FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Drin	nary Business Name: TOWER SQUARE SECU	DITIES INC		CRD Number: 83
	er-Than-Annual Amendment - All Sections	KITIES, INC.		Rev. 10/201
	2013 9:44:01 PM			NGV. 10/2017
0, 0,	2010 0.44.01 1			
W	ARNING: Complete this form truthfully. False s keep this form updated by filing perio			ation of your registration, or criminal prosecution. You must
lten	n 1 Identifying Information			
Re	sponses to this Item tell us who you are, wher	e you are doing business, an	nd how we can contact you.	
A.	Your full legal name (if you are a sole proprie TOWER SQUARE SECURITIES, INC.	tor, your last, first, and middl	le names):	
B.	Name under which you primarily conduct you TOWER SQUARE SECURITIES, INC.	ır advisory business, if differe	ent from Item 1.A.:	
	List on Section 1.B. of Schedule D any additi	onal names under which you	ı conduct your advisory business.	
C.	If this filing is reporting a change in your legal pour legal name or ☐ your primary busined	, , ,	business name (Item 1.B.), enter the nev	w name and specify whether the name change is of
D.	(1) If you are registered with the SEC as an i(2) If you report to the SEC as an exempt rep	·		
E.	If you have a number ("CRD Number") assig	ned by the <i>FINRA's CRD</i> sys	stem or by the IARD system, your <i>CRD</i> nur	mber: 833
	If your firm does not have a CRD number, sk	ip this Item 1.E. Do not provi	ide the CRD number of one of your officer	rs, employees, or affiliates.
F.	Principal Office and Place of Business			
	(1) Address (do not use a P.O. Box):Number and Street 1:1095 AVENUE OF THE AMERICAS		Number and Street 2:	
	City: NEW YORK	State: New York	Country: United States	ZIP+4/Postal Code: 10036
	If this address is a private residence, ch	eck this box:		
	registration, or are registered, with one of	or more state securities author lying for SEC registration, if y	prities, you must list all of your offices in the	ou conduct investment advisory business. If you are applying for state or states to which you are applying for registration or with you are reporting to the SEC as an exempt reporting adviser, list
	(2) Days of week that you normally conduct ⊙ Monday - Friday ○ Other:	business at your principal of	ffice and place of business:	
	Normal business hours at this location: 9:00 A.M. TO 5:00 P.M. (3) Telephone number at this location:			
	212-578-0594 (4) Facsimile number at this location: 908-552-2851			
G.	Mailing address, if different from your <i>princip</i>	al office and place of busine	ss address:	
	Number and Street 1: C/O METLIFE SECURITIES, INC.		Number and Street 2: 1095 AVENUE OF THE AMI	ERICAS
	City: NEW YORK	State: New York	Country: United States	ZIP+4/Postal Code: 10036
	If this address is a private residence, check	this box: \Box		
LJ	If you are a colo proprietor, etate your full and	sidonoo addraaa if diffarantii	rom your principal office and place of built	nose address in Itom 1 E
п.	If you are a sole proprietor, state your full res Number and Street 1:	idence address, it different fr	rom your <i>principal office and place of busi</i> Number and Street 2:	ness audiess in item 1.F
			. Tallibol and Olloot 2.	

Country:

ZIP+4/Postal Code:

City:

State:

								Yes	No
ı		Do you have one or more websit	tes?						0
		<u>-</u>	ting addresses for all o		·	through which to access other information you I to list more than one portal address. Do not p	=		
		Provide the name and contact int		-	ou are an <i>exempt reporti</i>	ing adviser, you must provide the contact inform	nation for your Chie	f	
		Name:		Oth	ner titles, if any:				
		Telephone number:		Fac	csimile number:				
		Number and Street 1:			mber and Street 2:				
			Ctata			ZIP+4/Postal Code:			
		City:	State:	Co	untry:	ZIP+4/Postal Code:			
		Electronic mail (e-mail) address	s, if Chief Compliance (Officer has one:					
ŀ		Additional Regulatory Contact Permay provide that information here	· · · · · · · · · · · · · · · · · · ·	r than the Chief Complia	nce Officer is authorized	to receive information and respond to questio	ns about this Form /	ADV, y	/ou
		Name:		Tit	les:				
		Telephone number:		Fa	csimile number:				
		Number and Street 1:			ımber and Street 2:				
			04-4			710 4/0 - 4-1 0 - 4-1			
		City:	State:	Co	ountry:	ZIP+4/Postal Code:			
		Electronic mail (e-mail) address	s, if contact person has	s one:					
								Yes	No
I		Do you maintain some or all of the principal office and place of busing the principal office and place of busing the principal of the principa		ou are required to keep	under Section 204 of the	e Advisers Act, or similar state law, somewhere	e other than your	•	0
		If "yes," complete Section 1.L. of	Schedule D.					Yes	No
ı	VI.	Are you registered with a foreign	financial regulatory au	nthority?				0	•
		Answer "no" if you are not registe complete Section 1.M. of Schedu	_	ncial regulatory authority	r, even if you have an affi	liate that is registered with a foreign financial re	egulatory authority. I	If "yes,	
ı	٧.	Are you a public reporting compa	any under Sections 12 o	or 15(d) of the Securities	s Exchange Act of 1934?				⊙
		If "yes," provide your CIK number	r (Central Index Key nu	ımber that the SEC assig	gns to each public reporti	ng company):			
								Yes	No
(Э.	Did you have \$1 billion or more in	n assets on the last day	y of your most recent fis	cal year?			0	⊙
i	⊃.	Provide your Legal Entity Identific	er if you have one:						
		A <i>legal entity identifier</i> is a unique still in development. You may no	· ·		other in the financial ma	ketplace. In the first half of 2011, the <i>legal enti</i>	<i>ty identifier</i> standar	d was	i
s	EC	FION 1.B. Other Business Names	S						
				No	o Information Filed				
s	EC1	FION 1.F. Other Offices							
	sep		r each location. If you a	are applying for SEC regi	•	which you conduct investment advisory busine ered only with the SEC, or if you are an exempt	•		
		nber and Street 1: MAIN STREET P.O. BOX 387			Number and Street	2:			
				State:	Country:	ZIP+4/Postal Code:			
	City	: STOL		State: Vermont	United States	21P+4/Postal Code: 05443			
	ا ۱ اب	J. J.		Commont	Simod States	00770			

Yes No

If this address is a private residence, check this box:			
Telephone Number: 802-453-2378	Facsimile Number: 802-453-4146		
	are applying for SEC registr		onduct investment advisory business. You must complete a the SEC, or if you are an exempt reporting adviser, list only
Number and Street 1: 504 WEST MAIN STREET		Number and Street 2:	
City: ARLINGTON		Country: United States	ZIP+4/Postal Code: 76010
If this address is a private residence, check this box:			
Telephone Number: 817-462-4230	Facsimile Number: 817-462-4250		
-	are applying for SEC registr		onduct investment advisory business. You must complete a n the SEC, or if you are an exempt reporting adviser, list only
Number and Street 1: 1750 N. WASHINGTON ST		lumber and Street 2: SUITE 112A	
City: NAPERVILLE		Country: Inited States	ZIP+4/Postal Code: 60563
NAFERVILLE	illinois C	milled States	00303
If this address is a private residence, check this box:			
Telephone Number: 630 577 4427	Facsimile Number:		
_	are applying for SEC registr		onduct investment advisory business. You must complete a n the SEC, or if you are an exempt reporting adviser, list only
Number and Street 1: 154 WEST STREET		Number and Street 2: BLDG 3-D	
	State:	Country: United States	ZIP+4/Postal Code:
CROWWELL	Connecticut	United States	06416
If this address is a private residence, check this box:			
	Facsimile Number: 860-788-2179		
	are applying for SEC registr		onduct investment advisory business. You must complete a home the SEC, or if you are an exempt reporting adviser, list only
Number and Street 1:		Number and Street 2:	
425 W. BROADWAY		#205	
City:	State:	Country:	ZIP+4/Postal Code:
	State: California		ZIP+4/Postal Code: 91204

