

Instructions on Filing a New or Initial Notice of Exemption

Below provides step-by-step instructional information for filing a Notice of Exemption. These instructions are for new filers, or those filing an initial exemption at the commencement of a new filing period.

All Covered Entities who want to claim a current Notice of Exemption should follow these instructions.

The following information will be necessary for your filing and DFS suggests locating it prior to commencing your filing:

- License number: Companies and individuals may have different types of license numbers, the DFS portal has been built to support usage of: NYS License #, NAIC/NY Entity #, NMLS # and Institution #. If you do not know your license number, a look up feature is included in the portal or on the DFS Website under “Who we Supervise.”

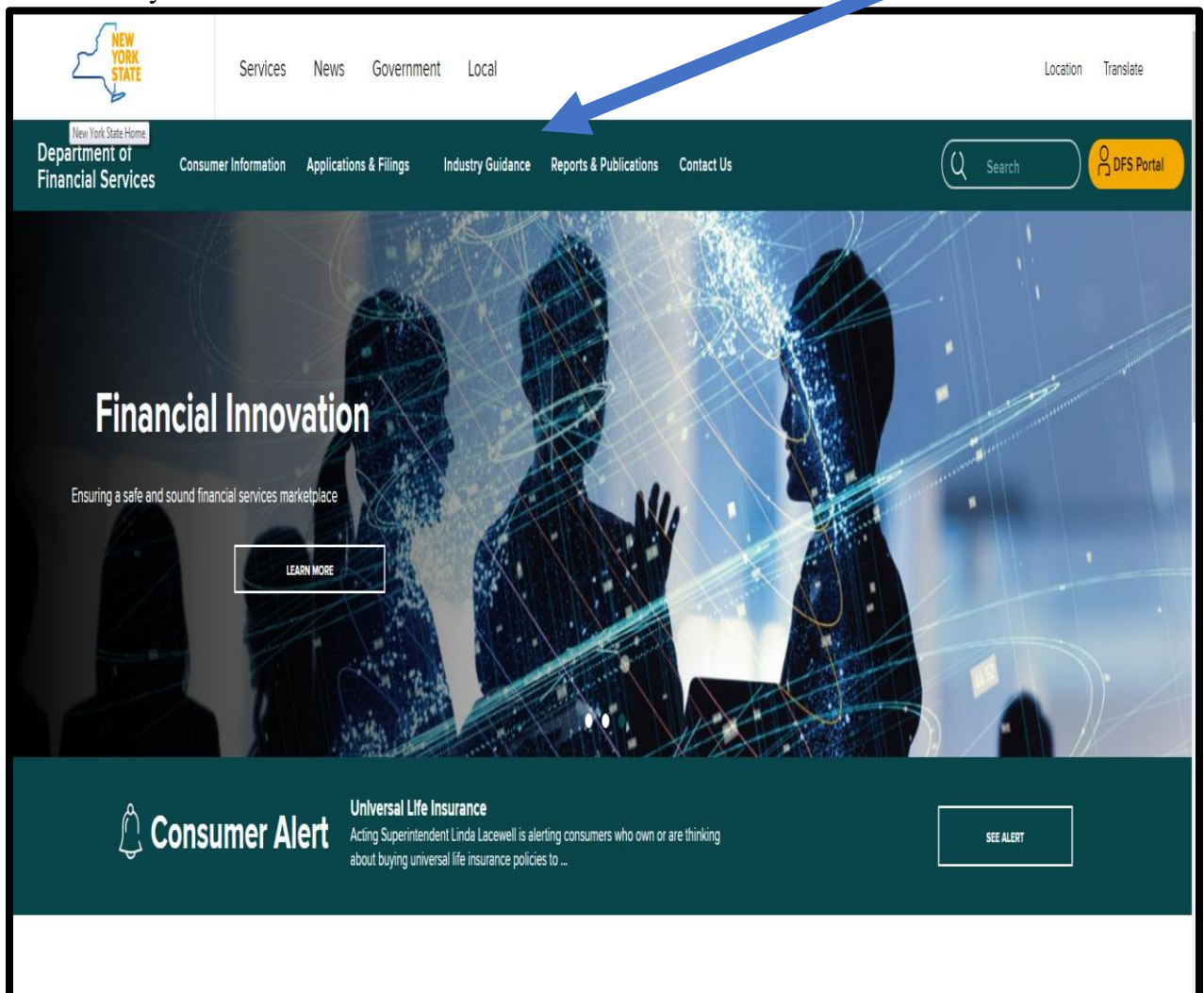
Please see information below on what exemptions you can file for:

