

CMF APPLICATION TEMPLATE

The Community Development Financial Institutions Fund (CDFI Fund) is publishing this Capital Magnet Fund (CMF) Application Template (Application Template) in conjunction with the Notice for Public Comment on proposed and/or continuing information collection, as required by the Paperwork Reduction Act (PRA) of 1995, 44 U.S.C. 3506(c)(2)(A). This Application Template is provided for the purposes of soliciting comments on the appropriateness of the information collected in the Application. The CMF Application is an online form submitted through the CDFI Fund's Award Management Information System (AMIS).

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

In order to understand the requirements of the CMF, including eligible uses of financial assistance grants, potential Applicants should review the CMF Interim Rule ([12 C.F.R. 1807](#)). Capitalized terms not defined in this Application Template (other than titles) have meanings set forth in the CMF Interim Rule or the Notice of Funds Availability (NOFA). The CMF Interim Rule and most recent NOFA are available on the CDFI Fund's website: www.cdfifund.gov/cmfi.

In order to facilitate review of this Application Template in Comment, new or substantially revised questions compared with the FY 2020 CMF Application are highlighted. A number of less substantive changes were also made relative to the FY 2020 CMF Application, but these changes were not highlighted.

APPLICATION TEMPLATE INSTRUCTIONS

AMIS Application Overview

This document provides the full question text and related guidance for the information that will be entered into the CMF Application in AMIS.

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

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

AMIS FIELD TYPES

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

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

Program Profile and Creating an AMIS Application

Once your organization is registered in AMIS, the first step in completing the AMIS Application is to ensure that your CMF Program Profile has the correct “Entity Type.” On the Program Profile, you must make sure the field “Entity Type” is completed in order to create an Application. This selection will trigger certain validations on the AMIS Application. The options are listed below:

- Financing Entity
- Affordable Housing Developer/Manager

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

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

All Certified CDFI Applicants will be categorized as CMF Financing Entities. Applicants that are eligible Nonprofit Organizations should select whether they are best categorized as a Financing Entity or an Affordable Housing Developer/Manager based on their predominant business activity and the definitions above. Note, a nonprofit instrumentality of a state established to provide financing for affordable housing activities owned or managed primarily by third parties, such as a state Housing Finance Agency (HFA), must select CMF Financing Entity.

Organization and Application Information

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

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

Question 2 – Requested Award			
Question Text	Response	Question Tips	Field Type
a. What is the total dollar amount of Award requested in this Application?	\$ _____	<ul style="list-style-type: none"> The Applicant should request an amount that it can use to finance eligible activities with total Eligible Project Costs at least 10 times the amount of the CMF Award. The Applicant should also request an award amount that it is confident can be Committed for use within two years of the Effective Date of the Assistance Agreement, and achieve Project Completion within five years of the Effective Date of the Assistance Agreement. The Applicant may not request an amount below \$500,000. The Applicant may not request an amount greater than 15% of the total funding available. AMIS will require that the award amount requested be rounded to the nearest thousand (e.g. \$615,000 instead of \$615,123). 	Currency
b. Is there an absolute minimum amount below which the Applicant would be unwilling to accept a CMF Award?	Yes/No	<ul style="list-style-type: none"> Having a minimum request will not affect the scoring or evaluation of the application. At the conclusion of the CDFI Fund’s review process, if the Applicant is recommended to receive less than the minimum amount identified in Question 2(c), the CDFI Fund <u>will not</u> provide a CMF Award to the Applicant. An Applicant with a minimum award request will need to demonstrate that it can deploy the minimum amount of capital requested in a timely manner, that it will likely achieve its proposed impacts, and that it could not successfully implement its business strategy without this minimum award amount. Applicants should only respond “Yes” if their minimum request is greater than \$500,000. 	Picklist
c. If Yes to 2(b), provide the minimum amount:	\$ _____	<ul style="list-style-type: none"> The CDFI Fund reserves the right to offer Awards smaller than the Applicant’s request in Question 2(a), but the CDFI Fund will not offer an Award less than the Applicant’s minimum request in Question 2(c). 	Currency
d. If Yes to 2(b), how was the minimum amount in 2(c) determined?	<i>Narrative – 2,000 characters</i>	<ul style="list-style-type: none"> Applicant should articulate why its business strategy would not be feasible with an Award that is less than the minimum request. 	Narrative

Question 3 – States Served			
Question Text	Response	Question Tips	Field Type
a. Identify the type of Service Area requested for this Award.	___ <i>Statewide (or territory-wide)</i> ___ <i>Multi-State (more than one state or territory)</i>	<ul style="list-style-type: none"> Applicants proposing to serve a portion of a single state, should select a Statewide Service Area. An Applicant that proposes to serve a Service Area that includes a Metropolitan Area that extends across more than one state (e.g., the Philadelphia and Boston Metropolitan Areas) should select “Multi-State Service Area.” The largest service area an Applicant can request is a Multi-State Service Area with up to 15 states. 	Picklist

Question Text	Response	Question Tips	Field Type
b. Identify the particular states where the Applicant will deploy its CMF Award.	_____	<ul style="list-style-type: none"> • In the search field, you can search by state name and then select the states. • A Statewide Service Area will cover one state/territory. Applicants planning to serve localities within just one state should select this option. • A Multi-State Service Area must cover at least two states/territories but no more than 15 states/territories. • If the Applicant is a Certified CDFI, please note that the CMF Service Area <u>does not</u> need to be the same as the Applicant's CDFI Target Market. • If the Applicant is selected for a CMF Award and has a Multi-State Service Area, it may be held to financing/developing <u>at least one Project</u> in any specific state(s) within its Multi-State Service Area. Thus, the Applicant should only select geographic areas where it is confident it can deploy some of its CMF Award. 	Look-up
c. Indicate which of the Geographic Areas the Applicant has not worked in the past five years.	<i>Narrative – 1,000 characters</i>	<ul style="list-style-type: none"> • Indicate any states within the Applicant's Service Area where the Applicant has not worked in the past five years. 	Narrative

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

Question 5 – Applicant Eligibility Criteria			
Question Text	Response	Question Tips	Field Type
a. Is the Applicant a Certified CDFI as of the date of the NOFA publication?	<i>Auto-populated (Yes/No)</i>	The Applicant's CDFI certification status should auto-populate in AMIS for the Applicant's Organization Profile. If it does not, please contact the CDFI Fund as soon as possible to resolve the issue.	Auto-populated
b. If (a) is "Yes", what is the CDFI certification number?	<i>Auto-populated</i>	The Applicant's CDFI certification number should pre-populate in AMIS for the Applicant's Organization Profile. If it does not, please contact the CDFI Fund as soon as possible to resolve the issue.	Auto-populated

Question Text	Response	Question Tips	Field Type
c. Does the Applicant have any Affiliates that are also applying for a CMF Award in the same funding round?	Yes/No	The answer to this question must be “No.” If an Applicant and its Affiliate(s) wish to apply for a CMF Award, they must do so through one of the Affiliated entities, in one Application; an Applicant and its Affiliates may not submit separate Applications. If Affiliates submit multiple or separate Applications, the CDFI Fund may, at its discretion, reject all such Applications received or select only one of the submitted Applications to deem eligible. See the CMF Interim Rule (12 C.F.R. 1807.104) for the definition of Affiliate. If the organization has closely held Affiliates, the Applicant should be careful to select the most appropriate entity to carry out the proposed activities under the Award. The Applicant should not be a wholly owned subsidiary of a parent organization, unless the wholly owned subsidiary has its own track record of financing and/or developing affordable housing. Note that the Applicant entity must meet the CMF eligibility requirements on its own.	Picklist
d. Is the Applicant a Nonprofit Organization?	Auto-populated (Yes/No)	<ul style="list-style-type: none"> The Applicant’s Nonprofit Organization status should pre-populate in AMIS for the Applicant’s Organization Profile. If it does not, please contact the CDFI Fund as soon as possible to resolve the issue. If the Applicant is <u>relying on its Nonprofit Organization status for eligibility</u> (i.e., it is not a Certified CDFI), it must attach the following documentation to its AMIS Application: <ul style="list-style-type: none"> State charter, articles of incorporation, or other establishing document stating the Applicant is a nonprofit or not-for-profit; A certificate or determination letter demonstrating tax exempt status from the IRS; and Articles of incorporation, by-laws, or other organizational establishing documents demonstrating the Applicant has a principal purpose of managing or developing affordable housing AMIS Note: <i>This question will only appear in the AMIS Application if the Applicant is not a Certified CDFI.</i> 	Auto-populated
e. Are at least 33 and 1/3 % of the Applicant’s total assets dedicated to the development or management of affordable housing?	Yes/No	<ul style="list-style-type: none"> Total assets are the sum of the value of all of the organization’s assets. If the Applicant is relying on its Nonprofit Organization status for Eligibility, it must indicate it meets this test. AMIS Note: <i>This question will only appear in the AMIS Application if the Applicant is not a Certified CDFI.</i> 	Picklist

Question 6 – Affiliate Organizations			
Question Text	Response	Question Tips	Field Type
Does the Applicant have any Affiliates or Subsidiaries that will have a role in executing	Narrative – 1,000 characters	<ul style="list-style-type: none"> Applicants will be required to submit as an Attachment an organization chart which demonstrates the business relationships between these Affiliates and/or Subsidiaries. 	Narrative

Question Text	Response	Question Tips	Field Type
the proposed business and leveraging strategy outlined in the application? If so, name these organizations and describe the business relationship with the Applicant and the role the organization will play in the CMF Award.		<ul style="list-style-type: none"> Note, regardless of whether any Affiliate organizations will be involved in the Applicant’s CMF strategy, the Applicant entity must meet all eligibility requirements on its own. Only include organizations that meet the definition of Affiliate or Subsidiary as defined in 12 C.F.R. 1807.104. 	

Question 7 – Total Estimated Hours to Complete the Application			
Question Text	Response	Question Tips	Field Type
Estimate the number of hours required to complete the entire Application package:	_____ hours	For the purpose of estimating Application completion hours, Applicants should focus only on the amount of time it took to complete and populate the questions asked in the Application materials. Other activities that are carried out in the normal course of business and are only indirectly related to the completion of this Application (e.g., identifying a project/lending pipeline, developing a strategic plan or marketing plan, etc.) should not be included in this estimate. This question will not be scored.	Numeric

Question 8 – Executive Summary			
Question Text	Response	Question Tips	Field Type
<p>Summarize the key elements of the CMF Proposal, including:</p> <ul style="list-style-type: none"> The Applicant’s vision for this CMF Award will accomplish, including the challenge/need the CMF Award will help address, and the anticipated outcomes that will result from the proposed CMF Award strategy. How receiving the requested CMF Award will allow the Applicant to do things it would otherwise not be able to do. How the Applicant’s organizational capacity and track record supports the Applicant’s ability to execute the proposed CMF Award strategy. 	<i>Narrative – 3,000 characters</i>	This is a high-level summary of the CMF Application strategy/vision. This will not be scored in the External Review phase.	Narrative

Part 1: Business Strategy and Leveraging Strategy

Proposed Uses of a CMF Award

Question 9(a) – Eligible Activities			
Please estimate the percentage of <u>CMF Award dollars</u> that will be used for each of the CMF eligible uses (numbers must add up to 100%). As a condition of their Assistance Agreement, Applicants will be restricted to using their CMF Award for the eligible activities selected in Q. 9(a).			
Question Text	Response	Question Tips	Field Type
i. Capitalize Loan Loss Reserves	_____ %	Loan Loss Reserves (LLR) means proceeds from the CMF Award the Applicant will set aside in the form of cash reserve, or through accounting-based accrual reserves, to cover losses on loans, accounts, and notes receivable for Affordable Housing Activities and/or Economic Development Activities.	Percentage
ii. Capitalize a Revolving Loan Fund	_____ %	Revolving Loan Fund means a pool of funds managed by the Applicant wherein repayment on loans for Affordable Housing Activities or Economic Development Activities are used to provide additional loans.	Percentage
iii. Capitalize an Affordable Housing Fund	_____ %	Affordable Housing Fund means a loan, grant or equity investment fund that is managed by the Applicant and that uses its capital to finance Affordable Housing Activities.	Percentage
iv. Capitalize a fund to support Economic Development Activities	_____ %	A fund to support the development, preservation, acquisition and/or rehabilitation of Community Service Facilities and/or other physical structures in which neighborhood-based businesses operate. Must be In Conjunction With Affordable Housing Activities and part of a Concerted Strategy.	Percentage
v. Make Risk-Sharing Loans	_____ %	Risk-Sharing Loans mean loans for Affordable Housing Activities and/or Economic Development Activities in which the risk of borrower default is shared by the Applicant with other lenders.	Percentage
vi. Provide Loan Guarantees	_____ %	Loan Guarantee means the use of the CMF Award to support an agreement to indemnify the holder of a loan all or a portion of the unpaid principal balance in case of default by the borrower. The proceeds of the loan that is guaranteed with the CMF Award must be used for Affordable Housing Activities and/or Economic Development Activities. Examples include arrangements where the Applicant will assume or repay all or a portion of the debt if the borrower defaults.	Percentage
vii. For Direct Administrative Expenses	_____ %	The Applicant may use no more than 5% of its CMF Award for Direct Administrative Expenses. Any portion of the amount available for Direct Administrative Expenses may be used for direct costs	Percentage

Question Text	Response	Question Tips	Field Type
		related to the effective tracking and evaluation of program or evidence-based outcomes for CMF-assisted Projects.	

