

MAIL TO: Licensing Office
Nevada Financial Institutions Division
1830 E. College Pkwy., Suite 100
Carson City, NV 89706

Annual Report Due Date: April 15, 2017
For The Year Ended: December 31, 2016

**ISSUERS OF INSTRUMENTS TO ENGAGE IN THE BUSINESS OF THRIFTS
ANNUAL REPORT OF CONDITION**

1. Submit complete audited or reviewed financial statements, which should include the CPA's opinion or report and notes to the financial statements, for the current Annual Report year ended December 31.
2. Enclose a copy of the operations bank statement, along with a copy of the account reconciliation, for the month ended December 31 of the current Annual Report year. For the outstanding checks, include: 1) check number, 2) payee, 3) date issued, and 4) amount. A computer print-out of the account reconciliation is preferred. The reconciled cash balance must reasonably agree with the cash balance reflected on the balance sheet.

AFFIDAVIT

I, _____, the undersigned, being the

_____ of _____

(Owner, title of officer, manager)

(Company Name)

swear and affirm, under penalty of perjury, that to the best of my knowledge and belief the statements contained in this report, including the accompanying supplementals, are true and complete in all respects.

Signature: _____

ACKNOWLEDGEMENT OF NOTARY PUBLIC

Taken, subscribed and sworn to before the undersigned authority in _____

County, in the State of _____ this ____ day of _____, 20____.

Notary Seal:

Signature of Notary Public

** Retain a copy of this report for your files **

** Mail original to the address reflected at the top of this Annual Report **

** Nevada Revised Statutes require a fee of \$10.00 per day for late, erroneous, or deficient filings. **