

Community Multiplier – Member Match Program

2025 APPLICATION



Community Multiplier – Member Match Program

This 2025 Federal Home Loan Bank of Indianapolis (FHLBank Indianapolis) Community Multiplier – Member Match Program (Program) application must be submitted by a FHLBank Indianapolis member (Member) to FHLBank Indianapolis via CommunityMultiplier@fhlbi.com. This Program application will be reviewed and awarded on a first-come, first-served basis until Program-dedicated funds are exhausted or by October 1, 2025, whichever comes first.

Program Overview

The FHLBank Indianapolis Community Multiplier contribution under the Program will provide at least \$25,000 and up to \$125,000 to an eligible not-for-profit organization that satisfies all of the criteria listed below (Grantee) that partners with a Member. A Member must additionally contribute and donate its own funds of at least 10% of the grant amount requested in this application. The FHLBank Indianapolis' total Community Multiplier contribution amount per Member under the Program cannot exceed \$200,000.

A Member must partner with a not-for-profit organization:

- that is exempt from federal income tax under section 501(c)(3) of Title 26 of the United States Code; and
- that is located in Indiana or Michigan;
- whose mission aligns with at least one of the following Priority Areas; and
- that must use the full combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution amounts to fund and support one or more of the following Priority Areas.

Priority Areas

- **Emerging developers** – programs for real estate developers who have not previously been funded by FHLBank Indianapolis and are new to the industry (less than 2 years in industry).
- **Housing supportive services** – services that assist with increasing stability of housing such as case management, healthcare, mental health care, substance abuse counseling, job training, employment support or child welfare.
- **Housing counseling** – programs that provide tools for current and prospective homeowners to make responsible and sustainable choices through educational assistance.

- **Affordable housing industry career development** – programs that build skillsets for the varied career paths that support affordable housing.
- **Operational funding for targeted affordable housing organizations** – operational funding for affordable housing organizations who have not previously received AHP funding from FHLBank Indianapolis, or who are working in a rural county, as defined by nonmetro counties in the “Metropolitan (metro) and nonmetropolitan (nonmetro) counties, 2023” map from [USDA](#). Organizations working in rural counties are not subject to prior funding restrictions.
- **Community land trusts** – community-driven organizations that buy and manage land to keep it affordable for residents.

A Grantee may only receive one award under the Program in 2025.

Program funds CANNOT be:

- awarded to a 501(c)(3) not-for-profit organization that does not demonstrate mission alignment with at least one of the above Priority Areas;
- awarded for an initiative that is not identified as a Priority Area; or
- used for political purposes, including contributions to political parties or candidates, lobbying activities or any activities that have a negative impact on communities or individuals.

Contact CommunityMultiplier@fhlbi.com with any questions.

Member: Member Financial Institution Information

Member Name: _____

Member Contact Name: _____ Member Contact Title: _____

Member Address: _____

Member City, State, Zip: _____

Member Email: _____ Member Phone: _____

Additional Contact Name (as applicable): _____

Title: _____ Email: _____

Phone: _____

Grantee: 501(c)(3) Not-for-Profit

Grantee Name: _____

Grantee Contact Name: _____ **Grantee Contact Title:** _____

Grantee Address: _____

Grantee City, State, Zip: _____

Grantee Email: _____ **Grantee Phone:** _____

Grantee Website: _____

Mission Alignment – The Grantee must provide to the Member a brief description of its organization's mission and demonstrate or explain how its organization's mission is aligned with one or more of the Priority Areas.

Priority Area

Emerging developers

Housing supportive services

Housing counseling

Affordable housing career industry development

Operational funding for targeted affordable housing organizations

Community land trusts

Mission Alignment: (Maximum word count: 250)

Program Award

Members must provide at least 10% of the requested Program grant. The Member's contribution must be a new contribution, i.e., the FHLBank Indianapolis will not match Member contributions that were made on or before March 27, 2025. The full amount of the combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution must be used to fund and support the Grantee's initiative within the Priority Area(s). The Grantee must request an amount between \$25,000 and \$125,000.

A: Requested grant from Community Multiplier Program: \$ _____

B: Member contribution (must be at least 10% of the request above): \$ _____

The combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution amounts must be delivered to the Grantee within 14 days of the Member receiving notice of the FHLBank Indianapolis Community Multiplier contribution funds having been posted to the Member's CMS Account.

The Grantee must submit Exhibit A: Confirmation of Receipt of Funds Form to the FHLBank Indianapolis within 30 days of the FHLBank Indianapolis Community Multiplier contribution funds having been posted to the Member's CMS Account, which is the same date as the Grantee will receive an award notice email from CommunityMultiplier@fhlbi.com.

Description & Use of Program Award Funds

Initiative for Funding Request – The Grantee must provide to the Member a detailed and concise explanation about the initiative that the combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution amounts will fund and support and how it aligns with the selected Priority Areas.

Please note: Email attachments and/or other supporting materials will not be reviewed or considered as part of this application. Maximum word count: 250

Please select and check the box of one or more of the following Priority Area(s) that the Grantee's initiative is to support.

Emerging developers – programs for real estate developers who have not previously been funded by FHLBank Indianapolis and are new to the industry (less than 2 years in industry).

