

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION
SOUTH DAKOTA BOARD OF ACCOUNTANCY

301 E. 14th St., Suite 200, Sioux Falls, SD 57104
 Tel: 605.367.5770 accountancy.sd.gov

AFFIDAVIT FOR INACTIVE STATUS AND CPE EXEMPTION
FOR THE YEAR ENDING JULY 31, 2018

The inactive certificate fee is \$50 if filed by August 1, 2017 (\$100 if filed after August 1, 2017)
Make check payable to the SD Board of Accountancy. No cash please.

Full Name	First	Middle	Last
Address	Street	City	State Zip
Phone number	e-mail	e-mail	
Certificate Number	Date Issued		

I, _____, hereby advise the South Dakota State Board of Accountancy that I wish to register my certificate as “Inactive”.

I warrant and affirm that I have not performed or offered to perform for the public, individually or as an employee in a firm, one or more kinds of services involving the use of accounting or auditing skills, including the issuance of reports on financial statements, nor have I performed or offered to perform for the public one or more kinds of management advisory, financial advisory or consulting services nor have I performed or offered to perform for the public services including preparation of tax returns or the furnishing of advice on tax matters since, _____. (Date must precede period for which you are seeking exemption)

I understand that by doing so I give up the right to use the title of certified public accountant or licensed public accountant without including “Inactive” adjacent to the use of the title which includes the abbreviations CPA, PA and the word “Accountant”. I understand that by making this election, I cannot perform or offer to perform for the public any of the services listed in the previous paragraph. I further certify that I have read and understand the Statutes and Rules of the Board.

I understand that I must continue to renew my permanent certificate on a regular annual basis and pay the renewal fees assessed by the Board of Accountancy. I further understand in order to return to active status, I must complete twenty-four (24) hours of CPE during the 12 month period preceeding the date I request reactivation of my license.

Additionally, I understand that violation of South Dakota SDCL 36-20B and/or the rules and policies of the South Dakota State Board of Accountancy relating to improperly performing services for the public and/or using my credential in the State of South Dakota is cause for disciplinary action by the South Dakota Board of Accountancy.

I, the undersigned, declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. Any person who signs such statement as provided for in this section, knowing the same to be false or untrue, in whole or in part, shall be guilty of perjury.

NOTE: Pursuant to SDCL 36-20B-29, each holder of an individual license shall notify the Board in writing within thirty (30) days after its occurrence of any denial of an application or revocation or suspension of a certificate or license in another state or any change of address, employment or conviction of a felony. If you answer “Yes” to any of the questions below, you must provide a statement of explanation with this application. Since your last renewal:

- | | | |
|-----|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| yes | no | Have you been charged, arrested, convicted, found guilty of, received a prayer for judgement continued, or pleaded nolo contendere to any criminal offense (excluding non-criminal traffic infractions)? |
| yes | no | Have you had an application for a certificate or license denied or a certificate or license suspended, canceled, or revoked by any state or federal agency, or governing or licensing board? |
| yes | no | Have you been investigated, charged, or disciplined; or are you currently under investigation by a governing or licensing board or by a state or federal agency or the AICPA or any state CPA society? |
| yes | no | Have you been party to any civil suit, bankruptcy action, administrative proceeding, or binding arbitration; the basis of which is grounded upon an allegation of negligence, dishonesty, fraud, misrepresentation, or incompetence? |

Signature

Date