	Nebraska Department of Banking and Finance NEBRASKA Financial Institutions Division Good Life Great Opportunit					
Website: https://ndbf.nebraska.gov/ Email to DOB.ConsumerFinance@nebraska.gov			DEPARTMENT OF BANKING			
Eme	an to DOB. Consumer Finance@		ent Loan Licensee Annual I	Report	AND FINANCE	
	Annual Report for the Year Ending December 31, 2022 Filing Deadline: <u>On or before March 1, 2023</u>					
refl suc	This Report is to be submitted by all Installment Loan Company Licensees under the Nebraska Installment Loan Act. All reports are to reflect information requested from the start of business January 1, 2022, through the close of business December 31, 2022, and give such relevant information as may be required concerning its business and operation in the State of Nebraska per Neb. Rev.Stat. § 45- 1018.					
1.	<u>Company Information:</u> NMLS Number:					
	Name of Licensee:					
	Company Street Address:					
	City, State, Zip Code:					
2.	Contact Information:					
	Contact Name:					
	Contact Telephone: Contact Email:					
	Contact Email.					
3.	<u>Branch Locations</u> <u>Conducting Business On</u> Nebraska Loans:	(If more than three locat	tions, submit as an attachment)			
	a.					
	b.					
	c.					
4.	Nebraska Loan Volume: (Servicing volume is number and amount of loans serviced as of December 31.)					
	Type	Number of Loans			<u>Amount</u>	
	Originated					
	Serviced					
5.	<u>Audited Financials:</u> In addit year.	lited Financials: In addition to the below financial information, a licensee may submit audited financial statements for the preceding calendar				
6.	Mortgage Call Report: In addition to this annual report a mortgage call report must also be submitted through the NMLS as required by Neb. Rev Stat. § 45-1018(2) and § 45-726. Refer to the NMLS website for additional details.				required by Neb. Rev.	
7.		ess: Please provide a description of any other business conducted at such office location(s) as identified in entry #3 above. If mo led file as an attachment. Be advised any other business requires notification and approval by the Department.		y #3 above. If more		
					1	
1						

	Schedule A	
	Statement of Income and Expenses for the Period from 1/01/2022	2 through 12/31/2022
	Income	
Т	ncome:	
	Earnings from Origination Activities	
	Earnings from Servicing Activities	
	Earnings from Debt Collection Activities	
	Other Income	
5 (Gross Income	\$
	Expenses	
т	7	
	Expenses: Expenses from Origination Activities	
	Expenses from Servicing Activities	
	Expenses from Debt Collection Activities	
	Ther Expenses	
	Total Expenses	\$
	-	ф
16 N	Net Income (Gross Income - Total Expenses)	\$
	Schedule B	
	Statement of Assets and Liabilities as of 12/31/20	022
17 C	Cash on Hand and in Banks - Available for Operation	
18 S	Servicing Account Inventory	
19 A	All other Assets	
20 1	Total Assets	\$
21 7	Fotal Liabilities	
22 F	Equity	\$
)3 T	Fotal Liabilities + Equity (must equal Total Assets)	\$
	tour Enconnecs - Equity (must equil Four Assess)	
rovi	de an explanation below for each line item left blank or filled with zero. If additional space is	s needed, submit as an attachment.
		,