMTC Allocation | An allocation of tax credit authority pursuant to the New Markets Tax Credit Program. |
| NMTC Program Income Tax Regulations | The regulations promulgated by the Internal Revenue Service which provide guidance for taxpayers claiming the New Markets Tax Credit under IRC §45D. See 26 CFR 1.45D-1 for more information. |
| Off-reservation Trust Lands | Areas for which the United States holds title in trust for the benefit of a tribe that is located outside the boundaries of a Federal Indian Reservation but is always associated with a specific federally recognized reservation and/or tribal government. |
| Operating Business | Any business whose predominant business activity (i.e. activity that generates more than 50 percent of the business’ gross income) does not include the development (including construction of new facilities and rehabilitation/enhancement of existing facilities), management, or leasing of real estate. |
| Principal | As defined by 31 C.F.R. Part 19.995. *Principal* means—(a) An officer, director, owner, partner, principal investigator, or other person within a participant with management or supervisory responsibilities related to a covered transaction; or(b) A consultant or other person, whether or not employed by the participant or paid with Federal funds, who—(1) Is in a position to handle Federal funds;(2) Is in a position to influence or control the use of those funds; or,(3) Occupies a technical or professional position capable of substantially influencing the development or outcome of an activity required to perform the covered transaction. |
| Project Sponsor | An entity that owns or *Controls* the *QALICB*.  |
| Public Contact Person | The individual that will field public inquiries (i.e. from potential *QALICB*s) if the *Applicant* is selected to receive an *NMTC Allocation*. This contact information will be published as part of the Award Announcement for the *NMTC Allocation* round and available to the public in the CDFI Fund’s monthly *QEI* Issuance Report.  |
| Qualified Active Low-Income Community Business (QALICB) | Under IRC §45D(d)(2), any corporation (including a non-profit corporation) or partnership if for any taxable year:1. At least 50 percent of total gross income of such entity is derived from the active conduct of a qualified business within any *Low-Income Community*;
2. A substantial portion of the use of the tangible property of such entity (whether owned or leased) is within any *Low-Income Community*;
3. A substantial portion of the services performed for such entity by its employees are performed in any *Low-Income Community*;
4. Less than 5 percent of the average of the aggregate unadjusted bases of the property of such entity is attributable to collectibles (as defined in IRC §408(m)(2)) other than collectibles that are held primarily for sale to customers in the ordinary course of such business; and
5. Less than 5 percent of the average of the aggregate unadjusted bases of the property of such entity is attributable to nonqualified financial property (as defined in IRC §1397C(e)).

Please refer to the *NMTC Program Income Tax Regulations* at 26 CFR 1.45D-1(d)(4) for more information. |
| Qualified Equity Investment (QEI) | Under IRC §45D(b)(1), any *Equity Investment* in a *CDE* if:1. Such investment is acquired by the investor at its original issue (directly or through an underwriter) solely in exchange for cash;
2. Substantially all of such cash is used by the *CDE* to make *QLICIs*; and
3. The investment is designated for purposes of IRC §45D by the *CDE* as a QEI. QEI also includes an *Equity Investment* purchased from a prior holder, to the extent provided in IRC §45D(b)(4).

QEI does not include any *Equity Investment* issued by a *CDE* more than five years after the date the *CDE* receives an *NMTC Allocation*. Please refer to the *NMTC Program Income Tax Regulations* at 26 CFR 1.45D-1(c) and related Internal Revenue Service notices for more information.  |
| Qualified Low-Income Community Investments (QLICI) | Under IRC §45D(d)(1), a *QLICI* is:1. Any capital or *Equity Investment* in, or loan to, any *QALICB* (as defined in IRC§45D(d)(2));
2. The purchase from a *CDE* of any loan made by such entity that is a *QLICI*;
3. *Financial Counseling and Other Services* to businesses located in, and residents of, *Low-Income Communities*; and
4. Any *Equity Investment* in, or loan to, any *CDE*.

Please refer to the *NMTC Program Income Tax Regulations* at 26 CFR 1.45D-1(d)(1) for more information. |
| Real Estate Activities | Refers to the development (including construction of new facilities and rehabilitation/enhancement of existing facilities), acquisition, management or leasing of real estate by a business. |
| Restricted NMTC Business Activities | * + - 1. Certain businesses that engage in the rental of real property, if:
				1. The property is residential rental property as defined by IRC §168(e)(2)(A), or
				2. There are not substantial improvements on the property, or
				3. A lessee of the real property is an excluded business as described in 2(b) below.
			2. Specific businesses and activities excluded under Treasury Regulation §1.45D-1(d)(5)(ii) and listed below:
				1. Trades or businesses consisting predominantly of the development or holding of intangibles for sale or license.
				2. Trades or businesses consisting of the operation of any private or commercial golf course, country club, massage parlor, hot tub facility, suntan facility, race track or other facility used for gambling, or any store for which the principle business is the sale of alcoholic beverages for consumption off the premises.

Farming (within the meaning of IRC §2032A(e)(5)(A) or (B)) if, as of the close of the taxable year of the taxpayer conducting such trade or business, the sum of the aggregate unadjusted basis (or, if greater, the fair market value) of the assets owned by the taxpayer that are used in such trade or business, and the aggregate value of the assets leased by the taxpayer that are used in such trade or business, exceeds $500,000. Two or more trades or businesses will be treated as a single trade or business under rules similar to the rules of IRC §52(a) and (b).  |
| Rural *CDE* | A Rural CDE is one that has a track record of at least three years of direct financing experience, has dedicated at least 50 percent of its direct financing dollars to *Non-Metropolitan Counties* over the past five years, and has committed that at least 50 percent of its NMTC financing dollars with this Allocation will be deployed in such areas. Non-Metropolitan counties are counties not contained within a Metropolitan Statistical Area, as such term is defined in OMB Bulletin No. 10–02 (Update of Statistical Area Definitions and Guidance on Their Uses) and applied using 2010 census tracts. |
| Small Business Investment Company (SBIC) | An entity defined in 15 USC 662(3). |
| Specialized Small Business Investment Company (SSBIC) | An entity defined in IRC §1044(c)(3). |
| Subsidiary | Any legal entity that is owned or *Controlled* directly or indirectly by an *Applicant*. This term includes series funds, which are separate investment funds *Controlled* by an *Applicant*. |
| Targeted Population | As defined in 12 U.S.C. 4702(20) and 12 C.F.R. 1805.201, the term “targeted population” means individuals, or an identifiable group of individuals, including an Indian Tribe, who (A) are *Low-Income Persons*; or (B) otherwise lack adequate access to loans or investments. |
| Unrelated  | Persons who are not related within the meaning of IRC §267(b) or IRC §707(b)(1). |

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