Telephone Number: 818-547-6677	Facsimile Number:		
SECTION 1.I. Website Addresses			
List your website addresses. You must complete a s	eparate Schedule D Section 1.I. for	each website address.	
Website Address: WWW.TOWERSQUARE.COM			
SECTION 1.L. Location of Books and Records			
Complete the following information for each location Schedule D Section 1.L. for each location.	at which you keep your books and i	records, other than your <i>principal</i> o	office and place of business. You must complete a separate
Name of entity where books and records are kept: TOWER SQUARE SECURITIES, INC.			
Number and Street 1: 185 ASYLUM STREET		Number and Street 2: 18TH FLOOR	
City: HARTFORD	State: Connecticut	Country: United States	ZIP+4/Postal Code: 06103
If this address is a private residence, check this box:			
Telephone Number: 860-308-10020	Facsimile number: 860-308-3985		
This is (check one): one of your branch offices or affiliates.			
a third-party unaffiliated recordkeeper.			
C other.			
Briefly describe the books and records kept at this lo COMPLIANCE RELATED RECORDS MAY BE MAINT. TRAINING DOCUMENTATION.		CODE OF ETHICS REPORTS, SUI	RVEILLANCE REPORTS, IAR LICENSING REVIEW AND
Name of entity where books and records are kept: IRON MOUNTAIN			
Number and Street 1: 32 GEORGE STREET		Number and Street 2:	
City: BOSTON	State: Massachusetts	Country: United States	ZIP+4/Postal Code: 02119
If this address is a private residence, check this box:			
Telephone Number: (617) 445-949	Facsimile number:		
This is (check one): one of your branch offices or affiliates.			
a third-party unaffiliated recordkeeper.			
C other.			
Briefly describe the books and records kept at this lo INVESTMENT ADVISORY RECORDS	cation:		

Name of entity where books and records are kept: METLIFE			
Number and Street 1: 1095 AVE OF THE AMERICAS		Number and Street 2:	
City: NEW YORK	State: New York	Country: United States	ZIP+4/Postal Code: 10036
If this address is a private residence, check this box:			
Telephone Number: 212-578-0594	Facsimile number: 212-578-8978		
This is (check one): one of your branch offices or affiliates.			
C a third-party unaffiliated recordkeeper.			
C other.			
Briefly describe the books and records kept at this locati INVESTMENT ADVISORY	on:		
Name of entity where books and records are kept: ADVISORPORT			
Number and Street 1: 760 MOORE ROAD		Number and Street 2:	
City: KING OF PRUSSIA	State: Pennsylvania	Country: United States	ZIP+4/Postal Code: 19406
KING OF FRUSSIA	Perinsylvania	Officed States	19400
If this address is a private residence, check this box:			
Telephone Number: 610-382-7700	Facsimile number:		
This is (check one): one of your branch offices or affiliates.			
a third-party unaffiliated recordkeeper.			
C other.			
Briefly describe the books and records kept at this locati CERTAIN LIMITED RECORDS RELATING TO THE FIRM		ERVICES PROGRAM IS MAINTAINED EL	ECTRONICALLY BY ADVISORPORT
Name of entity where books and records are kept: METLIFE SECURITIES			
Number and Street 1: 300 DAVIDSON AVENUE		Number and Street 2:	
City: SOMERSET	State: New Jersey	Country: United States	ZIP+4/Postal Code: 08873
If this address is a private residence, check this box:	1		
Telephone Number: 732-893-6000	Facsimile number: 7328936539		
This is (check one): one of your branch offices or affiliates.			
a third-party unaffiliated recordkeeper.			
O other.			

Briefly describe the books and records kept at this loca BOOKS AND RECORDS RELATED TO ADVISORY BUS		PAPERWORK	
Name of entity where books and records are kept: METLIFE			
Number and Street 1: 501 BOYLSTON STREET		Number and Street 2:	
City: BOSTON	State: Massachusetts	Country: United States	ZIP+4/Postal Code: 02116
If this address is a private residence, check this box:			
Telephone Number: 617-578-2804	Facsimile number: 617-578-5454		
This is (check one): one of your branch offices or affiliates.			
$_{\hbox{\scriptsize C}}$ a third-party unaffiliated recordkeeper.			
O other.			
Briefly describe the books and records kept at this loca SALES AND ADVERTISING RECORDS.	tion:		
Name of entity where books and records are kept: METLIFE			
Number and Street 1: 500 SCHOOLHOUSE ROAD		Number and Street 2:	
City: JOHNSTOWN	State: Pennsylvania	Country: United States	ZIP+4/Postal Code: 15904
If this address is a private residence, check this box:			
Telephone Number: 814-266-0200	Facsimile number: 814-269-8078		
This is (check one): one of your branch offices or affiliates.			
$_{ m C}$ a third-party unaffiliated recordkeeper.			
O other.			
Briefly describe the books and records kept at this loca REP AND FIRM REGISTRATION FILES. CUSTOMER C			
SECTION 1.M. Registration with Foreign Financial Regu	latory Authorities		
	No Informa	ition Filed	

Item 2 SEC Registration/Reporting

Responses to this Item help us (and you) determine whether you are eligible to register with the SEC. Complete this Item 2.A. only if you are applying for SEC registration or submitting an *annual updating amendment* to your SEC registration.

A. To register (or remain registered) with the SEC, you must check **at least one** of the Items 2.A.(1) through 2.A.(12), below. If you are submitting an *annual updating amendment* to your SEC registration and you are no longer eligible to register with the SEC, check Item 2.A.(13). Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the adviser):

(1) are a large advisory firm that either:

		(b) has regulatory assets unwith the SEC;	der management of \$90 mil	illion (in U.S. dollars) or more at the time of filing its mo	st recent annual updating amendment and is registered
	(2)	are a mid-sized advisory firm are either:	n that has regulatory assets	s under management of \$25 million (in U.S. dollars) or	more but less than \$100 million (in U.S. dollars) and yo
		(a) not required to be registe	ered as an adviser with the s	state securities authority of the state where you maintair	n your <i>principal office and place of business</i> , or
		(b) not subject to examination	n by the <i>state securities aut</i>	thority of the state where you maintain your principal offi	ice and place of business;
		Click HERE for a list of si	tates in which an investmen	nt adviser, if registered, would not be subject to examina	tion by the state securities authority.
	(3)			ning (which does not regulate advisers);	
	(4)	have your principal office and	•		
	(5)	-	•	stment company registered under the Investment Comp	
	(6)		· ·	ected to be a business development company pursual st \$25 million of regulatory assets under management;	
	(7)	are a pension consultant wit	th respect to assets of plans	s having an aggregate value of at least \$200,000,000 th	nat qualifies for the exemption in rule 203A-2(a);
	(8)	are a related adviser under r your <i>principal office</i> and plac	: :	, is <i>controlled</i> by, or is under common <i>control</i> with, an ir as the registered adviser;	nvestment adviser that is registered with the SEC, and
		If you check this box, comple	ete Section 2.A.(8) of Sched	fule D.	
	(9)	are a newly formed adviser	relying on rule 203A-2(c) be	ecause you expect to be eligible for SEC registration wit	hin 120 days;
		If you check this box, comple	ete Section 2.A.(9) of Sched	dule D.	
	(10)	•		5 or more states and is relying on rule 203A-2(d);	
	(-)	If you check this box, comple			
	(11)) are an Internet adviser relying	, ,	adio 2.	
_	. ,	·		ohibition against registration with the SEC;	
	(12)) have received an SEC order	exempling you from the pro	onibition against registration with the SEC,	
		If you check this box, comple	, ,		
	(13)	If you check this box, complete are no longer eligible to remain	, ,		
	(13)		, ,		
nte S	ecuri	are no longer eligible to remaining a remaining and a remaining and a remaining and a remaining are remained as a remaining and a remaining a remaining are remaining and a remaining are remaining	ain registered with the SEC	empt Reporting Advisers	
a te S Ur	ecuri der st	are no longer eligible to remaining and the laws, SEC-registered advis	ain registered with the SEC and State Reporting by Execusers may be required to pro	empt Reporting Advisers Divide to state securities authorities a copy of the Form A	•
u te S Ur ar	der st	are no longer eligible to remaining and the laws, SEC-registered advised notice filings. In addition, except	ain registered with the SEC and State Reporting by Exe sers may be required to pro empt reporting advisers may	empt Reporting Advisers Divide to state securities authorities a copy of the Form A by be required to provide state securities authorities with	a copy of reports and any amendments they file with the
ute S Ur are SE	ecurion der ste calle	are no longer eligible to remaining and the second state laws, SEC-registered advised notice filings. In addition, exertists is an initial application or research.	ain registered with the SEC and State Reporting by Exessers may be required to protempt reporting advisers may be port, check the box(es) nex	empt Reporting Advisers ovide to state securities authorities a copy of the Form A by be required to provide state securities authorities with to the state(s) that you would like to receive notice of	a copy of reports and any amendments they file with the this and all subsequent filings or reports you submit to
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SECTION 2.A.(8) Related Adviser

