



# INDEPENDENT RIA OUTSIDE BUSINESS ACTIVITY DISCLOSURE

Securities regulations (Finra Rule 3270) requires PCS Registered Representatives to disclose and receive approval of all outside business activities prior to engagement. An independent RIA qualifies as an outside business activity and must be disclosed and approved by the Broker Dealer.

For the review to be completed, please fill out all information requested below as well as supply the additional documentation requested at the bottom of this disclosure form. PCS will not approve the RIA activity unless the requested information is supplied prior to, or at the time of this disclosure.

*All submissions will be reviewed, and written notice of approval or denial will be supplied to you by the Compliance Department via Docupace or e-mail.*

**PCS Representative Information:**

Name: _____	PCS Rep #: _____
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**Disclosure Type:**    New RIA    Update    Cancellation      **Effective Date:** \_\_\_\_\_

**Name of RIA:** \_\_\_\_\_

**Address of RIA:** \_\_\_\_\_

What date was the RIA approved by the SEC? \_\_\_\_\_      Registration Type:    SEC    State: \_\_\_\_\_

How many years have you been providing advisory services to clients? \_\_\_\_\_

How many advisory clients do you currently service? \_\_\_\_\_      Approx. AUM: \_\_\_\_\_

Do you hold any position other than as an IAR with this RIA?    Yes    No   If yes please provide below:  
\_\_\_\_\_

**Please select the types of services provided by the RIA:**

<input type="checkbox"/> Financial Planning	<input type="checkbox"/> Investment Management	<input type="checkbox"/> SMA (Separately Managed Accounts)
<input type="checkbox"/> TPAM (Third Party Asset Management)	<input type="checkbox"/> Model Portfolios	<input type="checkbox"/> Portfolio Management Discretion
<input type="checkbox"/> Other: _____		

**Compensation (Select all that apply):**

Advisory Fees (AUM)       Advisory Fees (Hourly Rate)       Salary       Other: \_\_\_\_\_

<b>Number of hours/month:</b>	<b>Number during trading hours:</b>	<b>Email address used for activity:</b>

➤ Is there check-writing, trading authority, custody, or control authority with your role/duties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Are you the registered representative on any brokerage side investment accounts for the RIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Does the firm use a DBA (Marketing name) for your RIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Do you understand that you may not ask your clients, other individuals, or businesses to invest in your business without prior written approval from PCS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Website URL: _____	
➤ Are you an owner of this RIA? If so, please provide ownership level: _____ %	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Do you intend to solicit other ownership or raise capital for this entity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Are you subject to any formal or informal agreement or arrangement requiring you to turn over or share securities commissions to this business?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Will the activity of your RIA interfere or compromise your responsibilities to PCS or broker dealer side customers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Could the RIA activity listed above be viewed by customers or the public as part of PCS business?	<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Have you received any customer complaints related to your RIA business?	<input type="checkbox"/> Yes <input type="checkbox"/> No

