

Kansas Mortgage Company Licensee 2015 Annual Report

KANSAS OFFICE OF THE STATE BANK COMMISSIONER
CONSUMER AND MORTGAGE LENDING DIVISION
700 SW Jackson Street, Suite 300
Topeka, KS 66603

INSTRUCTIONS: Pursuant to K.S.A. 9-2201 et seq., all Mortgage Company Licensees are required to file an annual written report with the Office of the State Bank Commissioner (OSBC) on or before April 1st of each year. Complete the following information and return this form by **APRIL 1, 2016** via email to: katie.holm@osbckansas.org or mail to the OSBC at the address listed above. **When used herein, the term "PERIOD" is the entire calendar year of 2015.**

Legal Name of Licensee:		License Number: MC. _____	
Street Address:	City:	State:	Zip Code:

KANSAS REAL ESTATE BUSINESS

REAL ESTATE ORIGINATIONS		Number of Contracts (#)	Dollar Volume (\$)
1	Enter below the number (#) and amount (\$) of all <u>Kansas</u> mortgage loans CLOSED during the PERIOD. <i>* CLOSED means the company was the broker or lender/funder.</i>		
	1a Enter 1 st lien mortgage loans closed:		
	1b Enter 2 nd lien mortgage loans closed:		
	1c TOTAL mortgage loans closed:		
2	Of the transactions in 1c above, enter the number (#) and amount (\$) of loans where the company was the BROKER*: <i>* BROKER LOAN means a closed loan where company took the application but did not close the loan in its name or fund the loan.</i>		
3	Of the transactions in 1c above, enter the number (#) and amount (\$) of loans where the company was the LENDER*: <i>* LENDER LOAN means a loan closed in the company's name and/or funded by the company.</i>		
REAL ESTATE SERVICING		Number of Contracts (#)	Dollar Volume (\$)
4	Did the company engage in any SERVICING ACTIVITIES and/or own any SERVICING RIGHTS related to Kansas mortgage loans? No <input type="checkbox"/> Yes <input type="checkbox"/>		
5	Enter below the number (#) and amount (\$) of Kansas mortgage loans DIRECTLY OR INDIRECTLY SERVICED <u>as of the end</u> of the PERIOD. <i>(These are "point-in-time" figures, meant to reflect the size of the servicing portfolio and/or ownership rights for Kansas real estate loans.)</i>		
5a	The company owned BOTH LOAN & SERVICING rights:		
5b	The company owned ONLY SERVICING RIGHTS to the loan:		
5c	The company OWNED THE LOAN but NOT servicing rights:		
5d	The company SERVICED FOR OTHERS with NO ownership rights:		

REAL ESTATE SERVICING (cont.)

6	Did the company UTILIZE A SERVICER for Kansas mortgage loans to which the company owned the loan and/or the servicing rights? <p style="text-align: center;">No <input type="checkbox"/> Yes <input type="checkbox"/></p>
6a	If "Yes" to 6 above, list all servicers below. Attach a separate list if necessary.
Servicer Name:	Address:
Servicer Name:	Address:
Servicer Name:	Address:
7	Did the company SERVICE any Kansas mortgage loans to which it did NOT own the associated servicing rights? <p style="text-align: center;">No <input type="checkbox"/> Yes <input type="checkbox"/></p>
7a	If "Yes" to 7 above, list all master servicers (rights holders) or owners below. Attach a separate list if necessary.
Servicer/Owner Name:	Address:
Servicer/Owner Name:	Address:
Servicer/Owner Name:	Address:

TOTAL COMPANY ASSETS	Dollar Amount (\$)
8	Enter the dollar amount (\$) of the company's TOTAL ASSETS as of last fiscal year-end:

ATTESTATION AND SIGNATURE

The following section should be completed by an Authorized Executive Officer of the Mortgage Company Licensee.

I hereby swear and affirm that the information contained herein is true and correct to the best of my knowledge and belief. Further, I understand that filing with the commissioner any document or statement containing any false representation, inaccuracy, or omission may cause the Mortgage Company License to be denied, suspended, or revoked in accordance with K.S.A. 9-2201 et seq.

Print Name of Authorized Officer:	Signature of Officer:	Date:
Name of Person Completing this Form:	Email Address:	Phone Number: