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|  | **NIAC Member Loan Fund Application** |

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| **Contact Information** |
| Organization Name: |       | Tax-ID: |       |
| Organization Phone: |       | Website: |       |
| Billing Address: |       |  |  |
| City: |       | State: |       | Zip Code: |       |
| Contact Name: |       | Contact Phone: |       |
| Contact Title |       | Contact Fax: |       |
| Contact Email: |       | Date: |       |
| ED / CEO Name: |       | ED / CEO Phone: |       |
| ED / CEO Email: |       |  |  |
| Board Chair Name: |       | Board Chair Phone: |       |
| Board Chair Email: |       |  |  |

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| **Loan Request** |
| **1.** | What is the requested loan amount?  |       |  |  |
| **2.** | When do you need the funds by?  |       |  |  |
| **3.** | What is the requested loan term? |       months |
| **4.** | What is the purpose of the loan? (please check only one)

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| General Operating Loan | Bridge Loan | Equipment Loan | Loan for New Product or Service  |
| [ ]  | [ ]  | [ ]  | [ ]  |

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| **5.** | What is the requested payment plan? (please check only one) |
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| Equal monthly payments of principal and interest: | Fully amortizing loan: | Monthly payment of interest only, principal due at maturity (only available for loans funded by reimbursable contracts) |
| [ ]  | [ ]  | [ ]  |

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| **6.** | What is your repayment source for this loan? Answer below in either 6a, b, or c. |
| **a.** | If cash flow is the only repayment source, please check this box: [ ]  |
| **b.** | If the repayment source is a grant, please provide grant details and contact information for the funder: |
|  | Grant Details:       |
| Funder Contact:       |
| **c.** | If repayment is from another source, please provide details: |
|  |       |
| **8.** | Specify major sources of funding, and indicate approximate proportion of total budget from each source (for example: specific private foundation 10%, specific federal agency 35%, fee for service 20%):

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| --- | --- | --- |
| Source(s) of Funding | Contact name and email/phone | % of Total Budget  |
|       |       |      % |
|       |       |      % |
|       |       |      % |
|       |       |      % |
|       |       |      % |
|       |       |      % |

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| **9.** | What outcomes do you hope to achieve with this loan? How will this loan build capacity for your organization? |
|  |       |
| **10.** | Do you currently have a line of credit or other outstanding loan? (check all that apply) | [ ]  Line of credit  |
| **a.** | If yes to either, please provide details: | [ ]  Other loan |
|  |       |

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| **GENERAL INFORMATION:** |
| **11.** | Is the Applicant currently a tax-exempt nonprofit organization under the U.S. Internal Revenue Code 501(c)(3)?  | [ ]  Yes [ ]  No  |
| **12.** | Does your organization have independent, audited financial statements for the past year? | [ ]  Yes [ ]  No |
| **13.** | Did your organization provide a completed Form 990 to its governing body before filing with the IRS last year? | [ ]  Yes [ ]  No |
| **12.** | In what state is the Applicant incorporated? |       |  |
| **13.** | What is the Applicant’s principal operating state? |       |  |
| **14.** | Complete the following:

|  |  |  |  |
| --- | --- | --- | --- |
| Organization’s Annual Budget | Year of Incorporation | Number of Employees | Number of Board Members |
|       |       |       |       |

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| **15.** | In the past year, has the organization been involved or threatened with default or delinquency on any loans, bankruptcy, lawsuits, or any litigation? If yes to any of these, please provide details on a separate sheet. |
| **16.** | In order to participate in the NIAC loan program, you promise to complete an Impact Evaluation survey provided by NIAC within one month of receiving the survey. Please check this box to indicate you understand this requirement:  | [ ]  |

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| **Notice of Origination Fee**After NIAC approves a loan application, the borrower will be charged a one-time origination fee based on the loan amount:* $250 fee for loans $25,000 or under.
* $500 fee for loans $25,001 - $50,000
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| **Additional Required Documents:**To complete your application, please submit this application form as well as:1. Financials for the past three years (audits preferred, Form 990’s acceptable).2. Monthly cash flow projection for the upcoming year (document provided by NIAC).3. Signed Borrower’s resolution (document provided by NIAC)4. List of Board of Directors with contact information.5. A statement from the organization’s Board of Directors approving applying for the loan.6. If your organization is using these funds for a reimbursable contract, please attach the contract.7. An annual report (optional). |

The applicant certifies under penalty of perjury that the information contained herein and in all additional documents is true and correct.

### SIGNATURES

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|       |       |       |       |
| Applicant’s Signature or Electronic Signature | Date | Loan Officer’s Signature | Date |
|       |  |       |  |
| Print or type applicant’s name |  | Print Loan Officer’s Name |  |
|       |  |  |  |
| Applicant’s Title  |  |  |  |