

Name of Organization	IRP/RDLF/RMAP Fund Number:	Report Period	Date
Address:	Telephone No	Contact Person:	Date Intermediary IRP/RDLF/RMAP Loan was approved:
	Tax I.D. No.:		DUNS No.:

		REPORT PERIOD	TO DATE
LOANS			
1.	Amount of IRP/RDLF/RMAP Loan	\$	\$
2.	Principal of loans disbursed	\$	\$
3.	Principal of loans received	\$	\$
4.	Net Lending (line 2 minus 3)	\$	\$
AVAILABLE ASSETS			END OF PERIOD
5.	Total Assets (less furniture & equipment)		\$
6.	Loans Outstanding		\$
7.	Loan Loss Reserve (5% required) - RMAP (6% required) - IRP		\$
8.	Funds Available for Relending (line 5 minus line 6 and 7)		\$
9.	Percent of Assets Available for Relending (Line 8 divided by Line 5)		%

BALANCE SHEET		
ASSETS		
1.	Cash (minus Loan Loss Reserve)	\$
2.	Loan Loss Reserve	\$
3.	Loans Outstanding	\$
4.	Interest-Bearing Deposits	\$
5.	Other Assets (specifi Fixed Assets (furniture and fixtures)	\$
	_____	\$
	_____	\$
6.	TOTAL ASSETS	\$
LIABILITIES		
7.	Loan Payable to RBS	\$
8.	Accounts Payable	\$
9.	Other Liabilities	\$
	_____	\$
	_____	\$
10.	TOTAL LIABILITIES	\$
		\$
11.	FUND BALANCE (Assets minus Liabilities)	\$

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0570-NEW. The time required to complete this information collection is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

IRP/RDLF/RMAP INCOME AND EXPENSE STATEMENT

Report Period
12/30/99

	USDA Approved Budget	Prior Fiscal Year	Reporting Period	Program to Date
1. IRP/RDLF/RMAP INCOME (All Sources)	\$	\$	\$	\$
2. EXPENSES (IRP/RDLF/RMAP Related Expenses)				
a. Employee Salaries	\$	\$	\$	\$
b. Employee Fringe Benefits	\$	\$	\$	\$
c. IRP/RDLF/RMAP-related Travel	\$	\$	\$	\$
d. Loan Processing/Closing Costs	\$	\$	\$	\$
e. Interest Paid RBS	\$	\$	\$	\$
f. Professional Services	\$	\$	\$	\$
g. Marketing	\$	\$	\$	\$
h. Staff Training	\$	\$	\$	\$
i. Equipment - Rental	\$	\$	\$	\$
- Acquisition	\$	\$	\$	\$
j. Bad Debt (Loan Losses)	\$	\$	\$	\$
k. Loan Loss Recovery (negative number)	\$	\$	\$	\$
l. Space (rent)	\$	\$	\$	\$
m. Audit	\$	\$	\$	\$
n. Indirect Costs	\$	\$	\$	\$
o. Other (Specify)	\$	\$	\$	\$
3. TOTAL EXPENSES (sum line 2.a. thru line 2.o)	\$	\$	\$	\$
4. NET IRP/RDLF/RMAP INCOME (line 1 minus line 3)	\$	\$	\$	\$
5. EXPENSES as % of IRP/RDLF/RMAP INCOME (line 3/	%	%	%	%
<p>6. If salaries & expenses are not charged against the IRP/RDLF/RMAP fund, how are these expenses paid ? EXPLANATION: _____</p> <p>7. What is the total program income that was used to cover administrative costs? \$ _____</p> <p>8. Describe any encumbrances, liens, compensating balances, or assignments on any of the assets in the IRP/RDLF/RMAP, including pursuant to any guarantees made.</p> <p>Description: _____</p>				

CERTIFICATION OF AUTHORIZED REPRESENTATIVE : I certify that the above information and any attachments thereto are complete and accurate to the best of my knowledge and belief.

