

Program Related Investment Application



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About Westside Future Fund

Westside Future Fund (WFF) was established in 2014 to revitalize four neighborhoods surrounding the Mercedes-Benz stadium, WFF focuses on the neighborhoods of Vine City, English Avenue, Atlanta University Center and Ashview Heights. Our mission is to advance a compassionate approach to neighborhood revitalization that creates a diverse, mixed-income community, improves the quality of life for current and future residents, and elevates the Historic Westside's unique history and culture.

How are we working with minority businesses on the Westside?

Westside Future Fund provides Program-Related Investments (PRI) to minority-owned businesses based in or serving Atlanta's Westside. We leverage internal community outreach and partnerships with local incubators and small business networks to engage minority entrepreneurs.

What are Program Related Investments?

PRIs are below market-rate loans that WFF uses to support minority entrepreneurs and drive economic development on the Westside. As regulated by the IRS, PRIs must be made for the primary purpose of accomplishing a community-focused outcome and not primarily for financial gain.

Application Check List:

- Business Financial Statements:
 - Profit & Loss Statement
 - Projected Financial Statements
 - Year-to-Date Budget vs. Actuals
- Income Tax Returns (2 years)
- Operating Agreement
- Ownership & Affiliations
- Business Certificate/License
- Business Lease
- Resume(s)
- Business Profile (attach or use template)
- Business Plan that includes key areas:
 - Executive Summary
 - Business Description
 - Market Analysis
 - Organization and Management Structure
 - Sales Strategies
 - Funding
- Funding Request (up to \$70,000)
- Board of Directors List (if applicable)
- Nondiscrimination Policy



Business Structure
 Corporation Partnership
 LLC

Program Related Investment Application

Business Name: _____

D.B.A. Name: _____

Current Address: _____

City, State and ZIP: _____ Telephone: _____

E-mail Address: _____ Fax: _____

Type of Business: _____ Date Established: _____

Number of Employees BEFORE / AFTER PRI: _____ / _____ Tax ID: _____

Proposed New Address: _____ Gross Annual Sales: _____

Current Bank: _____ Account Open Since: _____

Checking Account Number: _____ Average Balance: \$ _____

Savings Account Number: _____ Average Balance: \$ _____

Estimated Use of Proposed PRI Proceeds

- | | | |
|-----------------------------------------------------------|----|-------|
| <input type="checkbox"/> Land Acquisition | \$ | _____ |
| <input type="checkbox"/> New Building Construction | \$ | _____ |
| <input type="checkbox"/> Land and Building Acquisition | \$ | _____ |
| <input type="checkbox"/> Building Improvements or Repairs | \$ | _____ |
| <input type="checkbox"/> Leasehold Improvements | \$ | _____ |
| <input type="checkbox"/> Machinery & Equipment | \$ | _____ |
| <input type="checkbox"/> Furniture & Fixtures | \$ | _____ |
| <input type="checkbox"/> Inventory Purchase | \$ | _____ |
| <input type="checkbox"/> Acquisition of Existing Business | \$ | _____ |
| <input type="checkbox"/> Refinance Existing Bank Loan | \$ | _____ |
| <input type="checkbox"/> Other Debt Repayment | \$ | _____ |
| <input type="checkbox"/> Working Capital | \$ | _____ |

TOTAL CAPITAL REQUIREMENTS	\$	_____
Cash Being Provided by Borrower	\$	()
Funds Provided by Other Sources	\$	()
PRI AMOUNT REQUESTED	\$	

List any previous public/private loan(s) or other Federal Government Debt

NAME OF ORGANIZATION	ORIGINAL AMOUNT OF LOAN	DATE OF REQUEST	APPROVED OR DECLINED	BALANCE	CURRENT OR PAST DUE

MANAGEMENT/GUARANTOR(S) (proprietor, partners, officers, directors, and all holders of outstanding stock - 100% of ownership must be shown)

NAME	TITLE	%OWNERSHIP

AFFILIATES (List below any business concerns in which the application company or any of the individuals listed above have any ownership)