that is registered with the SEC and your <i>principal office and place of business</i> is the same as that of the registered adviser, provide the following information:
Name of Registered Investment Adviser
CRD Number of Registered Investment Adviser
SEC Number of Registered Investment Adviser 801 -
SECTION 2.A.(9) Newly Formed Adviser
If you are relying on rule 203A-2(c), the newly formed adviser exemption from the prohibition on registration, you are required to make certain representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations. You must make both of these representations: I am not registered or required to be registered with the SEC or a <i>state securities authority</i> and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective. I undertake to withdraw from SEC registration if, on the 120th day after my registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.
SECTION 2.A.(10) Multi-State Adviser
If you are relying on rule 203A-2(d), the multi-state adviser exemption from the prohibition on registration, you are required to make certain representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations.
If you are applying for registration as an investment adviser with the SEC, you must make both of these representations:
I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state
securities authorities in those states. I undertake to withdraw from SEC registration if I file an amendment to this registration indicating that I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.
If you are submitting your annual updating amendment, you must make this representation:
Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the <i>state securities authorities</i> in those states.
SECTION 2.A.(12) SEC Exemptive <i>Order</i>
If you are relying upon an SEC <i>order</i> exempting you from the prohibition on registration, provide the following information:
Application Number:
803-
Date of order:
Item 3 Form of Organization
A. How are you organized?
© Corporation
Sole Proprietorship
C Limited Liability Partnership (LLP)
O Partnership
C Limited Liability Company (LLC)
Cumited Partnership (LP)
Other (specify):
If you are changing your response to this Item, see Part 1A Instruction 4.
B. In what month does your fiscal year end each year? DECEMBER
C. Under the laws of what state or country are you organized?
State Country Connecticut United States

	-	ou are a partnership, provide the name of the state or country under whose laws your partnership was formed. If you are a sole proprietor, provide the name of the state or not
		bu are changing your response to this Item, see Part 1A Instruction 4.
	n ye	a die changing your response to uns item, see i art 174 instraction 4.
Iter	n 4 Sı	rccessions Yes No
A.	Are	you, at the time of this filing, succeeding to the business of a registered investment adviser?
	If "y	es", complete Item 4.B. and Section 4 of Schedule D.
B.	Date	e of Succession: (MM/DD/YYYY)
	If yo	ou have already reported this succession on a previous Form ADV filing, do not report the succession again. Instead, check "No." See Part 1A Instruction 4.
SEC	CTION	4 Successions
		No Information Filed
•.		
		ormation About Your Advisory Business - Employees, Clients, and Compensation es to this Item help us understand your business, assist us in preparing for on-site examinations, and provide us with data we use when making regulatory policy. Part 1A
		n 5.a. provides additional guidance to newly formed advisers for completing this Item 5.
En	nploy	ees
		e organized as a sole proprietorship, include yourself as an employee in your responses to Item 5.A. and Items 5.B.(1), (2), (3), (4), and (5). If an employee performs more function, you should count that employee in each of your responses to Items 5.B.(1), (2), (3), (4), and (5).
A.	App 111	roximately how many <i>employees</i> do you have? Include full- and part-time <i>employees</i> but do not include any clerical workers.
B.	(1)	Approximately how many of the <i>employees</i> reported in 5.A. perform investment advisory functions (including research)? 189
	(2)	Approximately how many of the <i>employees</i> reported in 5.A. are registered representatives of a broker-dealer? 686
	(3)	Approximately how many of the <i>employees</i> reported in 5.A. are registered with one or more <i>state securities authorities</i> as <i>investment adviser representatives</i> ? 516
	(4)	Approximately how many of the <i>employees</i> reported in 5.A. are registered with one or more <i>state securities authorities</i> as <i>investment adviser representatives</i> for an investment adviser other than you? 12
	(5)	Approximately how many of the <i>employees</i> reported in 5.A. are licensed agents of an insurance company or agency? 328
	(6)	Approximately how many firms or other <i>persons</i> solicit advisory <i>clients</i> on your behalf?
	In y	our response to Item 5.B.(6), do not count any of your employees and count a firm only once – do not count each of the firm's employees that solicit on your behalf.
CI	ients	
In	your r	esponses to Items 5.C. and 5.D. do not include as "clients" the investors in a private fund you advise, unless you have a separate advisory relationship with those investors.
C.	(1)	To approximately how many <i>clients</i> did you provide investment advisory services during your most recently completed fiscal year?
		O 0 O 1-10 O 11-25
		© 26-100 More than 100 If more than 100, how many? (round to the nearest 100)
	(2)	Approximately what percentage of your <i>clients</i> are non- <i>United States persons</i> ? 0%

busi Inve Con	ness stme npany	oses of this Item 5.D., the category "individuals" includes es organized as sole proprietorships. The category "bus nt Company Act of 1940. Unless you provide advisory s Act of 1940, check "None" in response to Item 5.D.(1)	siness development companies" consists of services pursuant to an investment advisor (d) and do not check any of the boxes in re	of companie y contract to esponse to Ite	s that have ma an investmer em 5.D.(2)(d).	ade an electi nt company r	ion pursuan egistered u	t to section t nder the Inve	54 of the estment
(1)		at types of <i>clients</i> do you have? Indicate the approximate gory, check all that apply.	e percentage that each type of <i>client</i> compr	ises of your	total number (of <i>client</i> s. If a	i <i>Client</i> fits ii	nto more tha	n one
			None	<u>Up to 10%</u>	<u>11-25%</u>	<u>26-50%</u>	<u>51-75%</u>	<u>76-99%</u>	<u>100%</u>
	(a)	Individuals (other than high net worth individuals)	0	0	0	0	0	⊙	0
	(b)	High net worth individuals	o	•	0	0	0	0	0
	(c)	Banking or thrift institutions	•	0	0	0	0	0	0
	(d)	Investment companies	•	0	0	0	0	0	0
	(e)	Business development companies	•	0	0	0	0	0	0
	(f)	Pooled investment vehicles (other than investment co	mpanies) .	0	0	0	0	0	0
	(g)	Pension and profit sharing plans (but not the plan part	ticipants)	•	0	0	0	0	0
	(h)	Charitable organizations	o	•	0	0	0	0	0
	(i)	Corporations or other businesses not listed above	c	•	0	0	0	0	0
	(j)	State or municipal government entities	•	0	0	0	0	0	0
	(k)	Other investment advisers	•	0	0	0	0	0	0
	(I)	Insurance companies	•	0	0	0	0	0	0
	(m)	Other: MISC	o	•	o	o	0	o	0
(2)		cate the approximate amount of your regulatory assets under than one category, check all that apply.		oelow) attribu	utable to each	of the follow	ring type of	client. If a cli	<i>ient</i> fits
	(0)	Individuals (ather then high not worth individuals)		<u>None</u>	<u>Up to 25%</u>	<u>Up to 50</u>	<u>Ur</u>	to 75%	<u>>75%</u>
	(a)	Individuals (other than high net worth individuals)		0	0	0		0	•
	(b)	High net worth individuals		0	⊙	0		0	0
	(c)	Banking or thrift institutions		•	0	0		0	0
	(d)	Investment companies		•	0	0		0	0
	(e)	Business development companies		•	0	0		0	0
	(f)	Pooled investment vehicles (other than investment co		⊙	0	0		0	0
	(g)	Pension and profit sharing plans (but not the plan part	ticipants)	0	•	0		0	0
	(h)	Charitable organizations		0	⊙	0		0	0
	(i)	Corporations or other businesses not listed above		0	•	0		0	0
	(j)	State or municipal government entities		•	0	0		0	0
	(k)	Other investment advisers		•	0	0		0	0
	(I)	Insurance companies		•	0	0		0	0
	(m)	Other: MISC		0	•	0		О	0
Compen	satio	n Arrangements							
E. You	(1) (2) (3) (4) (5) (6) (7)	A percentage of assets under your management Hourly charges Subscription fees (for a newsletter or periodical) Fixed fees (other than subscription fees) Commissions Performance-based fees Other (specify):	check all that apply):						
Item 5 Inf	orma	tion About Your Advisory Business - Regulatory Asse	ets Under Management						
		ssets Under Management							
									Yes No
, ,	•	ou provide continuous and regular supervisory or mana							O
(2)	ıt yes	, what is the amount of your regulatory assets under ma	anagement and total number of accounts? S. Dollar Amount	•	Total Numbe	r of Account	e		
	Diec			(d)	232	. or Account	-		
Discretionary: (a) \$ 50,221,409 Non-Discretionary: (b) \$ 249,014,902				` ,	1,897				

