Check box if the bank or bank holding company is a Sub Chapter S Corporation		
Date December 31, 2019	_	
	STATE OF ARKANSAS	
	STATE BANK DEPARTMENT	
We,(signed)	, PRESIDENT OR CHAIRMAN and	(signed)
CASHIER OR SECRETARY OF		,
(legal title	e of bank or bank holding company or other institution	n) (City)
(state)	, do hereby certify that below is a full and comp	lete list of stockholders of the above
named institution and the amount of stock h	eld by each:	
NAME	CITY, STATE	OWNED SHARES

Total \_\_\_\_\_