

MEDICAL CANNABIS SOCIAL EQUITY DECLARATION FORM

This form must be signed by either the President or Vice-President of the corporation.

D.C. Official Code §7-1671.06(h) requires at least 50% of all new Cultivation Center, Manufacturer, Retailer, Internet Retailer, and Courier licenses to be set aside for social equity applicants. Social equity applicants also receive a 75% fee reduction on application and licensing fees associated with receiving a medical cannabis facility license, excluding endorsement fees, for the first three years. Additionally, D.C. Official Code §7-1671.08B(c)(2) only permits social equity applicants and medical cannabis certified business enterprises to receive equity, grants, and loans from the medical cannabis social equity fund.

To qualify, an applicant must meet two of the following three criteria. Applicants must have at least one owner who is a DC resident, individually or collectively owns at least 50% of the business, and is/has:

- 1) A returning citizen.
- 2) Married to or in a civil union, has a child, or is the child of a person or has a non-parent legal guardian, or a grandparent or a sibling who is or has been arrested, convicted, or incarcerated in DC or in any other jurisdiction for a cannabis or drug-related offense.
- 3) An income that does not exceed 150% of the median family income as set forth by US HUD, adjusted for household size, at the time of application submission (table can be found on page 2 of the Social Equity Applicant Resource Guide).

You must include in your application packet documentation establishing that the applicant satisfies two or more of the criteria listed above. You must also submit a notarized affidavit with your medical cannabis facility application attesting to:

- 1) the number of owners who meet the criteria for a social equity applicant,
- 2) the ownership interests, incomes, and net worth of any owners,
- 3) the location of all managerial employees in the principal office,
- 4) the residency of owners, employees, and contractors, and
- 5) the locations of the assets and the percentages of the assets in each location.

Check one of the following statements:

- I am not applying or seeking to qualify as a social equity applicant. I understand that by not qualifying as a social equity applicant that I am not eligible to receive equity, grants, and loans from the medical cannabis social equity fund or a 75% fee reduction on application and licensing fees associated with receiving a medical cannabis facility license, excluding endorsement fees, for the first three years.
- I am seeking to qualify as a social equity applicant under the criteria listed above. I have included the required supporting documentation with my application.

Applicant First and Last Name

Title

Applicant Signature

Date