	Total:	(c) \$ 299,236,311 (f) 2,129
	Part 1A I	nstruction 5.b. explains how to calculate your regulatory assets under management. You must follow these instructions carefully when completing this Item.
14 E I		About Vous Address Business Address Address
	ory Activities	About Your Advisory Business - Advisory Activities
	-	of advisory services do you provide? Check all that apply.
	(1) Fin. (2) Por (3) Por Cor (4) Por (5) Por veh (6) Per (7) Sel (8) Put (9) Sec (10) Ma (11) Edu (12) Oth	ancial planning services tfolio management for individuals and/or small businesses tfolio management for investment companies (as well as "business development companies" that have made an election pursuant to section 54 of the Investment impany Act of 1940) tfolio management for pooled investment vehicles (other than investment companies) tfolio management for businesses (other than small businesses) or institutional clients (other than registered investment companies and other pooled investment icitics) insion consulting services ection of other advisers (including private fund managers) blication of periodicals or newsletters surity ratings or pricing services trutings or pricing services ucational seminars/workshops ier(specify): Item 5.G.(3) unless you provide advisory services pursuant to an investment advisory contract to an investment company registered under the Investment Company
in	Section 5.G	ncluding as a subadviser. If you check Item 5.G.(3), report the 811 or 814 number of the investment company or investment companies to which you provide advice i.(3) of Schedule D.
	0 1 - 10 11 - 25 26 - 50 51 - 100 101 - 25 251 - 50 More that (round to	0
I. If	you participa	ate in a wrap fee program, do you (check all that apply): nsor the wrap fee program?
-	· / /	as a portfolio manager for the wrap fee program?
If	you are a po	ortfolio manager for a wrap fee program, list the names of the programs and their sponsors in Section 5.I.(2) of Schedule D.
	-	ement in a wrap fee program is limited to recommending wrap fee programs to your clients, or you advise a mutual fund that is offered through a wrap fee program, either Item 5.I.(1) or 5.I.(2). Yes No
J. In	response to	Item 4.B. of Part 2A of Form ADV, do you indicate that you provide investment advice only with respect to limited types of investments?
SECTIO	ON 5.G.(3) A	dvisers to Registered Investment Companies and Business Development Companies
		No Information Filed
SECTIO	DN 5.I.(2) <i>Wra</i>	ap Fee Programs
	=	lio manager for one or more wrap fee programs, list the name of each program and its sponsor. You must complete a separate Schedule D Section 5.I.(2) for each for which you are a portfolio manager.
	of <i>Wrap Fe</i> TH MANAGI	e Program EMENT SERVICES - ADVISOR SELECT

Name of Sponsor	
TOWER SQUARE SECURITIES, INC.	
Item 6 Other Business Activities	
In this Item, we request information about your firm's other business activities.	
A. You are actively engaged in business as a (check all that apply):	
(1) broker-dealer (registered or unregistered) (2) registered representative of a broker-dealer	
 (2) registered representative of a broker-dealer (3) commodity pool operator or commodity trading advisor (whether registered or exempt from registration) 	
(4) futures commission merchant	
 □ (5) real estate broker, dealer, or agent ☑ (6) insurance broker or agent 	
(7) bank (including a separately identifiable department or division of a bank)	
(8) trust company (9) registered municipal advisor	
(9) registered municipal advisor (10) registered security-based swap dealer	
(11) major security-based swap participant	
(12) accountant or accounting firm (13) lawyer or law firm	
(14) other financial product salesperson (specify):	
If you angage in other business using a name that is different from the names remarked in Harras 4.4 and D. annual 1.5 Carlies C.4. (C.1.)	
If you engage in other business using a name that is different from the names reported in Items 1.A. or 1.B, complete Section 6.A. of Schedule D.	Yes No
B. (1) Are you actively engaged in any other business not listed in Item 6.A. (other than giving investment advice)?	0.0
(2) If yes, is this other business your primary business?	0 0
If "yes," describe this other business on Section 6.B.(2) of Schedule D, and if you engage in this business under a different name, provide that name.	-
	Yes No
(3) Do you sell products or provide services other than investment advice to your advisory <i>clients</i> ?	⊙ ○
If "yes," describe this other business on Section 6.B.(3) of Schedule D, and if you engage in this business under a different name, provide that name.	
SECTION 6.A. Names of Your Other Businesses	
No Information Filed	
SECTION 6.B.(2) Description of Primary Business	
Describe your primary business (not your investment advisory business):	
If you engage in that business under a different name, provide that name:	
if you engage in that business drider a different fiame, provide that fiame.	
SECTION 6.B.(3) Description of Other Products and Services	
Describe other products or services you sell to your <i>client</i> , You may omit products and services that you listed in Section 6.B.(2) above. VARIABLE INSURANCE PRODUCTS AND GENERAL SECURITIES, INCLUDING, BUT NOT LIMITED TO, STOCKS, BONDS, MUNICIPAL AND GOVERNMENT SECURITIES, FUNDS, AND REGISTERED LIMITED PARTNERSHIPS, TO THE PUBLIC.	MUTUAL
If you engage in that business under a different name, provide that name.	
you ongugo an that outside a amoron name, provide that hame.	
Item 7 Financial Industry Affiliations	
In this Item, we request information about your financial industry affiliations and activities. This information identifies areas in which conflicts of interest may occur between y your <i>clients</i> .	ou and
A. This part of Item 7 requires you to provide information about you and your related persons, including foreign affiliates. Your related persons are all of your advisory affiliate person that is under common control with you.	es and any
You have a <i>related person</i> that is a (check all that apply):	
 (1) broker-dealer, municipal securities dealer, or government securities broker or dealer (registered or unregistered) (2) other investment adviser (including financial planners) 	
(2) registered municipal advisor (4) registered security-based swap dealer	

	(3) Inapus security-based swap participant (6) commodity pool operator or commodity trading advisor (whether registered or exempt from registration) (7) futures commission merchant (8) banking or thrift institution (9) trust company (10) accountant or accounting firm (11) lawyer or law firm (12) insurance company or agency (13) pension consultant (14) real estate broker or dealer (15) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles (16) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles For each related person, including foreign affiliates that may not be registered or required to be registered in the United States, complete Section 7.A. of Schedule D. You do not need to complete Section 7.A. of Schedule D for any related person if: (1) you have no business dealings with the related person in connection with advisory so you provide to your clients; (2) you do not conduct shared operations with the related person; (3) you do not refer clients or business to the related does not refer prospective clients or business to you; (4) you do not share supervised persons or premises with the related person; and (5) you have no reason to believe	perso	
	your relationship with the related person otherwise creates a conflict of interest with your clients. You must complete Section 7.A. of Schedule D for each related person acting as qualified custodian in connection with advisory services you provide to your clients (other any mutual fund transfer agent pursuant to rule 206(4)-2(b)(1)), regardless of whether you have determined the related person to be operationally independent under rule 206(4)-2 of the Advisers Act.	r than)
SEC	CTION 7.A. Financial Industry Affiliations		
Со	mplete a separate Schedule D Section 7.A. for each related person listed in Item 7.A.		
1.	Legal Name of <i>Related Person</i> : METLIFE SECURITIES INC.		
2.	Primary Business Name of <i>Related Person</i> : METLIFE SECURITIES INC.		
3.	Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-) 801 - 22306 or Other		
4.	Related Person's CRD Number (if any): 14251		
5.	Related Person is: (check all that apply) (a) broker-dealer, municipal securities dealer, or government securities broker or dealer (b) other investment adviser (including financial planners) (c) registered municipal advisor (d) registered security-based swap dealer (e) major security-based swap participant (f) commodity pool operator or commodity trading advisor (whether registered or exempt from registration) (g) futures commission merchant (h) banking or thrift institution (i) trust company (j) accountant or accounting firm (k) lawyer or law firm (l) insurance company or agency (m) pension consultant (n) real estate broker or dealer (p) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles	Yes	No
6.	Do you control or are you controlled by the related person?		•
7.	Are you and the related person under common control?	•	0
8.	(a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	0	•
	(b) If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds or securities that are maintained at the <i>related person</i> ?	0	0
	(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:		

