



THRIVE ON SMALL BUSINESS LOANS: *A relief round of funding by the Greater Milwaukee Foundation's Impact Investing Program*

APPLICANT:

Legal Name of Business: _____

Legal Name of Owner(s): _____

TIN/ EIN/ Social Security Number: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Direct Phone: _____ Fax: _____ Email: _____

Website (if available): _____

Date Incorporated _____ # of Full-Time Employees _____ # of Part-Time Employees _____

Was your business negatively impacted by the COVID-19 pandemic?

Is the business currently operating?

Revenues in 2020: _____ Revenues in 2021: _____

Loan Amount Requested: _____

Minority Owned or Controlled:

Women Owned or Controlled:

Which neighborhood is your business located?

Have you previously received a PPP Loan?

Have you applied for other financial resources since the pandemic began?

Owner Ethnicity:

Operating Structure:

LOAN REQUEST:

<p>Describe purpose and use of loan funds and how the loan will positively impact (benefit) your business operations: 500-word limit.</p>	
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<p>Provide a description of your business (purpose/services provided): 500-word limit.</p>	
<p>Describe specific impact of the Covid 19 pandemic on your business: 500-word limit.</p>	
<p>Describe expected repayment sources for this loan: 500-word limit.</p>	
<p>Describe geographic region served and target customer population: 500-word limit.</p>	

ORGANIZATIONAL DESCRIPTION:

<p>Describe your business history: When company was founded, purpose, and your journey to date. 500-word limit.</p>	
<p>Please share the experience and expertise of owner(s) and key staff crucial to ongoing management of business: 500-word limit.</p>	
<p>Please describe your general business outlook or plans for continued success over the next 3 to 5 years: 500-word limit.</p>	

USE OF FUNDS:

Item(s) Description	Amount (from loan request)

COLLATERAL:

Please list assets available to use as collateral to secure this loan:		
COLLATERAL	VALUE	COLLATERAL DETERMINED <i>(Example: purchase price, current value, appraisal, etc.)</i>

Is this collateral used to secure any other loan?

If yes, please identify other current lien holder(s) and describe purpose:

FINANCIAL INFORMATION: List any outstanding obligations (loans) **related to the business**, including tax liabilities, judgments, liens, or defaults:

Creditor Name	Purpose	Balance	Mo. Payment	Current or Past Due

SUPPORTING INFORMATION:

Please enclose or upload the following documentation:

Note: It is not uncommon for Greater Milwaukee Foundation to request additional information specific to the loan requested.

- **ORGANIZATIONAL/BUSINESS DESCRIPTION:** If available Brochures or Marketing information regarding your business or business plan (**not required**)

 - **ORGANIZATIONAL DOCUMENTS**
Submit with your application a copy of:
 - ✓ Articles of Organization or Incorporation
 - ✓ Operating Agreement **if applicable**
 - ✓ Form SS-4 listing Employer Identification Number **if applicable**

 - **PERSONAL AND BUSINESS FINANCIAL INFORMATION:** **Businesses with multiple owner(s) having 20% or more interest in the company must each provide the following:**
 - ✓ Personal Tax Returns of owner(s) (2020 and 2021)
 - ✓ Owner(s) Personal Financial Statement – **included at end of this application. Additional and separate personal financial statements are available for businesses with more than one owner. Husband and wife owners can complete one personal financial statement together.**
 - ✓ Copy of official Wisconsin Identification for each owner (Drivers Licenses etc....)
- Additionally, for the business specially please provide the following:**
- ✓ If separate from personal taxes, provide Business Tax Returns (2020 and 2021)
 - ✓ Company Prepared Profit & Loss Statement & Balance Sheet from January-June 2022

CERTIFICATION OF LOAN APPLICATION AND CREDIT AUTHORIZATION

This Certification must be completed and returned with the supporting attachments.

By my signature below, I certify that the information contained herein and submitted in support of this loan request is complete and accurate.

By signing this application, permission is granted to Greater Milwaukee Foundation or its affiliates to talk with the applicant's creditors, lenders, and potential lenders regarding any information relevant in considering this loan.

I further understand that if this loan request is approved and disbursed, this organization will be listed as a recipient of loan funds from Greater Milwaukee Foundation and hereby agree to allow Greater Milwaukee Foundation to use our name, and images as part of its community marketing efforts.

By my signature below I authorize Greater Milwaukee Foundation, Inc. (directly or through a third-party affiliate) to obtain Consumer Credit Report on me and work with third party consultants in processing of this loan application.

This authorization is valid for purposes of verifying information given pursuant to a loan application, business negotiations, or any other lawful purpose covered under the Fair Credit Reporting Act (FCRA).

By my signature below, I hereby authorize all credit agencies to release all information they may have about me regarding credit history. This certification and authorization shall be valid in original or copy form.

Business Owner Name: _____

Social Security Number: _____ - - Date of Birth: _____

Current Street Address: _____ City: _____

State: _____

Business Owner Name#2: _____

Social Security Number: _____ - - Date of Birth: _____

Current Street Address: _____ City: _____

State: _____

Applicant Signature _____

Print Name and Title _____ Date _____



**GREATER MILWAUKEE FOUNDATION
 PERSONAL FINANCIAL STATEMENT**

As of _____, _____

Name	Business Phone
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Home Address	Home Phone
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City, State, & Zip Code

Business Name of Applicant

ASSETS (Omit Cents)	LIABILITIES (Omit Cents)
Cash on Hand & in banks\$ _____	Accounts Payable.....\$ _____
Savings Accounts\$ _____	Notes Payable to Banks and Others\$ _____ (Describe in Section 2)
IRA or Other Retirement Account\$ _____ (Describe in Section 5)	Installment Account (Auto)\$ _____ Mo. Payments \$ _____
Accounts & Notes Receivable.....\$ _____ (Describe in Section 5)	Installment Account (Other).....\$ _____ Mo. Payments \$ _____
Life Insurance – Cash Surrender Value Only.....\$ _____ (Describe in Section 8)	Loan(s) Against Life Insurance.....\$ _____
Stocks and Bonds.....\$ _____ (Describe in Section 3)	Mortgages on Real Estate.....\$ _____ (Describe in Section 4)
Real Estate\$ _____ (Describe in Section 4)	Unpaid Taxes\$ _____ (Describe in Section 6)
Automobiles.....\$ _____ (Describe in Section 5, and include Year/Make/Model)	Other Liabilities\$ _____ (Describe in Section 7)
Other Personal Property\$ _____ (Describe in Section 5)	Total Liabilities\$ _____
Other Assets\$ _____ (Describe in Section 5)	Net Worth.....\$ _____
Total \$ _____	Total \$ _____ *Must equal total in assets column.

Section 1. Source of Income.	Contingent Liabilities
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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 per Month/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.)

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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.)

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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.)

I authorize the Greater Milwaukee Foundation/Lender/to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

CERTIFICATION: (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

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 the Greater Milwaukee Foundation will rely on this information when making decisions regarding an application for a loan.

Signature _____

Date _____

Print Name _____

Social Security No. _____

Signature _____

Date _____

Print Name _____

Social Security No. _____