



Application for Participation in the Central Bank Incentive Program ("Program")

Chicago Mercantile Exchange Inc. ("CME"), Board of Trade of the City of Chicago, Inc. ("CBOT"), New York Mercantile Exchange, Inc. ("NYMEX") and Commodity Exchange, Inc. ("COMEX") (collectively the "Exchanges")

1. Organization's Full Legal Name ("Applicant"): _____
- Main Address _____
- City _____ State _____ Country _____ Zip Code _____
- Information of individuals to contact for questions related to the Application:
- Name _____
- Title _____ Phone Number _____
- Email Address _____

2. Current Exchange Memberships. Is Applicant currently:

A CME Member Firm?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A NYMEX Member Firm?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A CBOT Member Firm?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A COMEX Member Firm?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Specified Account Information

All trading activity under the Program must be conducted through Applicant's accounts or directly managed third party accounts on behalf of Applicant ("Specified Accounts"). Please provide all accounts that will be included in the Program, including all of the identification information set forth in Appendix A hereto. Please include a copy of a recent account statement(s) from a CME, CBOT, NYMEX and/or COMEX clearing member indicating that the organization's account(s) is/are opened and funded.



Applicant Information

Please respond to the following questions:

- | | Yes | No |
|--|--------------------------|--------------------------|
| A. Is the Applicant or any present officer or partner 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"/> |
| B. A requirement of participating in the Program is for a participant to be a non-U.S. central bank, multilateral development bank, multilateral financial institution, sub-regional bank, aid corporation group, or an international organization of central banks. Does applicant meet this requirement? | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Are there any local country laws, regulations or internal policies/procedures of the Applicant that prohibit the Applicant from participating in the Program? | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Has Applicant complied with all internal authorizations and procedures for participating in the Program? | <input type="checkbox"/> | <input type="checkbox"/> |

If NOT currently a member at a CME Group Exchange:

- | | Yes | No |
|--|--------------------------|--------------------------|
| A. Has Applicant or any present officer or partner 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 Applicant or any present officer or partner 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 the Applicant or any present officer or partner of Applicant? | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Has the Applicant or any present officer been convicted, pled guilty, entered a plea of "no contest" or entered into a voluntary settlement for 1) any felony or 2) any misdemeanor involving, arising from, or related to the purchase or sale of any commodity, security, futures contract, option or other financial instrument or involving or arising from fraud or moral turpitude? | <input type="checkbox"/> | <input type="checkbox"/> |



Attestation, Authorization and Agreement for Program Participation

By signing below, Applicant hereby submits this Application for participation in the Program and agrees to the following:

If Applicant is accepted as a Program participant, it will comply with and agrees to be bound by and subject to (i) the bylaws, certificate of incorporation, and rules and regulations of CME/CBOT/NYMEX (the "Exchanges") (including, but not limited to, the Exchanges' Fee Policy Bulletins located on CME Group Inc.'s website at www.cmegroup.com regarding firm trading policies) including all amendments thereto ("Exchange Rules"), (ii) the Program Terms and Conditions set forth in Exhibit A to this Application, and (iii) any additional requirements or qualifications that are outlined in the Program Questions & Answers located on CME Group Inc.'s website at www.cmegroup.com.

Applicant represents and warrants that the information concerning Applicant, its principals and all other information set forth in this Application (the "Information") is true, correct and complete as of the date set forth below and further acknowledges that submitting incorrect or false information may subject Applicant to the Exchanges' disciplinary action and/or penalties. Applicant further warrants that (i) all current and future Applicant trading activity receiving incentives as contemplated hereunder will conform to any and all requirements under the Program established by the Exchanges, including but not limited to those set forth in Exhibit A; (ii) there are no local laws, regulations or internal policies/procedures that prohibit or limit Applicant's participation in the Program; and (iii) Applicant has complied with all internal authorizations and procedures for participation in the Program. Applicant agrees to comply with all local anti-corruption laws, as well as the US Foreign Corrupt Practices Act, in connection with the Program.

Applicant agrees to notify CME Group Inc. in writing of any material changes with respect to the Information that take place after Applicant has submitted this Application and, if accepted into the Program, for the duration of Applicant's participation in the Program.

Applicant authorizes the Exchanges to obtain information from sources that the Exchanges deem appropriate in order to adequately evaluate and process this Application.