Question 9(b) – Financing Activities
Please estimate the percentage of CMF Award dollars (and any Program Income earned during the 5 year Investment Period) that will be used for each of the following types of financing. Please exclude any portion to be retained for Direct Administrative Expenses. Percentages must add up to 100%. Successful Applicants will not be held to these percentages in their Assistance Agreement.

Question Text	Response	Question Tips	Field Type
i. Predevelopment Financing	_____ %	Refers to costs related to determining the feasibility of a particular project, such as the costs of preliminary financial applications, legal fees, architectural fees, and engineering fees.	Percentage
ii. Property/Site Acquisition Financing	_____ %	This category refers to financing any costs associated with obtaining control of the site.	Percentage
iii. Construction Financing		This category refers to financing costs associated with the construction of a Project.	Percentage
iv. Bridge Loans or Other Similar Short-Term Financing	_____ %	This category is for short term financing that doesn't fit into the categories in (i) – (iv).	Percentage
v. Permanent Financing (1 st Lien)	_____ %	This category refers to permanent financing (1 st Lien).	Percentage
vi. Permanent Financing (2 nd Lien or lower)	_____ %	This category refers to permanent financing (2 nd Lien or lower).	Percentage
vii. Refinancing	_____ %	This category refers to refinancing.	Percentage
viii. Loan Loss Reserves or Loan Guarantees	_____ %	See Q. 9(a) for the definitions of these terms. Note that these should be restricted accounts.	Percentage
ix. Equity	_____ %	This category refers to equity investments.	Percentage

Question 9(c) – Proposed Uses

Please estimate the percentage of CMF Award dollars (and any Program Income earned during the five year Investment Period) that will be directed towards each of the following proposed uses. Please exclude any portion to be retained for Direct Administrative Expenses. All percentages must add up to 100%. Applicants will be restricted in the Assistance Agreement to using the CMF Award for Homeownership, rental housing, and/or Economic Development Activities based on the selections in Q. 9(a) but will not be restricted to the percentage estimates

Question Text	Response	Question Tips	Field Type
i. Homeownership (Development)	<i>Checkmark</i>	Development includes any combination of land acquisition, demolition of existing facilities, and construction of new facilities for Homeownership units for Affordable Housing.	Checkmark
ii. Homeownership (Rehabilitation)	<i>Checkmark</i>	Rehabilitation includes any repairs and/or capital improvements related to Homeownership units for Affordable Housing.	Checkmark
iii. Homeownership (mortgage finance and/or Purchase assistance)	<i>Checkmark</i>	If the Applicant plans to use a CMF Award to provide mortgages to eligible Families to purchase Homeownership units and/or other Purchase assistance (i.e. down payment or closing cost assistance).	Checkmark
iv. Rental Housing (Development)	<i>Checkmark</i>	Rental development includes any combination of land acquisition, demolition of existing facilities, and construction of new facilities for rental Affordable Housing units.	Checkmark
v. Rental Housing (Preservation, and/or Rehabilitation)	<i>Checkmark</i>	Rental Rehabilitation includes any repairs and/or capital improvements related to rental Affordable Housing. Preservation includes acquisition, with or without rehabilitation of at-risk affordable rental housing (already subsidized and restricted), as well as recapitalization of expiring LIHTC properties. Note, in this scenario, the existing affordability and use restrictions must be extended by a minimum of 10 years. Preservation also includes using CMF to convert non-restricted rental housing, such as “naturally occurring affordable housing” to Affordable Housing (with or without rehabilitation).	Checkmark
vi. Economic Development Activities (commercial facilities)	<i>Checkmark</i>	No more than 30% of the CMF Award may be used for Economic Development Activities. Commercial facilities are physical structures in which neighborhood-based businesses operate.	Checkmark
vii. Economic Development Activities (Community Service Facilities)	<i>Checkmark</i>	No more than 30% of the CMF Award may be used for Economic Development Activities.	Checkmark

Question 10 – Community Analysis and Financing Gaps			
Question Text	Response	Question Tips	Field Type
<p>a. Describe the challenges facing the Low-Income Families and communities within the requested Service Area. The discussion should address:</p> <ul style="list-style-type: none"> The nature and extent of the affordable housing needs and, if applicable, the economic development/community service needs; 	<p><i>Narrative – 4,000 characters</i></p>	<ul style="list-style-type: none"> Support the narrative with relevant data where possible. For example, metrics of demand for affordable housing, whether this unmet demand is more acute among certain subsets of the population, income characteristics of Families in the requested Service Area, the extent of unemployment in the requested Service Area (if applicable), lack of access to goods/services, etc. Be sure to cite the sources of any metrics used in the narrative. If the Applicant is planning on targeting more specific areas within the states in the broader Service Area (e.g., the Applicant requests a statewide Service Area but plan to target CMF activities in five key cities, or Rural Areas within a statewide Service Area), focus the discussion on these areas, their needs and the strategy to address their needs in detail. If the Applicant is planning on a more broad-based approach to all the states in the requested service area, be sure to identify the challenges across the entire Service Area, using statewide or regional data where appropriate. If the Applicant will use a CMF Award to finance/support Economic Development Activities, it must address community needs relevant to these activities. 	<p>Narrative</p>
<p>b. What financing gaps in the requested Service Area are contributing to the challenges described in 10(a)? Describe what types of financing are missing or not available at the appropriate rates and terms, and why this financing is unavailable in the private marketplace.</p>	<p><i>Narrative – 4,000 characters</i></p>	<ul style="list-style-type: none"> Support the description of financing gaps with relevant data and sources where possible. If the Applicant will use a CMF Award to finance/support Economic Development Activities, it must address financing gaps relevant to these activities. 	<p>Narrative</p>

Question 11 – Proposed CMF Award Financing Activities			
Question Text	Response	Question Tips	Field Type
a. Provide the requested data on the Applicant’s proposed products in Appendix 1 .	Appendix 1	See Appendix 1 .	Appendix 1
b. Describe how the Applicant will use the requested CMF Award as part of a financing strategy to address the challenges and financing gaps identified in Qs. 10(a) and 10(b), referencing the proposed financial products from Appendix 1 as necessary.	<i>Narrative – 4,000 characters</i>	<ul style="list-style-type: none"> • If the Applicant is an Affordable <u>Housing Developer/Manager</u> who will use the CMF Award to finance its own projects, it should clearly describe how the CMF Award dollars will be delivered to the project (e.g., grant, loan, etc.), and what phase of project financing it will support. • If the Applicant is proposing to provide <u>homeownership second mortgages/down-payment assistance</u>, it must discuss the rates and terms of the first mortgage and how the Applicant will ensure these mortgages are affordable for Low-Income homebuyers. • If the Applicant is proposing to <u>finance/support Economic Development Activities</u>, it must separately describe the financing activities for Economic Development and Affordable Housing in this narrative. • If the Applicant is proposing to use the CMF Award to support a <u>Loan Loss Reserve or provide a Loan Guarantee</u>, describe how the loans will address the challenges and financing gaps identified in this question, and separately describe the strategy and structure in 11(c). 	Narrative
c. <u>Loan Loss Reserves or Loan Guarantees:</u> If the Applicant intends to use its CMF Award for Loan Loss Reserves (LLR) or Guarantees, describe the strategy, the structure of the LLR/Loan Guarantees, and the role of a CMF Award.	<i>Narrative – 2,000 characters</i>	<ul style="list-style-type: none"> • Quantify the anticipated loss rate that these reserves/guarantees will cover and how this was derived. Indicate if the LLR will be used for loans originated and held by the Applicant or if the LLR or Guarantee will be used for loans of a third party lender. Be sure to also describe the rates/terms of the loans that will be guaranteed/reserved against and how these rates/terms compare to market. • Describe how the 10 year affordability term and other CMF restrictions will be imposed and maintained on the properties financed with the loans secured by the Loan Loss Reserve or Guarantee. • AMIS Note: This question will only appear in AMIS if the Applicant intends to use a portion of their CMF Award for Loan Loss Reserves or Loan Guarantees in Q. 9(a). 	Narrative

<p>d. Secondary market activity: If the Applicant intends to sell loans financed with a CMF Award, describe the strategy, the structure of the intended transactions, and the role of a CMF Award. Be sure to also address how all CMF requirements on the housing will be imposed and remain in place for the duration of the Affordability Period.</p>	<p><i>Narrative – 2,000 characters</i></p>	<ul style="list-style-type: none"> • CMF-financed loans may be sold on the secondary market but must retain all affordability requirements under 12 C.F.R. 1807.400. • If the Applicant intends to sell CMF-financed loans on the secondary market, describe the anticipated transaction(s), including the intended purchaser(s); the scope of the sale; the nature of the loans (rental or homeownership); timing; and how all CMF requirements will remain in place for each loan for the duration of the Affordability Period. Note if the Applicant will retain any long term risk or repurchase obligations and, if so, how the risks and obligations will be managed. Describe any long term supportive role the Applicant will play related to these loans, such as servicing or counseling. 	<p>Narrative</p>
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Track Record and Projections

Questions 12 and 13 focus on the Applicant’s track record and projections. These questions elaborate on the data requested in the Track Record and Projections tables which can be found in Appendix 2.

Question 12 – Track Record

Question Text	Response	Question Tips	Field Type
a. Provide data on the Applicant’s track record in Appendix 2, Tables A1, B1, and C1 (as applicable) .	See Appendix 2, Tables A1, B1, and C1 .	See Appendix 2, Tables A1, B1, and C1 .	See Appendix 2, Tables A1, B1, and C1 .
<p>b. Describe the Applicant’s track record of Affordable Housing and Economic Development Activities (as applicable). Be sure to address:</p> <ul style="list-style-type: none"> • How the Applicant’s track record supports its ability to carry out the proposed CMF Award activities, including any activities that are similar/relevant to the proposed CMF Award activities; • Any trends in the level of activity, for example if the Applicant’s activity has had significant differences in volume from year-to-year or has been relatively steady; • The Applicant’s experience serving its proposed Service Area. 	<p><i>Narrative – 5,000 characters</i></p>	<ul style="list-style-type: none"> • Please be sure to limit the response to activities that have occurred over the previous five years. • Be clear about which entity (the Applicant entity or its Subsidiaries) conducted the activities listed in the Appendix 2 • Describe experience and track record in undertaking Economic Development Activities, if applicable. • Do not include activities of Affiliates that are not Subsidiaries. 	Narrative

Question 13 – Projected Performance and Pipeline			
Question Text	Response	Question Tips	Field Type
a. Provide data on the Applicant’s projected CMF Award performance and financing activities for the next five years in Appendix 2, Tables A2, B2, and C2 (as applicable) .	See Appendix 2, Tables A2, B2, and C2 .	See Appendix 2, Tables A2, B2, and C2 .	See Appendix 2, Tables A2, B2, and C2 .

