



# Kansas Mortgage Company Licensee 2021 Limited Annual Report

CONSUMER AND MORTGAGE LENDING DIVISION  
700 SW Jackson Street, Suite 300  
Topeka, KS 66603

**APPLICABILITY NOTICE:** Pursuant to K.S.A. 9-2216a et seq., all Mortgage Company Licensees are required to, annually on or before April 1, file a written report with the Office of the State Bank Commissioner (OSBC). In satisfaction of this requirement, the OSBC accepts the contents of the mortgage call reports (MCR) filed quarterly on the Nationwide Mortgage Licensing System (NMLS), except in the instance where a standard MCR filer services or purchases mortgage loans in Kansas or notates such Kansas activity in NMLS MU1 filings. In such instances, the standard MCR filings currently do not include an itemization of state-specific servicing data. Therefore, **only mortgage companies under the following instances must complete this state form annually:**

- 1) company files the standard MCR form, **and**
- 2) company engages in Kansas mortgage servicing or purchasing or notates such Kansas activities in NMLS MU1 filings.

**INSTRUCTIONS AND DUE DATE:** Complete the following information and return this form by **APRIL 1, 2022** via email to [licensing@osbckansas.org](mailto:licensing@osbckansas.org) or mail to the OSBC at the address listed above. **When used herein, the term "PERIOD" represents the entire calendar year of 2021.**

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

KANSAS REAL ESTATE BUSINESS				
REAL ESTATE SERVICING AND PURCHASING				
<b>1</b>	Does the company file the <u>standard</u> MCR form and notates <u>Kansas mortgage servicing or purchasing</u> activities in its NMLS MU1 filings? <b>No*</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <i>*If no, this form may not be required. Please see notice above and contact the OSBC with any questions.</i>			
<b>2</b>	Enter the number (#) and unpaid balance (\$) of Kansas mortgage loans in the following categories <u>as of the end</u> of the PERIOD.		<b>Number of Loans (#)</b>	<b>Unpaid Balance (\$)</b>
<b>2a</b>	<b>Wholly Owned Loans Serviced:</b>	Loans that the company services and for which it retains all ownership rights.		
<b>2b</b>	<b>Loans Serviced Under MSRs:</b>	Loans that the company services and for which it owns only the Mortgage Servicing Rights (MSR).		
<b>2c</b>	<b>Subservicing for Others:</b>	Loans that the company subservices on behalf of others.		
<b>2d</b>	<b>Subservicing by Others:</b>	Loans that are wholly owned or for which the company owns the Mortgage Servicing Rights and contracts with a third-party to service on its behalf.		
<b>2e</b>	<b>Total Servicing Activity:</b>	Equals the sum of Lines <b>2a</b> through <b>2d</b> for the corresponding column.		

## REAL ESTATE SERVICING

**3** Did the company UTILIZE A SERVICER for Kansas mortgage loans to which the company owned the loan and/or the servicing rights (2d above)?  
 No  Yes

**3a** If "Yes" to 3 above, list all servicers below. Attach a separate list if necessary.

Servicer Legal Name:	NMLS ID:	Address: _____ City/ST/Zip: _____
Servicer Legal Name:	NMLS ID:	Address: _____ City/ST/Zip: _____
Servicer Legal Name:	NMLS ID:	Address: _____ City/ST/Zip: _____

**4** Did the company SERVICE any Kansas mortgage loans to which it did not own the associated servicing rights (2c above)?  
 No  Yes

**4a** If "Yes" to 4 above, list all master servicers (rights holders) or owners below. Attach a separate list if necessary.

Servicer/Owner Legal Name:	NMLS ID:	Address: _____ City/ST/Zip: _____
Servicer/Owner Legal Name:	NMLS ID:	Address: _____ City/ST/Zip: _____
Servicer/Owner Legal Name:	NMLS ID:	Address: _____ City/ST/Zip: _____

## TOTAL COMPANY ASSETS

Dollar Amount (\$)

**5** 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.

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