# CDFI Fund Annual Certification and Data Collection Report Form Instructions

**Purpose:**

The primary intent of the Annual Certification and Data Collection Report Form (the “Form”) is to ensure that Community Development Financial Institutions (CDFI) continue to meet the requirements to be certified CDFIs.[[1]](#footnote-1) It is also a method to ensure that organizational information is updated annually. The financial and portfolio data will be used by the CDFI Fund to gain insight on the CDFI industry. Information provided in these sections will not impact a CDFI’s certification status or applications for CDFI Fund programs.

**Overview:**

Please refer to these instructions for greater clarity and detail regarding what information should be included in order to respond to each question in the Form. It is highly recommended that you have access to the following documents, if applicable to your organization type, in order to accurately and thoroughly complete the Form:

* Your organization’s Balance Sheet (Statement of Financial Position),
* Your organization’s Income Statement (Statement of Activities or Statement of Operations or Profit and Loss Statement), and
* For Banks and Thrifts, Consolidated Reports of Condition and Income; or
* For Credit Unions, 5300 Call Report.

**Part I: Organization Information**

This Form requires you to verify, update, and correct organization profile information. In order to update some of the data in this part, an authorized organization account administrator must access the organization’s organization profile. If you are an authorized account administrator, you can access the organization profile page by selecting this **link**.

**TIP:** This is an opportunity to verify, on an annual basis, that the organization contact information is accurate and that there have been no changes to the authorized account administrator(s) who should have access to the organization’s account.

| **Number** | **Report Item** | **Instructions** |
| --- | --- | --- |
| **1. Organization Information** |
| 1a. | Organization Name | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page.  |
| 1b. | Employer Identification Number (EIN) | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page.  |
| 1c. | Fiscal Year End | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page. |
| 1d. | Tax Status | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page.  |
| 1e. | Certified CDFI Serving Native Communities | Select “yes” if your CDFI meets the definition of a Certified Native CDFI. Otherwise select “no.” The definition for Certified Native CDFI can be found in the Glossary. |
| 2. | Organization Type | Please select your organization type from the types listed in the Form. Definitions for each organization type may be found in the Glossary. The Organization Types include:* Bank or Thrift
* Credit Union
* Depository Institution Holding Company
* Loan Fund
* Venture Capital Fund
 |
| 2a. | FDIC Charter Number *(Banks and Thrifts Only)* | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page.  |
| 2b. | Bank Holding Company Number *(Banks and Thrifts Only)* | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page.  |
| 2c. | Office of Thrift Supervision (OTS) Docket Number *(Thrifts Only)* | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page. |
| 2d. | NCUA Number *(Credit Unions Only)* | This information is auto-populated from the organization profile page. To make changes to this information, an authorized account administrator must update the organization profile page. |
| 3. | Line of Business | Please select your Line of Business from the dropdown menus. Definitions for each Line of Business can be found in the Glossary. These are high-level categories. Categories included under a category are listed below. The Lines of Business include: * Business Finance
* Commercial Real Estate Finance
	+ Real Estate Loans
	+ Community Facilities Finance (e.g., Charter Schools, Health Centers)
* Consumer Finance
	+ Student Loans
	+ Unsecured Credit Card Loans
	+ Vehicle Loans
	+ Other Unsecured Loans
* Intermediary Finance
* Microfinance
* Residential Real Estate Finance
	+ 1 – 4 Family Residential Loans
	+ Multifamily Housing Loans
* Other