		Number and Street 1:	Number and Street 2:		
		City: State:	Country: ZIP+4/Postal Code:		
		If this address is a private residence, check this box:		V	
a	(a)	If the <i>related person</i> is an investment adviser, is it exempt from registration		Yes	
٥.			•	0	•
	(b)	If the answer is yes, under what exemption?			
10.	(a)	Is the related person registered with a foreign financial regulatory authority	?	0	_
		If the answer is yes, list the name and country, in English, of each <i>foreign fi</i>			۳
	(-)		No Information Filed		
11.	Do y	ou and the related person share any supervised persons?		•	0
12.	Do y	ou and the related person share the same physical location?		•	0
1	Logs	al Name of <i>Related Person</i> :			
1.	•	V ENGLAND SECURITIES CORPORATION			
2.	Prim	ary Business Name of Related Person:			
	NEW	VENGLAND SECURITIES CORPORATION			
3.		nted Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-) - 47061			
	or	- 47 00 1			
	Othe	er			
4.		ated Person's CRD Number (if any):			
	615				
5.	Rela	nted Person is: (check all that apply)			
J.		broker-dealer, municipal securities dealer, or government securities b	roker or dealer		
	` '	other investment adviser (including financial planners)			
	` '	registered municipal advisor			
	` '	registered security-based swap dealer			
	(e)	major security-based swap participant			
	(f)	$\hfill \Box$ commodity pool operator or commodity trading advisor (whether regist	ered or exempt from registration)		
	(g)	futures commission merchant			
	(h)	banking or thrift institution			
	(i)	trust company			
	(j)	accountant or accounting firm			
	(k)	lawyer or law firm			
	(I)	insurance company or agency			
	()	pension consultant real estate broker or dealer			
	(n) (o)	sponsor or syndicator of limited partnerships (or equivalent), excluding	nooled investment vehicles		
	(p)	sponsor, general partner, managing member (or equivalent) of pooled			
	(1 /			Yes	No
6.	Do y	ou control or are you controlled by the related person?		0	•
7.	Are y	you and the related person under common control?		\odot	0
8.	(a)	Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in conr	nection with advisory services you provide to clients?	\circ	\odot
			es," to question 8(a) above, have you overcome the presumption that you are not	0	0
			ed person and thus are not required to obtain a surprise examination for your clients' funds		
		or securities that are maintained at the <i>related person</i> ?			
	(c)	If you have answered "yes" to question 8.(a) above, provide the location of the Number and Street 1:	ne <i>related person's</i> office responsible for <i>custody</i> of your <i>clients</i> assets: Number and Street 2:		
		City: State:	Country: ZIP+4/Postal Code:		
		If this address is a private residence, check this box:			
				Yes	No
9.	(a)	If the related person is an investment adviser, is it exempt from registration	?	\circ	\odot
	(b)	If the answer is yes, under what exemption?			
	ه د				
10.		Is the related person registered with a foreign financial regulatory authority		\circ	\odot
	(b)	If the answer is yes, list the name and country, in English, of each foreign fi	inancial regulatory authority with which the related person is registered. No Information Filed		

11.	Do you and the <i>related person</i> share any <i>supervised persons</i> ?	⊙	0
12.	Do you and the <i>related person</i> share the same physical location?	0	•
	Legal Name of <i>Related Person</i> : METLIFE ADVISORS LLC		
	Primary Business Name of <i>Related Person</i> : METLIFE ADVISORS LLC		
3.	Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
	or Other		
4.	Related Person's CRD Number (if any):		
	Related Person is: (check all that apply) (a)	Yes	No
6.	Do you control or are you controlled by the related person?	0	•
7.	Are you and the related person under common control?	•	0
	 (a) Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in connection with advisory services you provide to <i>clients</i>? (b) If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients</i>' funds or securities that are maintained at the <i>related person</i>? (c) If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person</i>'s office responsible for <i>custody</i> of your <i>clients</i>' assets:	O O	0
9.	(a) If the <i>related person</i> is an investment adviser, is it exempt from registration?	O	
	(b) If the answer is yes, under what exemption?		
10.	 (a) Is the related person registered with a foreign financial regulatory authority? (b) If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered. No Information Filed 	0	•
11.	Do you and the related person share any supervised persons?	•	0
12.	Do you and the <i>related person</i> share the same physical location?	0	•
	Legal Name of <i>Related Person</i> : WALNUT STREET SECURITIES, INC.		

2. Primary Business Name of *Related Person*:

	WAI	LNUT STREET SECURITIES, INC.						
3.		ated Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-) - 62161						
	Othe	er						
4.	Rela	ated Person's CRD Number (if any): 340						
5.	Relation (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (n) (o) (p)	real estate broker or dealer sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles sponsor, general partner, managing member (or equivalent) of pooled investment vehicles	Yes	No				
6.	Doy	you control or are you controlled by the related person?	C					
7.	Are	you and the related person under common control?	•	0				
8.	(a)	Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	0	6				
	(b)	If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds or securities that are maintained at the <i>related person</i> ?	0					
	(c)	If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> assets: Number and Street 1: Number and Street 2:						
		City: State: Country: ZIP+4/Postal Code: If this address is a private residence, check this box:						
0	(2)	If the <i>related person</i> is an investment adviser, is it exempt from registration?	Yes					
9.	(a) (b)	If the answer is yes, under what exemption?	0	⊙				
10.	(a) (b)	Is the related person registered with a foreign financial regulatory authority? If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.	0	⊙				
		No Information Filed						
11.	Doy	you and the related person share any supervised persons?	•	0				
12.	Doy	you and the <i>related person</i> share the same physical location?	•	0				
1.	-	ral Name of <i>Related Person</i> : TLIFE INVESTMENT MANAGEMENT, LLC						
2.		nary Business Name of <i>Related Person</i> : TLIFE INVESTMENT MANAGEMENT, LLC						
3.	801	ated Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-) - 67314						
	or Othe	er er						
4.		ated Person's CRD Number (if any): 2463						

