
DEA CLIENT DUE DILIGENCE QUESTIONNAIRE

In order for us to meet our obligations under the revised EU Markets in Financial Instruments Directive (MiFID II) as a provider of direct electronic access (DEA) services, please answer the following questions and arrange for this questionnaire to be signed by an authorised signatory of your company.

Please note that we may ask for further information in relation to any of the answers you have provided below. Please also note that we may conduct a periodic risk-based assessment of the adequacy of your systems and controls on an annual basis or at such other frequency as we determine, and we may require further information from you at the time of such assessment.

An electronic version of this questionnaire is available on our website at www.marex.com/about-us/regulation

COMPANY INFORMATION

1. Full legal name

2. Legal Entity Identifier (*or equivalent*)

JURISDICTION

3. Location

AUTHORISATION STATUS

4. What is your legal status regarding access to European trading venues under MiFID II? Authorised Exempt
 Other

If exempt or other, please provide details:

GOVERNANCE & RISK CONTROLS

5. Do you have in place an effective overall governance and decision-making framework, which includes the monitoring of your DEA trading and separation of tasks and responsibilities between trading desks and support functions? Yes No

6. Are the employees/traders who will execute trades using our DEA services appropriately qualified, competent, and authorised to trade on your behalf? Yes No

7. Do you have a sufficient number of staff with the necessary skills to manage your DEA trading activities? Yes No

8. Do your staff have sufficient technical knowledge of the trading systems that you use when accessing our DEA services, including monitoring and testing procedures? Yes No

9. Does your company have knowledge of and comply with applicable market rules and other applicable law and regulations relating to DEA? Yes No

10. Has your company had any disciplinary actions brought by regulators or by trading venues against you within the last 5 years which relate to the trading activity you proposed to conduct using our DEA services? Yes No

If yes, please provide details:

11. Please describe the following in relation to your intended use of our DEA services:

- The asset classes you will trade.
- The types of trading strategies you will use.
- Any automated investment or execution strategies you will use.
- Your level of expected trading.

12. Will you be a “market maker” for the purposes of MIFID II¹? Yes No

13. Do you intend to participate in any form of exchange liquidity or rebate programmes? Yes No

If yes, please provide details:

14. Will you be a member of the exchange(s) to which we give you DEA access? Yes No

15. Will you be a clearing member in relation to any CCP involved in our provision of DEA services to you? Yes No

16. Please describe the operational setup and trading systems that you will use when accessing our DEA services:

¹ Article 4(7) MIFID II defines a “market maker” as a person who holds himself out on the financial markets on a continuous basis as being willing to deal on own account by buying and selling financial instruments against that person’s proprietary capital at prices defined by that person.

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17. Do you have pre-trade risk controls that you will apply to your trading strategies employed through our DEA services? Yes No

If yes, please provide details.

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18. When possible, a self-match prevention (SMP) control will be enforced at either exchange or trading platform level. If you require SMP not to be enabled, please provide details as to why:

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19. What action will you take in the event position or credit limits are exceeded?

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20. Please outline how real-time monitoring of the DEA activity is conducted:

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21. Do you have appropriate allocation of responsibility within your company for dealing with actions and errors that may arise when using our DEA services? Yes No

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22. Do you have systems and procedures in place for market abuse and disorderly conduct? Yes No

If so, please provide details on what market abuse scenarios you are monitoring for and the escalation procedure

CLIENTS PROVIDING DEA SERVICES TO THEIR CLIENTS (SUB-DELEGATION)

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23. Are you providing Sub-Delegation? Yes No

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24. Do you comply with the requirements outlined in Article 22(3) of RTS 6? RTS6 can be found here: [MiFID II RTS6](#) Yes No

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25. Do you carry out an annual due diligence assessment (as per Article 23 of RTS 6)? Yes No

26. Are you using a due diligence framework for your DEA clients which covers substantively the same topics as this questionnaire?

Yes No

CONTACT DETAILS

27. Please provide details of your compliance contact

Email:

Phone:

28. Please provide details of your risk contact

Email:

Phone:

Please sign below to certify that all the answers provided by you in this questionnaire are true and complete to the best of your knowledge.

Signature.....

Name.....

Date.....

INTERNAL MAREX USE ONLY

Compliance Review:

Name:

Date:

Risk Review:

Name:

Date