**TIP:** Loans to Business reported by banks may include those for Agricultural Production, Commercial and Industrial, Construction and Land Development, and Farmland. Credit Unions typically classify business loans (including lines or letters of credit) to include commercial, corporate, business investment or agricultural purposes. Loan Funds typically provide small business loans including lines of credit and working capital loans. Please note however that all certified CDFIs should report separately any business loan less than $50,000 under the category “microfinance.”**TIP:** When Real Estate Finance is used for mixed use properties the amounts should be associated with the predominant use of the property. For example, if 80 percent of a property is used towards Housing Finance and 20 percent is used towards Commercial Real Estate Finance the amount should be attributed to Housing Finance. |
| 3a. | Primary Line of Business | Identify the CDFI’s Primary Line of Business using the dropdown menu. You are limited to only one primary Financing Activity for this question. **TIP:** The Primary Line of Business selected should correspond to the organization’s predominant Financing Activity based on the dollar amount of dedicated to support the provision of Financial Products.  |
| 3b. | Secondary Line of Business | Identify the CDFI’s Secondary Line of Business using the dropdown menu. You are limited to one secondary Financing Activity for this question. If the CDFI only has one line of business, select “None” for this question.**TIP:** The Secondary Line of Business selected should correspond to the organization’s second most predominant Financing Activity based on dollar amount dedicated to support the provision of Financial Products.  |
| 4.  | Credit Union Membership *(Credit Unions Only)* | Question 4 only applies to Credit Unions and is not displayed for other organization types.  |
| 4a. | Total Number of Credit Union Members | Report the total number of Credit Union Members as of the last day of the Credit Union’s fiscal year. |
| 4b. | Total Number of Credit Union Members in the Target Market(s) | Report the total number of Credit Union Members in the CDFI’s currently Approved Target Market(s) as of the last day of the Credit Union’s fiscal year. |
| 5. | Full-Time Equivalent (FTE) Staff Time  | Report the total number of Full-Time Equivalent (FTE) Staff. This number should include contractor hours. The purpose of this section is to determine if an organization is a Financing Entity based on a predominant amount of staff time dedicated to the provision of financial products or services. In addition, FTE data will be used to report on FTEs within the certified CDFI industry. 5a and 5b should add up to 100% of FTE time dedicated to support of Financial Products and/or Services and Development Services. An FTE is defined as an employee, or sum of employees, that work at least a 35 hours per week. If two part-time employees work 20 hours per week, they would represent one FTE. FTEs may also include staff that manage activities.**TIP:** This should: *Include* all full-time and part-time employees. *Include* contractors, consultants and volunteers that perform ongoing operations. *Exclude* temporary employees. *Exclude* professional services conducted outside of the office by third parties such as accounting, bookkeeping, and legal counsel. |
| 5a. | Percentage of FTE and contractor time dedicated to providing Financial Products and/or Services *(Unregulated Only)* | Estimate the percentage of FTE time dedicated to providing Financial Products and/or Services.  This may include products such as: Loans, Equity Investments, Loan purchases, Loan Guarantees, and similar financing activities; or services such as: checking, savings accounts, check cashing, money orders, certified checks, automated teller machines, deposit-taking, safe deposit box services, and/or other similar services. If applicable, include FTE information for staff that manage activities. |
| 5b. | Percentage of FTE and contractor time dedicated to providing Development Services *(Unregulated Only)* | Estimate the percentage of FTE time dedicated to providing Development Services. May include: Business Technical Assistance, Credit Counseling, Financial Education, Homeownership Counseling, Housing Technical Assistance, Real Estate Technical Assistance. If applicable, include FTE information for staff that manage activities. |
| 5c. | Total number of FTE Staff *(All CDFIs)* | Total number of FTE time dedicated to providing support towards CDFI-related activities. |

**Part II: Verification of CDFI Re-Certification Eligibility**

In this portion of the Form, you will be asked to confirm that your organization continues to meet the certification eligibility criteria based on the data submitted in your previously approved CDFI certification application. If your organization’s information changed, you are required to complete a Certification Amendment Form. You will not be able to submit the Form if a Certification Amendment Form is required and not completed and submitted along with the Form. Definitions for all criteria are found in the Glossary.