By: _____

Date: _____

Name and Position: _____

ULTIMATE RECIPIENT/MICROENTERPRISE INFORMATION:			
Recipient Name: <input style="width: 90%;" type="text"/>		Recipient Tax ID#: <input style="width: 100%;" type="text"/>	
Applicant Type:			
<input type="checkbox"/> Indian Tribe (IRP/RMAP)	<input type="checkbox"/> Partnership		
<input type="checkbox"/> Profit-making Corporation	<input type="checkbox"/> Trust		
<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Other		
<input type="checkbox"/> Public Body	<input type="checkbox"/> Non-Profit Corporation		
<input type="checkbox"/> Institution of Higher Learning (RMAP Only)	<input type="checkbox"/> Non-Profit Entity (RMAP Only)		
Facility Location		Borrower's Address:	
Street Address: <input style="width: 90%;" type="text"/>		<input style="width: 100%;" type="text"/>	
City: <input style="width: 100%;" type="text"/>		(if different)	
State: <input style="width: 100%;" type="text"/>	Zip Code: <input style="width: 100%;" type="text"/>		
County: <input style="width: 100%;" type="text"/>			
Project Information			
Jobs Saved: <input style="width: 100%;" type="text"/>			
Jobs Created: <input style="width: 100%;" type="text"/>		NAICS Code: <input style="width: 100%;" type="text"/>	
Third Party Document Approved: <input style="width: 100%;" type="text"/>			
RECIPIENT LOAN INFORMATION:			
Loan Amount: <input style="width: 100%;" type="text"/>		Closing Date: <input style="width: 100%;" type="text"/>	
Loan Balance: <input style="width: 100%;" type="text"/>		Status: <input style="width: 100%;" type="text"/>	
Term: (Months): <input style="width: 100%;" type="text"/>		<input type="checkbox"/> Ahead	
Interest Rate: <input style="width: 100%;" type="text"/>		<input type="checkbox"/> Current	
Interest Rate Type:		<input type="checkbox"/> Delinquent	
<input type="checkbox"/> Fixed		<input type="checkbox"/> Loss/Charged Off	
<input type="checkbox"/> Variable		<input type="checkbox"/> Paid in Full	
Terms Renegotiated: <input style="width: 100%;" type="text"/>		<input type="checkbox"/> Suspended/Deferred	
Pay-Off Date: <input style="width: 100%;" type="text"/>			
Recipient Loan Funded by:			
<input type="checkbox"/> Initial USDA Loan Funds and approved by RD		<input type="checkbox"/> Revolving Funds	
Agency Contribution: <input style="width: 100%;" type="text"/>		Advanced Date (ACH): <input style="width: 100%;" type="text"/>	
Intermediary Contribution: <input style="width: 100%;" type="text"/>		Other: <input style="width: 100%;" type="text"/>	
Modifications to Amortization:			
<input type="checkbox"/> Balloon Payments		<input type="checkbox"/> Delayed Payment	
<input type="checkbox"/> Interest Only Payments		<input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>	
Collateral Information:			
<input type="checkbox"/> Equipment		<input type="checkbox"/> Personal Guarantees	
<input type="checkbox"/> Real Estate		<input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>	
Lien Position:			
<input type="checkbox"/> 1st Position		<input type="checkbox"/> 3rd Position	
<input type="checkbox"/> 2nd Position		<input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>	
Supplemental Funding Amounts:			
State/Local: <input style="width: 100%;" type="text"/>		Federal Funds: <input style="width: 100%;" type="text"/>	
Bank Loans: <input style="width: 100%;" type="text"/>		Other: <input style="width: 100%;" type="text"/>	
Sources of USDA Funding For This Loan: <input style="width: 100%;" type="text"/>			
PAYMENT INFORMATION :			
Payment Frequency: <input style="width: 100%;" type="text"/>		<input type="checkbox"/> Annually	
<input type="checkbox"/> Monthly		<input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>	
Number of Payments:			
Due (since inception): <input style="width: 100%;" type="text"/>		Made Late (30 days past due or less): <input style="width: 100%;" type="text"/>	
# Made on Time: <input style="width: 100%;" type="text"/>		Made Late (more than 30 days): <input style="width: 100%;" type="text"/>	
Comments: <input style="width: 100%; height: 20px;" type="text"/>			
<input style="width: 100%; height: 20px;" type="text"/>			
<input style="width: 100%; height: 20px;" type="text"/>			
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Race Information:		<input type="checkbox"/> Veteran	
<input type="checkbox"/> White		<input type="checkbox"/> Hispanic or Latino	
<input type="checkbox"/> Black/African American		<input type="checkbox"/> Not Hispanic or Latino	
<input type="checkbox"/> American Indian/Alaskan Native			
<input type="checkbox"/> Asian			
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander			
Sex:			
<input type="checkbox"/> Male			
<input type="checkbox"/> Female			
<input type="checkbox"/> Public Body			

RECIPIENT/MICROENTERPRISE INFOR				RECIPIENT LOAN INFORMATION										PAYMENT INFORMATION				
Recipient Name	Jobs Saved	Jobs Created	Date Verified	Supplemental Funding							Current Balance	Loan Status **	Loan Loss Amount	Loan Loss Recovery	# Due	# Made on time	# > 30 days	# < 30 days
				Original Loan Amount	Private Funding	In-Kind Funding	Indirect Costs	Other Funding	Equity Injection									

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Race	Ethnicity	Sex

PART I: PORTFOLIO STATUS

<u>Status of Loans</u>	<u>Current Principal Balance</u>	<u># Loans</u>	<u>Orig. Loan Amount</u>
1. Total Loans Made:		-	\$
2. Fully Repaid		-	\$
3. Current	\$	-	\$
4. Delinquent (>30 days)	\$	-	\$
5. Default	\$	-	\$
6. Total Active Loans (Add lines 3, 4, and 5)	\$	-	\$
7. Total Written Off	\$	-	\$

PART II: PORTFOLIO SUMMARY

A. Summary of Loan Activities: Provide information below on **Active** Loans and **Total** Loans closed to date.

	Active Loans		Total Loans	
	\$		\$	
1. # IRP/RDLF/RMAP Loans				
2. Total \$\$ Loaned:	\$		\$	
3. Non-IRP/RDLF/RMAP Leveraged				
a. Private	\$		\$	
b. Other	\$		\$	
c. Equity Injection				
d. Total Leveraged \$\$ (a+b+c)	\$		\$	
4. Total Project Leverage (2 + 3d)	\$		\$	
5. Private Sector Jobs:				
a. Created				
b. Saved				
c. Total Jobs (a + b)				

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B. Summary of Demographics: Provide information below on each borrower regarding race and ethnicity.

	Total Loans
1. # of IRP/RDLF/RMAP Loans to Borrowers per Race:	
a. White	
b. Black/African American	
c. American Indian/Alaskan Native	
d. Asian	
e. Native Hawaiian/Other Pacific Islander	
2. # of IRP/RDLF/RMAP Loans to Borrowers per Ethnicity:	
a. Hispanic or Latino	
b. Not-Hispanic or Latino	
3. # of IRP/RDLF/RMAP Loans to Borrowers per Sex:	
a. Male	
b. Female	