

DEPARTMENT OF ADMINISTRATION  
STATE OF MONTANA

BONA FIDE NOT-FOR-PROFIT CERTIFICATION

Date: \_\_\_\_\_

Check one: ( ) Original Application    ( ) Annual Renewal Due by December 31

**Information about the Bona Fide Not-For-Profit Entity**

1. Name of Bona Fide Not-For-Profit Organization:

\_\_\_\_\_

2. If name has changed since prior filing, Prior Name:

\_\_\_\_\_

3. Address:

\_\_\_\_\_

Number and Street	City	State	Zip Code
-------------------	------	-------	----------

Mailing Address:

\_\_\_\_\_

Number and Street	City	State	Zip Code
-------------------	------	-------	----------

4. Telephone Number: (\_\_\_\_) \_\_\_\_\_

5. Website: \_\_\_\_\_

6. Contact Person:

\_\_\_\_\_

Name and Title

\_\_\_\_\_

Business telephone

\_\_\_\_\_

Email address

\_\_\_\_\_

Mailing address

**For an Initial Certification:**

**Attach the following documentation for an initial certification:**

1. The determination letter or other indicia from the Internal Revenue Service recognizing the entity as exempt under section 501(c)(3) or (c)(4) of the Internal Revenue Code of 1986, 26 U.S.C. § 501(c)(3) or (c)(4).
2. The nonprofit organization's organizing documents, including articles of incorporation and by-laws.
3. If the nonprofit is a foreign corporation, the certificate of authority from the Montana Secretary of State's office.
4. The nonprofit's most recent Form 990, Return of Organization Exempt from Income Tax, filed by the nonprofit organization.
5. If not included in the nonprofit's Form 990 tax return, a description of the compensation and incentive structure for employees subject to any determination under these rules.
6. A description of each loan program provided by the nonprofit organization, including a description of eligibility, purpose, loan terms, key features, and servicing or securitization plans, if any.
7. Provide the names and contact information for all mortgage loan originators employed by the bona fide not for profit entity, including office address, business telephone number and email address.

Applicant acknowledges that pursuant to Mont. Code Ann. §§ 32-9-103(6), 32-9-104(1)(f) and 32-9-104(1)(g), the Division may periodically require reports and certifications regarding the not for profit's activities and shall examine the not for profit's books and records in accordance with the regulations issued by the Consumer Financial Protection Bureau or its successor regulator.

Applicant further acknowledges that if the bona fide not for profit entity fails to provide documentation as required by this application or does not continue to meet the criteria outlined above, the Division may revoke the bona fide not for profit's exempt status.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Title

**For a Renewal Certification:**

**Attach the following documentation for a renewal certification:**

1. The nonprofit's most recent Form 990, Return of Organization Exempt from Income Tax, filed by the nonprofit organization.
2. Provide the names and contact information for all mortgage loan originators employed by the bona fide not for profit entity, including office address, business telephone number and email address.

Attach the following documents **ONLY IF THEY HAVE CHANGED SINCE THE INITIAL CERTIFICATION:**

1. The determination letter or other indicia from the Internal Revenue Service recognizing the entity as exempt under section 501(c)(3) or (c)(4) of the Internal Revenue Code of 1986, 26 U.S.C. § 501(c)(3) or (c)(4).
2. The nonprofit organization's organizing documents, including articles of incorporation and by-laws.
3. If the nonprofit is a foreign corporation, the certificate of authority from the Montana Secretary of State's office.
4. If not included in the nonprofit's Form 990 tax return, a description of the compensation and incentive structure for employees subject to any determination under these rules.
5. A description of each loan program provided by the nonprofit organization, including a description of eligibility, purpose, loan terms, key features, and servicing or securitization plans, if any.

Exempt entity acknowledges that pursuant to Mont. Code Ann. §§ 32-9-103(6), 32-9-104(1)(f) and 32-9-104(1)(g), the Division may periodically require reports and certifications regarding the not for profit's activities and shall examine the not for profit's books and records in accordance with the regulations issued by the Consumer Financial Protection Bureau or its successor regulator.

Exempt entity further acknowledges that if the bona fide not for profit entity fails to provide documentation as required by this application or does not continue to meet the criteria outlined above, the Division may revoke the bona fide not for profit's exempt status.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Title