



## Application for International Cross Asset Volume Incentive Program Participation

Thank you for your interest in CME Group's International Cross Asset Volume Incentive Program ("IVIP"). The IVIP enables trading arcades located outside of North America to receive discounted fees for qualified products. These incentives apply only to electronic proprietary trades conducted by qualified registered traders in accordance with CME Group policies.

For more information and a complete list of requirements for IVIP firm eligibility, please review IVIP Q&A guide on CME Group's website at <http://www.cmegroup.com/company/membership/international-incentives.html#ivip>. Please review and follow all directions contained in this application packet carefully. **Please note incomplete information will extend the application review process. Prior to submitting the application, each applicant should ensure the following:**

1. Ensure ALL questions on the Application for International Cross Asset Volume Incentive Program Participation ("Application") have been thoroughly reviewed and completely answered.
2. Ensure ALL supporting documents included on page 6, question #17 of the application are submitted.
3. Ensure the following forms are executed by authorized signors of the applicant:
  - Attestation, Authorization, and Agreement for Membership,
  - CME Group Inc. IVIP Firm Trading Attestation
  - Designated Spokesperson and Authorized Signor Acknowledgement.
4. Ensure a Non-Refundable Application Fee of \$2,000 is submitted. Checks should be made payable to CME Group Inc. For wire transfer instructions, please contact [conciergeteam@cmegroup.com](mailto:conciergeteam@cmegroup.com).
5. A scanned copy of the Application and all applicable supporting documentation can be emailed to [conciergeteam@cmegroup.com](mailto:conciergeteam@cmegroup.com) or may be sent to the following mailing address:

CME Group Inc.  
c/o Membership Concierge Team  
20 S. Wacker Drive  
Chicago, IL 60606

CME Group Inc. policies require all directors, officers, employees, consultants and agents ("Representatives") to treat as confidential and to use a reasonable degree of care to maintain the confidential nature of all information received from an applicant in conjunction with an application for member firm status on a CME Group Exchange (i.e., CME, CBOT, NYMEX and COMEX). Such confidential information may only be disclosed to CME Group representatives who have a need to know such information and who are bound by these policies or who agree to protect the confidential information from unauthorized use and disclosure. CME Group Inc. acknowledges that such confidential information may not be disclosed to any third party person or entity (except pursuant to administrative or judicial process) without the prior written consent of the applicant providing such confidential information.



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1. Organization’s Full Legal Name \_\_\_\_\_

2. Type of organization (check one)

<input type="checkbox"/>	Limited Liability Company	<input type="checkbox"/>	Private Corp.
<input type="checkbox"/>	Limited Partnership	<input type="checkbox"/>	Public Corp.
<input type="checkbox"/>	General Partnership	<input type="checkbox"/>	Other :
<input type="checkbox"/>	Proprietorship	<input type="checkbox"/>	
<input type="checkbox"/>	Organized under the laws of:	_____	

3. Date Established \_\_\_\_\_

4. Main Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_ Web Site Address \_\_\_\_\_

5. Indicate the name(s), title(s) and contact information of individuals authorized to represent the organization before the Exchange(s) and its Committees.

\_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_



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6. Please respond to the following:

Question	Yes	No
A. Has your organization or its principals ever been denied registration, or had a registration suspended, revoked, or conditioned by a governmental or regulatory authority?	<input type="checkbox"/>	<input type="checkbox"/>
B. Has your organization or its principals ever been denied membership or clearing privileges by any commodity or securities exchange/clearing organization?	<input type="checkbox"/>	<input type="checkbox"/>
C. Has any commodity exchange, securities exchange, clearing organization or other self-regulatory body ever fined, suspended, conditioned, or revoked privileges of your organization or its principals?	<input type="checkbox"/>	<input type="checkbox"/>
D. Has your organization or its principals ever been convicted, pled guilty, entered a plea of “no contest” or entered into a voluntary settlement as to any violation of any criminal or penal code?	<input type="checkbox"/>	<input type="checkbox"/>
E. Is your organization or its principals subject to any investigation or have any charges been brought by any governmental or regulatory authority or exchange/clearing organization for violation of its laws or rules?	<input type="checkbox"/>	<input type="checkbox"/>
F. Does your organization or its principals currently have any judgments, liens, attachments, or other encumbrances filed against it?	<input type="checkbox"/>	<input type="checkbox"/>

If your response is “Yes” to any of the above, please describe below and provide supporting documentation.