- 500.19(a)(1) – You are entitled to this exemption when a Covered Entity has fewer than 10 employees, including independent contractors. This is a limited exemption and you must still design and implement a cybersecurity program that meets some but not all the regulatory requirements.
- 500.19(a)(2) – You are entitled to this exemption when a Covered Entity has less than \$5,000,000 in gross annual revenue in each of the last 3 fiscal years from NY business. This is a limited exemption and you must still design and implement a cybersecurity program that meets some but not all the regulatory requirements.
- 500.19(a)(3) – You are entitled to this exemption when a Covered Entity has less than \$10,000,000 in year-end total assets. This is a limited exemption and you must still design and implement a cybersecurity program that meets some but not all the regulatory requirements.
- 500.19(b) – You are entitled to this exemption when you are an employee, agent, representative or designee of another Covered Entity and you are following that entity’s cybersecurity program. Under this exemption persons do not need to create their own program, but will be required to identify the Covered Entity’s whose program you are following to claim this exemption.
- 500.19(c) – You are entitled to this exemption when a Covered Entity does not operate, maintain, utilize or control any IT systems and does not, and is not

required to control, own, access, generate, receive or possess Nonpublic Information. This is a limited exemption and you must still design and implement a cybersecurity program that meets some but not all the regulatory requirements.

- 500.19(d) – You are entitled to this exemption if you are a Covered Entity that is a captive insurance company that does not, and is not required to control, own, access, generate, receive or possess Nonpublic information.

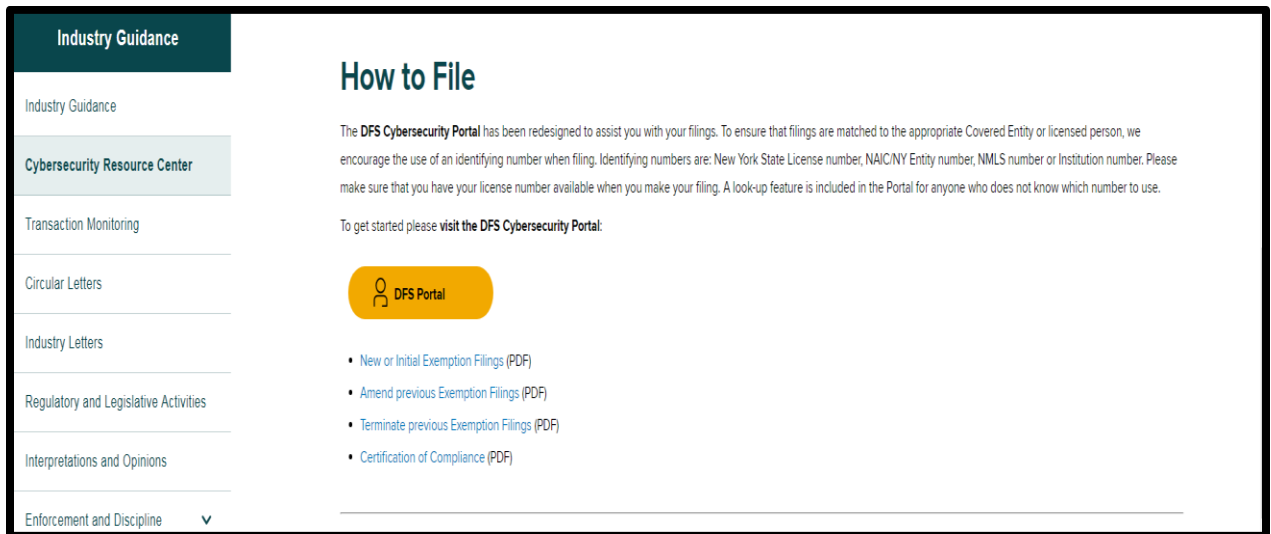
1. First, from the Department of Financial Services webpage (www.dfs.ny.gov), please click on the “Industry Guidance” column.



