

Commodity Futures Trading Commission Identification of "Special Accounts"

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For Administrative Use Only			
Trader Code:	Firm Code:		

NOTICE: Failure to file a report required by the Commodity Exchange Act and the regulations thereunder, or the filing of a false or fraudulent report, may be a basis for administrative action under 7 U.S.C. Section 9, and may be punishable by fine or imprisonment, or both, under 7 U.S.C. Section 13 or 18 U.S.C. Section 1001.

INSTRUCTIONS TO FUTURES COMMISSION MERCHANTS, CLEARING MEMBERS, AND FOREIGN BROKERS

Assign a reporting number to each special account when it is reportable for the first time in futures or options. If an account has been assigned a number for reporting in futures (options), use the same number for reporting options (futures). Such reporting number must not be changed or assigned to any other special account without prior approval of the Commodity Futures Trading Commission. For a futures and/or option account, transmit the form to the Commission.

				PLEASE TY	PE OR PR	INT		
1. (Che	eck one of "a," "b," or "c" for the special account and give identifying information as directed below:						
ć	a.	☐ House omnibus or☐Customer omnibus account of a futures commission merchant, clearing member, or foreign broker. Report the information in "d" below for that firm. In addition, complete items 6 through 11.						
I	b.	☐ Account(s) owned and controlled by the same person or legal entity, such as a corporation or partnership (or controlled by an employee or officer of the entity). Report the information in "d" below for the person or other legal entity who owns and controls the account(s). In addition, complete items 2 and 4 through 11.						
(C.	Account(s) controlled by an advisor or legal entity who is independent of the account owner. Report the information in "obelow for the advisor or legal entity controlling the special account. In addition, complete items 3 through 11.						
d. Name: Reporting No						Reporting Number	:	
		Street:				Business Phone:		
	City: State/Country:			e/Country:		_ Zip/Post	al Code:	
		If Individual, Employer				Job Title:		
		If "b" or "c" is check	ked, is the abov	e-identified person or	legal entity re	gistered as a:		
				trading advisor nvestment advisor	☐ Yes ☐ Yes	□No □No		
		If this special accouto contact:	unt is reported i	n the name of a busine	ess, such as a	corporation, give	the name	of an officer or employee
		Name:			,	Job Title:		
			Last,	First, Middle Initial				
. I	f ite	em 1.b is checked, c	omplete the foll	owing:				
á	a.	Check as many as apply to the legal entity identified in 1.d above.						
		□Individual □Trust □ Pa		☐ Partn	ership		□Joint	
		☐Sole Proprie☐Other (Speci	•	☐Corporation		ed Liability Corpora	ation	
ŀ	b.	Principal business	or occupation:					

2.	C.	eport on an attachment all account numbers and account names included in this special account, if different than identified 1.d above.						
	d.	Report all persons or entities not identified in 1.d above who have a 10 percent or more financial interest in this special account, including limited partners, indicating with an asterisk those having discretionary trading authority with respect to thi account. If none, write "none." Use a continuation sheet, if necessary.						
		Name:						
			Last, First, Middle Initial					
		Location:	City and Otato as Causta					
			City and State or Country					
	e.	Report all persons other than those above who control the trading of accounts included in the special account. Use a continuation sheet, if necessary. If there are more than five such persons, show "multiple controllers" in the space below.						
		Name:						
			Last, First, Middle Initial					
		Location:	0"					
			City and State or County					
3.	Controlled Accounts. If you checked item 1.c, complete "a" or "b" below.							
	a.	If ten or more accounts are controlled by the advisor, of	check this box.					
	b.		If fewer than ten accounts are controlled by the advisor, on an attachment provide for each account the account number and names and locations of persons having a ten percent or more financial interest in the account.					
	NO ⁻	NOTE: Exchanges using this form may require the following information:						
		a. If ten or more accounts are controlled by the advi	sor, provide the account number and name	e of each pool controlled by				
		the advisor, and the name and location of the commodity pool operator.						
		 If fewer than ten accounts are controlled by the account of person(s) having a ten percent or maccount number, the name of the pool, and the name 	nore financial interest in the account. For co	ommodity pools, provide the				
4.			des and positions in this special account usually associated with commercial activity of the account owner in related cash dities (i.e., positions considered as hedging in futures or options)?					
	If ye	yes, list those specific futures or option markets in which the trader hedges. Use a continuation sheet, if necessary.						
5.		me, location, and business phone number of the account executive handling the account. (If account executive is in a foreign untry, list country and city.)						
		Name:	Business Phone:					
		Last, First, Middle Initial Location:						
			City and State or Country					
6.	Firm Name and Address: 7. Name (Print)							
			8. Title:					
			9. Business Phone:	10. Date:				
			11. Signature:					