

RMT Email Notification Authorization

RMT Email Notification Authorization

Before filling out this form, users must request access to the Risk Management Tool (“RMT”) via the RMT User Request and Authorization form (available here: https://www.nyse.com/publicdocs/nyse/markets/nyse/rmt_user_request_form.pdf). By filing out this form, the user firm set forth below (“Firm”) has requested that certain individuals or entities receive RMT email notifications as set forth below. In doing so, Firm acknowledges and agrees that (1) New York Stock Exchange, NYSE Arca, NYSE American and any affiliates thereof (collectively, the “Exchange”) are not responsible or liable for any delay or interruption of email notifications, or omissions or inaccuracies in any RMT email notification, (2) Firm authorizes the Exchange, to provide on behalf of the Firm, RMT email notifications to the individuals or entities listed below (each a “RMT Email Recipient”), (3) Firm must immediately notify crs@nyse.com if a RMT Email Recipient has left the firm or is no longer authorized to receive RMT email notifications, and (4) Firm is responsible for any acts of such RMT Email Recipient.

General Information

Firm Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ CRD #: _____

RMT Email Recipient (Maximum of 5)

First/Last Name: _____

Email Address: _____

Choose Market Center(s): _____ By default, all IDs are assigned. If only specific IDs are required, please specify.

| | |
|--|--|
| <input type="checkbox"/> NYSE Firm Level Notifications* | <input type="checkbox"/> Specific Risk Groups: _____ |
| <input type="checkbox"/> NYSE Arca Firm Level Notifications* | <input type="checkbox"/> Specific ETP IDs: _____ |
| <input type="checkbox"/> NYSE American Firm Level Notifications* | <input type="checkbox"/> Specific MPIDs: _____ |

RMT Email Recipient

First/Last Name: _____

Email Address: _____

Choose Market Center(s): _____ By default, all IDs are assigned. If only specific IDs are required, please specify.

| | |
|--|--|
| <input type="checkbox"/> NYSE Firm Level Notifications* | <input type="checkbox"/> Specific Risk Groups: _____ |
| <input type="checkbox"/> NYSE Arca Firm Level Notifications* | <input type="checkbox"/> Specific ETP IDs: _____ |
| <input type="checkbox"/> NYSE American Firm Level Notifications* | <input type="checkbox"/> Specific MPIDs: _____ |

RMT Email Notification Contacts and Authorization (Continued)

RMT Email Recipient

First/Last Name: _____

Email Address: _____

Choose Market Center(s):

By default, all IDs are assigned. If only specific IDs are required, please specify.

NYSE Firm Level Notifications*

Specific Risk Groups: _____

NYSE Arca Firm Level Notifications*

Specific ETP IDs: _____

NYSE American Firm Level Notifications*

Specific MPIDs: _____

RMT Email Recipient

First/Last Name: _____

Email Address: _____

Choose Market Center(s):

By default, all IDs are assigned. If only specific IDs are required, please specify.

NYSE Firm Level Notifications*

Specific Risk Groups: _____

NYSE Arca Firm Level Notifications*

Specific ETP IDs: _____

NYSE American Firm Level Notifications*

Specific MPIDs: _____

Authorization and Acceptance

By (Signature) _____

Name: _____

Title: _____

Phone: _____

Email Address: _____

Date: _____

* Firm Level Notifications will include ALL NYSE Risk Groups, ALL NYSE ARCA ETP IDs and ALL NYSE American MPIDs for the Firm.

Completed RMT Email Notification forms should be returned via email to: crs@nyse.com