2. Once in Industry Guidance, click on “Cybersecurity Resource Center” which opens to below:



- Once selected, go to the middle of the page under “Instructions on How to File” you can click on it to access the DFS Cybersecurity Portal. Please note, filing instruction links can be found under “How to File”.



- Enter your DFS portal account information and select “Sign In.” If you previously made any cybersecurity filing with DFS, the account information you previously used remains the same and you should not create a new portal account. All prior filings are associated with your existing account and you should use the same account.

If you have never created a DFS portal account, you will need to create a new account by selecting “Create Account”. Please refer to the details in the next step for creating a new

account.

NEW YORK STATE

Services News Government Local

Department of Financial Services SECURE PORTAL

My Apps

Sign In [Return to Full Page](#)

Email Address
test@email.com

Password
.....

Remember Me

Sign In

[Create Account](#) [Forgot Password](#)

5. Skip to Step 7 if you already have an account. After clicking “Create Account”, you will be prompted to enter information required to create a DFS portal account. The “Text Verification” on the right side of the screen will be unique with each attempt to create an account. Select “Save” to create your DFS portal account.

NEW YORK STATE

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Department of Financial Services SECURE PORTAL

My Apps

Create Account [Return to Full Page](#)

First Name (Required)
| This field is required.

Middle Name

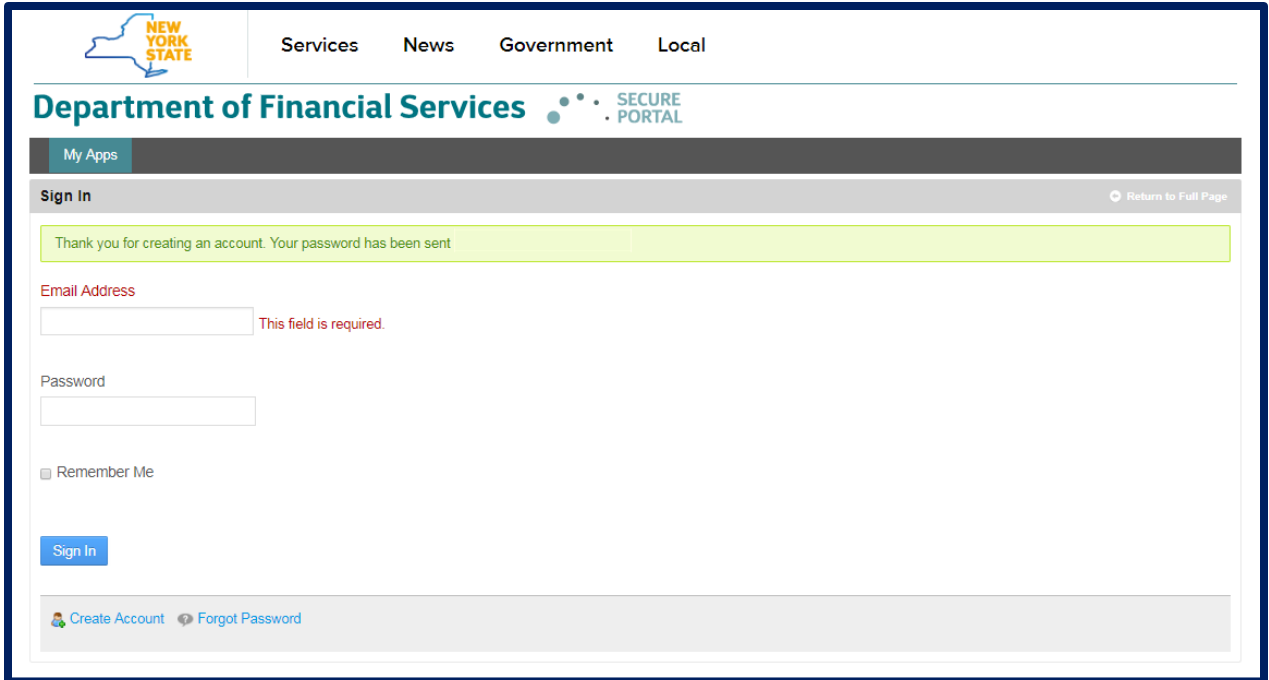
Last Name (Required)
This field is required.

