

**Cboe Exchange, Inc.**  
**Off-Floor Lead Market-Maker (“LMM”) Program**  
**Appointment Application**

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APPLICANT DATA		
Name of TPH Organization:		
Business Address:		
City:	State:	Zip:
Phone:	Firm CRD #:	

APPOINTED CLASS
Request to be appointed in class: _____

DESIGNEE INFORMATION	
Applicant may designate one or more individuals (Designees) who will act on behalf of the Off-Floor LMM. Please list any additional Designee(s), if any, on a separate page using the same format. All fields must be completed. Describe in detail, all industry experience as well as the relevant trading experience for each designee.	
DESIGNEE #1	
Name:	CRD #:
Title:	Business Phone:
Email:	Mobile Phone:
Experience:	

DESIGNEE #2	
Name:	CRD #:
Title:	Business Phone:
Email:	Mobile Phone:
Experience:	

DESIGNEE #3	
Name:	CRD #:
Title:	Business Phone:
Email:	Mobile Phone:
Experience:	

DESIGNEE #4	
Name:	CRD #:
Title:	Business Phone:
Email:	Mobile Phone:
Experience:	

DISPLINARY ACTION
<p>Note any disciplinary or remedial action taken against any individual or organization named in this application other than action taken pursuant to an SRO minor rule violation plan. If any disciplinary or remedial action has been taken, describe in detail the circumstances surrounding each action and identify the issuing SRO or governmental agency. Also note and describe any warnings issued to any individual or organization named in this application related to a capital or operational problem, rules of trading procedure or evaluation of market quality and identify the issuing SRO or Governmental agency.</p>

## OPERATIONAL CONSIDERATIONS

A. Describe the level of staffing which the applicant intends to have available.

B. Describe the arrangements which have been made to assure that the Off-Floor LMM is continuously operated by approved and experienced LMM designees.

## CAPITAL

Note the financial resources that the LMM Applicant proposes to commit. Provide details such as: The specific dollar amount; the name(s) of the source(s); whether or not the source(s) has any management responsibility or participates in the profits/losses of the operation and to what extent the source(s) participates in management and/or profits/losses. If the money is borrowed, note the repayment schedule. Provide any other related information that should be considered by the Exchange.

MISCELLANEOUS

Note any additional information which the applicant deems pertinent to this application.

I have carefully read the questions contained on this application and the responses that have been provided to those questions. On behalf of the Off-Floor LMM applicant organization, I represent that the responses provided and any other information provided to Cboe Options on behalf of the LMM applicant organization in connection with this application is current, accurate, and complete.

\_\_\_\_\_  
Signature of Authorized Officer, Partner or  
Managing Member of TPH

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title