Budget Planner Annual Report (Non-NMLS)
Calendar Year 2025

General Instructions

- The Annual Report is due at the Department of Financial Services (DFS) by the statutory deadline of **February 2, 2026**.
- All questions apply to the licensed legal entity as a whole, unless otherwise specified.
- Answer all questions. Type or print your answers legibly. Do not change the questions. State "None" or "Not Applicable" where appropriate.
- Attach an addendum to the report in response to any of the questions for which additional space is needed to provide all requested information.
- Subsequent to the initial submission of the Annual Report, if it is determined that information contained therein is substantially inaccurate, untrue, incorrect or incomplete, whether as a result of an audit, new information or otherwise, a revision must be submitted to DFS within two weeks of discovery along with a cover letter on company letterhead signed by an authorized executive officer of the Licensee.

Reminder

DFS must be notified within specified timeframes according to the type of changes contemplated. For example:

- Change of licensed locations – *at least 30 days prior to change* [Section 582 of the New York Banking Law (NYBL) and Part 402.18 of the Superintendent's Regulations (SR)]
- Change in members of the governing board, executive officers and individuals who supervise the daily operations of the Licensee – *within 10 days of change* [NYBL Section 583 and SR Part 402.8(a) and (b)]
- Modification to the fee structure (whether it is an increase or decrease) for clients in New York State - *at least 30 calendar days prior to implementation* [SR Part 402.14]
- Change in control (i.e. control parties) – ***prior approval of the Superintendent is required*** [NYBL Section 583-a]
- Reports of any arrest, indictment or conviction and certain crimes committed against the Licensee – *immediately upon discovery* [SR Parts 402.19, 402.20, and 300]

- Utilizing another licensee or a non-licensee service provider that has access to the monies of the licensee's debtors in contract – *within 10 days of intention to do so* [SR Parts 404.3 and 404.4]

- Reports of Cybersecurity event - *no later than 72 hours from a determination that a reportable Cybersecurity Event has occurred* [23 NYCRR 500.17(a)].

- Annual Certification of Compliance with NYS DFS Cybersecurity Regulations – *Due by April 15th* [Title 23 NYCRR 500 - §500 .17(b)]

Additionally, licensees are permitted to conduct regulated activities only at licensed locations. Pursuant to NYBL Section 580.2, regardless of geographic location, each branch, office or call center that provides budgeting, counseling and other budget planning-related services to New York residents must be licensed.

NYS DFS 2025 BUDGET PLANNER ANNUAL REPORT (NON-NMLS)

SCHEDULE A - GENERAL INFORMATION

1. Full legal name of the Licensee:

_____

2. Assumed (or doing business as) names, fictitious names, and any other names used in connection with the budget planner business in New York State during the reporting year and at any time since:

_____

3. The Licensee is incorporated/organized as a:

_____

(Type of legal entity such as corporation, limited liability company, and partnership.)

under the laws of the state of:

_____

4. Complete address of the Licensee's headquarters:

_____

Toll-free telephone number pursuant to SR Part 402.9(a):

_____

5. Does another entity have control over the Licensee?

_____ *(Yes or No)* If "Yes", provide the following information:

_____

Full Name Complete Address

_____

Type of Legal Entity with Control over the Licensee (*such as corporation, LLC, partnership, etc.*) State in which it is Incorporated/Organized

6. All locations where New York budget planner business was conducted during the reporting year:

Complete Address	Contact	Phone	Email

7a. Contacts:

Contact Type	Full Name	Title	Phone	Complete Mailing Address	Email
Primary*					
Secondary					
Billing (Optional)					
Examination (Optional)					
General Counsel					

** The individual, within the company, authorized to coordinate general DFS business and inquiries, and to receive all DFS correspondence*

7b. Where all books, records, accounts and documents are available for examination by DFS, pursuant to NYBL Sections 585 and 587:

Company Name	Full Address

7c. Licensee's websites for New York consumers and clients:

_____

8. Information of each:
   - Member of the Licensee's governing board (*e.g. director, trustee, etc.*); and
   - Executive officer of the Licensee

Full Name	Effective Date (if added after prior annual report)	Title	Board Member (Y/N)**	Complete Home Address	Home/Cell Phone	Email

*** If "Y", provide term expiration date also, if applicable.*

9. Membership in trade associations:

_____

10. Is the Licensee (or any of its parent, affiliate or subsidiary companies) licensed, registered or otherwise engaged in budget planning **outside of New York State**?

_____ *(Yes or No)* If "Yes", list the entities and the corresponding states, districts, territories, countries, etc.:

_____

_____

11. Is the Licensee engaged in lines of business other than the budget planning business?

_____ *(Yes or No)* If "Yes", provide details:

_____

12. List all banking relationships:

Bank	Account Type*	Branch Address where the Account is Held

** For example, operating account, trust account, line of credit, loan, etc.*

13. Have any of the following individuals and entities been involved in any of the following listed matters in the reporting year and at any time since?