Email Address (Required)
This field is required.

7053
Text Verification (Required)
This field is required.

Save

After selecting “Save”, a confirmation message as shown below will be displayed. Use the password sent to the email address you entered in the prior screen to sign in.



6. Upon logging in, you will find the landing page shown below.



7. To start your filing of a Notice of Exemption, please select “Begin” under the Notice of Exemption banner. Note for future filings, you will be able to amend or terminate your initial Notice of Exemption. However, each regulated entity or licensed person must file an initial or new Notice of Exemption.

Exemption

Perform actions related to your entity's NYS DFS cybersecurity regulation exemption status.

- File new Notice of Exemption
- Amend previously filed Notice of Exemption
- Terminate previously filed Notice of Exemption

Begin

Begin Bulk Exemption

Identify the Filing Entity – Steps 9-13

8. After clicking Begin, you will need to select the license number that you will be using to identify the regulated company or licensed person for whom you are filing. Please select your NY State License Number, NAIC/NY Entity Number, NMLS Number, Institution Number.

← Back to Main Menu
Submit Notice of Exemption

Find My Entity
Find My Entity (Cont)
Exemption Status
Contact Info
Done

Choose how you will be identifying your entity:

NYS License Number
• Adjusters • Bail Bond Agents • Brokers • Budget Planners • Check Cashers • Licensed Agents • Licensed Lenders • Life Settlement Brokers • Money Transmitters • Premium Finance Agencies • Sales Finance Companies • Service Contract Providers • Trust Companies • Virtual Currency

NAIC/NY Entity Number
• Continuing Care Retiring Community • Employee Welfare Funds and Retirement Systems • Fraternal Benefit Societies • Health Maintenance Organizations • Managed Long Term Care Plans • Municipal Cooperative Health Benefit Plan • NYS Licensed Insurance Companies • Prepaid Health Services Plan • Rate Service Organizations • Student Health Plan

NMLS
• Budget Planners • Check Cashers • Licensed Lenders • Money Transmitters • Mortgage Institutions/Loan Originators • Premium Finance Agencies • Sales Finance Companies • Virtual Currency licensees

Institution Number
• All Banking Institutions • Consumer Credit Reporting Agencies • Trust Companies

[Help me find my entity](#)

Next >

Please note, to facilitate ease of use, DFS allowed the use of different types of license numbers to enable users to identify themselves by various means. The portal includes recommendations for each type of license number. However, most regulated entities and licensed persons have more than one type of license number and the system will accept the filing using any of these types provided you identify the type of license number being used. For example, if your company has both an NMLS number and a NYS License number, you

can use either to identify yourself in the portal. If you do not know your entity's number, then please select "Help me find my entity" (*Skip to Step 12 for further instructions*).

9. If you know your license number, then you will land on the page below.

Enter Entity Information

Please provide your entity's NYS License #:

[Help me find my entity](#)

10. Please enter your number and click "Search". A message that an entity or individual has been found and the name of the individual or entity will appear in the box; please verify that the information is accurate. If accurate, click "Next" at the bottom right of the screen and skip to step 14.

