OMB Number: 2501-0036 Expiration Date: 03/31/2023

Certification for Opportunity Zone Preference Points

I certify that the information provided on this form and in any accompanying documentation is true and accurate. (Type or clearly print the following information)

Applicant Organization:		:	
Name of the Federal Program to which the applicant is applying:			
Opportunity Zone Census Tract(s) which the proposed activities/projects will benefit:			
Designated Opportunity Zone Census Tracts can be found at: https://www.cdfifund.gov/Pages/Opportunity-Zones.aspx using the 'List of designated Qualified Opportunity Zones". Please provide the full 11-digit census tract number. (ex: 06067001101)			
The application meets which of the following criteria (please select one):			
The approximation which is the remaining content (product content).			
	The proposed activities above.	es/p	orojects will occur solely within the Opportunity Zone Census Tract(s) listed
	The proposed activities and other communities		orojects will occur within the Opportunity Zone Census Tract(s) listed above
			projects will occur outside Opportunity Zone Census Tracts, but substantial ccrue within the Opportunity Zone Census Tracts listed above.
	delivered within Opportun	ity Z	tially and directly benefit Opportunity Zone Census Tracts, but which do not consist of activities Zone Census Tracts may be considered for competitive preference. If applicable, the respective offine "substantially and directly" in the relevant funding announcement.
Estimated Funding Allocations			
Estimate a percentage of the total dollar amount of awarded federal funding that would result in a direct benefit within the Opportunity Zone Census Tracts listed above:			
	76% - 100%		
	51% - 75%		
	26% - 50%		
	11% - 25%		
	1% - 10%		

project will support public and private investment in urban and economically distressed areas, specifically qualified Opportunity Zones (300-word limit): Example: "The Main Street project described in this application will stimulate economic opportunity and mobility, encourage entrepreneurship, expand quality educational opportunities, and promote workforce development for those families residing within the XYZ Opportunity Zone." Check the following boxes that accurately reflect the nature or purpose of the proposed project: Access to Capital Workforce Development **Asset Building** Low Income Housing Tax Credit (LIHTC) or other rent restricted housing **Business Assistance** Market rate housing Community Capacity Building Industrial development **Economic Development** Commercial or retail development Education Other business development Healthy Food Access "Above ground" infrastructure – streets, sidewalks, Health lighting Housing "Below ground" infrastructure - water, sewer, gas, electric **Human Services and Family Support** Schools or other educational facilities Community Infrastructure Hospitals or other health care facilities **Public Safety** Name: Prefix: First: Middle: Suffix: Last: Title: Organization: Signature: Completed on submission to Grants.gov.

Date (MM/DD/YYYY): Completed on submission to Grants.gov.

Provide a narrative explaining and/or reference the section in the application that explains how the