

SIMPLE IRA - Employee Certification Form

Employees are required to submit this form in order to complete the account opening process for opening their SIMPLE IRA (for SIMPLE IRA plans opened using Form 5304-SIMPLE).

Instructions

1. Complete this form in order to open a SIMPLE IRA with us under your employer's SIMPLE IRA plan.
2. Sign and send us this completed form:

Scan and Email

support@folioinvesting.com

Fax

703-649-6288

U.S. Mail

Folio Institutional

ATTN: New Accounts Department

8180 Greensboro Drive, 8th Floor

McLean, VA 22102

Important Note

- The custodian of your SIMPLE IRA is Kingdom Trust Company.
- You will be unable to open a SIMPLE IRA with us under your employer's plan until we receive a fully completed and executed copy of this form and the SIMPLE IRA Employer Certification Form from your employer.

If you need assistance, call us at **1-888-973-7890**.

Certifications

I, _____, ("Employee"), hereby certify, represent and warrant to Folio Investments, Inc. as follows:

- 1. I am an employee of _____ ("Employer") and am eligible to participate in the Savings Incentive Match Plan for Employees ("SIMPLE" or "Plan") adopted by Employer.
- 2. I understand that Employer is solely and exclusively responsible for the operation and monitoring of the Plan and for ensuring that Employees participating in the Plan, including myself, comply with the terms and conditions of the Plan, including, but not limited to, applicable restrictions and limitations on the nature and amount of contributions that can be made to my SIMPLE IRA. To assist Employer with fulfilling these responsibilities, Folio, upon Employer's request, will provide Employer with electronic access to my SIMPLE IRA maintained by Folio. By opening a SIMPLE IRA with Folio and signing this SIMPLE IRA Employee Certification Form, I hereby consent to Folio providing Employer with such access to my SIMPLE IRA.
- 3. I agree to indemnify and hold Folio harmless, including Folio's directors, officers, employees and agents from and against any and all losses, costs, damages and expenses (including reasonable attorney's fees) arising out of or related to my failure to comply with the certifications contained in this SIMPLE IRA Employee Certification Form.
- 4. I understand that only my Employer may make contributions to my SIMPLE IRA in the form of Employee Salary Reduction Contributions, Employer Matching Contributions, or Non-Elective Contributions, as outlined in the terms and conditions of the Plan, and that I am not permitted to make direct contributions to my SIMPLE IRA. I represent and warrant to Folio that I will not make or attempt to make any direct contributions to my SIMPLE IRA.

CERTIFIED TO FOLIO INVESTMENTS, INC.

Print Employee Name	First Name	Middle Initial	Last Name
Employee Signature	X		Date (mm/dd/yyyy) / /