Individuals and entities:

- The Licensee
- Any of the Licensee's parent, affiliate, and subsidiary companies
- Any of the Licensee's executive officers and members of the governing board

Listed matters:

- Felony conviction or guilty plea to felony
- Court proceeding or lawsuit *in which any of the above-listed individuals and entities was named a defendant*
- Investigation, civil or criminal
- Judgment
- Monetary penalty
- Regulatory or supervisory action
- Settlement *reached after a lawsuit, claim or court proceeding in which any of the above-listed individuals and entities was named a defendant*

(Yes or No) _____

If "Yes", provide details. In addition, for the reported court proceedings, lawsuits and settlements, ***attach*** to this report a signed statement from legal counsel on whether the court proceedings, lawsuits and settlements, when aggregated, would materially impact the Licensee's financial condition and/or ability to meet obligations.

_____

_____

_____

14. Current standing of the Licensee's tax-exemption status under Section 501(c)(3) of the Internal Revenue Code after the most recent IRS audit: *(Mark one)*

_____ No change*

_____ Not audited

_____ Audit -- ongoing

_____ Exemption revoked*, #

_____ Revocation under appeal*, #

* ***Attach*** a copy of the latest notification/acknowledgement letter from the IRS.

Attach a copy of a good standing certificate as a non-profit organization issued by the Licensee's home state and New York State.

15. Employees working remotely (away from licensed locations) *(Yes or No)* _____

If yes,:

Number of staff permitted to work remotely _____

Percentage of total staff permitted to work remotely _____

Briefly describe procedures in place to mitigate increased cybersecurity risks attributable to remote work *(i.e. protection of expanded attack surfaces, vulnerable networks, cloud-based infrastructures; staff access monitoring (passwords, encryption, authentication, etc.); etc.)*

_____

_____

16. Describe current fee structure applicable to NY consumers (*initial set-up, monthly fees, etc*.)

17. Is the Licensee in contract with any third-party service provider that has access to the Licensee's New York trust bank account with ability to deposit client payments and/or disburse creditor payments out of the same account?

(Yes or No) _____

If yes, please provide dates DFS was notified and surety bond requirement was satisfied in accordance with NYCRR Part 404.4 of S.R.?

_____

18. Person responsible for completion of this report:

Full Name	Title	Phone	Email

SCHEDULE B - OPERATIONAL INFORMATION

1. Budget planning clients[1]:

	(A) # of Clients at close of 12/31/24	(B) # of Clients signed up during 2025	(C) # of Clients who completed program during 2025	(D) # of Clients who dropped out of program during 2025	(E) # of Clients at close of 12/31/25
New York State					
Nationwide					

On the *New York State* line, Column (E) must equal:

Column (A) [*This must match the # of NYS budget planning clients at the close of 2024 as reported in the 2024 Annual Report.*]
\+ Column (B)
\- Column (C)
\- Column (D)

= Column (E)

2. Pursuant to NYBL Section 584-a, the Licensee must submit to DFS any form of written contract it intends to use between itself and clients in New York State. ***Attach*** a complete copy of the Licensee's client agreement package (blank forms and disclosures) currently in use. Indicate on the package its effective date. ***Also attach*** a complete copy of ONE recently executed New York DMP agreement, preferably one signed during December 2025. Confidential and sensitive information such as the borrower's date of birth, social security number, and bank/creditor account numbers should be redacted.

3. If the Licensee has been granted permission to employ the average daily balance criteria instead of the highest balance in the New York trust account in the setting of the surety bond/asset pledge requirement, pursuant to the DFS industry letter of March 24, 2005, ***attach*** a copy of (a) the declarations page from the licensee's Fidelity and Dishonesty insurance policy -- that is commensurate with the amount of money held on behalf of all debtors nationwide, and (b) the *primary nationwide trust account bank statement for the month of December 2025*.

[1] Pursuant to Article 28-B Section 455.1 of the General Business Law, a budget planning client in New York State is an individual with whom the Licensee has entered into a contract for budget planning and who was a resident in the state of New York at the time the contract was entered into, regardless of his/her subsequent or current residency.

AFFIDAVIT

I, the undersigned, do hereby swear or affirm under the penalties of perjury that (i) I am an executive officer of the Licensee, (ii) I am authorized to submit the above report (including all addenda and schedules), (iii) the information contained therein is accurate, true, correct and complete, to the best of my knowledge and belief, and (iv) that the licensee has complied with New York Banking Law and Regulations pertaining to the notices, applications, and certifications mentioned in the ***Reminder Section*** *of this report form, in addition to all other applicable laws and regulations.*

Full Name Title

Signature Date

Subscribed and sworn to before me this date:

NOTARY SIGNATURE: **DATE:**