| **Number** | **Report Item** | **Instructions** |
| --- | --- | --- |
| 1. **Legal Entity**
 |
| 1a. | The organization continues to be the same legal entity, duly formed and in good standing, since it was certified by the CDFI Fund. | Indicate whether the CDFI is a Legal Entity, duly formed and in good standing under the laws of its state of incorporation. A “yes” response means there has been no change.A “no” response requires completion of the Certification Amendment Form. The respondent must describe how their ability to meet the legal entity changed.**TIP:** If any of the aspects of the organization’s legal status, such as name or incorporation information, changed in the last fiscal year you must select “no” and complete a CDFI Certification Amendment Form. |
| 1b. | The organization has not amended its organizational documentation (e.g., articles of incorporation, bylaws, charter) since the organization’s CDFI certification was last approved by the CDFI Fund. | Indicate whether the organization amended its organizational documentation since its most recent certification by the CDFI Fund. A “yes” response means there has been no change to your organizational documentation (e.g., articles of incorporation, bylaws, charter). A “no” response requires completion of the Certification Amendment Form. **TIP:** If you modified organizational documentation in any way in the last fiscal year you must select “no” and complete a CDFI Certification Amendment Form.  |
| 1. **Primary Mission**
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|  | The Primary Mission of the organization, as evidenced in board- approved organizational documents, has not changed since the organization’s CDFI certification was last approved by the CDFI Fund. | Indicate whether the CDFI made any changes to its Primary Mission since its most recent certification by the CDFI Fund. A “yes” response means there has been no change. A “no” response requires completion of the Certification Amendment Form. **TIP:** If you modified the language describing your Primary Mission in any way in the last fiscal year you must select “no” and complete a CDFI Certification Amendment Form. |
| **3. Financing Entity –** If applicable, confirm that the organization continues to meet the Financing Entity criteria. **TIP:** Confirmation is not required for Credit Unions, Banks, and Depository Institution Holding Companies and will not display. A “no” response to any of the sub-questions 3a – 3d requires completion of the Certification Amendment Form. You will not be able to submit the Form if a Certification Amendment Form is required and not completed and submitted with this Form. |
| 3a. | The organization continues to be an entity whose predominant business activity is the provision, in Arms-Length Transactions, of Financial Products, as reflected on its financial statements and executed notes. | Indicate whether the CDFI continues to engage in direct Financial Products, as indicated on its financial statements and executed notes. |
| 3b. | The organization continues to maintain Sufficient Capital to continue Financing Activities that support the provision of Financial Products for at least three months from the end of the organization’s fiscal year. | Indicate whether the CDFI continues to maintain Sufficient Capital to continue Financing Activities for at least 3 months from the FYE. |
| 3c. | The organization continues to dedicate a Predominance of its **Assets** to Financial Products. | Indicate whether the CDFI continues to dedicate a Predominance of its **Assets** to Financial Products. |
| 3d. | The organization continues to dedicate a Predominance of **staff time** to the provision to Financial Products. | Indicate whether the CDFI continues to dedicate a Predominance of **staff time** to the provision to Financial Products. |
| 1. **Development Services**
 |
| 4a. | The organization, directly or through an Affiliate, or through a contract with another provider, continues to meet the Development Services criteria requirements. | Indicate whether the CDFI made changes to its Development Services since its most recent certification by the CDFI Fund. Development Services include:* Business Technical Assistance
* Credit Counseling
* Financial Education
* Homeownership Counseling
* Housing Technical Assistance
* Real Estate Technical Assistance

A “yes” response means there has been no change. A “no” response requires completion of the Certification Amendment Form.  |
| 4b. | Please identify the Development Services provided during the last fiscal year and the associated Financial Products offered in conjunction with those services. | For the Development Services offered by the CDFI, from the drop down box, choose the Development Services provided, associate it with a Financial Product, and indicate the total number of clients served, breaking out the number of those clients that are in the Target Market(s).**TIP:** While use of the drop-down menu categories is preferred whenever possible, you have the option to select an “Other” option and provide a narrative description.**TIP:** Be sure that that the total clients served for each Development Service includes clients in the Target Market(s). Target Market clients may be a subset of the total clients served. |
| 1. **Target Market**
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| 5a. | At least 60% of the organization’s Transactions are directed towards serving their approved Target Market(s). | Indicate whether the CDFI directed at least 60% of its Transactions in the last fiscal year to clients in its Target Market(s).**TIP:** Only Transactions included on an organization’s Balance Sheet may be counted towards the 60% of Transactions in their Target Market. |
| 5b. | The organization reviewed its approved Target Market maps in CIMS and verified that its Target Market(s) have not changed since its CDFI certification was last approved by the CDFI Fund. | Access CIMS to review your Target Market Map(s). A “yes” response means there has been no change. A “no” response requires completion of the Certification Amendment. **TIP:** If you believe a change in your CDFI’s Target Market(s) occurred and you need to have this change reviewed by the CDFI Fund for approval, answer “no” to this question. You will be required to complete a CDFI Certification Amendment Form. You will be required to provide updated Target Market map(s) and complete an updated Target Market Accountability Table. No changes to Target Market(s) are effective unless approved by the CDFI Fund. |
| 1. **Accountability**
 |
| 6a. | The organization continues to maintain Accountability to clients in its approved Target Market through representation on its governing board, or otherwise, since the Respondent’s CDFI certification was last approved by the CDFI Fund. | Indicate whether there has been a change to the accountability information provided as part of the last review of the CDFI’s certification. A “yes” response means there has been no change. A “no” response requires completion of the Certification Amendment Form.  |
| 6b. | The organization maintained the same method or set of methods for providing Accountability to the organization’s approved Target Market since the organization’s CDFI certification was last approved by the CDFI Fund. | Indicate whether there has a change to the methods by which the CDFI maintains accountability to its Target Market(s). A “yes” response means there has been no change. A “no” response requires completion of the Certification Amendment Form. **TIP:** If your organization experienced changes to how you ensure Accountability to the Target Market in any way in the last fiscal year you must select “no” and complete a CDFI Certification Amendment Form. This includes any changes in representation on governing boards. |
| 1. **Non-Governmental Entity**
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|  | The organization continues to not be an agency or instrumentality of the United States, or any state or political subdivision thereof, and that such has not changed since the organization’s CDFI certification was last approved by the CDFI Fund. | Indicate whether the CDFI continues to meet the Non-Governmental Entity requirement since its most recent certification by the CDFI Fund. A “yes” response means there has been no change. A “no” response requires completion of the Certification Amendment Form.  |