Question Text	Response	Question Tips	Field Type
<p>b. Indicate the dollar amount of the CMF Award that the Applicant plans to commit to Projects in each of the first two years.</p> <ul style="list-style-type: none"> • Year 1: \$ _____ • Year 2: \$ _____ 	<p>\$ _____</p> <p>\$ _____</p>	<ul style="list-style-type: none"> • CMF Recipients are required to provide legally binding, third party, written commitments for the entire CMF Award amount to specific projects within two years from the execution of the Assistance Agreement. Recipients who fail to do so face mandatory recapture of the uncommitted funds. • In certain circumstances where a commitment with a third party is not possible, the Award Recipient may be eligible to meet its Commitment requirement under a general waiver of 12 C.F.R. 1807.501(b) via the FY2018 NOFA (83 FR 34685). To find out more, see the additional guidance on this waiver available at the CDFI Fund’s website. 	<p>Currency</p>
<p>c. Describe the Applicant’s projections in Tables A2, B2, C2 (as applicable) and the types of Affordable Housing and Economic Development Activities that will be financed/supported with a CMF Award. Be sure to address the following factors:</p> <ul style="list-style-type: none"> • How the projections were developed. • How the projected outputs (e.g., units produced, dollars of financing) address the housing and economic development (if applicable) gaps identified in Q. 10(a); • Any risks that may impact the Applicant’s ability to achieve projections and steps to mitigate those risks, including the role of CMF, if any, in the risk mitigation. • To the extent the Applicant is projecting increased level of activities compared to its track record, or expansion to new geographic areas, describe why these projections are reasonable and note any new or established partnerships that will help the Applicant achieve these projections. 	<p><i>Narrative – 3,000 characters</i></p>	<ul style="list-style-type: none"> • To the extent the Applicant is proposing a significant increase in activities compared with its track record, be sure to describe why this increase is reasonable and achievable. • If the Applicant’s projections rely on investments in Low Income Housing Tax Credit (LIHTC) projects that have not yet received credit allocations, be sure to discuss the risk management strategy for this issue. • If states in the requested Service Area are new markets to the Applicant, describe how it intends to build a pipeline of projects in these new markets. • If the Applicant has established partnerships which will facilitate creating a solid pipeline of projects, please discuss. If applicable, indicate whether such partnerships will result in a greater number of units produced (how many) and the extent to which such partnerships will allow the Applicant to serve geographic areas it would not otherwise be able to reach. 	<p>Narrative</p>
<p>d. Provide the requested data on the Applicant’s proposed pipeline in Appendix 3.</p>	<p>Appendix 3</p>	<ul style="list-style-type: none"> • See Appendix 3 	<p>See Appendix 3</p>

Question Text	Response	Question Tips	Field Type
<p>e. For Homeownership, describe how the Applicant will build/manage a pipeline of potential CMF projects/borrowers, addressing the following items:</p> <ul style="list-style-type: none"> • Be sure to address the number of pre-qualified applicants; number of applications submitted; and describe the waiting list if applicable. • Describe referral sources for potential borrowers/purchasers. • For Purchase Assistance/Mortgage Lending: Describe how many loans the Applicant plans to make per year and the estimated demand for the proposed product(s). • For Homeownership Development/Rehabilitation: Describe the number of units in the pipeline, how purchasers will be located, the number of purchasers pre-qualified or approved, and/or estimated demand. 	<p><i>Narrative – 3,000 characters</i></p>	<ul style="list-style-type: none"> • If you serve a small market, describe the demand, the Applicant’s competition and the Applicant’s competitive advantage in that market. • Describe how a CMF Award will assist in attracting borrowers/purchasers. • Describe how the Applicant will manage its pipeline to enable it to achieve the projections outlined in Appendix 2. 	<p>Narrative</p>
<p>f. For Rental Housing, describe how the Applicant will build/manage a pipeline of potential CMF projects. Be sure to address:</p> <ul style="list-style-type: none"> • The factors you look for when selecting and prioritizing potential CMF projects/borrowers. • How any new or established partnerships with borrowers, developers, or others will be utilized to assist you in sourcing CMF borrowers. • How you will determine the need for CMF financing/support. 	<p><i>Narrative – 3,000 characters</i></p>	<ul style="list-style-type: none"> • An Applicant will generally score more favorably to the extent it has more than one project that it plans to use a CMF Award to finance/support and has some other financing sources Committed, awarded or funded. • Describe how the Applicant will manage its pipeline to enable it to achieve the projections outlined in Appendix 2. 	<p>Narrative</p>
<p>g. For Economic Development Activities, describe how the Applicant will build/manage a pipeline of potential CMF projects. Be sure to address:</p> <ul style="list-style-type: none"> • The factors the Applicant will look for when selecting and prioritizing potential CMF projects/borrowers. 	<p><i>Narrative – 3,000 characters</i></p>	<ul style="list-style-type: none"> • Describe how the Applicant will manage its pipeline to enable it to achieve the projections outlined in Appendix 2. 	<p>Narrative</p>

Question Text	Response	Question Tips	Field Type
<ul style="list-style-type: none"> • How any new or established partnerships with borrowers, developers, or others will be utilized to assist the Applicant in sourcing CMF borrowers • How the Applicant will determine the need for CMF financing/support. 			

Leveraging the CMF Award

The CMF authorizing statute requires that Recipients use the CMF Award to finance/support Projects with Eligible Project Costs totaling at least ten times the CMF Award amount. The CDFI Fund refers to this as “leveraging” the CMF Award. Questions 14-18 ask the Applicant to detail its strategy for leveraging the CMF Award.

Question 14 – Overall Leverage Summary			
In this question, please provide information on the overall plans for leveraging the CMF Award.			
Question Text	Response	Question Tips	Field Type
a. The Applicant’s CMF Award Request:	<i>Auto-Calculated</i>	This will auto-populate based on the response to Q. 2(a).	Auto-Calculated
b. What portion of the CMF Award will be used for Direct Administrative Expenses	<i>Auto-Calculated</i>	This will auto-populated based on the response to Q. 2(a) and Q. 9(a)	Auto-Calculated
c. What are the estimated total Eligible Project Costs that will be financed/supported with the CMF Award?	\$ _____	Enter the estimated Eligible Project Costs (EPC) that will be financed/supported by the CMF Award. Further guidance on what counts as Eligible Project Costs is available in the Application FAQs. <u>Note that the Eligible Project Costs for a Project will not exceed the total development cost for that Project.</u>	Currency
d. The Applicant’s projected Leverage Multiplier:	<i>Auto-Calculated</i>	Projected Leverage Multiplier = Projected Eligible Project Costs ÷ CMF Award Amount Requested	Auto-Calculated

Question Text	Response	Question Tips	Field Type
e. How much does the Applicant anticipate generating in Leveraged Costs with the CMF Award?	<i>Auto-Calculated</i>	<ul style="list-style-type: none"> • <u>Leveraged Costs</u> means costs for Affordable Housing Activities and Economic Development Activities that exceed the dollar amount of the CMF Award, as further described in CFR 1807.500. • Leveraged Costs are calculated by subtracting the CMF Award (less any portion of the Award used for Direct Administrative Expenses) from total EPCs. 	Auto-Calculated
f. How much of 14(e) above will be financed/supported by private sources?	\$_____	<ul style="list-style-type: none"> • 14(f) +14(g) must equal 14(e). • Private sources of capital are investments or loans to the Applicant, or to Projects financed and/or supported by the Applicant, received from private entities that are not a unit of federal, state, or local government. Examples include private activity bonds, LIHTC equity, other equity investments, lines of credit, loans or other investments from private sources, such as banks, private investors or philanthropic entities that are made to the Applicants or Projects. 	Currency
g. How much of 14(e) above will be financed/supported by public sources?	\$_____	<ul style="list-style-type: none"> • 14(f) + 14(g) must equal 14(e). • Do not include the CMF Award in this figure. 	Currency
h. The data and a description of the sources of capital and the activities the Applicant intends to undertake should be included in Appendix 3 .	See Appendix 3	See Appendix 3	See Appendix 3

Question 15 – Private Leverage			
Question Text	Response	Question Tips	Field Type
a. The Applicant’s overall Private Leverage Multiplier:	<i>Auto-Calculated</i>	This multiplier is calculated by dividing Q. 14(f) by the CMF Award request. If selected for a CMF Award, the Applicant will be held to this multiplier in the Assistance Agreement. If the projected multiplier is greater than 10, the Applicant will be held to a multiplier of 10 in the Assistance Agreement.	Auto-Calculated
b. Describe how the Applicant will use the CMF Award to attract private capital for Affordable Housing and Economic Development Activities. Also, discuss any	<i>Narrative – 3,000 characters</i>	Be sure to discuss any risks of not meeting the projected private leverage multiplier listed in 15(a) and plans to mitigate those risks.	Narrative

Question Text	Response	Question Tips	Field Type
relevant track record in the last five years of raising private capital for these types of activities.			

Question 16 – Enterprise-Level Leverage (if applicable)

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

Example: An Applicant requests a \$2 million CMF Award which it intends to leverage 10 times to create a \$20 million Affordable Housing Fund. The Affordable Housing Fund will be comprised of the requested \$2 million in CMF Award and \$18 million in leveraged funds. Of the \$18 million, \$16 million is from private sources (\$15 million in a new bank line of credit and \$1 million from an existing foundation Program Related Investments (PRI). The Affordable Housing Fund also includes \$1 million in funds from the city (not restricted to a specific project) and the Applicant is contributing \$1 million of its own funds. The total Enterprise-Level Capital in this example is \$18 million. \$17 million is private Enterprise-Level Capital.

Note: If the Applicant does not plan to leverage its CMF Award at the Enterprise-Level, it should respond \$0 to Qs. 16(a) – (c). The Applicant only needs to respond to Qs. 16(e), 16(f) and 16(g) if any of Qs. 16(a) – 16(c) are greater than 0. Questions 16(e) – 16(g) will not appear in AMIS if Qs. 16(a) – 16(c) are all 0.

Question Text	Response	Question Tips	Field Type
a. How much Enterprise-Level Capital will the Applicant raise from private sources with the CMF Award?	\$_____	Any capital designated by the capital provider for a specific, identified project cannot be included here.	Currency
b. How much Enterprise-Level Capital will the Applicant raise from public sources with the CMF Award?	\$_____	Any capital designated by the capital provider for a specific, identified project cannot be included here. Do not include the CMF Award request in this field.	Currency
c. Total amount of Enterprise-Level Capital the Applicant plans to leverage.	Auto-Calculated	<ul style="list-style-type: none"> Calculated by adding 16(a) +16(b). Must be less than or equal to Q. 14(e). 	Auto-Calculated
d. Describe the Applicant’s strategy to leverage the CMF Award by using it to attract Enterprise-Level Capital for the organization.	Narrative – 3,000 characters	<ul style="list-style-type: none"> AMIS Note: If 16(c) equals 0, 16(d), (e), (f) will not populate as these questions will not be applicable. 	Narrative

Question Text	Response	Question Tips	Field Type
		<ul style="list-style-type: none"> Existing capital sources may be tapped as leverage for the CMF Award, but please note where the Applicant will be raising new private Enterprise-Level Capital as a result of the CMF Award. In this narrative, reference the information in Appendices 3 and 4 as appropriate. For sources of capital not yet secured, describe the Applicant’s strategy to attract investors. Be specific about how the CMF Award will enable the Applicant to attract Enterprise-Level Capital for Affordable Housing and related Economic Development Activities. 	
e. Discuss the Applicant’s prior relevant experience raising and deploying private Enterprise funds from the sources being targeted for Enterprise-Level Capital (or similar sources).	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> <i>AMIS Note: If 16(c) is 0, 16(d), (e), (f) will not populate as these questions will not be applicable.</i> 	Narrative
f. If the Applicant has identified potential sources of Enterprise-Level Capital to leverage with the CMF Award, they should be included in Appendix 4 .	<i>See Appendix 4</i>	<ul style="list-style-type: none"> See Appendix 4. 	See Appendix 4

Question 17 – Reinvestment (if applicable)

The questions below focus on the Applicant’s plans to redeploy repaid capital during the five-year Investment Period (i.e. redeployment of CMF Award and Enterprise-Level Capital) and generating additional capital. If the Applicant does not anticipate redeploying CMF Award dollars or Enterprise-Level Capital, the amount entered in 17(a) and 17(b) should be zero. Program Income in the form of principal and equity repayments of the CMF Award earned during the Investment Period must be reinvested by the Recipient. The required conditions for that reinvestment of Program Income will be specified in the Assistance Agreement and may vary depending on whether the Applicant intends to leverage the CMF Award through reinvestment, as indicated in their response to this question.

