## **COMMODITY FUTURES TRADING COMMISSION**

## FORM SEF

# SWAP EXECUTION FACILITY APPLICATION OR AMENDMENT TO APPLICATION FOR REGISTRATION

### **COVER SHEET**

**Tassat Derivatives LLC** 

Exact name of Applicant as specified in charter

### 22 West 21st Street, 9th Floor, New York, NY 10010

#### Address of principal executive offices

If this is an **APPLICATION** for registration, complete in full and check here.

If this is an **AMENDMENT** to an application, or to an existing order of registration, list all items that are amended and check here.

This is an application for reinstatement.

### **GENERAL INFORMATION**

1. Name under which the business of the swap execution facility is or will be conducted, if different than name specified above (include acronyms, if any):

N/A

2. If name of swap execution facility is being amended, state previous swap execution facility name:

N/A

3. Contact information, including mailing address if different than address specified above:

N/A

 Number and Street

 City
 State
 Country
 Zip Code

 Main Phone Number
 Fax

Website URL

E-mail Address

4. List of principal office(s) and address(es) where swap execution facility activities are/will be conducted:

Office	Address		
Tassat Derivatives LLC	22 West 21st Street, 9th Floor, New York, NY 10010		

- 5. If the Applicant is a successor to a previously registered swap execution facility, please complete the following:
  - a. Date of succession

November 6, 2019

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	b.	Full name and address of predecessor registrant						
		trueEX LLC						
		Name						
		22 West 21st Street, 9th Floor           Number and Street						
		New York	NY	USA	10010			
		City	State	Country	Zip Code			
		Main Phone Number	ber Website URL					
BU	SINESS	ORGANIZATION						
6.	Applica	nt is a:						
	Corporation							
	Partnership							
	Limited Liability Company							
	Other form of organization (specify)							
7.	Date of							
8.		State of incorporation or jurisdiction of organization:						
9.	The Applicant agrees and consents that the notice of any proceeding before the Commission in connection with this application may be given by sending such notice by certified mail to the person named below at the address given.							
	Ann Cresce, CCO							
	Print Name and Title							
	Tassat Derivatives LLC							
	Name of Applicant							
	22 West 21st Street, 9th Floor							
	Number and Street							
	New `	York	NY		10010			
	City		State		Zip Code			

#### SIGNATURES

10. The Applicant has duly caused this application or amendment to be signed on its behalf by the undersigned, hereunto duly authorized, this 15th day of October , 20<sup>20</sup>. The

Applicant and the undersigned represent hereby that all information contained herein is true, current, and complete. It is understood that all required items and Exhibits are considered integral parts of this Form SEF and that the submission of any amendment represents that all unamended items and Exhibits remain true, current, and complete as previously filed.

Tassat Derivatives LLC

Name of Applicant

Ann Cresa

Signature of Duly Authorized Person

Ann Cresce, CCO Print Name and Title of Signatory