



2024 YEAR-END ANNUAL REPORT FOR TEXAS MONEY TRANSMISSION LICENSE HOLDERS

Charles G. Cooper
Commissioner

License Name: _____

License No.: _____

1. Indicate whether the following sections of Nationwide Multistate Licensing System (NMLS) have been updated and are accurate as of the date of the submission of this report by checking the appropriate boxes below.

- a. Company Information (including primary contacts)
- b. Current MU2 Associations
- c. Other Trade Names (d/b/a, assumed names, etc.)
- d. Annual Financial Statement

NOTE: If your company is not registered through NMLS, provide documentation of changes to any of the items noted below since the previous filing, if not already submitted to the Department.

NOTE: If the most recent audited financial statement is not uploaded to NMLS, include a copy with submission of this report.

- e. Books and Records Information
- f. Surety Bonds and/or Electronic Surety Bond Coverage

NOTE: If Texas security is not uploaded to NMLS, attach the most recent security continuation certificate, rider, or confirmation with submission of this report.

- g. Regulatory Actions and Investigations
- h. Assumed name certificate(s) filed with the Texas Secretary of State

2. Select the products or services offered directly to Texas consumers under this license (mark all that apply).

NOTE: Do not include services offered as an authorized delegate of another MSB.

- | | | |
|---|---|---|
| <input type="checkbox"/> Traditional Money Transfer | <input type="checkbox"/> Foreign Payments Facilitator | <input type="checkbox"/> Cryptocurrency Exchange |
| <input type="checkbox"/> Currency Exchange | <input type="checkbox"/> Mail Order Currency Exchange | <input type="checkbox"/> Prepaid Wallet – Cryptocurrency |
| <input type="checkbox"/> Money Orders | <input type="checkbox"/> Drafts | <input type="checkbox"/> Prepaid Wallet – Fiat |
| <input type="checkbox"/> Prepaid Access Cards | <input type="checkbox"/> Traveler’s Checks | <input type="checkbox"/> Issuer of Fiat-Backed Stablecoins |
| <input type="checkbox"/> Commissary | <input type="checkbox"/> Currency Transportation | <input type="checkbox"/> Receipt of Fiat-Backed Stablecoins |
| <input type="checkbox"/> Bill Pay | <input type="checkbox"/> Payroll | <input type="checkbox"/> Other (explain below) |
| <input type="checkbox"/> Biweekly Payment Accelerator <input type="checkbox"/> Accounts Payable Facilitator | | |
| <input type="checkbox"/> Offering of Returns: Lending, Earn, Rewards, APY, Staking, etc. (explain below) | | |

Explanation: _____

3. Service is provided through (check all that apply):
- Company Owned Branches
_____ Enter total number, if applicable
 - Independent Authorized Delegates (AD)
_____ Enter total number, if applicable
 - Online

NOTE: If Company Owned Branches and/or Independent AD locations were identified, complete **EXHIBIT A.**

4. Sales Volume:
- Provide **Texas only** volume of money transmission business (all transmission of funds, money orders, bill payment, prepaid access, etc.) for the period of **January 1, 2024 to December 31, 2024** for all locations, including your Texas online activity.
- a. Number of Texas money transmission transactions conducted: _____
 - b. Total dollar amount of Texas money transmission transactions: \$ _____
 - c. Number of Texas currency exchange transactions involving **sales** of U.S. Dollars (if applicable): _____
 - d. Total dollar amount of Texas currency exchange transactions involving **sales** of U.S. dollars (if applicable). \$ _____
 - e. Grand total number of Texas money transmission and currency exchange transactions:
(a & c) _____
 - f. Grand total in dollars of Texas money transmission and currency exchange transactions conducted in Texas (b & d): \$ _____

5. Has there been any litigation involving the license holder initiated since the previous Annual Report filing?

Yes No

If yes, separately provide a brief description and copies of applicable documents if not previously submitted to the Department.

Documents attached Previously provided Available under NMLS Not applicable

6. Have there been any acquisition of control, change of key individuals, or material changes to the business plan, products, or services since the previous Annual Report filing.

Yes No

If yes, separately provide a brief description and copies of applicable documents.

Documents attached Previously provided Available under NMLS Not applicable

Annual Report Acknowledgement

I sign the foregoing Annual Report as a Key Individual of the license holder, as defined under Section 152.003(17) of the Texas Finance Code, having full authority to sign such Annual Report in said capacity. I affirm I have reviewed the Annual Report and all information contained therein is true and correct and no material fact has been omitted. I affirm that the license holder is familiar with and will abide by the provisions of Chapter 152 of the Texas Finance Code.

Annual Report Submitted by: (Printed Name) (Title)

(Signature) (Date)

EXHIBIT A

Submit a Microsoft Excel file that includes the data fields below for all physical Texas locations (company owned branches and authorized delegates, including authorized delegates that have multiple locations) for the period of January 1, 2024 to December 31, 2024.

The excel spreadsheet headings **must include** the items listed below for each column exactly as indicated.

Required Item Headings	Instructions
ID	Branch or Authorized Delegate (AD) Number
Name	Name, Branch or AD
Address	Branch or AD Street Address
City	Branch or AD City
State	Branch or AD State
Zip Code	Branch or AD Zip Code
Phone	Branch or AD Telephone Number
Services	Type of MSB services offered by Branch or AD
Sales	Branch or AD Aggregate Sales for the 2023 Calendar Year for all money transmission services offered under your license (include currency exchange if applicable).
Activated	Date Branch or AD was “Activated”
Terminated	Date Branch or AD was “Terminated”

NOTE: Before importing the authorized delegate excel files the excel file must be formatted accordingly with the items listed under the “Required Item Headings.” Ensure the excel spreadsheet headings start on row one and the data begins on row two.