

Firm Name:

Application Contact:

Title:

Telephone:

CRD #:

**I. Type of Business Activity** *(indicate all that apply)*

**MIAX Pearl Equities Member**

Equities Market Maker

Equities Order Entry Firm

Clearing Firm

Sponsored User

Self-Clearing #(s):

Clearing Arrangement with #(s):

**Trading Categories:**

Proprietary Trading

Transact Business with the Public

Other:

**II. Organizational Structure**

Limited Liability Company

Partnerships

Corporation

Other:

**III. Business and Operating Information**

Type of trading activities description:

Description of market maker, order routing and processing systems:

**Application Contract:**

Name: Title:  
Telephone: Email:

**Technical Contract:**

Name: Title:  
Telephone: Email:

**Trading Contract:**

Name: Title:  
Telephone: Email:

**IV. Miscellaneous Information**

Designated Examining Authority:

Will your firm require connectivity to MIAX Pearl Equities? Yes No

Will your firm be routing orders to MIAX Pearl Equities through another firm? Yes No

Explain:

Will your firm be doing a public business? Yes No

Will your firm receive Market Data from MIAX Pearl Equities? Yes No

Is your firm (or an affiliate) publicly traded? Symbol: Exchange: No

Encrypted electronic filings are advisable for secure personal or financial information.