

A. Transfer Information

What is being transferred?	
<input type="checkbox"/> 1. A qualified CDE, as defined by sec. 76.633(1)(h), Wis. Stats., is transferring QEI authority to another eligible CDE pursuant to sec. 76.633(5)(e), Wis. Stats.	If Box 1 is checked go to Part B
<input type="checkbox"/> 2. An investor is transferring a qualified equity investment in a Wisconsin-approved CDE pursuant to sec.76.633(5)(b)(5), Wis. Stats.	If Box 2 is checked go to Part C
<input type="checkbox"/> 3. An insurance company is transferring the credit to an affiliate pursuant to sec. 76.633(7), Wis. Stats.	If Box 3 is checked go to Part D

B. Transfer of QEI Authority

Transferor Name		Transferor Tax ID Number	
Mailing Address			Phone Number
City		State	Zip Code
Contact Name	Email Address		Fax Number

- 1. Date of original QEI Certificate issued by DOR / /
(mm / dd / yyyy)
- 2. Amount of original Qualified Equity Investment (QEI) Authority available \$ _____
- 3. Amount of QEI Authority Transferred to Affiliate CDE(s) \$ _____
- 4. Amount of QEI Authority Available after transfer \$ _____

Transferee Information

- 1. Is the transferee CDE domiciled in Wisconsin?
 - Yes – Go to Line 3
 - No – Go to Line 2
- 2. Enter the amount of the remaining federal authority allocation remaining when transferred \$ _____
Pursuant to sec. 76.633(5)(f)(3) a transferee not domiciled to Wisconsin is limited to receiving a Wisconsin authority allocation equal to two times the transferee’s remaining federal authority allocation. Attach a screenshot from the CDFI fund’s allocation tracking system that shows the applicant’s remaining federal qualified equity investment authority as of the date of this application.

	Column A Tax ID Number	Column B Acquiring CDE Name	Column C QEI Authority Acquired
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____

- 4. Attach evidence of the transferee certification as a qualified CDE by the federal CDFI Fund with a service area that includes the State of Wisconsin.
- 5. Attach a copy of the applicable allocation agreement(s) executed by the transferee CDE or its controlling entity and the CDFI fund.

E. Executive Officer Certification

I do hereby certify as the Authorized Executive Officer of applicant CDE that each allocation agreement attached hereto remains in effect and has not been revoked or cancelled by the CDFI fund.

I further certify that we anticipate raising the required funds and that we will maintain the capacity and ability to generate eligible investments in the amount expressed in this application and that verification will be provided to the department within a 30-day period.

I further certify under oath that the applicant CDE has read, understands, and agrees to the terms of this application and the materials provided in the application are true and correct to the best of my knowledge, information and belief.

The applicant CDE agrees that if it marked that it is withdrawing the application in the event of a partial award, then the application is withdrawn upon the department's determination that the amount of allocation available for the applicant CDE is less than the minimum amount requested by the applicant CDE.

Applicant CDE further acknowledges that the individual executing this agreement is authorized to act on the applicant CDE's behalf.

Signature	Title	Date
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Instructions

Use Form CDE-T to notify the department of a transfer of QEI authority, transfer of a qualified equity investment, or transfer of the credit.

Note: The CDE must submit Form CDE-T, *Community Development Entity Investment*, through the [Community Development Entity Investment Credit - File Transmission portal](#) and include the evidentiary documents.