The following entity or individual has been found, and if you are filing on their behalf, you may continue by clicking 'Next'. Please carefully review the entity information listed below to ensure you select the correct information.

NAME WILL APPEAR HERE

[Help me find my entity](#)

11. If your identifying number is incorrect you will receive the following error message.

Please provide your entity's NYS License #:

No entity or License # could be found which matched your entry.

12. If you receive an error, please check that your number was entered correctly and search again. If you do not know your number, please select "Help me find my entity" located at the bottom left of the page in blue font.

The following entity or individual has been found, and if you are filing on their behalf, you may continue by clicking 'Next'. Please carefully review the entity information listed below to ensure you select the correct information.

NAME WILL APPEAR HERE

[Help me find my entity](#)

13. Once you select “Help me find my entity” you will see this screen, and you will be able to enter information (your entity name or individual name- including both first name and last name) which will prompt a search for your license number.

File By Name

Entity name:

OR (If Individual)

First Name:

Last Name:

[Still can't find your entity? Click here](#)

Note, when searching as an individual, if you do not enter the first and last name you will receive this error message:

File By Name

Entity name:

OR (If Individual)

First Name:

Last Name:

You must enter either an entity name, or first and last name.

Once you enter your entity information in the Entity name box, then click “Search”, results will appear in blue, which specify the entity name(s) and license number(s) (see

example below). Please select the name that matches you or your entity. You can skip to Step 14.

File By Name

Entity name: All or part of the name

OR (If Individual)

First Name:

Last Name:

Please carefully review the search results before making a selection

Fake Company Name NYS License #: #####	Fake Company Name NYS License #: #####	Fake Company Name NYS License #: #####
Fake Company Name NYS License #: #####	Fake Company Name NYS License #: #####	

Showing 5 results

[Still can't find your entity? Click here](#)

14. If are still unable to find your entity, please click on “Still can’t find your entity?”. By clicking and moving to this page, you will be able to manually enter more detailed information to make your filing. While submitting an entry without an identifying number is possible, it will not result in your filing being automatically associated with your license record. We may contact you for further information to confirm your license. You may also get notices of delinquency until your Notice of Exemption has been associated with your record.

File By Name

Filing by name will require you to provide the additional information below:

Entity or First Name: *	<input type="text"/>
Last Name (required for individuals):	<input type="text"/>
Employed by (required for individuals):	<input type="text"/>
Social Security or Tax ID Number: *	<input type="text"/>
Home Address (required for individuals):	<input type="text"/>
Work or Office Address: *	<input type="text"/>
DOB (required for individuals):	<input type="text"/>
Type of license or field of business: *	<input type="text"/>
Phone Number: *	<input type="text"/>

[Back](#)

[Submit](#)

File a Notice of Exemption – Step 14 -

15. Each regulated company or licensed person will need to file an initial or new Notice of Exemption. After your initial filing you will be able to amend or terminate this Notice of Exemption; however, all persons filing should select the first option for their filing. Please click on “This is the first exemption filed for this entity or individual”.

The screenshot shows a navigation bar with buttons for 'Find My Entity', 'Find My Entity (Cont)', 'Exemption Status', 'Contact Info', and 'Done'. Below this is a section titled 'Indicate what you are filing' with the instruction 'Please choose from the following:'. Three radio button options are listed: 'This is the first exemption filed for this entity or individual', 'I wish to amend a previously filed exemption', and 'I would like to remove a previously filed exemption'. A red arrow points to the first option.

After you select “This is the first exemption filed for this entity or individual”, please choose the exemptions that you qualify for. You can click on the box with the question mark for further details about the Exemption reasons.