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7. Does your organization engage in futures and options customer business?

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8. Is your organization subject to any restrictions which would prohibit it from becoming an incentive program participant?

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9. Is your organization registered in any capacity with a regulatory agency? If so, indicate the nature and country of the registration(s), your primary regulator(s) and the regulator’s Web Site(s).

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10. List all commodity or security exchanges/clearing organizations, at which membership privileges are held or pending. Please indicate the type of membership held (e.g. clearing or non-clearing).

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11. List all CME Group Inc. membership or incentive programs held or pending. If applicable, please indicate the type of membership held (e.g. clearing or non-clearing).

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12. Describe the nature of your organization’s anticipated firm trading activity:

a. Please list CME Group products do you intend to trade:

\_\_\_\_\_

b. Please indicate whether your trading activity will utilize an automated trading system (ATS).

\_\_\_\_\_

c. Please indicate whether trading activity will be for speculative or for hedging purposes.

\_\_\_\_\_

d. Please indicate if you will day trade, carry positions overnight, or a combination.

\_\_\_\_\_

13. Complete the chart below for your organization’s firm traders.

	Number of Traders
Bona-fide Employees	_____
Owners	_____
Commodity Trading Advisors	_____
Independent Contractors	_____
<b>Total Number of Firm Traders</b>	_____

14. Indicate the CME, CBOT, NYMEX and/or COMEX clearing member(s) that will clear your organization’s firm trades and the trading account number(s).

Clearing Member	Account Number
_____	_____
_____	_____
_____	_____
_____	_____

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15. Please indicate the product lines your firm would like to participate in under the IVIP:

- Interest Rates
- FX
- Equity
- Energy
- Metals
- Agriculture

16. Indicate the name(s), title(s) and contact information of individuals authorized to act on behalf of the organization regarding this application and to contact for questions concerning the application.

Name: \_\_\_\_\_

Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

17. Please include with this application the following:

- Company Organizational Documents (e.g. Certificate of Incorporation, Memorandum of Association, Articles of Incorporation, Articles of Association, Limited Liability Company Operating Agreement, Partnership Agreement, as applicable)
- Most recent Certified Financial Statement. If a Certified Financial Statement is not available, please submit a financial statement indicating the assets, liabilities, and capital of the company or a recent tax return filing.
- A copy of a recent account statement(s) from a CME, CBOT, NYMEX and/or COMEX clearing member indicating that the organization’s account is opened and funded.
- An ownership chart detailing the organization’s ownership including percentages of ownership.
- A listing of firm traders and, as applicable, evidence of employment/independent contractor status for employee-traders or independent contractor-traders, and/or most recent capital account balance for owner-traders.



## **Application for International Cross Asset Volume Incentive Program Participation (“IVIP”)**

### **Attestation, Authorization and Agreement for Membership**

On behalf of my organization, I make this application for CME Group Inc. IVIP. I represent that my organization meets all of the requirements for IVIP participation.

I do hereby agree that, if my organization is accepted as a CME Group Inc. IVIP, it will comply with and agrees to be bound by the Bylaws, Certificate of Incorporation, Rules and Regulations of CME, CBOT and NYMEX and all amendments thereto.

I further acknowledge that my organization meets all of the requirements for IVIP as outlined in CME Group Inc.’s IVIP Questions & Answers located on CME Group Inc.’s website at <http://www.cmegroup.com/company/membership/files/InternationalCrossAssetVolumeIncentiveProgramQA.pdf>. I further acknowledge that I will abide by CME Group Inc.’s Fee Policy Bulletins located on CME Group Inc.’s website at <http://www.cmegroup.com/tools-information/fee-policy-bulletins.html> regarding Firm Trading Policies. I further represent that all current and future trading activity of my organization will conform to the requirements for such trading activity established by CME Group Inc.

I authorize CME Group Inc. to obtain information from sources that CME Group Inc. deems appropriate in order to adequately evaluate and process this application. I understand that any person or firm that obtains IVIP status by fraudulent representations or concealment, or by any material misstatement, shall be subject to suspension or expulsion pursuant to CME Group Inc. Rules and Regulations, as applicable.

