

California Investment & Innovation Program (Cal IIP) **Annual Report**

Instructions:

Annual reports are due no later than 180 days after the Community Development Financial Institutions (CDFIs) end of the CDFI's fiscal year following receipt of funds (4 California Code of Regulations Section 8147.) Please submit your report electronically via email to caliip@treasurer.ca.gov.

| Part I. Project Information | | |
|-----------------------------|---|--|
| 1. | Legal Name of Community Development Financial Institution (CDFI): | |
| 2. | CDFIs Fiscal Year: | |
| 3. | Date of receipt of funds: | |
| 4. | Amount awarded: | |
| 5. | Total amount of grant funds spent: | |
| Part | II. Updates on Grant Fund Uses | |
| 1. | Number of jobs created: | |
| 2. | Number of businesses created: | |
| 3. | For housing, number of units created: | |
| 4. | Have any new target markets or target populations been served by grant funds: | |

Cal IIP Annual Report 5. Please provide a description of activities completed with grant funds during this reporting period: 6. Unless otherwise prohibited by law, as a condition of receiving the grant, all grantees shall request businesses directly served by the grantee with grant funds to self-identify their gender, race, and ethnicity (California Health & Safety Code Section 44558.5, subdivision (a)(5)). Please include a narrative with the information received: Please provide a narrative outlining how grant funds have benefited the applicant's mission, 7. fortified their organizational infrastructure, bolstered resources for sustaining ongoing activities, supported the management team, or advanced strategic plans.

Cal IIP Annual Report

Part III. Attachment

Attachment A: Annual financial statement, as required in California Health and Safety Code Section 44558.5, subdivision (a)(2). Audited or internal financial statements are acceptable.

Part IV. Certification

The authorized representative listed below, certifies that to the best of their knowledge, the information contained in this Annual Report and the accompanying supplemental materials are true and accurate.

Further, the authorized representative acknowledges that all materials submitted in this report will become the property of the State of California and will not be returned. In addition, all materials submitted will be considered a public record by the CPCFA and State Treasurer's Office and subject to disclosure pursuant to the California Public Records Act (Government Code Section 7920.000 et seq.).

| Authorized Signature | Job Title |
|----------------------|-------------|
| | |
| Printed Name | Date Signed |