**Part III: Selected Financial Information**

Please refer to the Glossary for definitions of all terms referenced in the Form and Instructions. All amounts should be as of the last day of the organization’s fiscal year, unless otherwise noted in the Instructions.

**Selected Balance Sheet Information**

| Number | Report Item | Instructions |
| --- | --- | --- |
| 1. | Are the following values being taken from audited financial statements? | A “yes” response indicates that the values included in this form are from financial statements that have been prepared and certified by a Certified Public Accountant according to the requirements of the U.S. GAAP.A “no” response means that the values included in this form are not from audited financial statements. |
| **2. Assets** |
| 2a. | Unrestricted Cash and Cash Equivalents | Enter the amount of the organization's Unrestricted Cash and Cash Equivalents that are available to cover the organization’s Operating Expenses. |
| 2b. | Restricted Cash and Cash Equivalents | Enter the amount of the organization’s Cash and Cash Equivalents that are NOT available to cover the organization’s Operating Expenses. |
| 2c. | Cash and Cash Equivalents  | Enter the sum of the amounts entered in 2a. and 2b.  |
| 2d. | Average Assets | Enter the amount of the organization’s Average Assets. This is calculated by taking the sum of Assets at the beginning and end of a period and dividing by 2. |
| 2e. | Current Assets | Enter the amount of the organization’s Assets that are reasonably expected to be converted to cash within the next 12 months. |
| 2f. | Allowance for Loan and Lease Losses Reserve (ALLL) | Enter the amount of the organization’s ALLL (i.e., Loan Loss Reserves). |
| 2g. | Total Assets | Enter the organization’s Total Assets. Total Assets are the value of the sum of all Assets. This amount may include Assets not reflected in 2a. through 2f.  |
| **3. Liabilities**  |
| 3a. | Current Liabilities | Enter the amount of Debts, obligations, or Payables due within the next 12 months. |
| 3b. | Total Liabilities | Enter the amount for the total value of the organization’s short-term and long-term outstanding Debts, obligations, and Payables. |
| **4. Net Assets, Net Worth, or Equity Information** |
| 4a. | Temporarily Restricted Net Assets  | Enter the amount for excess or deficiency of Assets compared to Liabilities, which are subject to externally imposed restrictions that are not Permanently Restricted Net Assets. |
| 4b. | Permanently Restricted Net Assets  | Enter the amount for excess or deficiency of Assets compared to Liabilities, which are subject to externally imposed, permanent restrictions. |
| 4c. | Unrestricted Net Assets | Enter the amount of excess or deficiency of Assets compared to Liabilities, which are not subject to externally imposed restrictions. |
| 4d. | Tier 1 Capital *(Banks and Thrifts Only)* | Enter the organization’s Tier 1 Capital as defined by the appropriate Federal regulating agency. |
| 4e. | Total Net Assets  | Enter the sum of the amounts entered in 4a. through 4c., as well as 4d., if applicable. (*i.e.,* *add together the amounts for temporarily restricted, permanently restricted, and unrestricted net assets)* |
| 4f. | Total Net Worth *(Credit Unions Only)* | Enter the amount of Equity, or the amount by which Assets exceed Liabilities. This is calculated by subtracting Total Liabilities, deferred Income, redeemable preferred stock, and non-controlling interest from Total Assets. |
| 4g. | Total Equity *(For-profit Entities Only)* | Enter the amount of funds on the balance sheet contributed by owners (the stockholders) plus Retained Earnings (or losses). This is calculated by subtracting Total Liabilities, deferred income, redeemable preferred stock, and non-controlling interest from Total Assets. |

