

Commodity Futures Trading Commission Identification of "Special Accounts"

OMR	NΩ		.mnq

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.

			PLEA	SE TYPE OR P	RINT			
1.	Che	eck one of "a," "b," or "c" for the special account and give identifying information as directed below:						
	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.						
	b. Account(s) owned and controlled by the same person or legal entity, such as a corporation or partnership (or controlled 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 in below for the advisor or legal entity controlling the special account. In addition, complete items 3 through 11								
d.		Name:			Reporting Number:			
		Otrosoto	If Individual, Last, First, Middle		Durain and Dhanna			
					Business Phone:			
		City:		_ State/Country:		Zip/Postal Code:		
		If Individual, Employe	er		Job Title:			
	If "b" or "c" is checked, is the above-identified person or legal entity registered as a:							
			Commodity trading advisor Securities investment advis		□ No □ No			
		If this special account to contact:	nt is reported in the name of a	a business, such as	a corporation, give	he name of an officer or employee		
		Name:			Job Title:			
			Last, First, Middle Initial					
	If ite	em 1.b is checked, cor	nplete the following:					
<u>.</u> .		Check as many as apply to the legal entity identified in 1.d above.						
2.	a.				to a sala in	□ laint		
<u>?</u> .	a.	☐ Individual	☐ Trust	⊔ Par	tnership	☐ Joint		
<u>?</u> .	a.	☐ Individual ☐ Sole Proprieto			tnersnip ited Liability Corpora	<u>—</u>		

2.	C.	c. Report on an attachment all account numbers and account names included in this special account, if different than identified in 1.d above.				
d. Report all persons or entities not identified in 1.d above who have a 10 percent or more financial interest account, including limited partners, indicating with an asterisk those having discretionary trading authority account. If none, write "none." Use a continuation sheet, if necessary.						
		Name:				
				Last, F	rst, Middle Initial	
		Location:				
				City and	State or Country	
e. Report all persons other than those above who control the trading of accounts included in the special account continuation sheet, if necessary. If there are more than five such persons, show "multiple controllers" in the special account.						
		Name:		Loot E	rst, Middle Initial	
				Last, I	ist, Middle IIIItiai	
		Location:		City and	State or County	
				J., J.		
3.	Cor	ntrolled Acc	ounts. If you checked item 1.c, complete "a" or '	"b" belo	w.	
	a.	If ten or m	ore accounts are controlled by the advisor, chec	k this b	ox. 🗆	
	b.		an ten accounts are controlled by the advisor, or d locations of persons having a ten percent or m			unt the account number and
	NO.	TE: Excha	nges using this form may require the following in	nformat	ion:	
		a. If ten	or more accounts are controlled by the advisor,	provide	e the account number and name	e of each pool controlled by
	the advisor, and the name and location of the commodity pool operator.					,
		locat	ver than ten accounts are controlled by the advision(s) of person(s) having a ten percent or more unt number, the name of the pool, and the name	financi	al interest in the account. For c	ommodity pools, provide the
4.	 Are trades and positions in this special account usually associated with commercial activity of the account owner in related cash commodities (i.e., positions considered as hedging in futures or options)? ☐ Yes ☐ No If yes, list those specific futures or option markets in which the trader hedges. Use a continuation sheet, if necessary. 					ount owner in related cash
						et, if necessary.
5. Name, location, and business phone number of the account executive handling the account. (If acc				handling the account. (If accou	int executive is in a foreign	
			untry and city.)		3 · · · · · · · · · · · · · · · · · · ·	3
Name: Last, First, Middle Initial		Business Phone:				
		Last, First, Middle Initial				
		Location:				
		City and State or Country				
6.	Firm Name and Address:		7. Name (Print)			
				8.	Title:	
				0	Rusinoss Phono:	10 Date:
				9.	Business Phone:	10. Date:
				11.	Signature:	ı