

OFFICE OF THE STATE TREASURER
SEMI-ANNUAL CERTIFICATION
(Report Period Ended June 30, 2025)

(Bank Name)

(Address)

_____, _____, _____
(City) (State) (Zip Code)

(Please see below for definitions)

Arkansas Loans \$ _____

Arkansas Deposits \$ _____

CAPITAL BASE \$ _____
(Please attach current Statement of Condition)

I certify that the above information is true and correct.

Name/Title

Signature

Date

PLEASE RETURN TO
STATE TREASURER'S OFFICE
Investment Division
1401 W. Capitol, Suite 275
Little Rock, AR 72201
cgladden@artreasury.gov

1. **“Arkansas Loans”** means the sum of:
 - (A) Loans made to individual borrowers residing in the State of Arkansas
 - (B) Loans made to corporations or other legal entities doing business in Arkansas for which an address within Arkansas is used for transacting business.
 - (C) Bonds issued or loans made to the State of Arkansas or its instrumentalities.
 - (D) Bonds issued or loans made to political subdivisions of the State of Arkansas.
 - (E) Bonds issued by Arkansas corporations.

2. **“Arkansas Deposits”** means deposits received by banks and credited to accounts whose accountholders have their principal place of business or permanent home address in Arkansas.

3. **“Capital Base”** means the sum of its capital stock, surplus, undivided profits, plus any additions and less any subtractions which the Commissioner may by regulation prescribe.

PLEASE RETURN TO
STATE TREASURER'S OFFICE
Investment Division
1401 W. Capitol, Suite 275
Little Rock, AR 72201
cgladden@artreasury.gov