## FORM 21-101F4 CESSATION OF OPERATIONS REPORT FOR ALTERNATIVE TRADING SYSTEM

1.	Identification:						
A.	ame of alternative trading system (if sole proprietor, last, first and middle name):						
B.	ne(s) under which business is conducted, if different from item 1A:						
2.	Date alternative trading system proposes to cease carrying on business as an ATS:						
3.	essation of business was involuntary, date alternative trading system has ceased to carry on ness as an ATS:						
4.	Please check the appropriate box:						
	<ul> <li>□ the ATS intends to carry on business as an exchange and has filed Form 21-101F1.</li> <li>□ the ATS intends to cease to carry on business.</li> <li>□ the ATS intends to become a member of an exchange.</li> </ul>						
	IE FILER CONSENTS TO HAVING THE INFORMATION ON THIS FORM AND ATTACHED CHIBITS PUBLICLY AVAILABLE.						
EXHIBITS							
File all Exhibits with the Cessation of Operations Report. For each exhibit, include the name of the ATS, the date of filing of the exhibit and the date as of which the information is accurate (if different from the date of the filing). If any Exhibit required is inapplicable, a statement to that effect shall be furnished instead of such Exhibit.							
Exhibit	<b>A</b> The reasons for the alternative trading system ceasing to carry on business as an ATS.						
Exhibit	<b>B</b> A list of each of the securities the alternative trading system trades.						
Exhibit	The amount of funds and securities, if any, held for subscribers by the alternative trading system, or another person or company retained by the alternative trading system to hold funds and securities for subscribers and the procedures in place to transfer or to return all funds and securities to subscribers.						

## CERTIFICATE OF ALTERNATIVE TRADING SYSTEM

The undersigned certifies that the information given in this report is true and correct.							
DATED at	this	day of		20			
(Name of alternative tr	ading system)		-				
(Name of director, office	cer or partner - plea	se type or print)	_				
(Signature of director,	officer or partner)		-				
(Official capacity - plea	ase type or print)		_				