5.	Rela	ated	Person is: (check all that apply)		
	(a)		broker-dealer, municipal securities dealer, or government securities broker or dealer		
	(b)	V	other investment adviser (including financial planners)		
	(c)		registered municipal advisor		
	(d)		registered security-based swap dealer		
	(e)		major security-based swap participant		
	(f)		commodity pool operator or commodity trading advisor (whether registered or exempt from registration)		
	(g)		futures commission merchant		
	(h)		banking or thrift institution		
	(i)		trust company		
	(j)		accountant or accounting firm		
	(k)		lawyer or law firm		
	(I)		insurance company or agency		
	(m)		pension consultant		
	(n)		real estate broker or dealer		
	(o)		sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles		
	(p)		sponsor, general partner, managing member (or equivalent) of pooled investment vehicles		
				Yes	No
6.	Do y	ou c	control or are you controlled by the related person?	0	•
7.	Are	you a	and the related person under common control?	•	0
				•	
8.	(a)	Doe	es the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	0	_
	(b)		ou are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not		
	(D)	ope	erationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds securities that are maintained at the <i>related person</i> ?	0	0
	(c)	If yo	bu have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:		
		Nu	mber and Street 1: Number and Street 2:		
		City			
		If ti	his address is a private residence, check this box:		
				Yes	No
9.	(a)	If th	ne related person is an investment adviser, is it exempt from registration?	\circ	\odot
	(b)	If th	ne answer is yes, under what exemption?		
10.	(a)	ls th	he related person registered with a foreign financial regulatory authority?	\circ	\odot
	(b)	If th	ne answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.		
			No Information Filed		
11.	Do y	ou a	and the <i>related person</i> share any supervised persons?	\odot	\circ
12.	Doy	ou a	and the <i>related person</i> share the same physical location?	0	•
1.	-		ame of Related Person:		
	MET	ΓLIFE	E INVESTORS DISTRIBUTION COMPANY		
2.		-	Business Name of Related Person:		
	MET	ΓLIFE	E INVESTORS DISTRIBUTION COMPANY		
_	5 /				
3.			Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
	8 - 5	306			
	or Othe	⊇r			
	Out	5 1			
4	Rela	ated	Person's CRD Number (if any):		
••	107				
5.	Rela	ated	Person is: (check all that apply)		
	(a)		broker-dealer, municipal securities dealer, or government securities broker or dealer		
	(b)		other investment adviser (including financial planners)		
	(c)		registered municipal advisor		
	(d)		registered security-based swap dealer		
	(e)		major security-based swap participant		
	(f)		commodity pool operator or commodity trading advisor (whether registered or exempt from registration)		
	(i) (g)		futures commission merchant		
	(9) (h)				
	()))		Danking or thrift institution		
	(i)		banking or thrift institution trust company		

	(j) (k) (l) (m) (n)			
	(b)	sponsor, general partner, managing member (or equivalent) of pooled investment vehicles		
	,		Yes	No
6.	Do y	you control or are you controlled by the related person?	\circ	\odot
7.	Are	you and the related person under common control?	•	0
8.	(a)	Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	0	•
	(b)	If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds or securities that are maintained at the <i>related person</i> ?	0	0
	(c)	If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> assets:		
		Number and Street 1: Number and Street 2: City: State: Country: ZIP+4/Postal Code:		
		If this address is a private residence, check this box: □		
9.	(a)	If the <i>related person</i> is an investment adviser, is it exempt from registration?		No
Э.	(a) (b)	If the answer is yes, under what exemption?	О	0
	(5)	if the answer is yes, under what exemption:		
10.	(a)	Is the related person registered with a foreign financial regulatory authority?	0	\odot
	(b)	If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered. No Information Filed		
11.	Do،	you and the <i>related person</i> share any <i>supervised persons</i> ?	_	_
				0
12.	Doy	you and the <i>related person</i> share the same physical location?	0	•
1.	FIRS	gal Name of <i>Related Person</i> : ST METLIFE INVESTORS INSURANCE COMPANY mary Business Name of <i>Related Person</i> :		
		ST METLIFE INVESTORS INSURANCE COMPANY		
3.	Rela -	lated Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
	or Othe	er		
4.	Rela	lated Person's CRD Number (if any):		
5.	(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l)	other investment adviser (including financial planners) registered municipal advisor registered security-based swap dealer major security-based swap participant commodity pool operator or commodity trading advisor (whether registered or exempt from registration) futures commission merchant banking or thrift institution trust company accountant or accounting firm lawyer or law firm insurance company or agency pension consultant real estate broker or dealer		
6.	Dov	you control or are you controlled by the related person?		No
٠.		,	O	\odot

7.	Are y	you and the related person under common control?	•	0
8.	(a)	Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in connection with advisory services you provide to <i>clients</i> ?	0	•
	` '	If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> fund or securities that are maintained at the <i>related person</i> ?	o	
		If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:		
		Number and Street 1: Number and Street 2: City: State: Country: ZIP+4/Postal Code:		
		If this address is a private residence, check this box:		
			Yes	No
9.		If the <i>related person</i> is an investment adviser, is it exempt from registration?	0	0
	(b)	If the answer is yes, under what exemption?		
10.	(a)	Is the related person registered with a foreign financial regulatory authority?	0	•
	(b)	If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.		~
		No Information Filed		
11.	Do y	ou and the <i>related person</i> share any <i>supervised persons</i> ?	⊙	0
12.	Do v	rou and the <i>related person</i> share the same physical location?	_	_
12.	Боу	and the related person share the dame physical location.	0	•
		al Name of Deleted Demons		
1.	•	al Name of <i>Related Person</i> : IERAL AMERICAN LIFE INSURANCE COMPANY		
2.		pary Business Name of Related Person:		
	GEN	IERAL AMERICAN LIFE INSURANCE COMPANY		
3.	Rela	ated Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
	-			
	or Othe			
	Ouio			
4.	Rela	ated Person's CRD Number (if any):		
5.	Rela	ated Person is: (check all that apply)		
	(a)	broker-dealer, municipal securities dealer, or government securities broker or dealer		
	(b)	other investment adviser (including financial planners)		
	(c) (d)	registered municipal advisor registered security-based swap dealer		
	(e)	major security-based swap participant		
	(f)	commodity pool operator or commodity trading advisor (whether registered or exempt from registration)		
	(g)	futures commission merchant		
	(h) (i)	banking or thrift institution trust company		
	(i) (j)	accountant or accounting firm		
	(k)	lawyer or law firm		
	(I)	insurance company or agency		
	(m) (n)	pension consultant real estate broker or dealer		
	(o)	sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles		
	(p)	sponsor, general partner, managing member (or equivalent) of pooled investment vehicles		
_	Davi			No
о.	Бо у	ou control or are you controlled by the related person?	0	⊙
7.	Are y	you and the related person under common control?	•	0
	,		٠	V
8.	(a)	Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	0	•
		If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not		\circ
		operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> fund or securities that are maintained at the <i>related person</i> ?	S	
		If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person</i> 's office responsible for <i>custody</i> of your <i>clients</i> ' assets:		
		Number and Street 1: Number and Street 2:		
		City: State: Country: ZIP+4/Postal Code: If this address is a private residence, check this box:		

			Yes	No
9.	(a)	If the <i>related person</i> is an investment adviser, is it exempt from registration?	0	\sim
-	. ,		0	0
(b) If the answer is yes, under what exemption?				
10.	(a)	Is the related person registered with a foreign financial regulatory authority?	0	\odot
	(b)	If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.		
	(~)	No Information Filed		
	_			
11.	Do y	ou and the <i>related person</i> share any <i>supervised persons</i> ?	\odot	\circ
12.	Do y	ou and the <i>related person</i> share the same physical location?	0	~
	•			**
1.	Lega	al Name of Related Person:		
	MET	LIFE INSURANCE COMPANY OF CONNECTICUT		
2.	Prim	pary Business Name of Related Person:		
		LIFE INSURANCE COMPANY OF CONNECTICUT		
		EN ENGOTOWING COMMITTED TO CONTRACTION TO		
3.	Rela	nted Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
	-			
	or			
	Othe	er en		
4	Rela	nted Person's CRD Number (if any):		
٦.	1 (010	tica i ordono one in any).		
5.	Rela	ated Person is: (check all that apply)		
	(a)	broker-dealer, municipal securities dealer, or government securities broker or dealer		
	(b)	other investment adviser (including financial planners)		
		registered municipal advisor		
	(d)	registered security-based swap dealer		
	(e)	major security-based swap participant		
	(f)	commodity pool operator or commodity trading advisor (whether registered or exempt from registration)		
	(g)	futures commission merchant		
	(h)	banking or thrift institution		
	(i)			
	(j)	accountant or accounting firm		
	(k)	lawyer or law firm		
	(l)	insurance company or agency		
	(m)	pension consultant		
	(n)	real estate broker or dealer		
	` '	_		
	(-)	sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles		
	(p)	sponsor, general partner, managing member (or equivalent) of pooled investment vehicles		
			Yes	No
6.	Do y	ou control or are you controlled by the related person?	0	•
	J		•	***
_				
1.	Are	you and the related person under common control?	\odot	\circ
8.	(a)	Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in connection with advisory services you provide to <i>clients</i> ?	0	•
-	` '		_	
	(b)	If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not	\circ	\circ
		operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds		
		or securities that are maintained at the <i>related person</i> ?		
	(c)	If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:		
		Number and Street 1: Number and Street 2:		
		City: State: Country: ZIP+4/Postal Code:		
		If this address is a private residence, check this box:		
			Yes	Na
^	, ,			INO
9.	(a)	If the <i>related person</i> is an investment adviser, is it exempt from registration?	\circ	\circ
	(b)	If the answer is yes, under what exemption?		
	•			
10	(2)	Is the related person registered with a foreign financial regulatory authority?	_	
10.			\circ	⊙
	(b)	If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.		
		No Information Filed		
11.	Do y	ou and the related person share any supervised persons?	•	0
	,		3	*/