The screenshot shows a list of exemption reasons under the heading 'In accordance with 23 NYCRR 500.19(e), JOHN SMITH provides notice of qualification for the following Exemption(s) (check all that apply): *'. The list includes: 500.19(a)(1) – I certify the Covered Entity has fewer than 10 employees, including independent contractors.; 500.19(a)(2) – I certify the Covered Entity has less than \$5,000,000 in gross annual revenue in each of the last 3 fiscal years from NY business.; 500.19(a)(3) – I certify the Covered Entity has less than \$10,000,000 in year-end total assets.; 500.19(b) – I certify I am an employee, agent, representative or designee of another Covered Entity and am covered by that entity’s cybersecurity program.; 500.19(c) – I certify the Covered Entity does not operate, maintain, utilize or control any IT systems and that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.; 500.19(d) – I certify the Covered Entity is a captive insurance company that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information. A blue arrow points to a green box with a question mark icon.

Please note that you are responsible for maintaining documentation sufficient to demonstrate you are qualified for any exemptions claimed; as such, you may be asked to provide documentation to the Department. In addition, the Department will periodically require you to refile your exemption upon request.

16. Note exemptions 500.19(a)(1), 500.19(a)(2),500.19(a)(3), 500.19(c), or 500.19(d) are limited in nature. Regulated companies and licensed persons are still required to comply with certain provisions of the regulations, including for most entities the core requirements of a cybersecurity program, cybersecurity policy and procedures, access privileges, a risk assessment, third party service provider security policy, limitations on data retention and a filing of a Certification of Compliance. Please carefully review each exemption and select the exemptions that apply to your circumstances. You will be asked to confirm that you understand these requirements.

In accordance with 23 NYCRR 500.19(e), JOHN SMITH provides notice of qualification for the following Exemption(s) (check all that apply): *

- 500.19(a)(1) – I certify the Covered Entity has fewer than 10 employees, including independent contractors.
- 500.19(a)(2) – I certify the Covered Entity has less than \$5,000,000 in gross annual revenue in each of the last 3 fiscal years from NY business.
- 500.19(a)(3) – I certify the Covered Entity has less than \$10,000,000 in year-end total assets.
- 500.19(b) – I certify I am an employee, agent, representative or designee of another Covered Entity and am covered by that entity’s cybersecurity program.
- 500.19(c) – I certify the Covered Entity does not operate, maintain, utilize or control any IT systems and that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.
- 500.19(d) – I certify the Covered Entity is a captive insurance company that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.

Please note that you are responsible for maintaining documentation sufficient to demonstrate you are qualified for any exemptions claimed; as such, you may be asked to provide documentation to the Department. In addition, the Department will periodically require you to refile your exemption upon request.

Further Action Required - Exemptions under sections 500.19(a)(1-3), (c) and (d) are **limited exemptions**. Any Covered Entities and licensed persons exempt under these sections are required to maintain a cybersecurity program and file an annual Certification of Compliance to confirm compliance with the provisions of the regulation that apply to the Covered Entity. See the Cybersecurity FAQs on the DFS website for more information.

I have read and understand the information above.*

17. Once you select the exemptions that apply to you, you will need to check the box that states “I have read and understand the information above.” By checking this box, you are certifying that the information you selected is accurate. Click “Next” to continue to the next page. *If you are not selecting an exemption 500.19(b), then please skip to Step 20.*

Further Action Required - Exemptions under sections 500.19(a)(1-3), (c) and (d) are **limited exemptions**. Any Covered Entities and licensed persons exempt under these sections are required to maintain a cybersecurity program and file an annual Certification of Compliance to confirm compliance with the provisions of the regulation that apply to the Covered Entity. See the Cybersecurity FAQs on the DFS website for more information.

I have read and understand the information above.*

18. Exemption B: Under the 23 NYCRR 500 Cybersecurity regulation, section 500.19(b) exemption (“B exemption”) means – ***“You are entitled to this exemption when you are an***

employee, agent, representative or designee of another Covered Entity¹ and you are following that entity's cybersecurity program. Under this exemption, persons do not need to create their own program, but will be required to identify the Covered Entity's whose program you are following to claim this exemption". You will need to provide the Department with the name of the Covered Entity whose cybersecurity program you are following and an individual's contact information who will confirm such cybersecurity program.

