

This Lender Application for Deposit ("Application") is to be completed by a lender representative ("Lender Representative") of the financial institution ("Financial Institution") seeking a deposit under Invest in Illinois: Ag Invest – 1-Year Operating Line of Credit Loan Program ("Program"). This Program is facilitated by the Office of Illinois State Treasurer ("Treasurer"). The Program is an agriculture-focused impact investment program providing loan opportunities for Illinois farmers and farm businesses. The impact investment time deposits shall be used to provide operating line of credit loans to Illinois farmers and farm businesses in Illinois.

| Т   | TREASURER USE ONLY:  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| FINANCIAL INSTITUTION CERTIFICATIONS & ACKNOWLEDGMENT |  |  |  |  |  |  |  |
|   | ("Lender Representative") of ('Financial   |  |  |  |  |  |  |
| in t  | citution") hereby applies for a deposit under the Program. Financial Institution acknowledges that, in order to participate<br>he Program, Financial Institution must meet the requirements below and must attest that certifications and statements<br>now are true and accurate: |  |  |  |  |  |  |
| I he  | reby attest and certify that the following statements are true and accurate:   |  |  |  |  |  |  |
| 1.  | I am (title) of Financial Institution and I am authorized to execute this Application and Certification on behalf of Financial Institution;  |  |  |  |  |  |  |
| 2.  | I am authorized to act on behalf of the Financial Institution and have authority to bind the Financial Institution;  |  |  |  |  |  |  |
| 2   | I have such familiarity with the husiness and affairs of Financial Institution so as to be able to knowledgeably make the  |  |  |  |  |  |  |

- 3. I have such familiarity with the business and affairs of Financial Institution so as to be able to knowledgeably make the statements set forth in this Application;
- 4. I understand that the Treasurer will rely, in part, on the statements set forth herein in determining whether Financial Institution will be granted a deposit under the Program and such statements must be accurate;
- 5. The loaned funds will be used for a project that promotes community or economic development through farm businesses in Illinois under the Program. I understand that the Treasurer may request documentation that specifies local community or economic development efforts for which these loaned funds are used;
- 6. Financial Institution (a) has a CRA rating of Satisfactory or above, or (b) is a credit union that does not receive a CRA rating;
- 7. Financial Institution has an IDC rating of at least 75, or the Treasurer granted Financial Institution a written exception from the IDC rating requirement;
- 8. Unless otherwise agreed to in writing by the Treasurer, Financial Institution will collateralize all deposits received as a result of this Application in accordance with the Treasurer's Acceptable Collateral Listing: List of Financial Assets Qualified for Collateral to Secure Deposits and Repurchase Agreements, available at: https://illinoistreasurergovprod. blob.core.usgovcloudapi.net/twocms/media/doc/acceptablecollaterallisting20150602.pdf
- 9. If an IDC rating exception was granted to Financial Institution, Financial Institution will collateralize all deposits at 110% and in the form of: FHLB LOC, and NMB U.S. Treasury and U.S. Agency securities;