Housing supportive services – services that assist with increasing stability of housing such as case management, healthcare, mental health care, substance abuse counseling, job training, employment support or child welfare.

Housing counseling – programs that provide tools for current and prospective homeowners to make responsible and sustainable choices through educational assistance.

Affordable housing industry career development – programs that build skillsets for the varied career paths that support affordable housing.

Operational funding for targeted affordable housing organizations – operational funding for affordable housing organizations who have not previously received AHP funding from FHLBank Indianapolis, or who are working in a rural county, as defined by nonmetro counties in the "Metropolitan (metro) and nonmetropolitan (nonmetro) counties, 2023" map from [USDA](#). Organizations working in rural counties are not subject to prior funding restrictions.

- Please list counties Grantee works in:
- If working in metro counties, please indicate you have not received an AHP award from FHLBank Indianapolis since (and including) 2010.

Community land trusts – community-driven organizations that buy and manage land to keep it affordable for residents.

Member Requirements & Certifications

The Member must check every box below and by checking each box certifies and acknowledges understanding, agreement, and compliance with all of the following Program requirements:

The Grantee is a 501(c)(3) not-for-profit organization based in Indiana or Michigan.

The Grantee's mission aligns with at least one Priority Area.

Grant funds requested in this application will fund and support at least one Priority Area.

An application will only be accepted from a Member.

Member contribution funds must be for a new contribution to the Grantee under this Program and not for grants previously committed to the Grantee on or before March 27, 2025.

The combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution amounts will be used as described in this application.

The Member will provide the combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution amounts to the Grantee within 14 business days of the FHLBank Indianapolis Community Multiplier contribution funds having been posted to the Member's CMS Account.

The Member will ensure that a Confirmation of Receipt of Funds Form will be completed by the Grantee and submitted to FHLBank Indianapolis within 30 days of the FHLBank Indianapolis

Community Multiplier contribution funds posting to the Member's CMS Account. It is the responsibility of the Member to ensure that the Grantee completes and timely returns this form to CommunityMultiplier@fhlbi.com

The Member will acknowledge the FHLBank Indianapolis Community Multiplier contribution and provide an opportunity for the FHLBank Indianapolis to participate in any promotion of the Program. The FHLBank Indianapolis may publicly communicate information about the Program award.

The FHLBank Indianapolis, at its sole discretion, may decline a Program application.

The Member agrees that it shall repay the FHLBank Indianapolis Community Multiplier contribution amount to the FHLBank Indianapolis promptly upon the request of the FHLBank Indianapolis if the FHLBank Indianapolis, acting in good faith, determines that the Member has failed to comply with the Program requirements or with the use of the Program Award as proposed in this application.

Member Certification

This application must be certified and signed by two officers currently listed on the Member's FHLBank Indianapolis "Certified Resolutions for Advances." Inquire at CommunityMultiplier@fhlbi.com if unsure of those listed on the "Certified Resolution for Advances" prior to executing and submitting this application to the FHLBank Indianapolis.

Each of the undersigned, an authorized representative of the Member, hereby certifies that all of the information provided in, and provided to it by the Grantee for, this application has been verified and is true, correct and complete and, if any, supporting attachments to this application are also true, correct and complete.

MEMBER INSTITUTION

Member Institution Name

Signed

Printed Name

Title

Date

Signed

Printed Name

Title

Date

Electronic signatures are accepted and encouraged

FEDERAL HOME LOAN BANK OF INDIANAPOLIS

Executed by FHLBank Indianapolis upon receipt

Signed

Printed Name

Title

Date

Signed

Printed Name

Title

Date

Exhibit A: Confirmation of Receipt of Funds Form

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A Grantee must complete, sign and return this form to CommunityMultiplier@fhlbi.com within 30 days of the FHLBank Indianapolis Community Multiplier contribution funds posting to the Member's CMS Account/receiving your award notice email.

Grantee: 501(c)(3) Not-for-Profit Information

Grantee Name: _____

Grantee Contact Name: _____

Grantee Contact Name Title: _____

Grantee City, State, Zip: _____

Grantee Email: _____

Member: FHLBank Indianapolis Member Financial Institution Information

Member Institution Name: _____

Member Contact Name: _____

Member Contact Title: _____

Member Email: _____

Program Award

The combined FHLBank Indianapolis Community Multiplier contribution and the Member contribution amounts have been received: \$_____ (Program Award).

Grantee Certification

The undersigned, an authorized representative of the Grantee, hereby certifies that: (1) the information contained in this form is true, correct, and complete; (2) the Grantee has received the Program Award which will be used in full for an initiative that funds and supports the Priority Area(s) identified in the application (3) the Program Award amount was provided to my organization as a grant (4) I will name the FHLBank Indianapolis and the Member named above in communications about the Program Award; (5) I will notify the FHLBank Indianapolis about Program Award communications and will coordinate communications with the FHLBank Indianapolis as needed; and (6) I understand that the FHLBank Indianapolis may publicly communicate information about the Program and the Program Award to the Grantee.

Grantee Name: _____

Grantee Signature: _____ **Date:** _____

Printed Name: _____

Title: _____

For support with promoting your Program Award, contact Katherine Marshall, Corporate Communications Associate at kmarshall@fhlbi.com.