Note: *The Applicant only needs to respond to Qs. 17(d) and 17(e) if Qs. 17(a) – 17(c) are greater than 0. Questions 17(d) – 17(e) will not appear in AMIS if Qs. 17(a) – 17(c) are all 0.*

Question Text	Response	Question Tips	Field Type
<p>a. How much additional private capital will be attracted as a result of reinvestment of repaid funds into additional Projects during the five year Investment Period?</p>	<p>\$ _____</p>	<ul style="list-style-type: none"> • Only include reinvestment in Projects which will be completed within the five-year Investment Period. • Enter “0” if the Applicant’s strategy to meet leverage requirements does not include reinvestment during the five-year Investment Period or are not planning to attract private investment as a result of the reinvestment. • Only include reinvestment in Projects which will be completed within the five-year Investment Period. 	<p>Currency</p>
<p>b. How much additional public capital will be attracted as a result of reinvestment of repaid funds (Program Income) into additional Projects during the five-year Investment Period?</p>	<p>\$ _____</p>	<ul style="list-style-type: none"> • Only include reinvestment in Projects which will be completed within the five-year Investment Period. • If 17(b) is greater than 0, 17(a) must also be greater than 0. • Enter “0” if the Applicant is not planning to reinvest during the five-year Investment Period or are not planning to attract public capital as a result of reinvestment. 	<p>Currency</p>
<p>c. Based on the responses to 17(a) and 17(b), please outline how much the Applicant plans to reinvest every year during the five-year Investment Period.</p>	<p>Yr. 1: \$ _____ Yr. 2: \$ _____ Yr. 3: \$ _____ Yr. 4: \$ _____ Yr. 5: \$ _____</p>	<p>The sum of reinvestment in Years 1-5 (Investment Period) must equal 17(a) + 17(b). Only include reinvestment in Projects which will be completed within the five-year Investment Period.</p>	<p>Currency</p>
<p>d. If the response to 17(a) or 17(b) was greater than \$0, describe the Applicant’s strategy for reinvesting the CMF Award and any Enterprise-level Capital. In particular, discuss:</p> <ul style="list-style-type: none"> • How much capital the Applicant anticipates will be repaid during the five-year Investment Period (Program Income) and how it developed the schedule for reinvestment in 17(c); • The plan for mitigating risks that repayment may occur not on the anticipated schedule; 	<p><i>Narrative – 3,000 characters</i></p>	<ul style="list-style-type: none"> • AMIS Note: Questions 17(d) – 17(e) will not appear in AMIS if 17(a) – 17(c) are all 0. • If the Applicant needs to reinvest the CMF Award to reach the 10:1 leverage multiplier, be sure to indicate that in this narrative. 	<p>Narrative</p>

Question Text	Response	Question Tips	Field Type
<ul style="list-style-type: none"> The plan to identify eligible projects to reinvest the CMF Award and ensure the Projects will be completed within the five-year Investment Period. 			
e. If the response to 17(a) or 17(b) was greater than \$0, discuss the Applicant's track record of managing the repayment and reinvesting of capital.	<i>Narrative – 3,000 characters</i>	<i>AMIS Note: Questions 17(d) – 17(e) will not appear in AMIS if 17(a) – 17(c) are all 0.</i>	Narrative

Question 18 – Project-Level Leverage (if applicable)

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

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

Note: The Applicant only needs to respond to Qs. 18(d) and 18(e) if Q. 18(c) is greater than 0. Questions 18(d) – 18(e) will not appear in AMIS if Q. 18(c) is 0.

Question Text	Response	Question Tips	Field Type
a. How much capital does the Applicant anticipate leveraging at the Project-Level from private sources?	\$_____	Examples may be a mortgage secured by the property or equity investment raised through LIHTC.	Currency
b. How much capital does the Applicant anticipate leveraging at the Project-Level from public sources?	\$_____	Examples may be grants or loans from local or state government.	Currency

Question Text	Response	Question Tips	Field Type
c. Total amount of Project-Level Leverage	<i>Auto-Calculated</i>	This field will be auto-calculated. It is the sum of 18(a) and 185(b).	Auto-Calculated
d. Describe the Applicant’s approach to leveraging at the Project-Level. Be sure to discuss, on average, how much of the Eligible Project Costs the Applicant will fund and how much will be funded by third party, Project-Level sources. If the Applicant plans to fund projects that have not secured all the necessary sources of financing, be sure to discuss the strategy for managing the risk that these other sources will not be available.	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> • <i>AMIS Note: 18(d) – 18(e) will not appear in AMIS if 18(c) is 0.</i> • As part of this narrative, be sure to identify likely sources of Project-Level Leverage (e.g., bank loan, LIHTC equity, etc.) in Appendix 3. • For sources of Project-Level capital not yet secured or not yet identified, describe the strategy to identify and generate such investment. • If the Applicant is relying on competitive sources of financing (e.g. LIHTC) to provide a portion of the Project-Level leverage, be sure to discuss how the Applicant plans to mitigate any risk associated with the possibility of not receiving the anticipated funds. 	Narrative
e. Discuss the Applicant’s track record in the last five years of securing Project-Level Leverage.	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> • <i>AMIS Note: 18(d) – 18(e) will not appear in AMIS if 18(c) is 0.</i> • Be sure to quantify the amount of Project-Level leverage raised in past projects/activities. Discussion should be thorough, descriptive, and provide quantitative as well as qualitative information. 	Narrative

Adaptability

Question 19 – Adaptability			
Question Text	Response	Question Tips	Field Type
Discuss the adaptability of the Applicant’s business and leveraging strategy to changing market conditions, including loss of anticipated pipeline projects, changes to interest rates, availability and/or cost of capital.	<i>Narrative – 2,000 characters</i>	Where relevant, discuss the Applicant’s track record in adjusting its strategy and/or pipeline due to changing market conditions, availability or cost of capital or other external pressures.	Narrative

Part 2: Community Impact

Potential Outcomes and Impacts

Question 20 – Housing and Economic Development Impacts			
Question Text	Response	Question Tips	Field Type
<p>a. Select which of the following five impacts is expected to result from the CMF Award strategy described in this Application. The Affordable Housing impact options are:</p> <ol style="list-style-type: none"> Improved financial strength and stability for Low-Income Families. Improved health outcomes for Low-Income individuals and Families, particularly seniors, children, formerly homeless, persons with disabilities, or people with other health challenges. The opportunity for Low-Income residents to avoid dislocation and remain in their affordable homes and/or neighborhoods. Improved access to educational opportunities, quality jobs or transportation for Low-Income Families. Assist in the long term recovery and rebuilding of affordable housing in federally designated disaster areas through disaster-prevention or disaster-resistant design. 	<i>Picklist</i>	<ul style="list-style-type: none"> Applicants should provide evidence to support that the strategy will achieve the selected impact(s), such as third-party studies or the Applicant’s own evaluations. Applicants won’t receive a scoring advantage for selecting more than one impact and should only discuss the one(s) that best fit their strategy. 	Picklist
<p>b. If the Applicant intends to finance/support Economic Development Activities, select which of the impacts below will result from these Economic Development Activities. The Economic Development impact options are:</p>	<i>Picklist</i>	<ul style="list-style-type: none"> Applicants won’t receive a scoring advantage for selecting more than one impact and should only discuss the one(s) that best fit their strategy. 	Picklist

Question Text	Response	Question Tips	Field Type
<p>1. Increased access to goods or services for Low-Income Families especially community and educational services.</p> <p>2. Increased economic opportunity for Low-Income Families, especially those in Areas of Economic Distress and the most vulnerable.</p>		<ul style="list-style-type: none"> • <i>AMIS Note:</i> This question will only appear in the AMIS if the Applicant indicates in Q. 9(c) that it plans to use a portion of its Award for Economic Development Activities. 	
<p>c. For each Impact selected in 20(a)-20(b) of this question, describe how the Applicant’s CMF Strategy will lead to that impact, using third-party research or internal studies as supporting information. Also, discuss the plan for tracking the impact metric(s) identified by the CDFI Fund under Question Tips, as well as any other metrics the Applicant plans to track to determine if it is achieving the selected impact.</p>	<p><i>Narrative-3,000 Characters</i></p>	<p>The metrics identified by the CDFI Fund for each Impact option in parts a-b above are listed below:</p> <p><i>Improved financial strength and stability for Low-Income Families.</i></p> <ul style="list-style-type: none"> • Number of first time homeowners. • Rental resident retention rate (average number of years in place). <p><i>Improved health outcomes for Low-Income individuals and Families, particularly seniors, children, formerly homeless, those with disabilities, and the most vulnerable.</i></p> <ul style="list-style-type: none"> • Number of units rehabilitated to improve health conditions (e.g. improved ventilation; removal of lead paint or lead pipes; radon mitigation, improved accessibility, improved plumbing and heating, removal of asbestos or mold, etc.) • Number of new units developed with healthy features. (This may include both physical aspects of the building such as universal design, low emission materials, as well as locations which promote health such as walkability, proximity to healthy food choices, parks and recreation facilities). • Number of Families with access to health services (e.g. community health center or dental clinic). • Service-enriched housing. <p><i>The opportunity for Low-Income residents to avoid dislocation and to remain in their affordable homes and/or neighborhoods.</i></p>	<p>Narrative</p>

Question Text	Response	Question Tips	Field Type
		<ul style="list-style-type: none"> • Number of at-risk affordable units preserved for 10 years or more (deed restricted). <p><i>Improved access to educational opportunities, quality jobs or transportation for Low-Income Families.</i></p> <ul style="list-style-type: none"> • Number of units acquired or developed as affordable housing in High Opportunity Areas (see Q. 22 below). <p><i>Assist in the long term recovery and rebuilding of affordable housing in federally designated disaster areas through disaster-prevention or disaster-resistant design.</i></p> <ul style="list-style-type: none"> • Number of affordable units replaced, rehabilitated or rebuilt in disaster areas federally-designated within the last five years. • Number of new or rehabilitated affordable units developed with disaster-prevention or disaster-resistant design. <p><i>Increased access to goods or services for Low-Income Families especially community and educational services.</i></p> <ul style="list-style-type: none"> • Square footage and number of Low-Income residents served from commercial Economic Development Activities (projects) financed/supported with CMF (e.g. grocery stores; retail establishments). • Number of clients/students served by CMF-supported community and educational facilities. <p><i>Increased economic opportunity for Low-Income Families, especially those in Areas of Economic Distress and the most vulnerable.</i></p> <ul style="list-style-type: none"> • Number of Economic Development Activities (projects) in Areas of Economic Distress. • Number of permanent jobs created by CMF-supported Economic Development Activities. 	

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

Economic Distress and Income Targeting

Question 21 – Areas of Economic Distress			
Question Text	Response	Question Tips	Field Type
a. What is the minimum percentage of the Applicant’s total CMF-financed/supported housing units that will be located in Areas of Economic Distress?	_____ %	<ul style="list-style-type: none"> • Areas of Economic Distress are census tracts: (a) where at least 20% of households that are Very Low-Income (50% of Area Median Income (AMI) or below) spend more than half of their income on housing; or (b) that are designated Qualified Opportunity Zones; or (c) that are Low-Income Housing Tax Credit Qualified Census Tracts; or (d) where greater than 20% of households have incomes below the poverty rate and the rental vacancy rate is at least 10%; or (e) where greater than 20% of the households have incomes below the poverty rate and the homeownership vacancy rate is at least 10%; or (f) are Underserved Rural Areas as defined in the CMF Interim Rule (as amended February 8, 2016; 12 CFR Part 1807). • The CDFI Fund will use the information obtained from 21(a) to help ensure that the CMF Program achieves its statutory goal of funding activities in geographically diverse Areas of Economic Distress, including Metropolitan and Underserved Rural Areas. The CDFI Fund plans to achieve the goal of promoting investment in Areas of Economic Distress by holding Applicants to their minimum commitment to produce units in Areas of Economic Distress (which includes Underserved Rural Areas). 	Percentage

Question Text	Response	Question Tips	Field Type
		<ul style="list-style-type: none"> • If the Applicant is selected to receive a CMF Award, it will be required to produce the percentage of housing units listed in 21(a) as a condition of its Assistance Agreement. • The Applicant will also project the percentage of units that will be located in Areas of Economic Distress in Appendix 2 - Table B2. The percentage entered in 21(a) as the commitment must be less than or equal to the projection in Table B2. 	
b. Please discuss the extent to which the Applicant’s planned CMF activities will occur in Areas of Economic Distress. In particular, discuss the Applicant’s plan to identify projects in Areas of Economic Distress, how the proposed activities will address economic distress in these areas, and the Applicant’s track record in these areas in the past five years.	<i>Narrative – 3,000 characters</i>	<ul style="list-style-type: none"> • Areas of Economic Distress are defined above. • Reference the data in Tables B1 and B2, as appropriate. • If there is a particular category of distress the Applicant plans to target (e.g. Opportunity Zones), please state that in this narrative. 	Narrative

Question 22– High Opportunity Areas			
Question Text	Response	Question Tips	Field Type
a. What is the minimum percentage of the Applicant’s total CMF-financed/supported housing units that will be located in High Opportunity Areas?	____%	<ul style="list-style-type: none"> • High Opportunity Areas refers to census tracts with characteristics including lower poverty, higher racial diversity, and above average socio-economic conditions, educational opportunities and accessible transportation. • The CMF Program specifically defines High Opportunity Areas pursuant to the criteria used by the Federal Housing Finance Agency (FHFA) to designate High Opportunity Areas, i.e. (1) an area designated by HUD as a “Difficult to Develop Area” whose poverty rate is lower than the rate specified by FHFA in the most recently published Duty to Serve Evaluation Guidance; or (ii) an area designated by a state Qualified Allocation Plan as a high opportunity area and approved by FHFA 	Percentage

Question Text	Response	Question Tips	Field Type
		in its most recently published Duty to Serve Evaluation Guidance. A data set that indicates what census tracts are High Opportunity Areas from Duty to Serve Data Federal Housing Finance Agency (fhfa.gov). The most current data set is from 2020.	
b. Describe the Applicant's track record and strategy for locating housing units in High Opportunity Areas.	Narrative - 3,000 characters		Narrative