NAME	TITLE	%OWNERSHIP

YES * NO

- Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? *
- Are you or your business involved in any pending lawsuits? *
- Are there any outstanding tax liens or judgements filed against you or your company? *
- Does any applicant or their spouse or registered domestic partner, or any member of their household, or anyone who owns, manages or directs your business or their spouse or registered domestic partner or members of their household work for the Small Business Administration, Small Business Advisory Council, SCORE or ACE, and Federal Agency, or the participating lender? *
- Does your business presently, or as a result of this PRI, engage in export trade? *
- Does the company or any owner own title to a patented, trademarked, or copyrighted product? *
- Does the company maintain Life Insurance on any owner or officer? *

Insured _____ Beneficiary _____ Amount \$ _____
 Insured _____ Beneficiary _____ Amount \$ _____

* If yes, please provide the details.

Name	Business Phone
Home Address	Home Phone
City, State, & Zip Code	
Business Name of Applicant	
ASSETS	LIABILITIES
(Omit Cents)	(Omit Cents)
Cash on Hand & in banks	Accounts Payable... ..\$ _____
Savings Accounts..... \$ _____	Notes Payable to Banks and Others\$ _____
IRA or Other Retirement Account... ..\$ _____	(Describe in Section 2)
(Describe in Section 5)	Installment Account (Auto).....\$ _____
Accounts & Notes Receivable.....\$ _____	Mo. Payments \$ _____
(Describe in Section 5)	Installment Account (Other)\$ _____
Life Insurance - Cash Surrender Value Only.....\$ _____	Mo. Payments \$ _____
(Describe in Section 8)	Loan(s) Against Life Insurance \$ _____
Stocks and Bonds..... \$ _____	Mortgages on Real Estate \$ _____
(Describe in Section 3)	(Describe in Section 4)
Real Estate... ..\$ _____	Unpaid Taxes..... \$ _____
(Describe in Section 4) Automobiles\$ _____	(Describe in Section 6)
(Describe in Section 5, and include	Other Liabilities \$ _____
Year/Make/Model)	(Describe in Section 7)
Other Personal Property\$ _____	Total Liabilities \$ _____
(Describe in Section 5)	Net Worth.....\$ _____
Other Assets.....\$ _____	
(Describe in Section 5)	
Total \$ _____	Total \$ _____
	*Must equal total in assets column.
Section 1. Source of Income.	Contingent Liabilities
Salary\$ _____	As Endorser or Co-Maker.....\$ _____
Net Investment Income \$.....\$ _____	Legal Claims & Judgments.....\$ _____
Real Estate Income \$.....\$ _____	Provision for Federal Income Tax.....\$ _____
Other Income (Describe below)*... ..\$ _____	Other Special Debt.....\$ _____
Description of Other Income in Section 1.	
*Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.	

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Names and Addresses of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Real Estate (e.g., Primary Residence, Other Residence, Rental Property, Land, etc.)			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment perMonth/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and, if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and, if delinquent, describe delinquency.)

Section 6. Unpaid Taxes. (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies – name of insurance company and Beneficiaries.)

CERTIFICATION: (to be completed by each person submitting the information requested on this form)

By signing this form, I certify that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that Westside Future Fund will rely on this information when making decisions regarding an application for a PRI. I further certify that I have read the attached statements required by law and executive order.

Signature _____

Date _____

Print Name _____

Social Security No. _____

Signature _____

Date _____

Print Name _____

Social Security No. _____

Business Profile *(if not attached)*

Please provide a brief background including the year founded and by whom, products and/or services provided, and location of the business

Who are your major customers?

Name	Location	Percent (%) of Sales
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Who are your major suppliers?

Name	Location	Percent (%) of Purchase
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Who are your major competitors?

Name	Location	Competing Product
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How will the PRI change or aid the growth of the business?



Business Debt Schedule

Company Name: _____ Date: _____ Signature: _____

INDEBTEDNESS: Furnish the following information on all installment debt, contracts, notes, and mortgages payable. Indicate by asterisk (*) items to be paid by PRI proceeds and reason for paying them (present balance should agree with latest balance sheet submitted). Do not include accounts payable or accrued liabilities.

CREDITOR Name and Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral / Security
Total Present Balance:							

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