

**FSA064 Small electronic money institution return**

**Firm Name**

**Firm Reference Number (FRN)**

**Year End**

**Reporting Period**

*(\*\*Full completion of Section 1 of this return is only required if the actual or, where applicable, projected figure for 'average outstanding electronic money' in respect of the relevant period is equal to or exceeds €500,000. If the figure is below this threshold the capital requirement does not apply and figures for fields A3 and A4 only should be entered.\*\*)*

**Section 1: Capital Adequacy**

A

Currency  Please select £ or €

Currency units  Thousands

**PART ONE: CAPITAL REQUIREMENT**

1 Initial capital requirement  2% of average outstanding electronic money figure (A4)

Own funds requirement

2 Total own funds

3 Electronic money outstandings at period end

4 Average outstanding electronic money at the end of each calendar day over preceding 6 months

5 Own funds requirement  2% of average outstanding electronic money figure (A4)

6 Total capital requirement (higher of initial capital and own funds requirements)

**Part Two: TOTAL CAPITAL RESOURCES**

7 Paid up capital

8 Reserves

9 Retained profit/loss

10 Revaluation reserves

11 Eligible general or collective provisions

12 Eligible securities and instruments

13 Cumulative preference shares (other than fixed term)

14 Eligible members' commitments

15 Eligible borrowers' commitments

16 Eligible fixed term cumulative preference shares and subordinated loans

17 Total resources  0

**Deductions**

18 Own shares at book value

19 Intangible assets

20 Material losses

21 Deductible holdings of shares

22 Deductible participations

23 Deductible instruments

24 Total deductions  0

25 Total capital resources  0

26 Period end £/€ exchange rate used  0.00

27 Total capital resources (Euro equivalent)  0

28 Total capital requirement (in Euro)  0

29 Capital surplus/deficit (in Euro)  0

**Section 2: Method of safeguarding of client assets**

Mark 'X' in all appropriate boxes in columns A & B

	A Electronic money	B Unrelated payment services	C Name of institution/ custodian/insurer
1 Placed in a separate account with an authorised credit institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
2 Invested in approved secure low-risk liquid assets held in a separate account with an authorised custodian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
3 Covered by an insurance policy with an authorised insurer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
4 Covered by a guarantee from an authorised insurer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
5 Covered by a guarantee from an authorised credit institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

**Section 3: Supplementary Information**

	Yes/No	Explanation if No
1 Has the firm continued to meet the condition for registration that average outstanding electronic money generated by the firm's total business activities must not exceed €5,000,000 throughout the reporting period?	<input type="checkbox"/>	<input type="text"/>
2 Has the firm continued to meet the condition for registration that the rolling monthly average of the total amount of any unrelated payment transactions (over any period of 12 months) must not exceed €3,000,000 throughout the reporting period?	<input type="checkbox"/>	<input type="text"/>
3 If the actual or, where applicable, projected figure for 'average outstanding electronic money' in respect of the relevant period is equal to or greater than €500,000, has the firm's own funds been equal to or greater than its own funds requirement (2% of their average outstanding electronic money) throughout the reporting period? Answer N/A if the average amount of outstanding electronic money is below €500,000.	<input type="checkbox"/>	<input type="text"/>
4 Have all funds received from customers been immediately segregated and safeguarded throughout the reporting period?	<input type="checkbox"/>	<input type="text"/>

5 Please report the number of electronic money accounts open with the firm at the end of the reporting period.

6 Please report the number of agents the firm was responsible for at the end of the reporting period.

**Audited Accounts**

7 If your firm is incorporated, does it qualify for the Companies House small firms exemption from having its accounts audited? Please answer 'yes' or 'no'.

8 If your firm is required to submit audited accounts, please report the date on which your accounts were last audited. Please enter date.

9 Is your firm a 'hybrid' firm conducting other non-regulated business with an obligation to submit separate accounts for its electronic money and payment services business? Please answer 'yes' or 'no'.

10 If you have answered 'Yes' to 9 above, please enter the date these accounts were last submitted to us. Please enter date.