Question 23 – Affordable Housing Activities Targeting Low-Income, Very-Low Income and Extremely-Low Income Populations			
Question Text	Response	Question Tips	Field Type
a. If the Applicant is proposing to finance rental housing with a CMF Award, indicate the number and minimum percentage of the total number of rental housing units that the Applicant will commit to financing for Very Low-Income Families (50% of the area median income or below).	____%	<ul style="list-style-type: none"> If applicable, an Applicant will generally be scored more favorably to the extent it commits to produce a greater number and/or portion of total rental units set aside for Very Low-Income Families and demonstrates that these percentages are achievable. Applicants will be held to achieving this commitment as a condition of their Assistance Agreement. Please refer to the definitions for Affordable Housing Activities and Affordable Housing laid out in section 1807.104 of the CMF Interim Rule (12 C.F.R. 1807). Note that greater than 50% of the total Eligible Project Costs (CMF Award plus Leveraged Costs) must be attributable to housing units that meet the CMF affordability qualifications for Low-Income, Very Low-Income, or Extremely Low-Income Families. <i>AMIS Note: These questions will only appear in the AMIS Application if the Applicant indicates in Q. 9(c) that it plans to use a portion of its Award for rental Housing.</i> 	Percentage
b. If the Applicant is proposing to finance Homeownership with a CMF Award, indicate the minimum percentage of the total number of Affordable Homeownership units that the Applicant		<ul style="list-style-type: none"> See note above about definitions. Note that greater than 50% of the total Eligible Project Costs (CMF Award plus Leveraged Costs) must be attributable to housing units that meet the CMF affordability qualifications for Low-Income, Very Low-Income, or Extremely Low-Income Families. 	Percentage

Question 23 – Affordable Housing Activities Targeting Low-Income, Very-Low Income and Extremely-Low Income Populations			
Question Text	Response	Question Tips	Field Type
will commit to financing for Low-Income Families (80% of the area median income or below).	____%	<ul style="list-style-type: none"> If applicable, an Applicant will generally be scored more favorably to the extent it commits to produce a greater number and/or portion of total Homeownership units available to Low-Income Families. <i>AMIS Note:</i> These questions will only appear in the AMIS if the Applicant indicates in Q.9(c) that it plans to use a portion of its Award for Homeownership. 	
c. Discuss the Applicant’s track record of financing and/or developing housing to serve the targeted income levels. Discuss how the CMF Award will enable the Applicant to finance/produce more units of Affordable Housing and/or target lower income groups than would otherwise be possible without a CMF Award. Compare the planned level of Affordable Housing finance/production and income targeting with a CMF Award to what would be possible without a CMF Award.	<i>Narrative – 4,000 characters</i>	<ul style="list-style-type: none"> Be sure to quantify how a CMF Award will allow the Applicant to increase its level of housing finance/production and/or pursue targeting units for Families with lower incomes than would otherwise be possible. Reference the data in Tables A2, B2, and C2, as appropriate. 	Narrative

Community Engagement and Strategy Alignment

Question 24 – Community Partnerships			
Question Text	Response	Question Tips	Field Type
Describe partnerships with other organizations (e.g. housing developers, lenders, community organizations) that will enhance the Applicant’s strategy and impact for Low-Income Families and help the Applicant to address priorities of the CDFI Fund.	<i>Narrative – 3,000 characters</i>	Potential areas of partnership include, but are not limited to: a) partnerships that facilitate supportive services for residents of CMF-financed Affordable Housing; b) partnerships that will allow the Applicant to reach new markets, significantly increase its Affordable Housing production, or undertake new activities; c) partnerships that facilitate the Applicant in addressing priorities of the CDFI Fund as identified in the Notice of Funding Availability (NOFA) for each funding round (e.g. partnerships with local or state jurisdictions whose land use policies or other regulations will have the effect of reducing development costs for affordable housing.)	Narrative

Question 25 – Economic Development Activities (if proposed in Q.9(c))			
Question Text	Response	Question Tips	Field Type
a. If the Applicant intends to finance Economic Development Activities (EDA), describe how the Applicant will ensure that its activities are certified as being part of a <u>Concerted Strategy</u> to stabilize or revitalize a Low-Income Area or Underserved Rural Area In Conjunction with Affordable Housing.	Narrative – 2,000 characters	<ul style="list-style-type: none"> • <i>Concerted Strategy</i> means a formal planning document that evidences the connection between Affordable Housing Activities and Economic Development Activities. Such documents include comprehensive, consolidated, or redevelopment plan, or some other local, state or regional planning document adopted or approved by the jurisdiction. • This is a regulatory requirement if the Applicant intends to use its CMF Award to finance/support EDA. CMF Interim Rule (12 CFR § 1807.104) • EDA must benefit affordable housing residents within a one mile radius in Metropolitan Areas and up to 10 miles in Rural Areas. • <i>AMIS Note:</i> This question will only appear in the AMIS Application if the Applicant indicates in Q. 9(c) that it plans to use a portion of its Award for Economic Development Activities. 	Narrative
b. Describe how the planned EDA will serve nearby residents of affordable housing.	Narrative – 2,000 characters	<ul style="list-style-type: none"> • Per the CMF Interim Rule, the EDA facility must be must be located in the same census tract or within one mile of the affordable housing in Metropolitan Areas and in the same county, township or village or within 10 miles of the affordable housing in Nonmetropolitan Areas. 	Narrative

Rural Areas

Question 26 – Rural Areas

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

Rural Areas is defined per 12 CFR § 1282.1 (Enterprise Duty To Serve Final Rule) as (i) A census tract outside of a Metropolitan Statistical Area as designated by the Office of Management and Budget; or (ii) A census tract in a Metropolitan Statistical Area as designated by the Office of Management and Budget that is outside of the Metropolitan Statistical Area’s Urbanized Areas, as designated by the U.S. Department of Agriculture’s (USDA) Rural-Urban Commuting Area (RUCA) Code #1, and outside of tracts with a housing density of over 64 housing units per square mile for

USDA’s RUCA Code #2. The CDFI Fund has published a dataset indicating which census tracts are designated as Rural Areas for the current Round on its [website](#).

If the Applicant’s response to Q. 26(a) is greater than zero, the Applicant will be held to using a required percentage of CMF Award dollars in Rural Areas as a condition of its Assistance Agreement. The required percentage will equal the response to Q. 26(a).

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

Question Text	Response	Question Tips	Field Type
a. Indicate the percentage of CMF Award dollars that the Applicant is willing to commit to deploy in Rural Areas:	_____ %	<ul style="list-style-type: none"> The percentage entered must be between 0 and 100. 	Percentage
b. If the response to 26(a) is greater than 0%, briefly describe the Applicant’s track record of serving Rural Areas. Be sure to indicate: <ul style="list-style-type: none"> Both in dollar amount and as a percentage of the Applicant’s overall activities, the amount of loans, investments or related activities the Applicant has undertaken in Rural Areas. The proportion of activities in Rural Areas of Economic Distress. The type of housing that will be financed—e.g. manufactured housing; single family; multifamily; etc. 	Narrative – 3,000- characters	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	Narrative
c. For the Applicant’s activity over the last five years, provide the following information based on the total housing units produced located in <u>Rural Areas</u> : <ul style="list-style-type: none"> Total project costs financed/supported Total units produced 	\$_____ Costs _____ Units	<ul style="list-style-type: none"> This question will only appear if Applicant commits to using a portion of its CMF Award in Rural Areas. 	<ul style="list-style-type: none"> Currency Numeric

Question 27– Innovation			
Question Text	Response	Question Tips	Field Type
If the Applicant is proposing to use the CMF Award in an innovative way, please describe the innovative strategy, approach, product or activity. Be sure to address how this strategy, approach, product or activity: is new to the industry; makes creative use of	Narrative – 2,000 characters	<ul style="list-style-type: none"> A response to this question is not required and the Applicant should indicate N/A if this question is not relevant to the Applicant. The CDFI Fund is interested in innovative uses of CMF and is seeking this response for informational purposes only. The 	Narrative

Question Text	Response	Question Tips	Field Type
existing resources; is a new approach to the Applicant; will enable the Applicant to significantly scale up existing activity or reach new markets.		Applicant's response on this question will not impact the evaluation of the Application.	

Part 3: Organization Capacity

Question 28 – Key Personnel			
Question Text	Response	Question Tips	Field Type
Complete Appendix 5 for key personnel that will be involved in managing the CMF Award. Applicants will be able to list no more than 10 individuals. Select the individuals that will be most important in managing the CMF Award.	See Appendix 5	See Appendix 5 .	See Appendix 5

Question 29 – Previous Awards			
Question Text	Response	Question Tips	Field Type
a. Appendix 6 will list previous awards from the CDFI Fund received by the Applicant and any Affiliates.	See Appendix 6	<ul style="list-style-type: none"> See Appendix 6. This information should pre-populate in AMIS. If it does not, contact the AMIS Help Desk to ensure all the Applicant’s Affiliates are linked. 	See Appendix 6
b. If the Applicant has received other Federal awards (not from the CDFI Fund), discuss the following: <ul style="list-style-type: none"> Briefly describe the Applicant’s experience managing Federal Awards in the last three years, including the number, dollar amount and types of awards managed. Indicate if the Applicant or its Affiliates have been deemed noncompliant with a Federal award (other than a CDFI Fund Award), experienced any significant compliance issues or received a finding as the result of an Office of Inspector General (OIG) audit in the past three years. If the Applicant did not receive any Federal awards in the past three years, discuss any other experience that the Applicant has in administering awards from other entities (<i>e.g.</i>, state or local governments, foundations), particularly large monetary awards with 	<i>Narrative – 4,000 characters</i>	<ul style="list-style-type: none"> Previous CMF Recipients must clearly discuss the status of Awards from the last three years, as applicable. 	Narrative

Question Text	Response	Question Tips	Field Type
substantial compliance requirements and describe how this experience will enable the Applicant to successfully administer a CMF Award.			
c. Is the Applicant or any Affiliates currently the subject of an unresolved audit or investigation by the Office of the Inspector General (OIG) for any Federal Agency?	Yes/No		
d. If the Applicant has received a CMF Award in one or more of the past five rounds, indicate how much of each Award has been Committed and disbursed to Projects/borrowers as of the Application submission date. Indicate if any Projects under these Awards have achieved Project Completion.	Narrative- 2,000 characters	<ul style="list-style-type: none"> Performance related to past Awards will be reviewed and considered as part of the Application review. Applicants should ensure that information on Commitment of past CMF Awards is up to date in AMIS throughout the Application review period. 	Narrative

Question 30 – Financial Health			
Question Text	Response	Question Tips	Field Type
a. Enter the Applicant’s relevant financial data in Appendix 7 . Note which fields are relevant for the Applicant entity type.	See Appendix 7	For reference, see Appendix 7 .	See Appendix 7
b. Have any of the Applicant’s completed audits within the past three years indicated negative Net Income?	Yes/No	Net Income, also known as Earnings, is Revenue less Expenses.	Picklist
c. Have any of the Applicant’s completed audits within the past three years included an opinion other than unqualified/unmodified?	Yes/No	An unqualified opinion is an independent auditor's judgment that a company's financial records and statements are fairly and appropriately presented, and in accordance with Generally Accepted Accounting Principles (GAAP). An unqualified/unmodified opinion is the most common type of auditor's report.	Picklist
d. Have any of the Applicant’s completed audits within the past three years included a “going-concern paragraph” or qualification?	Yes/No	The going concern principle is that it is assumed a business will continue in the future, unless there is evidence to the contrary. When an auditor conducts an examination of the accounting records of a company, he or she has an obligation to review its ability to continue as a going concern; if the assessment is that there is a substantial doubt regarding the company's ability to	Picklist

Question Text	Response	Question Tips	Field Type
		continue in the future (which is defined as the following year), a going concern qualification must be included in his or her opinion of the company's financial statements.	
e. Have any of the Applicant's audits for the three most recently completed fiscal years (as of the date of the NOFA), including any Single Audits for those years, contained repeated findings of reportable conditions?	Yes/No	Reportable condition is a matter coming to the auditor's attention relating to significant deficiencies in the design or operation of the internal control that could adversely affect an entity's ability to fulfill future obligations and/or the satisfaction of liabilities.	Picklist
f. Have any of the Applicant's completed audits within the three most recently completed fiscal years (as of the date of the NOFA), including its Single Audit, indicated material weaknesses in internal control?	Yes/No	Material weakness in internal controls means that it could lead to a material misstatement in a company's financial statements.	Picklist
If "Yes" to any of 30(b)-30(f) above, indicate the fiscal years of the occurrence, and describe the circumstances and corrective action taken.	Narrative – 2,000 characters	Be as thorough as possible in describing the circumstances around the occurrence and any corrective steps take to address the issue.	Narrative
g. Provide a narrative responding to the following questions on the Applicant's financial health: <ul style="list-style-type: none"> • Discuss financial health over the past three years prior to the date of the NOFA, noting key trends and circumstances and how they shape organizational performance and business strategy. • Be sure to discuss any recent material changes to the Applicant's financial health that are not reflected in the audited financial statement for the most recently completed fiscal year. • Has the Applicant ever filed for bankruptcy or otherwise defaulted on financial obligations to a third party? • If yes, please explain the circumstances, indicate the fiscal year in which they occurred, and describe the corrective action being taken. • Is the Applicant delinquent with respect to any obligations owed by the Applicant to an investor or lender? If yes, please explain the circumstances and describe the corrective action being taken. 	Narrative – 4,000 characters	The CDFI Fund reserves the right to contact other governmental organizations to review the Applicant's award status and reserves the right to obtain additional audited or interim financial statements from an Applicant to review its financial condition, prior to making a final award determination. Failure on the part of the Applicant to acknowledge issues related to the financial health of the organization in this question or elsewhere in the Application could result in the Application being deemed ineligible, dismissed from a subsequent stage of review, or in termination of an Award.	Narrative

Question Text	Response	Question Tips	Field Type
<ul style="list-style-type: none"> Acknowledge any other areas of material weakness and/or deficiencies in the Applicant’s financial health, viability, and capacity as well as financial statement and Single Audit findings (as applicable). Discuss how the Applicant is trying to improve in those areas. 			

