STATE OF WISCONSIN Department of Financial Institutions Division of Banking



AFFIDAVIT OF PASSIVE INVESTOR FOR MONEY TRANMITTER LICENSE APPLICATION

Purpose: A completed Affidavit of Passive Investor for Money Transmitter License Application form must be uploaded to the Nationwide Multistate Licensing System & Registry (NMLS) demonstrating that the investor meets the requirements of a passive investor. An owner of an applicant or potential owner of an applicant who claims to satisfy the passive investor definition found in Wis. Stats. s. 217.02(22) must provide the Wisconsin Department of Financial Institutions (Department) with acceptable documentation establishing that the person qualifies as a passive investor.

Notice: This form is required under Wis. Stat. s. 217.02(22). The attached affidavit is only for use by a current owner of a new applicant for a money transmitter license. Failure to timely provide documentation acceptable to the Department or to continuously satisfy the definition of passive investor prior to the approval of the license application will require the person claiming to be a passive investor to provide all information required by the Department of individuals in control of an applicant or may result in denial of pending license application. If circumstances change such that the affidavit fails to continuously satisfy the passive investor definition after the approval of the license application, the timely filing of an application for change of control will be required. Failure to do so may result in fines and revocation of the license. Personally identifiable information on this form may be matched against tax information and law enforcement agencies. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

Checklist for Completion

- ➤ Print the name of the company applicant, its NMLS number, and the affiant's name, email address, and mailing address.
- Print the city and country in which the affidavit was executed.
- Affiant should sign the document in the presence of a notary who will affix his or her seal to the document.
- Affiant must obtain a completed Apostille certification to be affixed to the affidavit if notarized outside of the United States
- Submit the original, signed, notarized affidavit with Apostille certification, if applicable, to the Department via NMLS.

If you have questions about this form, contact the Department of Financial Institutions' Division of Banking at (608) 261-7578 or DFI LFS@dfi.wisconsin.gov.

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Company Applicant	Name:		
Company Applicant	NMLS Number:		
Affiant Name:			
Affiant Email Addre	ess:		
Affiant Mailing Add	lress:		
		gned verifies the following with resolying for a Wisconsin money trans	spect to my ownership interest of the smitter license:
For purposes of this affidation Wis. Stat. s. 217.02.	avit, the terms "control",	"passive investor", and "person" sh	nall have the same definitions as set forth
or person in cor 2. Does not have t trustees, or othe 3. Is not employed Applicant; and 4. Does not have t of the Applicant Affiant acknowledges and approval of the Applicant required of a control personal traction of the Applicant required of a control personal traction, then an application, then an application, then an application.	atrol of the Applicant; the power to elect a major or persons exercising mand by and does not perform the power to exercise, direct or person in control of the diagrees that if Affiant fair's license application, the on of the Applicant pursuation for change of control the undersigned certifies	rity of the key individuals or executagerial authority of a person in contany managerial duties for the Applectly or indirectly, a controlling infine Applicant. Is to continuously satisfy the above on Affiant must promptly provide to ant to Wis. Stats. s. 217.05(5). Affire criteria of a passive investor at any old must be promptly filed with the	atrol of the Applicant; blicant or person in control of the luence over the management or policies e criteria of a passive investor prior to
Subscribed and Sworn Before me on the		Executed in: _	(City),
Day of	, 20	_ 	(State, if applicable),(Country).
Notary Public My Commission Expires: (Affix seal or stamp heret		-	Signature of Affiant
		-	Printed Name of Affiant