## COMMODITY FUTURES TRADING COMMISSION

## FORM DCM

## CONTRACT MARKET APPLICATION OR AMENDMENT TO APPLICATION FOR DESIGNATION

## **COVER SHEET**

NΑ	SDAQ Futures, Inc.						
	Exa	ct name of Applican	as specified in chart	er	***************************************		
19	00 Market Street, Ph	iladephia, PA	19103				
		Address of principa	l executive offices				
	If this is an APPLICATION	for designation, comp	lete in full and check l	nere.			
and	If this is an AMENDMENT to check here.	o an application, or to	an existing designation	n, list all items that are ar	mended		
GENI	ERAL INFORMATION						
1.	Name under which the business of the designated contract market is or will be conducted, if different than name specified above (include acronyms, if any):  NASDAQ Futures, Inc. or "NQF"						
2.	If name of designated contract market is being amended, state previous designated contract market name:						
3.	Contact information, including mailing address if different than address specified above:						
	Number and Street						
	City	State	Country	Zip Code			
	+1 215 496 5550	State	County	Zip Code			
	Main Phone number	Fa	X				
	http://www.nasdaqtrader.com/Micro.aspx?id=nasdaqfuturesNQF						
	Website URL						

4.	List	t of principal off	ice(s) and address(es)	where designated cont	tract market activities are/will be conducted:			
Office Main			Address 1900 Marke	Address 1900 Market Street, Philadelphia, PA 19103				
5.	If Applicant is a successor to a previously designated contract market, please complete the following:							
	a. Date of succession							
	b.	Full name and						
		Name						
		City	State	Country	Zip Code			
		Main Phone N		ebsite URL				
6.	App	olicant is a:						
	Corporation							
П	☐ Partnership ☐ Limited Liability Company							
_	Other form of organization (specify) 01/01/2014							
7. 8.		Date of incorporation or formation: 0170172014  State of incorporation or jurisdiction of organization: Delaware						
9.	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.							
Wa	Walt Smith, Vice President							
Print	Name	and Title						
NA	SD	AQ Future	s, Inc.					
Name of Applicant								
190	00 <b>N</b>	/larket Stre	eet					
Numl	ber an	d Street						

City	у	State	Zip Code
SIG	GNATURES		
10.	The Applicant has duly caused this are hereunto duly authorized, this Applicant and the undersigned represe complete. It is understood that all req DCM and that the submission of any true, current, and complete as previous	ent hereby that all information conta juired items and Exhibits are considerated amendment represents that all unaments	, 20 14. The ained herein is true, current, and ered integral parts of this Form
NASDA	DAQ Futures, Inc.		
	ne of Applicant		
Signa	nature of Dury Authorized Person		
Walt S	Smith, Vice President		
Print	nt Name and Title of Signatory		

PA

19103

Philadelphia