Question 31–Portfolio Health			
Question Text	Response	Question Tips	Field Type
<p>Discuss the Applicant’s portfolio performance. Describe key trends or changes in the portfolio for the three most recently completed fiscal years and the current fiscal year-to-date.</p> <p><u>For Applicants who are Financing Entities</u></p> <p>Discuss the Applicant’s loan/equity portfolio. Refer to relevant loan/equity portfolio data entered in Table E. Explain any weaknesses, especially those related to delinquencies or net loan losses and discuss how the Applicant is trying to improve those areas. Compare the Applicant’s performance with industry benchmarks where appropriate.</p> <p><u>For Applicants who are Affordable Housing Developers/Managers, discuss the Applicant’s property portfolio.</u></p> <p>Refer to the relevant portfolio data entered in Table F as necessary. Explain any weaknesses, especially around low net operation income (NOI), high vacancy rates, etc. Compare the Applicant’s performance with industry benchmarks where appropriate.</p>	<p><i>Narrative – 3,000 characters</i></p>	<ul style="list-style-type: none"> Financing Entity-Applicants should complete this question as it relates to the Applicant’s loan/equity portfolio. Complete Table E. Affordable Housing Developer/Manager of Rental Housing-Applicants should complete this question as it relates to the Applicant’s property portfolio. Complete F. If an Affordable Housing Developer/Manager Applicant does not maintain a property portfolio that should be described in the narrative. 	<p>Narrative</p>

Appendix 1: Financing Products

Instructions for Completing Appendix 1

In this table, the Applicant will provide the following data for each product the Applicant plans to offer with its CMF Award. Comparative interest rates and terms should reflect what is available in the market for similar products. In the case of Developer/Managers, it is sufficient to indicate the activity type of financing that will be provided to projects using the CMF Award. Tie the products to needs and financing gaps described in this Application. Focus on the role of CMF with the products in the narrative section of this table.

Appendix 1: Financing Products		
AMIS Field Name	Question Tips	Field Type
Financing Product/Activity Type	<p>Select the Financing Product/ Activity Type.</p> <ul style="list-style-type: none"> • Predevelopment • Acquisition • Construction • Bridge/short term financing • Permanent (1st Lien) • Permanent (2nd Lien or lower) • Refinancing • Loan Loss Reserve/Loan Guarantee • Secondary market activity • Equity 	Picklist
Description	Describe the financing product.	Narrative - 500 Characters
Tenure Type	<p>Select the appropriate tenure type that will be supported by the financing product.</p> <ul style="list-style-type: none"> • Rental • Homeownership • Economic development 	Picklist
Maximum Loan Amount	Enter the maximum loan amount that will be supported by the financing product.	Currency
Estimated Interest Rate Range	Discuss estimated interest rate range and how the specific rate will be determined.	Text

Appendix 1: Financing Products		
Estimated Average Interest Rate	Enter the estimated average interest rate.	Percentage
Comparative Average Interest Rate	Identify the comparable average interest rate offered by others.	Percentage
Comparative Interest Rate Description	Discuss comparative interest rates. Should reflect what is available in the market for similar products.	Text
Amortization/Repayment Terms	Discuss amortization terms.	Text
Comparative Amortization/Repayment Terms	Discuss comparable amortization/repayment terms offered by others.	Text
Security Position (1 st , 2 nd , etc.)/Collateral	Discuss the security position (1 st , 2 nd , etc.) and/or collateral	Text
Other Terms	Discuss other applicable terms.	Text
Comparative Other Terms	Discuss comparable terms offered by others.	Text
Need/Gap this Product Addresses	Discuss the need/gap this product is intended to address.	Text

Appendix 2: Track Record and Projections

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

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

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

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

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

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

Table A1 – Track Record by Activity Type			
AMIS Field Name	Question Tips	Field Type	5 Year Total
New Development Cost (Rental)	Enter the costs for rental housing new Development for the last five years.	Currency	\$ _____
New Development Units (Rental)	Enter the units for rental housing new Development for the last five years.	Numeric	_____
Rehabilitation and/or Preservation Cost (Rental)	Enter the costs for rental housing Rehabilitation and/or Preservation for the last five years.	Currency	\$ _____
Rehabilitation and/or Preservation Units (Rental)	Enter the units for rental housing Rehabilitation and/or Preservation for the last five years.	Numeric	_____
Total Rental Housing Costs	Totals for rental housing costs will be auto-calculated in this row.	Auto-Calculated	\$ _____
Total Rental Housing Units	Totals for rental housing units will be auto-calculated in this row.	Auto-Calculated	_____
New Development Cost (HO)	Enter the costs for new Development Homeownership for the past five years.	Currency	\$ _____
New Development Units (HO)	Enter the units for new Development Homeownership for the past five years.	Numeric	_____
Rehabilitation Cost (HO)	Enter the costs for Rehabilitation Homeownership for the past five years.	Currency	\$ _____
Rehabilitation Units (HO)	Enter the units for Rehabilitation Homeownership for the past five years.	Numeric	_____
Mortgage Finance, Refinance and/or Purchase Assistance Cost	Enter the costs for homeowner mortgage finance and/or Purchase assistance for the past five years.	Currency	\$ _____
Mortgage Finance, Refinance and/or Purchase Assistance Units	Enter the units for homeowner mortgage finance and/or Purchase assistance for the past five years.	Numeric	_____
Total Homeownership Costs	Totals for Homeownership costs will be auto-calculated in this row.	Auto-Calculated	\$ _____
Total Homeownership Units	Totals for Homeownership units will be auto-calculated in this row.	Auto-Calculated	_____
Community Service Facilities Costs	Enter the costs for Community Service Facilities for the past five years.	Currency	\$ _____
Community Service Facilities Units	Enter the number of Community Service Facilities for the past five years.	Numeric	_____
Commercial Econ. Dev. Activities Costs	Enter the costs for commercial Economic Development Activities for the past five years.	Currency	\$ _____
Commercial Econ. Dev. Activities Units	Enter the number of commercial Economic Development Activity facilities for the past five years.	Numeric	_____
Total Economic Development Costs	Total Economic Development Activity costs will be auto-calculated in this row.	Auto-Calculated	\$ _____
Total Economic Development Units	Total Economic Development Activity units will be auto-calculated in this row.	Auto-Calculated	_____
Total Cost	Total costs will be auto-calculated in this row.	Auto-Calculated	\$ _____
Total Units	Total units will be auto-calculated in this row.	Auto-Calculated	_____

Table A2: Projected Housing/Economic Development Activity Type

Data entered in Table A2 should be based on the date the Project will achieve Project Completion. In this table, only provide data for activities undertaken as a result of the Applicant’s requested CMF Award. Do not include data on activities unrelated to the Applicant’s requested CMF Award.

In the fields for cost (\$), the Applicant must enter the projected total Eligible Project Costs (inclusive of financing by the Applicant and any other entity) as of the date the Project is projected to achieve Project Completion. Projected Total Costs in this table must equal the Eligible Project Costs entered in Q. 14c.

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

Table A2 – Projected Activity Type			
AMIS Field Name	Question Tips	Field Type	5 Year Total
New Development Cost (Rental)	Enter the costs for rental housing new Development for the next five years.	Currency	\$_____
New Development Units (Rental)	Enter the units for rental housing new Development for the next five years.	Numeric	_____
Rehabilitation and/or Preservation Cost (Rental)	Enter the costs for rental housing Rehabilitation and/or Preservation for the next five years.	Currency	\$_____
Rehabilitation and/or Preservation Units (Rental)	Enter the units for rental housing Rehabilitation and/or Preservation for the next five years.	Numeric	_____
Total Rental Housing Costs	Totals for rental housing costs will be auto-calculated in this row.	Auto-Calculated	\$_____
Total Rental Housing Units	Totals for rental housing units will be auto-calculated in this row.	Auto-Calculated	_____
New Development Cost (HO)	Enter the costs for new Development Homeownership for the next five years.	Currency	\$_____
New Development Units (HO)	Enter the units for new Development Homeownership for the next five years.	Numeric	_____
Rehabilitation Cost (HO)	Enter the costs for Rehabilitation Homeownership for the next five years	Currency	\$_____
Rehabilitation Units (HO)	Enter the units for Rehabilitation Homeownership for the next five years.	Numeric	_____
Homebuyer Mortgage Finance and/or Purchase Assistance Cost	Enter the costs for homeowner mortgage finance and/or Purchase Assistance for the next five years.	Currency	\$_____

Table A2 – Projected Activity Type			
AMIS Field Name	Question Tips	Field Type	5 Year Total
Homebuyer Mortgage Finance and/or Purchase Assistance Units	Enter the units for homeowner mortgage finance and/or Purchase Assistance for the next five years.	Numeric	_____
Community Service Facilities Costs	Enter the projected costs for Community Service Facilities for the next five years.	Currency	\$_____
Community Service Facilities Units	Enter the number of projected Community Service Facilities for the next five years.	Numeric	_____
Commercial Econ. Dev. Activities Costs	Enter the projected costs for commercial Economic Development Activity costs for the next five years.	Currency	\$_____
Commercial Econ. Dev. Activities Units	Enter the projected number of commercial Economic Development Activity facilities for the next five years.	Numeric	_____
Total Economic Development Costs	Total Economic Development Activity costs will be auto-calculated in this row.	Auto-Calculated	\$_____
Total Economic Development Units	Total Economic Development Activity units will be auto-calculated in this row.	Auto-Calculated	_____
Total Cost	Total projected costs will be auto-calculated in this row.	Auto-Calculated	\$_____
Total Units	Total projected units will be auto-calculated in this row.	Auto-Calculated	_____

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

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

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

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

Table B2: Projected Housing Units Production by Income Levels

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

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

Please note that the number of units projected in Areas of Economic Distress in this table cannot be less than the percentage indicated in Q. 21(a). In other words, if the Applicant is committing to locate 50% of the units in Areas of Economic Distress in Q. 21(a) and is also proposing a total of 100 units, the housing activity in Areas of Economic Distress Units in this table cannot be less than 50.

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

Table B2 – Projected Housing Units Production by Income Levels			Response
AMIS Field Name	Question Tips	Field Type	5 Year Total
Rental Housing			
0-30% AMI Units	Enter the number of units for 0-30% AMI.	Numeric	_____
31-50% AMI Units	Enter the number of 31-50% AMI units.	Numeric	_____
51-80% AMI Units	Enter the number of 51-80% AMI units.	Numeric	_____
81-120% AMI Units	Enter the number of 81-120% AMI units.	Numeric	_____
Total Rental Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
Homeownership Housing			
0-30% AMI Units	Enter the number of units for 0-30% AMI.	Numeric	_____
31-50% AMI Units	Enter the number of 31-50% AMI units.	Numeric	_____
51-80% AMI Units	Enter the number of 51-80% AMI units.	Numeric	_____
81-120% AMI Units	Enter the number of 81-120% AMI units.	Numeric	_____

Table B2 – Projected Housing Units Production by Income Levels			Response
AMIS Field Name	Question Tips	Field Type	5 Year Total
Total Homeownership Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
All Housing			
Total - All Housing Units	This field will be auto-calculated.	Auto-Calculated	Auto-Calculated
Areas of Economic Distress			
Housing Activity in Areas of Economic Distress: Cost	Enter the costs for housing activity in Areas of Economic Distress. This figure should be a subset of Total Rental Costs and Total Homeownership Costs entered in Table A2.	Currency	_____
Housing Activity in Areas of Economic Distress: Units	Enter the number of units in Areas of Economic Distress. This figure should be a subset of Total Rental Housing Units and Total Homeownership Units entered in Table A2.	Numeric	_____
High Opportunity Areas			
Housing Activity in High Opportunity Areas: Cost	Enter the costs for housing activity in High Opportunity Areas. This figure should be a subset of Total Rental Costs and Total Homeownership Costs entered in Table A2.	Currency	_____
Housing Activity in High Opportunity Areas: Units	Enter the number of units in High Opportunity Areas. This figure should be a subset of Total Rental Housing Units and Total Homeownership Units entered in Table A2.	Numeric	_____

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

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

Data entered in Table C1 should be based on the date the financing transaction closed.

