



**South Dakota Money Transmitter License
Virtual Currency Kiosk
Renewal Report Form**

Licensee Information

Licensee Name: _____

NMLS ID Number: _____

License Number: _____

Reporting Period: _____

1. Virtual Currency Kiosk Activity

For each virtual currency kiosk located in South Dakota, provide:

- Number of virtual currency transactions: _____
- Total dollar amount of transactions: _____
- Gross revenue attributable to transactions: _____
- Kiosk location/address: _____
- (Attach additional pages if needed.)

2. Complaints Filed with Agencies or the BBB

Attach a copy of each complaint filed by any user with the BBB or any state or federal agency.

For each complaint, provide:

- Date of complaint: _____
- Agency/Bureau: _____
- Summary of issue: _____
- Outcome (if any): _____

3. Refund Requests

- Number of refund requests received: _____
- Dollar amount of refund requests: _____
- Number of requests granted: _____
- Number of requests denied: _____
- Dollar amount of refunds issued: _____

4. Compliance Officer Contact Information

Name: _____

Title: _____

Phone: _____

Email: _____

Mailing Address: _____

5. Physical Kiosk Locations

Number of physical locations in which the licensee operates a kiosk: _____

6. Suspicious Activity Reports (SARs) Filed

Number of SARs filed pursuant to the Bank Secrecy Act: _____

Dollar amount associated with SAR filings: _____

Certification

I certify that the information provided in this renewal report is true, accurate, and complete to the best of my knowledge.

Signature: _____

Printed Name: _____

Title: _____

Date: _____