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- 10. Financial Institution is an approved depository with the Treasurer and has completed all required documentation, including a Deposit Agreement between Financial Institution and Treasurer;
- 11. Financial Institution recognizes the Treasurer finds this partnership critical to enhancing community development, and that the Treasurer may educate and support the community by promoting the partnership of the Treasurer and Financial Institution;
- 12. Financial Institution understands the Treasurer does not assume any liability for acts or omissions of the Financial Institution. This liability rests solely with the Financial Institution;
- 13. Financial Institution will fund the loan(s) listed on the Agriculture Worksheet (Attachment 1A) and the loan rate will not exceed the state deposit rate by more than 3.75%<sup>1</sup>;
- 14. Financial Institution understands the impact investment time deposits from the Treasurer shall be used to provide loans to Illinois farmers and farm businesses in Illinois;
- 15. Financial Institution acknowledges the following: that (a) the Treasurer may use any information provided by Financial Institution for internal and external purposes, including marketing; (b) the Treasurer may terminate the deposit should Financial Institution fail to meet any requirement or term related there to; and (c) the Treasurer will consider failure of Financial Institution to comply with any term or requirement related to the deposit in assessing any future applications for participation in any of the Treasurer'sInvest in Illinois programs;
- 16. Financial Institution understands the borrower may utilize these funds as a line of credit. The Financial Institution shall be allowed to request a deposit of up to \$600,000 per borrower under the Program. Borrower is allowed only one operating line of credit loan at any given time regardless of the term of the deposit. The Treasurer reserves the right to audit documentation related to this Program;
- 17. Financial Institution understands that the Treasurer may withdraw this deposit at any time upon 30 calendar days' advance notice. Both principal and interest will be due on the 30th calendar day following such notice of withdrawal, or as otherwise mutually agreed to in writing by the parties;
- 18. Financial Institution understands that the Treasurer requires Financial Institution to submit an Acknowledgment Form(s) regarding usage of funds within 30 days of receipt of funds, unless the Treasurer granted Financial Institution a written exception;
- 19. Financial Institution acknowledges Program funds are to be used for costs related to the following: (1) conventional farming, (2) transitioning farm, (3) sustainable farming, (4) value added farming or (5) farm business. Costs covered by the Program include, but are not limited to the following: seed; feed; fertilizer; plants; cash rent; crop insurance; purchase of livestock or breedingstock; production-related energy and labor expenses; veterinary fees; new and used farm equipment; or costs related to sustainable/value added production such as processing, milling, transitioning, greenhouses, irrigation, and hoop houses; and
- 20. Financial Institution hereby certifies that it meets all of the requirements listed above, and will immediately notify the Treasurer if, at any point, Financial Institution no longer meets the requirements listed above.
- 21. I certify that Financial Institution is currently compliant with and will lend the deposit amount consistent with 12 CFS, Part 215, Regulation O ("Regulation O") and the Illinois Banking Act, 205 ILS 5. Financial Institution will alert the Treasurer if Financial Institution falls out of compliance with Regulation O or the Illinois Banking Act and such lack of compliance may be grounds for withdrawal of the deposit amount.

| This deposit shall be eligible for a 1-yea | ar term upon completion of a            | pplication documentation. | The Treasurer may i | eject any |
|--|---|---------------------------|---------------------|-----------|
| Application for any reason at its sole d   | iscretion in accordance with $\epsilon$ | applicable law.           |                     |           |

| 1-year Deposit Amount Requested: |  |
|----------------------------------|--|
| Approximate Date Funds Needed:   |  |
| (Deposit date may vary)          |  |

I certify that I am the person identified as a Lender Representative of Financial Institution submitting this Application, holding the title I have listed, that I have the authority to submit this application on Financial Institution's behalf, and Financial Institution hereby applies for a deposit under the Office of the Illinois State Treasurer's Invest in Illinois: Ag Invest – 1-Year Operating Line of Credit Loan Program.

| Lender Representative Signatu  | ıre:                   |                                      | Date:   |
|--------------------------------|------------------------|--------------------------------------|---|
| Financial Institution:         |                        |                                      |   |
| Address:                       |                        | County:                              |   |
| City:                          |                        | State:                               | Zip:  |
| Phone:                         | Fax:                   | Email:                               |   |
| SUBSCRIBED and SWORN to before | e me (Notary signature | date should match that of the Financ | cial Institution Representative's signature date) |
| (Notary Public Signature)      |                        | This                                 | Day of ,  |
|                                |                        |                                      | Notary Seal                                       |

Please return completed Lender Application for Deposit and Operating Line of Credit Worksheet (Attachment 1A) to the address listed below or email: <a href="mailto:Banking-TimeDeposit@illinoistreasurer.gov">Banking-TimeDeposit@illinoistreasurer.gov</a>

Illinois State Treasurer Michael W. Frerichs Invest in Illinois: Banking Division Marine Bank Building 1 East Old State Capitol Plaza Springfield, Illinois 62701

Phone: (217) 782.0764 \* Fax: (217) 558.3793

Please visit Invest in Illinois to learn more about new program changes at www.illinoistreasurer.gov.