19. If you select Exemption 500.19(b) by itself or with any other exemption, then you will be required to identify the Covered Entity whose cybersecurity program you are following.

In accordance with 23 NYCRR 500.19(e), GEICO General Insurance Company provides notice of qualification for the following Exemption(s) (check all that apply): *

- 500.19(a)(1) – I certify the Covered Entity has fewer than 10 employees, including independent contractors.
- 500.19(a)(2) – I certify the Covered Entity has less than \$5,000,000 in gross annual revenue in each of the last 3 fiscal years from NY business.
- 500.19(a)(3) – I certify the Covered Entity has less than \$10,000,000 in year-end total assets.
- 500.19(b) – I certify I am an employee, agent, representative or designee of another Covered Entity and am covered by that entity's cybersecurity program.
- 500.19(c) – I certify the Covered Entity does not operate, maintain, utilize or control any IT systems and that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.
- 500.19(d) – I certify the Covered Entity is a captive insurance company that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.

Please note that you are responsible for maintaining documentation sufficient to demonstrate you are qualified for any exemptions claimed; as such, you may be asked to provide documentation to the Department. In addition, the Department will periodically require you to refile your exemption upon request.

Click the 'Find/Choose my covering entity' icon at the bottom of the page. When you click this icon, you will be identifying the Covered Entity whose program you are following to claim this exemption.

¹ A Covered Entity is defined as "Any Person operating under or required to operate under a license, registration, charter, certificate, permit, accreditation or similar authorization under the Banking Law, the Insurance Law or the Financial Services Law".

Find My Entity Find My Entity (Cont) **Exemption Status** Contact Info Done

Indicate what you are filing

Please choose from the following:

- This is the first exemption filed for this entity or individual
- I wish to amend a previously filed exemption
- I would like to remove a previously filed exemption

In accordance with 23 NYCRR 500.19(e), JOHN SMITH provides notice of qualification for the following Exemption(s) (check all that apply): *

- 500.19(a)(1) – I certify the Covered Entity has fewer than 10 employees, including independent contractors.
- 500.19(a)(2) – I certify the Covered Entity has less than \$5,000,000 in gross annual revenue in each of the last 3 fiscal years from NY business.
- 500.19(a)(3) – I certify the Covered Entity has less than \$10,000,000 in year-end total assets.
- 500.19(b) – I certify I am an employee, agent, representative or designee of another Covered Entity and am covered by that entity's cybersecurity program.
- 500.19(c) – I certify the Covered Entity does not operate, maintain, utilize or control any IT systems and that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.
- 500.19(d) – I certify the Covered Entity is a captive insurance company that does not, and is not required to, control, own, access, generate, receive or possess Nonpublic Information.

Please note that you are responsible for maintaining documentation sufficient to demonstrate you are qualified for any exemptions claimed; as such, you may be asked to provide documentation to the Department. In addition, the Department will periodically require you to refile your exemption upon request.

What Cybersecurity Policy I Am Following:

You have certified that you are following the cybersecurity program of the following Covered Entity or licensed person and that entity is fully covering the cybersecurity program for all Nonpublic Information and systems in your possession. Please indicate the name of that Covered Entity

Find/Choose my covering entity

- a. There will be a new screen where you will need to identify the entity whose cybersecurity program you are following. You will be able to enter information (your entity name or individual name- including both first name and last name) which will prompt a search for that Covered Entity's name and license number.


What Cybersecurity Policy I Am Following

Entity name:

OR (If Individual)

First Name:

Last Name:

 Search

[Still can't find your entity? Click here](#)

Note, when searching as an individual, if you do not enter the first and last name you will receive this error message:

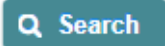
What Cybersecurity Policy I Am Following


Entity name:

OR (If Individual)

First Name:

Last Name:

 Search

 You must enter either an entity name, or first and last name.

Once you enter your entity information in the Entity name box, then click “Search”, results will appear in blue, which specify the entity name(s) and license number(s) (see example below). Please select the name that matches the name of the Covered Entity whose cybersecurity program you are following.


