

State of Alaska, Department of Commerce, Community, and Economic Development Division of Banking & Securities PO Box 110807 Juneau AK 99811-0807

PO Box 110807, Juneau, AK 99811-0807 Fax 907-465-1230

https://www.commerce.alaska.gov/web/dbs/Home.aspx

Small Loan Company Annual Report

This report should be filed via email, loanentity.licensing@alaska.gov, no later than March 15.

For the period ending December 31, 20

In accordance with AS 06.20.190, Small Loan Company Licensees shall submit their Balance Sheet and Income Statement for each licensed location with this report. This attestation confirms the submission for the previous calendar year.

| | | General I | nformation | |
|------------------------|-----------------------|-------------------------------|--------------------------|------------------------------------------|
| Company: | | | License #: | |
| Street Addre | ess: | | | |
| City: | | State: | | Postal Code: |
| Business Pho | one #: | | Fax #: | |
| Toll Free #: | | | Website: | |
| Primary Cor | ntact: | | Email: | |
| Provid | le the information re | quested below for the indiv | idual or company | being identified as a executive officer. |
| | | Please attach additional page | es, if space below is in | nadequate. |
| Name: | | | Title: | |
| If chan | ge of ownership | for any reason has occ | urred within th | e past 12 months, attach detailed |
| | | statement with | full particulars | s. |
| | | Loan II | nformation | |
| | | Volume of Loan | ns of \$25,000 or | Less |
| |] | For Period January 1, 2 | 0 to Decemb | per 31, 20 |
| Total Number of Loans: | | Total Doll | lar Amount: | |
| | Pleas | e attach financial repor | t, if audited by | an outside firm. |

Please complete the Balance Sheet & Comparative Statement below, if no audited report provided.

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| Small Loan Company A | nnual Report |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Attestation | ı |
| Execution: | |
| I, (Full Name), | (Title/Position), am employed |
| by or am an officer or a control person of | (Licensee). Licensee agrees to and |
| represents the following: | |
| That the information and statements contained information filed, all of which are made a part of complete and are made under the penalty of perj similar provisions as provided by law; To the extent any information previously subr | this annual report, are current, true, and ury, or un-sworn falsification to authorities, or |
| remains accurate and complete; 3. To keep the information current and to file accurate and basis; and 4. To comply with the provisions of law, including records, pertaining to the conduct of business for | ng the maintenance of accurate books and |
| If the Licensee has knowingly made a false statement of a redocumentation provided to support it, the annual report made a false statement of a redocumentation provided to support it, the annual report made a false statement of a redocumentation provided to support it, the annual report made a false statement of a redocumentation provided to support it. | - |
| On this (MM/DD/YYYY), I verify that I a authorized to attest to and submit this filing on behalf of the penalty of perjury or un-sworn falsification to authoriti that I have reviewed the foregoing responses, have made are true and correct to the best of my knowledge, information | ne Licensee. I solemnly swear (or affirm) under des, or similar provisions as provided by law diligent inquiry as to their accuracy, and they |
| Signature of Attestant | Printed Name of Attestant |

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| Bai | lance Sheet | |
|------------------------------------------------|-----------------------------|------------------------|
| Please complete the Balance Sheet, if no | o audited report provided w | rith Annual Report. |
| For the period e | ending December 31, 20 | |
| Assets | End of Present Period | End of Previous Period |
| Cash on hand and in bank: | | |
| Loans receivable: | | |
| Real estate: | | |
| Leasehold imporvements, furniture, fixtures, | | |
| and equipment (less reserve for depreciation): | | |
| Deferred charges: | | |
| Other assets: | | |
| | | |
| Total assets: | | |
| Liabilities | End of Present Period | End of Previous Period |
| Accounts payable: | | |
| Notes payable (current portion): | | |
| Accruals: | | |
| Other liabilites: | | |
| | | |
| | | |
| T. 1 (1: 1:1:) | | |
| Total current liabilities: | | |
| Notes payable (long-term): | | |
| Other long-term liabilites: | | |
| | | |
| Total long-term liabilites: | | |
| Net Worth | End of Present Period | End of Previous Period |
| Capital or partnership equity: | | |
| Surplus: | | |
| Undivided earnings: | | |
| Total net worth: | | |
| Total liabilities & net worth: | | |
| Please complete the Balance Sheet, if no | o audited report provided w | rith Annual Report. |

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| Comparati | ve Statement of Income & Expenses | |
|-------------------------------------------|--------------------------------------------|------------------------------|
| Please complete the Comparative Statement | of Income & Expenses, if no audited report | provided with Annual Report. |
| For the | period ending December 31, 20 | |
| Income | End of Present Period | End of Previous Period |
| Contract Income: | | |
| Other Income: | | |
| Total Income: | | |
| Expenses | End of Present Period | End of Previous Period |
| Salaries: | | |
| Occupancy: | | |
| Office Expenses & Supplies: | | |
| Bad Debt: | | |
| Depreciation: | | |
| Legal: | | |
| Interest of Borrowed Funds: | | |
| Total Expenses: | | |
| | End of Present Period | End of Previous Period |
| Net Operating Income: | | |
| Income Taxes: | | |
| Net Income: | | |
| Please complete the Comparative Statement | of Income & Expenses, if no audited report | provided with Annual Report. |

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