

REPORT OF INCOME FOR BANK BRANCHES AND TRUST COMPANIES

NAME OF INSTITUTION: _____

FOR THE PERIOD ENDING: _____

Report of Income must be reported on a calendar year-to-date basis in thousands of dollars.

		Dollar Amounts In Thousands	
1.	Interest Income:		
	a. Interest and fee income on loans:		
	(1) In domestic offices:		
	(a) Loans secured by real estate:		
	(1) Loans secured by 1-4 family residential properties		1.a.(1)(a)(1)
	(2) All other loans secured by real estate		1.a.(1)(a)(2)
	(b) Loans to finance agricultural production and other loans to farmers		1.a.(1)(b)
	(c) Commercial and industrial loans		1.a.(1)(c)
	(d) Loans to individuals for household, family, and other personal expenditures:		
	(1) Credit cards		1.a.(1)(d)(1)
	(2) Other (includes revolving credit plans other than credit cards, automobile loans, and other consumer loans)		1.a.(1)(d)(2)
	(e) Loans to foreign governments and official institutions		1.a.(1)(e)
	(f) All other loans in domestic offices		1.a.(1)(f)
	(2) In foreign offices, Edge and Agreement subsidiaries, and IBFs		1.a.(2)
	(3) Total interest and fee income on loans (sum of Items 1.a.(1)(a) through 1.a.(2))	0	1.a.(3)
	b. Income from lease financing receivables		1.b.
	c. Interest income on balances due from depository institutions ¹		1.c.
	d. Interest and dividend income on securities:		
	(1) U.S. Treasury securities and U.S. Government agency obligations (excluding mortgage-backed securities)		1.d.(1)
	(2) Mortgage-backed securities		1.d.(2)
	(3) All other securities (includes securities issued by states and political subdivisions in the U.S.)		1.d.(3)
	e. Interest income from trading assets		1.e.
	f. Interest income on federal funds sold and securities purchased under agreements to resell		1.f.
	g. Other interest income		1.g.
	h. Total interest income (sum of Items 1.a.(3) through 1.g.)	0	1.h.
2.	Interest expense:		
	a. Interest on deposits:		
	(1) Interest on deposits in domestic offices:		
	(a) Transaction accounts (interest-bearing demand deposits, NOW accounts, ATS accounts, and telephone and preauthorized transfer accounts)		2.a.(1)(a)
	(b) Nontransaction accounts:		
	(1) Savings deposits (includes MMDAs)		2.a.(1)(b)(1)
	(2) Time deposits of \$250,000 or less		2.a.(1)(b)(2)
	(3) Time deposits of more than \$250,000		2.a.(1)(b)(3)
	(2) Interest on deposits in foreign offices, Edge and Agreement subsidiaries, and IBF's		2.a.(2)

¹ Includes interest income on time certificates of deposit not held for trading.

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2.	Interest expense (continued):		
	b. Expense of federal funds purchased and securities sold under agreements to repurchase		2.b
	c. Interest on trading liabilities and other borrowed money		2.c
	d. Interest on subordinated notes and debentures		2.d
	e. Total interest expense (sum of items 2.a through 2.d)	0	2.e
3.	Net interest income (Item 1.h minus 2.e)	0	3.
4.	Provision for loan and lease losses		4.
5.	Noninterest income:		
	a. Income from fiduciary activities		5.a
	b. Service charges on deposit accounts		5.b
	c. Trading revenue		5.c
	d. (1) Fees and commissions from securities brokerage		5.d.(1)
	(2) Investment banking, advisory, and underwriting fees and commissions		5.d.(2)
	(3) Fees and commissions from annuity sales		5.d.(3)
	(4) Underwriting income from insurance and reinsurance activities		5.d.(4)
	(5) Income from other insurance activities		5.d.(5)
	e. Venture capital revenue		5.e.
	f. Net servicing fees		5.f.
	g. Net securitization income		5.g
	h. <i>Not applicable.</i>		
	i. Net gains (losses) on sales of loans and leases		5.i
	j. Net gains (losses) on sales of other real estate owned		5.j.
	k. Net gains (losses) on sales of other assets ²		5.k.
	l. Other noninterest income		5.l.
	m. Total noninterest income (sum of Items 5.a through 5.l.)	0	5.m
6.	a. Realized gains (losses) on held-to-maturity securities		6.a.
	b. Realized gains (losses) on available-for-sale securities		6.b.
7.	Noninterest expense:		
	a. Salaries and employee benefits		7.a.
	b. Expenses of premises and fixed assets (net of rental income) (excluding salaries and employee benefits and mortgage interest)		7.b.
	c. (1) Goodwill impairment losses		7.c.(1)
	(2) Amortization expense and impairment losses for other intangible assets		7.c.(2)
	d. Other noninterest expense		7.d
	e. Total noninterest expense (sum of Items 7.a through 7.d.)	0	7.e.
8.	a. Income(loss) before unrealized holding gains(losses) on equity securities not held for trading, applicable income taxes & discontinued operations (Item 3 plus or minus items 4,5.m,6.a, 6.b, and 7.e)	0	
	b. Unrealized holding gains (losses) on equity securities not held for trading ³		
	c. Income (loss) before applicable income taxes & discontinued operations (sum of items 8.a and 8.b)	0	8.
9.	Applicable income taxes (on Item 8.c)		9.
10.	Income (loss) before discontinued operations (Item 8 minus Item 9)	0	10.
11.	Discontinued operations, net of applicable income taxes		11.
12.	Net income (loss) attributable to institution and noncontrolling (minority) interests (sum of Items 10 and 11)	0	12.
13.	LESS: Net income (loss) attributable to noncontrolling (minority) interests (if net income, report as a positive value; if net loss, report as a negative value)		13.
14.	Net income (loss) attributable to institution (Item 12 minus Item 13)	0	14.

² Exclude net gains(losses on sales of trading assets and held-to-maturity and available-for-sale securities.

³ Item 8b is to be completed only by institutions that have adopted ASU 2016-01, which includes provisions governing the accounting for investments in equality securities. See the instructions for further detail on ASU 2016-01

PLEASE NOTE: THE FOLLOWING SIGNATURE PAGE *MUST BE COMPLETED AND SIGNED* IN ACCORDANCE WITH TITLE 5 OF THE DELAWARE CODE.

NAME OF INSTITUTION:

FOR THE PERIOD ENDING:

I hereby declare that this Report of Income is true and correct to the best of my knowledge and belief.

Print Name

Signature

Title

Phone Number

Email Address

We, the undersigned directors, attest to the correctness of this statement of income We declare that it has been examined by us and, to the best of our knowledge and belief, is true and correct.

Director's signature

Director's signature

Print Name

Print Name

Report must be submitted to:

**Office of the State Bank Commissioner
1110 Forrest Avenue
Dover, DE 19901**

Report must be submitted within 30 days after the end of the reporting period.