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.

Contact Information:

Jefferies LLC

| Name | of Financial Institution | | | | |
|------------------------------------|--|---------------------|-----------|----------------------|--|
| 11100 Santa Monica Blvd., Floor 12 | | Los Angeles | CA | 90025 | |
| Street Address | | City | State | Zip Code | |
| John (| Gust, Senior Vice President | | | | |
| Conta | act Person Name and Title | | | | |
| 310-575-5207 | | jgust@ | jefferies | .com | |
| Telep | hone No. | Email A | Address | | |
| | | | | | |
| SOCI | AL RESPONSIBILITY | | | | |
| Pleas | e answer the following questions | for the preceding | calendar | year. | |
| 1. | Did your firm make monetary donations to charitable programs within the City limits? | | | | |
| | Yes No | | | | |
| | If yes, please complete the attached form, labeled at Exhibit 1. | | | | |
| 2. | Did your firm provide any school Angeles? | plarship awards to | residents | s of the City of Los | |
| | Yes No | | | | |
| | a. How many scholarshb. What was the total v | | | rships? | |
| 3. | Does your firm have internal which are designated as "wo business enterprises? Yes | men owned," "mir | | | |
| | If ves. please provide a copy of | vour policies, labe | led as E | xhibit 2 | |

CONSUMER PROTECTION

| 1. | ls the financial institution currently in compliance with all applicable consur financial protection laws? | | | |
|----|---|--|--|--|
| | Yes No | | | |
| | If no, please briefly explain: | | | |
| 2. | es the financial institution have policies to prevent the use of illegal predatory sumer adverse sales goals as the bases for evaluation, promotion, sipline or compensation of employees? | | | |
| | Yes No X | | | |
| | Our wealth management department prohibits sales goals If no, please briefly explain: | | | |
| | | | | |
| 3. | Does the financial institution encourage and maintain whistleblower protection policies for its employees and/or customers to report suspected illegal practices, including predatory sales goals? | | | |
| | Yes X No | | | |
| | If no, please briefly explain: | | | |
| 4. | In the last five years, has the financial institution been subject to ar disciplinary actions such as fines, suspensions, or settlements, undertaken to the Securities and Exchange Commission, the Consumer Financial Protection Bureau, the Municipal Securities Regulation Board, the Financial Industrial Regulatory Agency and/or any State regulatory agency? | | | |
| | Yes No | | | |
| 5. | If the answer to question no. 4 is yes, please provide in separate attachment labeled Exhibit 3, what the violation(s) are, the reason for the enforcement action, what government agencies are involved, the date of the enforcement action, what is the current status, and how were or will the issues be resolved? | | | |
| | See Exhibit 3 | | | |
| | | | | |

CERTIFICATION UNDER PENALTY OF PERJURY (*)

I certify under penalty of perjury that I have read and understand the questions contained in this form and the responses contained in the form and on all the attachments. I further certify that I have provided full and complete answers to each question, and that all information provided in response to this form is true and accurate to the best of my knowledge and belief.

| Kym Arnone | Managing Director | Kyns. arone | 6/21/2022 |
|------------|-------------------|-------------|-----------|
| Print Name | Title | Signature | Date |

(*) Signature must be that of the Head of Public Finance or equivalent corporate executive.

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

Attachment for Question #1 - Responsible Banking Investment Monitoring Program for Investment Banks

| Name of Charitable Organization | Туре | Amount (\$) |
|---------------------------------|----------------------------|-------------|
| A New Way of Life | Womens / Criminal Advocacy | 2,500.00 |
| UNICEF USA | Humanitarian / Aid | 5,000.00 |
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In the normal course of buiness, we are involved in a number of judicial and regulatory matters arising out of the conduct of our business. Based on currently available information, we do not believe that any matter will have a material adverse effect on our financial condition nor has any prior matter had a material adverse effect on our financial condition or otherwise resulted in significant reputational or franchise risk. Additionally, our BrokerCheck Report, which contains any settled regulatory matters, may be obtained by following the links at: https://brokercheck.finra.org/firm/summary/2347. Please contact us with any questions about our BrokerCheck Report.