12.	Doy	you and the related person share the same physical location?	0	•
1.	•	al Name of <i>Related Person</i> : TLIFE INVESTORS INSURANCE COMPANY		
2.		nary Business Name of <i>Related Person</i> : TLIFE INVESTORS INSURANCE COMPANY		
3.	Rela -	ated Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
	or Othe	er		
4.	Rela	ated Person's CRD Number (if any):		
5.	(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n)	broker-dealer, municipal securities dealer, or government securities broker or dealer other investment adviser (including financial planners) registered municipal advisor registered security-based swap dealer major security-based swap participant commodity pool operator or commodity trading advisor (whether registered or exempt from registration) futures commission merchant banking or thrift institution trust company accountant or accounting firm lawyer or law firm insurance company or agency pension consultant real estate broker or dealer sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles sponsor, general partner, managing member (or equivalent) of pooled investment vehicles		
6.	Doy	ou control or are you controlled by the related person?	Yes C	No ⊙
7.	Are	you and the <i>related person</i> under common <i>control</i> ?	•	0
8.	(a)	Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in connection with advisory services you provide to <i>clients</i> ?	0	•
	(b)	If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds or securities that are maintained at the <i>related person</i> ?	_	o
	(c)	If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> assets: Number and Street 1: City: State: Country: ZIP+4/Postal Code: If this address is a private residence, check this box:		
			Yes	
9.	(a) (b)	If the <i>related person</i> is an investment adviser, is it exempt from registration? If the answer is yes, under what exemption?	0	0
10.	(a)	Is the related person registered with a foreign financial regulatory authority?	0	•
	(b)	If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered. No Information Filed		
11.	Doy	ou and the related person share any supervised persons?	•	0
12.	Doy	you and the related person share the same physical location?	0	•
1.	MET Prim	al Name of <i>Related Person</i> : TLIFE INVESTORS USA INSURANCE COMPANY hary Business Name of <i>Related Person</i> : TLIFE INVESTORS USA INSURANCE COMPANY		

3.	3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)								
	or								
	Other								
4.	Related Person's CRD Number (if any):								
5.	Related Person is: (check all that apply)								
	(a) broker-dealer, municipal securities dealer, or government securities broker or dealer								
	(b) other investment adviser (including financial planners)								
	(c) registered municipal advisor								
	(d) registered security-based swap dealer								
	(e) major security-based swap participant								
	 (f)								
	(g) La futures commission merchant (h) La banking or thrift institution								
	(i) trust company								
	(j) accountant or accounting firm								
	(k) lawyer or law firm								
	(I) insurance company or agency								
	(m) pension consultant								
	(n) real estate broker or dealer								
	(o) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles								
	(p) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles								
6	Do you control or are you controlled by the related narrow?		No						
6.	Do you control or are you controlled by the related person?	0	⊙						
7	Are you and the <i>related person</i> under common <i>control</i> ?	_	_						
	The year and the related person under common controls.	•	0						
8.	(a) Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in connection with advisory services you provide to <i>clients</i> ?	_	•						
	(b) If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not		0						
	operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds		0						
	or securities that are maintained at the <i>related person</i> ?								
	(c) If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> assets:								
	Number and Street 1: Number and Street 2:								
	City: State: Country: ZIP+4/Postal Code: If this address is a private residence, check this box:								
		Yes	No						
9.	(a) If the related person is an investment adviser, is it exempt from registration?	0	0						
	(b) If the answer is yes, under what exemption?								
10.		0	\odot						
	(b) If the answer is yes, list the name and country, in English, of each <i>foreign financial regulatory authority</i> with which the <i>related person</i> is registered.								
11	No Information Filed Do you and the <i>related person</i> share any <i>supervised persons</i> ?		_						
11.	bo you and the related person share any supervised persons?	⊙	0						
12.	Do you and the <i>related person</i> share the same physical location?	_	•						
		0	٠						
1.	Legal Name of Related Person: METROPOLITAN LIFE INSURANCE COMPANY								
2.	Primary Business Name of Related Person:								
	METROPOLITAN LIFE INSURANCE COMPANY								
2	Deleted Demonto CEC File Number (if any) /a m 204 0 200 200								
3.	Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)								
	or								
	Other								
4.	Related Person's CRD Number (if any):								
5.	Related Person is: (check all that apply)								
	(a) broker-dealer, municipal securities dealer, or government securities broker or dealer								

	(b)		other investment adviser (including financial planners)		
	(c)		registered municipal advisor		
	(d)		registered security-based swap dealer		
	(e)		major security-based swap participant		
	(f)		commodity pool operator or commodity trading advisor (whether registered or exempt from registration)		
	(g)		futures commission merchant		
	(h)		banking or thrift institution		
	(i)		trust company		
	(j)		accountant or accounting firm		
	(k)		lawyer or law firm		
	(I)	V	insurance company or agency		
	(m)		pension consultant		
	(n)		real estate broker or dealer		
	(o)		sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles		
	(p)		sponsor, general partner, managing member (or equivalent) of pooled investment vehicles	.,	
^	D			Yes	
6.	טט י	you d	control or are you controlled by the related person?	0	⊙
7	۸				
7.	Are	you	and the related person under common control?	\odot	\circ
_		_			
8.	(a)		es the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	\circ	\odot
(b) If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not				\circ	\circ
			erationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds		
	(0)		securities that are maintained at the related person? ou have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:		
(c) If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> ass Number and Street 1: Number and Street 2:					
		Cit			
			his address is a private residence, check this box:		
				Yes	No
9.	(a)	If th	ne related person is an investment adviser, is it exempt from registration?	0	0
	(b)	If th	ne answer is yes, under what exemption?		
	()				
10.	(a)	ls t	he related person registered with a foreign financial regulatory authority?	0	•
	(b)	If th	ne answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.	~	
	()		No Information Filed		
11.	Do	you a	and the related person share any supervised persons?	•	0
				~	~
12.	Do	you a	and the related person share the same physical location?	•	0
1.	_		ame of Related Person:		
	ME	IRO	POLITAN TOWER LIFE INSURANCE COMPANY		
2	Duin		Dusings Name of Delated Develop		
2.		-	Business Name of Related Person: POLITAN TOWER LIFE INSURANCE COMPANY		
	IVIL	11(0)	TOLITAN TOWER EILE INGORANGE GOMI ANT		
3.	Rela	ated	Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)		
-	-				
	or				
	Oth	er			
4.	Rela	ated	Person's CRD Number (if any):		
5.			Person is: (check all that apply)		
	(a)	,	broker-dealer, municipal securities dealer, or government securities broker or dealer		
			other investment adviser (including financial planners)		
	(c)		registered municipal advisor		
	(d)		registered security-based swap dealer		
	(e)		major security-based swap participant		
	(t)		commodity pool operator or commodity trading advisor (whether registered or exempt from registration) futures commission merchant		
	(g) (h)		banking or thrift institution		
	(i)		trust company		
	(i)		accountant or accounting firm		
	(k)		lawyer or law firm		