Table C1 – Track Record by Financing Activities/Products			
AMIS Field Name	Question Tips	Field Type	5 Year Total
Predevelopment	Enter dollar amount loaned or invested for predevelopment for the past five years.	Currency	\$ _____
Acquisition	Enter dollar amount loaned or invested for acquisition for the past five years.	Currency	\$ _____
Construction	Enter dollar amount loaned or invested for construction for the past five years.	Currency	\$ _____
Bridge Loans or Similar Short Term	Enter dollar amount loaned or invested for bridge loans or similar for the past five years.	Currency	\$ _____
Permanent Financing (1st)	Enter dollar amount loaned or invested for permanent financing (1 st lien) for the past five years.	Currency	\$ _____
Permanent Financing (2nd or Lower)	Enter dollar amount loaned or invested for permanent financing (2 nd lien or lower) for the past five years.	Currency	\$ _____
Refinancing	Enter dollar amount loaned or invested for refinancing for the past five years.	Currency	\$ _____
Loan Loss Reserves or Loan Guarantees	Enter dollar amount allocated for loan guarantees and/or loan loss reserves for the past five years.	Currency	\$ _____
Equity	Enter dollar amount invested or invested as equity for the past five years.	Currency	\$ _____
Total Financing Deployment	Will sum automatically in AMIS.	Auto-Calculated	\$ _____

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

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

Data entered in Table C2 should be based on the date the financing transaction will close.

Table C2 – Projected CMF Financing Activities/Products			
AMIS Field Name	Question Tips	Field Type	5 Year Total
Predevelopment	Enter projected dollar amount of financing for predevelopment for the next five years.	Currency	\$_____
Acquisition	Enter projected dollar amount of financing for acquisition for the next years.	Currency	\$_____
Construction	Enter projected dollar amount of financing for construction for the next five years.	Currency	\$_____
Bridge Loans or Similar	Enter projected dollar amount of financing for bridge loans or similar for the next five years.	Currency	\$_____
Permanent Financing (1st)	Enter projected dollar amount of financing for permanent financing (1 st lien) for the next five years.	Currency	\$_____
Permanent Financing (2nd or Lower)	Enter projected dollar amount of financing for permanent financing (2 nd lien or lower) for the next five years.	Currency	\$_____
Refinancing	Enter projected dollar amount of refinancing activity for the next five years.	Currency	\$_____
Loan Loss Reserves or Loan Guarantees	Enter projected dollar amount to be allocated for Loan Guarantees and/or Loan Loss Reserves for the next five years.	Currency	\$_____
Equity	Enter projected dollar amount of financing for equity investments for the next five years.	Currency	\$_____
Total Deployment	AMIS will sum the fields automatically.	Auto-Calculated	\$_____

Appendix 3: Project Pipeline and Sources/Uses

Please provide the following information for the proposed pipeline of projects. Include at least two and up to eight projects. For pipelines which exceed eight projects or where not all projects have yet been identified, provide estimated aggregate cost information on those projects in the “Total for Additional Projects” category.

For each project, provide the requested information on its name, location, the type of project it is (rental (R), homeownership (HO), economic development (EDA)), start and completion dates, and the number of units (number of units does not need to be provided for Economic Development Activities). All anticipated sources of capital to complete the project should be listed appropriately as Enterprise-Level or Project-Level Leverage and according to its status (Committed/Received or Estimated/Projected). If the sources are unknown, indicate the estimated amount as “Other.” The total sources identified for each project should equal the Total Development Cost for each project. Eligible Project Costs should not exceed Total Development Costs.

While the Applicant will not be held to financing/supporting all of the specific projects listed in the pipeline if selected to receive a CMF Award, please only describe projects in the Applicant’s pipeline for which the Applicant realistically anticipates using the CMF Award.

- If the Applicant is planning on providing mortgage assistance/Purchase assistance to homebuyers, you may list the Homeownership program as one “project” in Appendix 3.
- If the Applicant is planning on using the CMF Award to finance/support Economic Development Activities, make sure to include at least one project of this type in the pipeline.

Appendix 3: Project Pipeline Sources/Uses									
AMIS Field Name	Project 1	Project 2	Project 3	Project 4	Project 5	Project 6	Project 7	Project 8	Total for Additional Projects
Project Name and Description									
Location (City, State)									
Units Supported by CMF Award									
Units in Project									
Project Type (R/HO/EDA)									

Estimated Project Start (Year)									
Estimated Project Completion (Year)									

Appendix 3: Project Pipeline Sources/Uses									
AMIS Field Name	Project 1	Project 2	Project 3	Project 4	Project 5	Project 6	Project 7	Project 8	Total for Additional Projects
Committed and/or Received									
Enterprise-Level Leverage									
Private Financial Institution Debt/Equity									
Private Foundation									
Applicant Equity									
Other Private									
Public Funds (other than CMF Award)									
Project-Level Leverage									
Private Financial Institution Debt/Equity									
Private Foundation									
LIHTC Awarded									
Tax Exempt Bonds									
FHLB									
State Tax Credits									
Other Private									
Public Funds (other than CMF Award)									
Estimated/Projected									
Enterprise-Level Leverage									
Private Financial Institution Debt/Equity									

Private Foundation									
Applicant Equity									
Other Private									
Public Funds (other than CMF Award)									
Project-Level Leverage									
Private Financial Institution Debt/Equity									
Private Foundation									
LIHTC									
Tax Exempt Bonds									
FHLB									
State Tax Credits									
Other Private									
Public Funds (other than CMF Award)									
Reinvestment									
Additional Private Leverage Generated through Reinvestment									
Additional Public Leverage Generated through Reinvestment									
CMF Award									
Subtotal of All Sources									

<i>Uses</i>									
Total Development Costs									
Total Eligible Project Costs									

Appendix 4: Enterprise-Level Sources of Leverage

The Applicant will only be able to enter data in Appendix 4 if Q. 16 indicated that the CMF Award will be used to leverage Enterprise-Level Capital. If the Applicant plan to leverage Enterprise-Level Capital, you must provide at least one potential source of Enterprise-Level Capital in this Appendix. You may add as many sources as necessary.

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

Appendix 5: Key Personnel

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

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

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

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

Appendix 6: Previous CDFI Fund Awards

The following information is for each of the prior CDFI Fund awards that the Applicant and/or any Affiliates have received (as of the Application deadline) will be auto-populated by AMIS.

Previous CDFI Fund Awards			
AMIS Field Name	Response	Question Tips	Field Type
Name of Award	_____	Enter the name of the award.	Auto-Calculated
Award Amount	\$_____	Enter the award amount.	Auto-Calculated
Award Date	<i>mm/dd/yyyy</i>	Do not include any award received more than 3 years prior to the Application due date.	Auto-Calculated
Control/Award Number	_____	Enter the Control/Award Number, if applicable.	Auto-Calculated

Appendix 7: Application Financial Data

- An Applicant must provide data for the three most recently completed fiscal years prior to the date of the Notice of Fund Availability (NOFA) for which the Applicant has audited financials. FOR CERTIFIED CDFI DEPOSITORY INSTITUTIONS ONLY: Call Reports may be submitted in lieu of financial statements.
- When entering data, ensure that the Financial Data 3 column contains financial data for the most recently completed fiscal year. Data for the middle year should be entered in the Financial Data 2 column. Data for the least recent year should be entered in the Financial Data 1 column.
- Financial data may be provided on a consolidated or unconsolidated basis; however, the data in the Application must reflect the same basis as used in the audits attached to the Application. If submitting unconsolidated data for the Applicant entity only, it must be reflected in the attached audits. If the audit does not contain this unconsolidated data, you must enter consolidated data. If the attached audits contain both consolidated and unconsolidated financial information, you may choose which type to enter. However, you must enter the same type (consolidated/unconsolidated) for all three fiscal years. You will label the type of data submitted in AMIS. The data entered in Appendix 7 must match the attached audits.
- FOR CERTIFIED CDFI DEPOSITORY INSTITUTION HOLDING COMPANIES ONLY: If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it must enter the financial data for the Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award in Tables D and E.
- Definitions for the relevant terms are listed in Tables D, E, and F below.
- For any items where a timing dependent valuation is required, that valuation should be based on the appropriate fiscal year end date.
- **AMIS Note:** *Affordable Housing Developers/Manager Applicants may put \$0 in the fields that are only required for Financing Entities in Table D, as AMIS requires that data be entered in these fields.*

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

Table D – Applicant Financial Data				Responses (by Fiscal Year)		
AMIS Field Name	Question Tips	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Financial Data Consolidation	Select whether the financial data is on Consolidated or Unconsolidated basis.	Picklist	<i>All Applicants</i>	Consolidated or Unconsolidated	Consolidated or Unconsolidated	Consolidated or Unconsolidated
Single Audit Required?	Indicate whether the Applicant or its Affiliates were required to have a Single Audit completed in each of the Fiscal Years per 2 C.F.R. 200.501.	Picklist	<i>All Applicants</i>	Yes or No	Yes or No	Yes or No
Assets						
Cash Restricted for Operations (\$)	The dollar amount of cash, if any, restricted by an organization to fund its operations. Restricted cash appears noted on an organization's balance sheet as either "restricted cash" or as "other assets" restricted for operations.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Unrestricted Cash and Cash Equivalents (\$)	The value of unencumbered assets that are cash or can be converted into cash within three months, such as bank accounts or marketable securities.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Other Real Estate Owned (OREO) (\$)	In general, real estate, including capitalized and operating leases, that is acquired through any means, in full or partial satisfaction of a debt previously contracted.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Current Assets (\$)	Current Assets are cash and other assets/resources commonly identified as those which are reasonably expected to be realized in cash or sold or consumed during the normal operating cycle of the business (or one year, whichever is longer).	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Allowance for Loan and Lease Losses (\$)	Account value for unidentified Loan or Investment losses, inclusive of depository loss reserve as of the reporting period end. This appears as a contra asset on the balance sheet. Note, this field should be entered as a positive number.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Total Assets (\$)	The total value of the sum of all assets (current and non-current).	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Liabilities						

Table D – Applicant Financial Data				Responses (by Fiscal Year)		
AMIS Field Name	Question Tips	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Current Liabilities (\$)	The total value of debts, obligations and payables due within 12 months. Current liabilities include, but are not limited to, short-term debt, accounts payable, accrued liabilities and other debts.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Liabilities (\$)	The total value of short-term and long-term outstanding debts, obligations, and payables.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Net Assets (Net Worth)						
Unrestricted Net Assets (\$)	The portion of Net Assets that is neither permanently restricted nor temporarily restricted by donor-imposed stipulations. Board designated unrestricted net assets should be considered Unrestricted Net Assets for the purposes of this Application.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Total Net Assets (\$) or Equity	Equal to Total Assets minus Total Liabilities as reported in an organization's balance sheet. Credit Unions and Bank Applicants: Enter "0" and complete Net Worth (Credit Unions) or Tier 1 Capital (Banks) as appropriate.	Currency	<i>All Applicants</i>	\$_____	\$_____	\$_____
Net Worth (Credit Union Applicants Only) (\$)	As defined by the appropriate federal or state regulating agency.	Currency	<i>Credit Union Applicants</i>	\$_____	\$_____	\$_____
Tier 1 Capital (Bank Applicants Only) (\$)	In general, this term is used by financial institution regulators to assess capital adequacy and may include common Equity, noncumulative perpetual preferred stock, minority interests in consolidated Subsidiaries, less goodwill and other ineligible, intangible assets.	Currency	<i>Bank Applicants</i>	\$_____	\$_____	\$_____
Available Financing Capital (\$)	Assets that can be used for lending and Equity Investments that have not already been committed, disbursed, or restricted for other purposes.	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Total Financing Capital (\$)	All capital either currently available or currently in use for financing activities. <i>Note: This data point includes "Available Financing Capital" and therefore should be equal to or greater than the value entered for "Available Financing Capital (\$)" below.</i>	Currency	<i>Financing Entities</i>	\$_____	\$_____	\$_____
Revenue and Expenses						

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

Table E

The data entered in items for the “On-Balance Sheet” data fields in Table E must be for the loan/investment portfolio maintained on the balance sheet of the Applicant entity. If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it should provide data on the loan/investment portfolio maintained on the balance sheet of its Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award. When entering data, ensure that the Financial Data 3 column contains financial data for the most recently completed fiscal year. Data for the middle year should be entered in the Financial Data 2 column. Data for the least recent year should be entered in the Financial Data 1 column.