File By Name

Entity name: All or part of the name

OR (If Individual)

First Name:

Last Name:

 Search

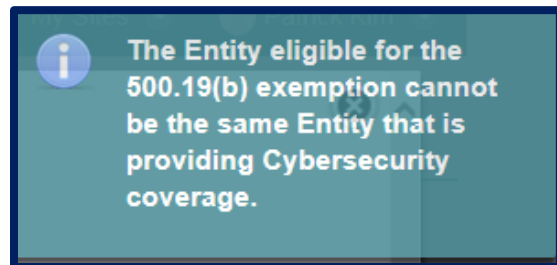
Please carefully review the search results before making a selection

Fake Companay Name NYS License #: #####	Fake Companay Name NYS License #: #####	Fake Companay Name NYS License #: #####
Fake Companay Name NYS License #: #####	Fake Companay Name NYS License #: #####	

Showing 5 results

[Still can't find your entity? Click here](#)

- b. Please note that this exemption is only available when all of your operations are being covered by the cybersecurity program of another Covered Entity. Companies and licensed persons often have different parts of their operations that rely on the cybersecurity programs of other Covered Entities, but those Covered Entities do not cover their entire operations. Such companies and licensed persons are not entitled to a 19(b) exemption – they must establish a cybersecurity program to ensure that all of their operations are completely covered. Accordingly, to claim a 19(b) exemption, you must identify ONE entity or individual that maintains the cybersecurity program you are following and there is no capability to identify an additional Covered Entity.
- c. If you entered your own individual or entity’s license number, then you will not be able to continue. Under the exemption, you are required to follow the cybersecurity program of another Covered Entity. If you enter that information, on the right corner, the message below will show.



- d. In the “Name of Entity responsible for the cybersecurity program” enter the individual’s first name or entity’s name. This might be the name of your employer, but you should check with your employer first. Enter a Last Name if applicable. On the “Entity Address” enter the location of the business. Under the drop-down list of “Type of license or field of business”, you will have to select the business that best describes the Covered Entity whose cybersecurity program you are following. Click “Submit” once you have completed all the fields.

What Cybersecurity Policy I Am Following

Provide information on the Covered Entity whose cybersecurity program you are following

Name of Entity responsible for the cybersecurity program(This may be your employer): *

Last Name (if applicable):

Entity Address: *

Type of license or field of business: *

20. After you selected an entity or individual whose cybersecurity program you are following, whether entered through the search function or the manual entry, you will have to enter information on the individual who can confirm coverage and details of the cybersecurity program.

Entity contact who can confirm coverage:

First Name: *

Last Name: *

Email Address: *

Phone Number: *

Note: If you do not fill in the information above or fill it out incorrectly (e.g. email is not in correct format, you will receive an error message).

Entity contact who can confirm coverage:

First Name: *	<input type="text"/>	<input checked="" type="checkbox"/> Required
Last Name: *	<input type="text"/>	<input checked="" type="checkbox"/> Required
Email Address: *	<input type="text"/>	<input checked="" type="checkbox"/> Required
Phone Number: *	<input type="text"/>	<input checked="" type="checkbox"/> Phone is required

21. In the Contact Information tab, please fill out the required information. You will also need to select the box that swears or affirms that the information you provided throughout this process is accurate. After you fill out the information, click “Next”.

Entity contact who can confirm coverage:

First Name: *

Last Name: *

Email Address: *

Phone Number: *

I understand that The New York State Department of Financial Services may verify the information provided above. I certify that the Covered Entity listed above is entitled to the exemption.

22. After entering your contact information, please click Submit. On the Done tab, you will find your receipt number that will start with the letter E. Please keep this number for your records as you may need to refer to this if any questions arise. You will also receive an email acknowledgement containing similar information from this screen including your receipt number.

Please find your receipt number below.
Receipt Number: E-2018-00000

23. Once these steps are completed you have filed for a Notice of Exemption.