**Selected Income Statement Information**

| Number | Report Item | Instructions |
| --- | --- | --- |
| **5. Income** |
| 5a. | Interest Income | Enter the Gross Revenue generated by interest-earning Assets. |
| 5b. | Earned Income | Enter the Income generated by the organization’s Assets and activities, excluding Grants and Contributions. This includes fees. |
| 5c. | Operating Revenue | Enter the Income generated by the organization’s Assets and activities, including Grants and Contributions that have been released from restrictions. |
| 5d. | Total Revenue | Enter the Total Revenue, including both Operating and non-operating Revenues. |
| **6. Expenses**  |
| 6a. | Interest Expense | Enter the Expenses generated by interest-bearing Liabilities. |
| 6b. | Provision for Loan Losses | Enter the Expenses recorded in order to maintain the Allowance for Loan and Lease Losses account in the organization’s reporting period. |
| 6c. | Operating Expenses | Enter the Expenses related to the organization’s everyday business operations, such as Interest Expense, staff salaries, professional fees, depreciation, and Provision for Loan Losses. |
| 6d. | Total Expenses | Enter the total value of Expenses incurred by the organization during the reporting period. |

**Financing Capital Detail**

| Number | Report Item | Instructions |
| --- | --- | --- |
| 7. | Financing Debt | Enter the amount of Liabilities outstanding that are associated with the organization’s Financing Activities (e.g., lending and investment). Financing Debt is calculated by deducting all notes payable specifically used for non-Financing Activities (such as operations) from total notes payable. |
| 8. | Grants | Enter the amount of financial awards given by a Federal, state, or local government, or other organization to an eligible organization, with no expectation of repayment. |
| 9. | Equity Investments | Enter the amount of Investments including, but not limited to, stock purchases, purchases of partnership interest, purchases of a limited liability company membership interest, Loans made on such terms that it has sufficient characteristics of Equity. |
| 10. | Deposits | Enter the amount of Transactions involving a transfer of funds held by another party for safekeeping. |
| 11. | Secondary Capital, Uninsured *(Credit Unions Only)* | Enter the amount of uninsured secondary capital account or other form of non-share account as defined by the appropriate Federal regulating agency.  |
| 12. | Net Assets or Retained Earnings | Enter the amount of excess or deficiency of Assets compared to Liabilities; classified into three mutually exclusive classes according to the existence or absence of externally imposed restrictions *(i.e., Permanently Restricted Net Assets, Temporarily Restricted Net Assets, and Unrestricted Net Assets)*. This is calculated by subtracting Total Liabilities from Total Assets as reported. |

**Part IV: Loan and Investment Portfolio Values**

Please refer to the Glossary for definitions of all terms referenced in the Form and Instructions. All amounts should be as of the last day of the organization’s fiscal year, unless otherwise noted in the Instructions.