I hereby consent to use by CME Group Inc. and its affiliates of proprietary data or other personal information regarding Applicant received by CME Group Inc. and its affiliates from time to time through the conduct of their businesses, including any data submitted to them to fulfill regulatory obligations, for commercial, business and marketing purposes. Without the prior consent of Applicant, CME Group Inc. and its affiliates will not reveal to non-affiliated third-parties on a non-aggregated, non-anonymized basis any of the following information that is obtained from Applicant to fulfill regulatory obligations: (i) personally identifiable information, (ii) detailed transaction data, (iii) position data, (iv) investigative materials, or (v) financial source documents, except (w) as necessary to fulfill its regulatory obligations, (x) as permitted by law, (y) as required or requested by regulatory authority or (z) pursuant to a valid court order, subpoena or equivalent legal instrument.

The Program and its terms are subject to all applicable regulatory processes and approvals, and the completion of such processes, and receipt of such approvals, are conditions precedent to the effectiveness of this Application. CME Group, Inc. shall have the right, in its sole discretion, but not the obligation, to monitor Applicant’s trading activity in the Products to ensure compliance with the terms of the Program and this Application. CME Group, Inc., reserves the right to disqualify any trade that it deems inappropriate to include in the Program from the rights and obligations of this Application.



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I attest that the information provided in this Application and the Application for International Cross Asset Volume Incentive Program Participation – Corporate Information is accurate and complete. I further acknowledge that confirming inaccurate and/or incomplete information may subject me to CME Group Inc. disciplinary action and/or penalties.

Signed and accepted by a duly authorized representative of \_\_\_\_\_.  
(Organization)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date





## Application for International Cross Asset Volume Incentive Program Participation (“IVIP”)

### CME Group Inc. IVIP Firm Trading Attestation

The trades of a CME Group Inc. International Cross Asset Volume Incentive Program (“IVIP”) firm may receive preferential fee rates – less than charged to non-member customers. Only the entity maintaining IVIP status is entitled to the preferential fees on its IVIP firm trades. The reduced fee benefit does not flow downward to 100% owned subsidiaries or to affiliates of the IVIP firm.

In order for IVIP firms to receive preferential fees on CME, CBOT, COMEX and NYMEX trades, all trading activity must be conducted in accordance with the Questions & Answers Guide for IVIPs. In addition, IVIP firm trading must meet the following requirements:

- IVIP firm and all IVIP traders must be located outside of North America.
- All trading must be done in IVIP firm trading accounts held in the name of the IVIP.
- Teams of individuals with joint P&Ls using the participant arcade must be separately registered and approved by CME as eligible for discounted rates.
- Traders under a participating arcade may receive discounted rates in accordance with the traders meeting the following requirements:
  - Have primary income coming from trading;
  - Pay a desk fee;
  - Primarily trade from the physical location operated by the IVIP firm;
  - Share risk with the IVIP Firm; and
  - Register with CME Group as Exempt Individual Traders and the participant arcade makes them available for product notices and education.

Further, IVIP trading activity must be conducted by traders that are:

- Bona-fide employees of the IVIP; or
- Independent contractors of the IVIP; or
- Bona-fide owners of the IVIP.

All IVIP traders must be assigned unique trader IDs. Those IDs and the associated IVIP trader must be appropriately registered in CME Group Inc.’s Exchange Fee System and all Globex trades (orders) must be identified with the registered ID of the trader executing the trade.

I represent that all current and future IVIP firm trading activity of my organization, an IVIP firm, receiving preferential clearing fee rates will conform to the requirements for such trading activity established by CME Group Inc.

I attest that the above information is true and correct. I further acknowledge that confirming incorrect information may subject me to CME Group Inc. disciplinary action and/or penalties.



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Signed and accepted by a duly authorized representative of my organization.

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Signature

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Print Name

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Title

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Date



## Application for International Cross Asset Volume Incentive Program Participation (“IVIP”)

### DESIGNATED SPOKESPERSON AND AUTHORIZED SIGNOR ACKNOWLEDGEMENT

CME Group Inc. requires that firms designate a representative who shall be authorized to deal with the Exchanges with respect to the membership owned or leased by the firm, as applicable and who shall be authorized to represent the International Cross Asset Volume Incentive Program (“IVIP”) firm before the Exchanges. Such authorized representative shall be responsible to the Exchanges as if such person was a member as defined by Rule 400.

IVIP Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Tax I.D. # \_\_\_\_\_

Email Address\* \_\_\_\_\_

#### Name and Signature of Officers Authorized to act on behalf of the firm:

Name (please print)	Signature	Designated Spokesperson	Authorized Signor
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\*General Correspondence will be sent electronically.