Signed and accepted by a duly authorized representative of _____
(Organization)

Signature

Print Name

Title

Date



EXHIBIT A Program Terms and Conditions

Upon acceptance into Program, Applicant agrees to abide by the following Terms and Conditions:

1. **Program Subject to Modification, Change and Termination.** Applicant acknowledges and agrees that the Exchanges may modify or terminate the Program, and any associated requirements and/or incentives thereunder, in the Exchanges' sole discretion for any reason whatsoever and at any time upon notice to Applicant.
2. **Accounts.** For audit and calculation/application of incentives, accounts must be disclosed to, and registered with, the Exchanges. Only trades made through the accounts set forth in the Application or such other place as designated by the Exchange (and such other future accounts that Exchanges agree to include as accounts), may be included in calculations and/or receive Program incentives as applicable. Accounts must be registered to the Applicant in the Applicant's name. Incentives earned under the Program can be extended to foreign branches, but do not flow downward to 100% owned subsidiaries of Applicant.
3. **Disqualified Trades.** The Exchanges may disqualify a trade under Program that the Exchanges determine, in their sole discretion, determine to have been entered into by the Applicant in violation of Exchange Rules.
4. **Term; Suspension; Termination.** The Program will expire on December 31, 2015, but may be renewed by the Exchanges in their sole discretion thereafter. The Exchanges may suspend Applicant or any Specified Account from participation in the Program for non-compliance with the Exchanges Rules, or the Terms and Conditions.
5. **Confidentiality.** The Exchanges recognize that confidentiality is of utmost importance within the marketplace. As an exchange, we are required by the Commodity Futures Trading Commission ("CFTC") to maintain information regarding all activities related to our business. This includes all data and or documentation in connection with trading on our markets. We acknowledge that in connection with your participation in the Program, the Exchanges may receive confidential or proprietary information relating to your business. We maintain all Program applicants' information confidentially and will not disclose to any third party except to the extent required by a valid subpoena or other order of court, law or other regulation, or to the extent required or requested by any governmental or regulatory authority with jurisdiction, or to the extent required by any information sharing agreement with or rule of any self-regulatory body with jurisdiction, provided that, in any such case, the Exchanges shall use reasonable efforts to secure confidential treatment of the information so disclosed. Additionally, the Exchanges are also subject to specific CFTC Regulations, which, unless agreed upon otherwise, prohibits the Exchanges from using for marketing purposes any proprietary data or personal information collected or received, from or on behalf of any person for the purpose of fulfilling its regulatory obligations. As such, the Exchanges shall not disclose participation in the Program publically without Participant's prior written consent.



If Not a CME Group Exchange Member

Designated Spokesperson and Authorized Signor Acknowledgement

CME Group Inc. requires that firms designate a representative who shall be authorized to deal with the CME Group with respect to the membership owned or leased by the firm, as applicable and who shall be authorized to represent the Applicant before CME Group Inc.

Firm Name _____

Address _____

City _____ State _____ Country _____ Zip Code _____

Title _____ Phone Number _____

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.*



Appendix A – Account Information

Accounts Managed Directly by Applicant:

Futures Commission Merchant (FCM):	Contact at FCM:	Phone Number:	Email:	Account Number(s):
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Accounts Managed by Third Party for Applicant:

Asset Manager Name	Contact Name	Phone Number	Email	Account Number(s):
FCM(s):	Contact at FCM:	Phone Number:	Email:	Account Number(s):
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Asset Manager Name	Contact Name	Phone Number	Email	Account Number(s):
FCM(s):	Contact at FCM:	Phone Number:	Email:	Account Number(s):
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



Accounts Managed by Third Party for Applicant (cont.):

Asset Manager Name	Contact Name	Phone Number	Email	
FCM(s):	Contact at FCM:	Phone Number:	Email:	Account Number(s):
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Asset Manager Name	Contact Name	Phone Number	Email	
FCM(s):	Contact at FCM:	Phone Number:	Email:	Account Number(s):
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Asset Manager Name	Contact Name	Phone Number	Email	
FCM(s):	Contact at FCM:	Phone Number:	Email:	Account Number(s):
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



Appendix B – Approved Traders Information

Please list at least one portfolio manager from each office (i.e. location) from which trades may originate. Optional: Applicant may register additional portfolio managers who have an interest in receiving updates on CME Group research, strategies and products and services. Please print:

Name	E-mail	Location (City, Country)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____