



Maine Seed Capital Tax Credit Program

PRIVATE VENTURE CAPITAL FUND INVESTOR APPLICATION

PRIVATE VENTURE CAPITAL FUND INFORMATION

Note 1: To qualify a Fund investment, please fill out the Application and Schedules A, B and C; attach enclosures listed on page two; sign the Certification of Fund Manager/Owner and Schedule C; have the business sign in both places indicated on Schedule C; and return all to FAME (see address at the bottom of this page).

Note 2: Fund owners must be notified of this program prior to any investment being made for which Fund anticipates seeking a tax credit.

Note 3: The names of investors (including Fund investors), the amount of certificates issued to each investor, the name of the business benefiting from investment, the nature of the business, and the intended use of proceeds shall be public information.

Name of Fund		
--------------	--	--

Mailing Address	City/State/Zip	County
-----------------	----------------	--------

Fund Ownership (Please fill in this information on Schedule A, attached.)

Contact Person Name		Title	
---------------------	--	-------	--

Phone	E-mail Address	Web Address	
-------	----------------	-------------	--

Federal Tax ID Number	Legal Form	Name of Fund Manager	State of Organization
-----------------------	------------	----------------------	-----------------------

Limited Life Fund? <input type="checkbox"/> YES <input type="checkbox"/> NO	Any Fund Owners or Managers Related? <input type="checkbox"/> YES <input type="checkbox"/> NO
---	---

Licensed by SBA? <input type="checkbox"/> YES <input type="checkbox"/> NO	Is the Fund Manager or any Fund Interest Holder a Principal Owner or a relative of the Principal Owner of the business that will receive any part of the investment? (See definition on Schedule A.) <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--

Describe the nature and extent of any Fund Manager or Fund Interest Holders' participation in the operation of the business that will receive any part of investment (Do not leave blank. If none, enter "None"):

Investment

Business Invested in	Amount of Cash to be Provided	
----------------------	-------------------------------	--

Anticipated Date of Investment	Amount of Tax Credit Requested (max 40%)	Refundable Credit Requested? <input type="checkbox"/> YES <input type="checkbox"/> NO
--------------------------------	--	--

Form of Investment <input type="checkbox"/> EQUITY <input type="checkbox"/> CONVERTIBLE NOTE <input type="checkbox"/> SAFE



Maine Seed Capital Tax Credit Program

PRIVATE VENTURE CAPITAL FUND INVESTOR APPLICATION

Enclosures

- Most recent PPM **(Required, if available; if unavailable, equivalent information must be submitted)**
- Certificate(s) of Good Standing from State of Fund organization **(Required)**
- Schedule A for Fund information **(Required)**
- Schedule B for Investment information **(Required)**
- Schedule C Agreement between Fund and Company stating Fund investment will not be repaid within 5 years. **(Required)**
- Application fee of \$650 for the Private Venture Capital Fund (all checks made payable to the Finance Authority of Maine) **(Required)**
- Evidence of investment will be required prior to issuance of tax credit (i.e. cancelled check, wire receipt or deposit record). **(Required)**
- Copy of signed stock subscription agreement, note purchase agreement and promissory note, or other investment documents. **(Required)**

Certification of Fund Manager/Owner

The undersigned certifies that under penalty of perjury: **The Fund was informed of this program prior to investment in the above Company and in part made its decision to invest in this Company based on the potential of receiving the benefit of the tax credit.** Under penalty of perjury, I further certify that the information provided in this application is accurate, complete and true, and that the Fund for which application is being made is in compliance with all Federal and State laws and regulations. The Fund has made its own investment decision and shall hold FAME harmless in the event of any loss it may suffer. I understand that FAME and/or the State Tax Assessor may audit the Fund to ensure compliance with the laws governing this program, and that FAME may attach conditions to the tax credit to which the Fund may be obligated. I understand that any credits may be revoked or recaptured in full or in part if any false representations are made, if legal requirements are violated, or if conditions established by FAME are violated. I understand that any misrepresentation herein constitutes an act of fraud and may subject me, the Fund and/or the business to civil fines or criminal penalties. The undersigned further consents to publication by the Authority of the Fund name, contact person information, amount of investment/certificate and Fund investor names.

Signature

Date

Printed Name

Title



Maine Seed Capital Tax Credit Program

PRIVATE VENTURE CAPITAL FUND APPLICATION

SCHEDULE A: FUND INFORMATION—FUND APPLICANTS

Fund Name

Fund is (check one): C-Corporation S-Corporation Partnership Limited Partnership Taxable Trust Non-taxable Trust
 Limited Liability Company

Fund Participant Name (i.e. GP/LP, etc.)	Fund Participant Address	Percent Ownership (in Fund)	Is interest holder Principal Owner of any Investment Target**
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Attach additional sheets as needed.

***"Principal Owner" means one or more natural persons who control the business, whether by owning 50% or more of the business, or by owning any interest in the business and being directly involved in the daily management of such business as a full-time professional activity, or otherwise, all as determined by the Authority. Principal owners and their spouse are not eligible for tax credit under this program. Other relatives of Principal Owners are eligible only for their initial investment.



Maine Seed Capital Tax Credit Program

PRIVATE VENTURE CAPITAL FUND APPLICATION

SCHEDULE B: INVESTMENT INFORMATION—FUND APPLICANTS					
Target Investment Business Name					
Fund Name	FEIN	Type of Investor* in Target Business	Percent Ownership in Target Business (as converted, fully diluted)	Number of ownership units held (as converted, fully diluted)	Are any Fund Participants a Principal/Owner** of any business which will ultimately receive any part of investment?
					<input type="checkbox"/> YES <input type="checkbox"/> NO

*Indicate whether Investor is a Shareholder, Note (including convertible) Holder, General Partner, Limited Partner, Limited Liability Company Member
 ***"Principal Owner" means one or more natural persons who control the business, whether by owning 50% or more of the business, or by owning any interest in the business and being directly involved in the daily management of such business as a full-time professional activity, or otherwise, all as determined by the Authority. Principal owners and their spouses are not eligible for tax credit under this program. Other relatives of Principal Owners are eligible only for their initial investment.



Maine Seed Capital Tax Credit Program

PRIVATE VENTURE CAPITAL FUND APPLICATION

SCHEDULE C: FUND / COMPANY AGREEMENT

The undersigned agree with and certify to the Finance Authority of Maine that the company will not make, and the investor will not accept, repayment of the investment in company listed below (for which a Maine Seed Capital Tax Credit Certificate is awarded) for a period of five (5) years from the date of investment, without notice to and consent of the Authority in accordance with the Authority's Rule governing the Maine Seed Capital Tax Credit Program (Chapter 307). In addition, the company and undersigned investor acknowledge that any credit issued on account of the aforementioned investment may be revoked if the company moves substantially all its operations outside the state of Maine within 4 years from investment, except as may be approved by the Authority in accordance with the Rule.

Date of investment: _____ Amount of Investment: _____

INVESTOR

Fund Name

Signature

Date

Printed Name

Title

COMPANY

Company Name

Signature

Date

Printed Name

Title

CERTIFICATE OF COMPANY

Under penalty of perjury, I certify on behalf of the company in which the above investment is being made, that such investment is necessary to allow the business to create or retain jobs in the state of Maine.

Signature

Date

Printed Name

Title