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

Table E – Loan/Equity Portfolio				Responses (by Fiscal Year)		
AMIS Field Name	Question Tips	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Loan and Investment Portfolio						
Total On-Balance Sheet Loan Portfolio (\$)	The gross dollar amount (\$) of loans receivable as reported in an organization’s statement of financial condition or balance sheet. Gross loans receivable are the principal amount of loans receivable held by an organization that represents the amount still owed to the organization by its borrowers, without giving effect to any allowance for the collectability thereof (i.e. before loan loss reserves are calculated).	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Total On-Balance Sheet Loan Portfolio (#)	The total number (#) of loans receivable as reported in an organization’s statement of financial condition or balance sheet.	Numeric	<i>Financing Entity</i>	_____	_____	_____
Commitments (\$)	The total dollar amount (\$) of loan or Equity Investment commitments made by an organization to borrowers or investees that have not yet been disbursed, but for which the organization has reserved cash, cash equivalents, or other assets to fund at a later date (e.g., a loan that is closed but not yet disbursed, a loan that has been provisionally approved but will not be closed or disbursed until a borrower meets certain terms and conditions; a loan that has been approved by a loan committee, but not yet closed).	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____

Table E – Loan/Equity Portfolio				Responses (by Fiscal Year)		
AMIS Field Name	Question Tips	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Commitments (#)	The number (#) of loan or Equity Investment commitments.	Numeric	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Total Charge-offs (\$)	The dollar amount (\$) of a receivable, primarily a loan, that has been determined to be a loss or non-recoverable during the repayment cycle and that has been taken off the balance sheet as a loss during the reporting period and a direct reduction of the carrying amount of a financial asset measured at amortized cost resulting from the inability to collect the asset. A financial asset is considered uncollectible if the entity has no reasonable expectation of recovery.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Total Charge-offs (#)	The total number (#) of receivables, primarily loans, that have been determined to be a loss or non-recoverable during the repayment cycle and that have been taken off the balance sheet as a loss during the reporting period.	Numeric	<i>Financing Entity</i>	_____	_____	_____
Troubled Debt Restructuring (\$)	The total dollar amount (\$) of all debt restructured during the reporting period by a creditor for economic or legal reasons related to the debtor’s financial difficulties and/or inability to pay and perform as agreed.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Troubled Debt Restructuring (#)	The total number (#) of debt instruments restructured during the reporting period by a creditor for economic or legal reasons related to the debtor’s financial difficulties and/or inability to pay and perform as agreed.	Numeric	<i>Financing Entity</i>	_____	_____	_____
Recoveries (\$)	The total dollar amount (\$) of all gross recoveries on charged-off loans, less any related expenses, collected during the current reporting period.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Recoveries (#)	The total number (#) of loans with gross recoveries collected during the current reporting period.	Numeric	<i>Financing Entity</i>	_____	_____	_____
Loans 90 Days (or more) Past Due (\$)	The total dollar amount (\$) amount of all loans 90 or more days past due. Loans should be considered past due if any part of the payment is past due.	Currency	<i>Financing Entity</i>	\$_____	\$_____	\$_____
Loans 90 Days (or more) Past Due (#)	The total number (#) of loans 90 or more days past due. Loans should be considered past due if any part of the payment is past due.	Numeric	<i>Financing Entity</i>	_____	_____	_____

Table E – Loan/Equity Portfolio				Responses (by Fiscal Year)		
AMIS Field Name	Question Tips	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Loans Delinquent 61 to 89 days (\$)	The total dollar amount (\$) amount of all loans 61 to 89 days past due. Loans should be considered past due if any part of the payment is past due.	Currency	Financing Entity	\$_____	\$_____	\$_____
Loans Delinquent 61 to 89 days (#)	The total number (#) of all loans 61 to 89 days past due. Loans should be considered past due if any part of the payment is past due.	Numeric	Financing Entity	_____	_____	_____
Total Equity Investments Portfolio (\$)	The total dollar amount (\$) of Equity Investments held by an organization in portfolio companies in which it owns stock or other forms of ownership interest. Total Equity Investment portfolio should reflect the valuation of the organization’s interests after making adjustments for any investment gains or losses.	Currency	Financing Entity	\$_____	\$_____	\$_____
Total Equity Investments Portfolio (#)	The total number (#) of Equity Investments held by an organization in portfolio companies in which it owns stock or other forms of ownership interest.	Numeric	Financing Entity	\$_____	\$_____	\$_____

Table F

Affordable Housing Developers/Managers will enter their property portfolio data in Table F using their three most recently completed fiscal years prior to publication date of the applicable NOFA. When entering data, ensure that the Financial Data 3 column contains financial data for the most recently completed fiscal year. Data for the middle year should be entered in the Financial Data 2 column. Data for the most recent year should be entered in the Financial Data 3 column.

AMIS Note: This table is not required for Financing Entities and will not appear in the AMIS Application for these Applicants.

Table F – Property Portfolio (Developers of Rental Property Only)				Responses (by Fiscal Year)		
AMIS Field Name	Question Tips	Field Type	Required For	Financial Data 1	Financial Data 2	Financial Data 3
Total Number of Properties	Enter the total number of properties in the Applicant’s property portfolio.	Numeric	<i>Developer</i>	_____	_____	_____
Total Number of Units in the Portfolio	Enter the total number of units in the Applicant’s property portfolio.	Numeric	<i>Developer</i>	_____	_____	_____
Average Vacancy Rate for Portfolio	Average annual vacancy rate for all units in Applicant’s property portfolio. Calculation: number of vacant units divided by total number of units.	Percentage	<i>Developer</i>	_____%	_____%	_____%
Total Percentage of Rent Collected for Portfolio	Percentage of rent collected for the entire portfolio. Calculation: total rent collected divided by gross rental revenue due.	Percentage	<i>Developer</i>	_____%	_____%	_____%
Total NOI for Portfolio	Total annual Net Operating Income (NOI) for the portfolio. Calculation: Total Income minus total operating expenses.	Currency	<i>Developer</i>	\$_____	\$_____	\$_____
Total DCR for Portfolio	Annual debt coverage ratio for portfolio. NOI divided by total debt service costs.	Numeric	<i>Developer</i>	_____	_____	_____
Total Properties with HUD REAC Score Below 60	Total number of properties in the portfolio subject to HUD Real Estate Assessment Center (REAC) inspection with scores below 60.	Numeric	<i>Developer</i>	_____	_____	_____

Appendix 8: AMIS Application Attachments

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

AMIS APPLICATION ATTACHMENTS	
<p>Audited Financial Statements (most recently completed 2 fiscal years as of the date of the NOFA)</p> <ul style="list-style-type: none"> Data in the audited financial statements should correspond with the data entered in Tables D and E. If the Applicant is a Certified CDFI Depository Institution, it may submit call reports. If the Applicant is a Certified CDFI Depository Institution Holding Company that intends to carry out the activities of a CMF Award through its Certified CDFI Subsidiary Insured Depository Institution, it must submit call reports for the Certified CDFI Subsidiary Insured Depository Institution that will administer the CMF Award. If the Applicant is unable to submit its two most recently completed fiscal years of audited financial statements, its Application will be deemed incomplete and ineligible. 	Required for All Applicants
<p>Any management letter related to the audited financial statements for the two most recently completed fiscal years as of the date of the NOFA</p>	Required for all Applicants
<p>State charter, articles of incorporation, or other establishing documents designating that the Applicant is a Nonprofit or not-for-profit entity under the laws of the organization’s State of formation</p>	Required only for Applicants that are <u>not</u> Certified CDFIs
<p>A certification or determination letter demonstrating tax-exempt status from the IRS¹</p>	Required only for Applicants that are <u>not</u> Certified CDFIs
<p>Articles of incorporation, by-laws or other establishing document demonstrating the Applicant has a principal purpose of managing or developing affordable housing</p>	Required only for Applicants that are <u>not</u> Certified CDFIs

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

AMIS APPLICATION ATTACHMENTS	
An organizational chart demonstrating the relationship between the Applicant and any Affiliate, Subsidiary or parent entity that will play a role in executing the CMF Award.	Required for all Applicants.

Appendix 9: Forms and Certifications

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

Environmental Review Form

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

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

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

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

Notification

As stated in 12 CFR 1815.105, if the CDFI Fund determines that the Application proposes actions which require an environmental assessment or an environmental impact statement, any approval and funding of the Application will be contingent upon:

1. The Applicant supplying to the CDFI Fund all information necessary for the CDFI Fund to perform or have performed any required environmental review;
2. The Applicant not using any CDFI Fund Financial Assistance to perform any of the proposed actions in the Application requiring an environmental review until approval is received from the CDFI Fund; and
3. The outcome of the required environmental review.

In addition, as stated in 12 CFR 1815.106, if the CDFI Fund determines that an Application, or any part thereof, is not sufficiently definite to perform a meaningful environmental review prior to approval of the Application, final approval and funding of the Application shall require supplemental environmental review prior to the taking of any action directly using CDFI Fund Financial Assistance for any action that is not a categorical exclusion.

Assurances and Certifications

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

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

STANDARD FORM 424B: ASSURANCES – NON-CONSTRUCTION PROGRAMS

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

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management, and completion of the project described in this Application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work (activities in Application) within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of Ohm’s Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L.88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C.1681-1683, 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C.794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C.6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L.91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C.3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which Application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statutes which may apply to the Application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally

assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

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

A. ADDITIONAL CERTIFICATIONS

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

1. It is duly organized and validly existing under the laws of the jurisdiction in which it was incorporated or otherwise established, and is (or within 30 days will be) authorized to do business in any jurisdiction in which it proposes to undertake activities specified in this Application;
2. Its Board of Directors (or similar governing body) has by proper resolution or similar action authorized the filing of this Application, including all understandings and assurances contained herein, and directed and authorized the person identified as the authorized representative of the Applicant to act in connection with this Application and to provide such additional information as may be required;
3. It will comply with all applicable requirements of the Community Development Banking and Financial Institutions Act of 1994 (the Act) [12 U.S.C. 4701 et seq.], regulations implementing the Act and all other applicable Department of the Treasury regulations and implementing procedures (and any regulations or procedures which are later promulgated to supplement or replace them);
4. It will comply, as applicable and appropriate, with the requirements of 2 C.F.R. 200 and any regulations and circulars which are later promulgated to supplement or replace them, including standards for fund control and accountability;
5. It has not knowingly and willfully made or used a document or writing containing any false, fictitious or fraudulent statement or entry as part of this Application or any related document, correspondence or communication. (The Applicant and its authorized representative should be aware that, under 18 U.S.C. 1001, whoever knowingly and willfully makes or uses such document or writing shall be fined or imprisoned for not more than five years, or both); and
6. It has not had proceedings instituted against it in, by, or before any court, governmental agency, or administrative body, and a final determination made within the last 3 years as of the date of the NOFA indicating that the Applicant has violated any of the following laws: Title VI of the Civil Rights Act of 1964, as amended (42 U.S.C.2000d); Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); the Age Discrimination Act of 1975 (42 U.S.C. 6101-6107); Title VIII of the Civil Rights Act of 1968, as amended (42 U.S.C. 3601 et seq.); and Executive Order 13166, Improving Access to Services for Persons with Limited English Proficiency.
7. The information in this Application, and in these assurances and certifications in support of the Application, is true and correct to the best of the Applicant's knowledge and belief and the filing of this Application has been duly authorized.

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

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

4. The Applicant shall provide immediate written notice to the CDFI Fund if at any time the Applicant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms “covered transactions,” “debarred,” “suspended,” “ineligible,” “lower tier covered transaction,” “participant,” “person,” “primary covered transaction,” “principal,” “proposal”, and “voluntarily excluded,” as used in this clause (certification), have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the CDFI Fund for assistance in obtaining a copy of those regulations (31 C.F.R. part 19).
6. The Applicant agrees by submitting this Application that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the CDFI Fund.
7. The Applicant further agrees by submitting this Application that it will include the clause titled “Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction,” to be provided by the CDFI Fund, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions (see 31 C.F.R. part 19, Appendix B).
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the No Procurement List.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the CDFI Fund may terminate this transaction for cause or default.

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

1. The prospective primary participant (the Applicant) certifies to the best of its knowledge and belief, that it and its principals:
 - a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - b) have not within a three-year period preceding this Application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - d) Have not within a three-year period preceding this Application had one or more public transactions (Federal, State or local) terminated for cause or default.

2. Where the Applicant is unable to certify to any of the statements in this certification, such Applicant shall attach an explanation to this proposal.

D. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

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

E. CERTIFICATION REGARDING LOBBYING

1. The Applicant certifies, to the best of its knowledge and belief, that:
 - (i) No Federal appropriated funds have been paid or will be paid, by or on behalf of the Applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;

- (ii) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Application, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying" in accordance with its instructions; and
 - (iii) The Applicant shall require that the language of this certification be included in the award documents for all sub-awards of all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.
- 2. This certification is a material representation of fact upon which reliance is placed when this transaction is made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

501(C)(4) Questionnaire

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

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

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

QUESTIONS

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

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

SIGNATURE

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

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

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

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