City of Los Angeles Responsible Banking Investment Monitoring Program For Investment Banks

Investment banks providing City investment banking services or seeking City investment banking business must complete and submit this form no later than July 1st of each year to the City Administrative Officer to comply with Chapter 5.1, Section 20.95.1 of the Los Angeles Administrative Code.

Co	ntact	Info	rma	tion:
CUI	ILALI	. HHC	ппа	HOII.

Academy Securities					
Name of Financial Institution					
140 E 45th Street, 5th FI	New York	NY	10017		
Street Address	City	State	Zip Code		
Michael Boyd, CCO					
Contact Person Name and Title					
646-736-3995		mysecurities.com			
Telephone No.	Email Address				
Please answer the following quantum please and the following quant	uestions for the preceding calen	ndar year.			
 Did your firm make r Yes No ✓ If yes 	monetary donations to charitab , please complete the attached	le programs wi form.	thin the City limits?		
2. Did your firm provide Yes No ✓	Did your firm provide any scholarship awards to residents of the City of Los Angeles?				
a. How many b. What was	/ scholarships were awarded? _ the total value of the awarded s	scholarships?			
designated as "wome	internal policies regarding utiliz n owned," "minority owned," o , please provide a copy of your p	r "disabled" bu	ntractors which are siness enterprises?		
CERTIF	ICATION UNDER PENALTY O	R PERJURY			
form and the responses contain have provided full and comple	ry that I have read and understained in the form and on all the te answers to each question, and accurate to the best of my known	attachments. I	further certify that I		
Michael Boyd, CCO	1000416	RI	06/14/19		
Print Name, Title	Signature		Date		

PLEASE SEND THE ORIGINAL SIGNED FORM TO THE ADDRESS BELOW AND EMAIL A COPY TO CAO.DEBT@LACITY.ORG.

Office of the City Administrative Officer 200 North Main St. Room 1500 Los Angeles, CA 90012 Attention: Debt Management Group

CITY ADMINISTRATIVE OFFICE