

FINRA Member Approval Form

Complete this form if you, your spouse, or any other immediate family members, including parents, in-laws, and siblings that are dependents, are employed by or are associated with the Financial Industry Regulatory Agency (FINRA) or an Exchange Member Firm.

Instructions

1. Request that your employer's Compliance Officer complete the Compliance Officer Statement.
2. Send us both the completed Account Owner Statement and the FINRA Compliance Officer Statement:

Scan and Email

support@folioinstitutional.com

Fax

703-649-6288

U.S. Mail

Folio Institutional

8180 Greensboro Drive, 8th Floor

McLean, VA 22102

Important

- Your account will be restricted until we receive this form completed by you and your employer's compliance officer.

If you need assistance, call us at **1-888-485-3456**.

Account Owner Statement

PART 1: Personal Information

Personal Information	First Name	Middle Initial	Last Name	
	Brokerage Account Username			
	Employer Name		Employer Phone Number () -	
	Employer Street Address (No PO Boxes)			
	City		State	Zip Code

PART 2: Account Information

Provide the following information for the account(s) you are opening. List all the account numbers under your member profile below. Your alphanumeric account number is located next to the account name on your **Accounts** page, after logging in to our website.

Account Number	Account Type

FINRA Compliance Officer Statement

Compliance Officer must fill out this form.

An employee of your organization is requesting permission to open a brokerage account at Folio Institutional. The employee's access to this account is restricted pending your approval. Instead of providing duplicate account documents to employers, we grant you online access to view your employee's account statements, trade confirmations and other account details such as account holdings and transaction history.

Select one of the options below:

Option 1: The Employee of our firm, as specified in the Account Owner Statement, is authorized to establish the brokerage account with Folio Institutional. In accordance with the requirements of FINRA Conduct Rule 3050, I will not require online access to account information for this employer. The employee's account restriction will be lifted without granting me online access to view the account, and I will not have the ability to view copies of account statements or trade confirmations electronically. Skip to Part 4.

Option 2: The Employee of our firm, as specified in the Account Owner Statement, is authorized to establish the brokerage account with Folio Institutional. In accordance with the requirements of FINRA Conduct Rule 3050, I will require online access to account information for this employer. The employee's account restriction will be lifted and I will be granted online access to view the account. Complete Part 3 and 4.

Option 3: The Employee of our firm, as specified in the Account Owner Statement, is not authorized to establish the brokerage account with Folio Institutional. I deny the employee's request to open this account. This account will remain restricted until the employee or their advisor closes this account. Skip to Part 4.

PART 3: Approve Account Opening With Access

We will lift the restriction on the employee's account, and grant you online access to view their account details once you are a user of our website. We will grant you limited access to view account statements, trade confirmations and other account details such as activity, holdings, and balances online.

1. If you are already a user of our website, enter your Username and Date of Birth below (once you have entered this information go to Part 4):

Username	Date of Birth (mm/dd/yyyy) / /
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2. If you are not a user of our website, please fill out all of the following information. Once completed, we will create a web site membership in your name and grant you access to this client's account. This membership will not be a functioning brokerage account.

Provide 3 unique choices for your username:

(8-12 characters, not case sensitive, and cannot be changed once set up)

1.	2.	3.
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We will notify you once your account has been created and we have granted you access to the account.

* **Note:** We strongly urge you to change your password after you log into our website. You can change your password from your **Settings** page by selecting the **Change** link next to Password.

Compliance Officer Information	First Name	Middle Initial	Last Name	Date of Birth (mm/dd/yyyy) / /
	Employer Name		Employer Street Address (No P.O. Boxes)	
	City		State	Zip Code
	Secret Question		Secret Answer	

* **Note:** If you forget your password, we will ask you to type in the exact answer to your Secret Question.

PART 4: Compliance Officer Signature

Compliance Officer Information	Signature X	Date (mm/dd/yyyy) / /
	Print Name	Title
	Phone Number () -	Email Address