



# IDAHO

DEPARTMENT OF FINANCE

## 2026 ASSESSMENT FEE CALCULATION FORM FOR IDAHO FINANCIAL INSTITUTIONS

Institution Name: \_\_\_\_\_

Person Completing Form: \_\_\_\_\_

Email Address: \_\_\_\_\_

**(1) Office Fee:**

(a) Number of banking offices, including the head office. \_\_\_\_\_

*(Do not include loan production, administrative or operations offices.)*

(b) Office fee of \$100 per office. \$ 100

(c) **Total Office Fee** (*Multiply line 1.a by 1.b*). \_\_\_\_\_

**(2) Asset Fee:**

(a) Total Assets (*in thousands*) from December 31, 2025 Call Report. \_\_\_\_\_

(b) Base Fee Due (*per attached fee schedule*). \_\_\_\_\_

(c) Amount due in excess of Base Fee (*per attached fee schedule*). \_\_\_\_\_

(d) **Total Asset Fee** (*Add lines 2.b and 2.c*). \_\_\_\_\_

**(3) Total Asset and Office Fee** (*Add lines 1.c and 2.d*). \_\_\_\_\_

**(4) Twenty-five Percent (25%) Assessment Reduction** (*Multiply line 3 by .25*). \_\_\_\_\_

**(5) Total Assessment Fee Due for 2026** (*Subtract line 4 from line 3*). \_\_\_\_\_

*Please remit your payment by February 28, 2026. Thank you.*