1. **Loan and Investment Portfolio**

Report Total Outstanding Loan and Investment Portfolio information for the most recent fiscal year.

| Number | Report Item | Instructions |
| --- | --- | --- |
| 1a. | Total Outstanding Loan Portfolio | Enter the aggregate amount of active Loans outstanding as of the last day of the organization’s fiscal year. |
| 1b. | Total Outstanding Investment Portfolio | Enter the aggregate amount of Investments outstanding as of the last day of the fiscal year. |
| 1c. | Total Charge-Offs | Enter the amount of Charge-Offs that have been written off the balance sheet as of the last day of the fiscal year. |
| 1d. | Total Recoveries | Enter the amount of Total Recoveries as of last day of the fiscal year. |
| 1e. | Total Value of Non-performing Assets | Enter the amount of Non-performing Assets as of last day of fiscal year. |

1. **Financial Products Portfolio Breakdown**

Select all applicable Financial Products that are present in the organization’s outstanding portfolio.

| Value | Instructions |
| --- | --- |
| Loans (including loan acquisitions) | Mark the check box if your organization makes Loans. |
| Equity Investments (including Equity Equivalent Investments) | Mark the check box if your organization makes Equity Investments. |
| Loan Guarantees | Mark the check box if your organization makes Loan Guarantees. |

1. **Loan Portfolio Breakdown**

Enter the total number and value of outstanding loans at the end of the fiscal year within the portfolio by loan category, and specify the value of outstanding loans directed to Target Market borrowers.

| Report Item | Instructions |
| --- | --- |
| Loan Outstanding Category | Select and enter the requested data for all Loans outstanding in the following categories:* Business Loans
* Commercial Real Estate Loans
	+ Charter School
	+ Commercial
	+ Community Facility
	+ Health Care Facility
* Consumer Loans
* Intermediary Loans
* Microfinance Loans
* Residential Real Estate Loans
* Other (Please Describe)
 |
| Total Loan (Count) | Enter the total number of all types of active Loans in an organization’s portfolio as of the last day of the fiscal year. |
| Total Loan (Amount) | Enter the aggregate amount of Loans in dollars as of the last of the fiscal year. |
| Target Market Loan (Count) | The subset of the total number of active Loans that the organization made in their Target Market(s) as of the last day of the fiscal year. |
| Target Market Loan (Amount) | The subset of the aggregate amount of Loans in dollars made in their Target Market(s) as of the last day of the fiscal year. |

1. **Equity Portfolio Breakdown**

Enter the number and value of outstanding equity and equity equivalent investments by category, and specify the value of products directed to the Target Market.

| Report Item | Instructions |
| --- | --- |
| Equity Investments | Select and enter the requested data for all Equity Investments in the following categories:* Business Financing
* Commercial Real Estate Financing
	+ Charter School Loans
	+ Community Facility
	+ Commercial
	+ Health Care Facility
* Consumer Financing
* Intermediary Financing
* Microfinance Financing
* Residential Real Estate Financing
* Other (Please Describe)
 |
| Total Financing (Count) | Enter the total number of all types of active financing in an organization’s portfolio as of the last day of the fiscal year. |
| Total Financing (Amount) | Enter the aggregate amount of financing in dollars as of the last of the fiscal year. |
| Target Market Financing (Count) | The subset of the total number of active financing in the organization’s Target Market as of the last day of the fiscal year. |
| Target Market Financing (Amount) | The subset of the aggregate amount of financing in dollars made in the organization’s Target Market(s) as of the last day of the fiscal year. |

1. **Loan Guarantee Portfolio Breakdown**

Enter the number and value of outstanding Loan Guarantees by category, and specify the value of products directed to the Target Market.

|  |  |
| --- | --- |
| Report Item | Instructions |
| Loan Guarantees | Select and enter the requested data for all Loan Guarantees in the following categories:* Business Financing
* Commercial Real Estate Financing
	+ Charter School Loans
	+ Commercial
	+ Community Facility
	+ Health Care
* Consumer Financing
* Intermediary Financing
* Microfinance Financing
* Residential Real Estate Financing
* Other (Please Describe)
 |
| Total Financing (Count) | Enter the total number of all types of active Loan Guarantees in an organization’s portfolio as of the last day of the fiscal year. |
| Total Financing (Amount) | Enter the aggregate amount of Loan Guarantees in dollars as of the last of the fiscal year. |
| Target Market Financing (Count) | The subset of the total number of active Loan Guarantees in the organization’s Target Market as of the last day of the fiscal year. |
| Target Market Financing (Amount) | The subset of the aggregate amount of Loan Guarantees in dollars made in the organization’s Target Market(s) as of the last day of the fiscal year. |

1. Emerging CDFIs are not required to complete the Form. [↑](#footnote-ref-1)