

**COMMODITY FUTURES TRADING COMMISSION
FORM SEF
SWAP EXECUTION FACILITY
APPLICATION OR AMENDMENT TO APPLICATION FOR REGISTRATION**

COVER SHEET

Tradition Securities and Futures, Inc. (DBA Tradition SEF).

Exact name of Applicant as specified in charter:

255 Greenwich Street, 4th floor, New York, New York, 10007

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

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):

Tradition SEF, Inc.

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

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

Number and Street

City

State

Country

Zip Code

212 791 4500

Main Phone Number

Fax

www.traditionsef.com

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
<u>New York, NY</u>	<u>255 Greenwich Street, 4th floor, 10005</u>
<u>New York, NY</u>	<u>32 Old Slip, 34th floor, 10007</u>
<u>Stamford, CT</u>	<u>680 Washington Boulevard, 06901</u>

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

a. Date of succession

n/a

b. Full name and address of predecessor registrant

Name _____

Number and Street _____

City State Country Zip Code _____

Main Phone Number _____ Website URL _____

BUSINESS ORGANIZATION

6. Applicant is a:

Corporation

Partnership

Limited Liability Company

Other form of organization (specify)

7. Date of incorporation or formation:

March 15, 1996

8. State of incorporation or jurisdiction of organization:

Delaware

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.

Eric Earnhardt – Chief Compliance Officer
Print Name and Title

Tradition SEF, Inc.
Name of Applicant

255 Greenwich Street, 4th floor
Number and Street

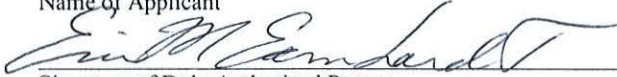
New York, NY 10005
City State Zip Code

SIGNATURES

10. The Applicant has duly caused this application or amendment to be signed on its behalf by the undersigned, hereunto duly authorized, this 9th day of September, 20 13. 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.

Tradition SEF, Inc.

Name of Applicant



Signature of Duly Authorized Person

Eric Earnhardt, Chief Compliance Officer

Print Name and Title of Signatory