	(I) M insurance company or agency			
	(m) pension consultant			
	(n) real estate broker or dealer			
	(o) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles			
	(p) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles	V		
6.	6. Do you control or are you controlled by the related person?	Yes O	. NC	
7.	7. Are you and the <i>related person</i> under common <i>control</i> ?	•	0)
8.	8. (a) Does the <i>related person</i> act as a qualified custodian for your <i>clients</i> in connection with advisory services you provide to <i>clients</i> ?	o	•	
	(b) If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you a operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your or securities that are maintained at the <i>related person</i> ?	are not	0	
	(c) If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> assets: Number and Street 1: Number 2:			
	City: State: Country: ZIP+4/Postal Code:			
	If this address is a private residence, check this box:	Voo	. NI-	
۵	9. (a) If the <i>related person</i> is an investment adviser, is it exempt from registration?	Yes		
9.	(a) If the <i>related person</i> is an investment adviser, is it exempt from registration?(b) If the answer is yes, under what exemption?	О	О	
40	40. (a) In the related consequence interest with a femalism financial manufacture and the rite of			
10.	10. (a) Is the related person registered with a foreign financial regulatory authority? (b) If the answer is year list the name and country in English, of each foreign financial regulatory outhority with which the related person is registered.	0	⊙	J
	(b) If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered. No Information Filed			
11.	11. Do you and the related person share any supervised persons?	•	О	į
12.	12. Do you and the <i>related person</i> share the same physical location?	О	0	ı
	1. Legal Name of <i>Related Person</i> : NEW ENGLAND LIFE INSURANCE COMPANY 2. Primary Business Name of <i>Related Person</i> :			
	NEW ENGLAND LIFE INSURANCE COMPANY			
3.	3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)			
	or Other			
4.	4. Related Person's CRD Number (if any):			
5.	5. Related Person is: (check all that apply) (a)			
6.	6. Do you control or are you controlled by the related person?	Yes O		
7.	7. Are you and the related person under common control?	•	0	,

8.	(a)	Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?	0	•
	(b)	If you are registering or registered with the SEC and you have answered "yes," to question 8(a) above, have you overcome the presumption that you are not	0	0
		operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the <i>related person</i> and thus are not required to obtain a surprise examination for your <i>clients'</i> funds or securities that are maintained at the <i>related person</i> ?		
	(c)	If you have answered "yes" to question 8.(a) above, provide the location of the <i>related person's</i> office responsible for <i>custody</i> of your <i>clients'</i> assets:		
	(0)	Number and Street 1: Number and Street 2:		
		City: State: Country: ZIP+4/Postal Code:		
		If this address is a private residence, check this box:	Yes	No
9.	(a)	If the related person is an investment adviser, is it exempt from registration?	0	0
	(b)	If the answer is yes, under what exemption?		
	` '			
10.	(a)	Is the related person registered with a foreign financial regulatory authority?	0	\odot
	(b)	If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.		
11	Do v	No Information Filed you and the <i>related person</i> share any <i>supervised persons</i> ?	_	
	<i>D</i> 0 y	tod dild the related person chare dilly edpervised persone.	⊙	0
12.	Do y	you and the <i>related person</i> share the same physical location?	0	•
			~	~
•.				
Item	7 Pr	rivate Fund Reporting	.,	
			Yes	No
B. A	Are yo	ou an adviser to any <i>private fund</i> ?	0	\odot
	-	s," then for each private fund that you advise, you must complete a Section 7.B.(1) of Schedule D, except in certain circumstances described in the next sentence and in		
		uction 6 of the Instructions to Part 1A. If another adviser reports this information with respect to any such private fund in Section 7.B.(1) of Schedule D of its Form ADV (e.g. subadviser), do not complete Section 7.B.(2) of Schedule D.	j., II	you
		her case, if you seek to preserve the anonymity of a private fund client by maintaining its identity in your books and records in numerical or alphabetical code, or similal Ination, pursuant to rule 204-2(d), you may identify the private fund in Section 7.B.(1) or 7.B.(2) of Schedule D using the same code or designation in place of the fund's i		_
·	icsigi	Hallon, pursuant to fulle 204-2(u), you may identify the private fulld in decilon 7.5.(1) or 7.5.(2) or defined the damped of using the same code or designation in place of the fund 3 i	iam	С.
SEC	TION	N 7.B.(1) Private Fund Reporting		
		No Information Filed		
SEC.	TION	N 7.B.(2) Private Fund Reporting		
		No Information Filed		
		NO Information Flied		
ltem	8 Pa	articipation or Interest in <i>Client</i> Transactions		
		em, we request information about your participation and interest in your clients' transactions. This information identifies additional areas in which conflicts of interest ma	y o	cur
betv	veen	you and your <i>clients</i> .		
Like	Item	n 7, Item 8 requires you to provide information about you and your related persons, including foreign affiliates.		
Pro		tary Interest in <i>Client</i> Transactions		
		Vou or any related norman		
A.	priet	you or any related person:	′ es	No
A.	priet Do y	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)?	res	No ⊙
A.	priet Do y	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)?	_	_
A.	Do y (1) (2)	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other	0	•
A.	Do y (1) (2)	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ?	o •	0
	Do y (1) (2) (3)	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))?	o •	0
Sale	Do () (1) (2) (3)	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))?	○ ⊙	© 0
Sale	Do () (1) (2) (3) es In	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))? Interest in <i>Client</i> Transactions you or any <i>related person</i> :	○ ⊙ Yes	⊙ ○ ○
Sale	Do () (1) (2) (3) es In	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))? Interest in <i>Client</i> Transactions you or any <i>related person</i> :	○ ⊙	© 0
Sale	Do () (1) (2) (3) es In	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))? Interest in <i>Client</i> Transactions you or any <i>related person</i> : as a broker-dealer or registered representative of a broker-dealer, execute securities trades for brokerage customers in which advisory <i>client</i> securities are sold to or bought from the brokerage customer (agency cross transactions)?	○ ⊙ Yes	⊙ ○ ○
Sale	Do y (1) (2) (3) Do y (1) (2) (3)	buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)? buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory <i>clients</i> ? recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))? Interest in <i>Client</i> Transactions you or any <i>related person</i> : as a broker-dealer or registered representative of a broker-dealer, execute securities trades for brokerage customers in which advisory <i>client</i> securities are sold to or bought from the brokerage customer (agency cross transactions)?	○ ⑥ ⑥ ſes	⊙ ○ ○ No ⊙

Inv	estm	ent or Brokerage Discretion		
C.	Doy	you or any related person have discretionary authority to determine the:	Yes	No
	(1)	securities to be bought or sold for a <i>client's</i> account?	•	0
	(2)	amount of securities to be bought or sold for a client's account?	•	0
	(3)	broker or dealer to be used for a purchase or sale of securities for a client's account?	·	0
	(4)	commission rates to be paid to a broker or dealer for a <i>client's</i> securities transactions?	_	Ö
D.	If vc	ou answer "yes" to C.(3) above, are any of the brokers or dealers <i>related persons</i> ?	_	_
Б. Е.	-	you or any related person recommend brokers or dealers to clients?		o ⊙
	•			٠
F.	If yo	ou answer "yes" to E above, are any of the brokers or dealers related persons?	0	0
G.	(1)	Do you or any <i>related person</i> receive research or other products or services other than execution from a broker-dealer or a third party ("soft dollar benefits") in connection with <i>client</i> securities transactions?	0	•
	(2)	If "yes" to G.(1) above, are all the "soft dollar benefits" you or any <i>related persons</i> receive eligible "research or brokerage services" under section 28(e) of the Securities Exchange Act of 1934?	0	0
Н.	Doy	you or any related person, directly or indirectly, compensate any person for client referrals?	•	0
I.	Doy	you or any related person, directly or indirectly, receive compensation from any person for client referrals?	0	•
		esponding to Items 8.H and 8.I., consider all cash and non-cash compensation that you or a related person gave to (in answering Item 8.H) or received from (in answe any person in exchange for client referrals, including any bonus that is based, at least in part, on the number or amount of client referrals.	ng l	tem
lten	9 Cı	ustody		
		em, we ask you whether you or a <i>related person</i> has <i>custody</i> of <i>client</i> (other than <i>clients</i> that are investment companies registered under the Investment Company Act	f 10	10)
		nd about your custodial practices.	13-	,0)
A.	(1)	Do you have <i>custody</i> of any advisory <i>clients</i> ':	Yes	No
		(a) cash or bank accounts?	0	•
		(b) securities?	0	•
	If yo	ou are registering or registered with the SEC, answer "No" to Item 9.A.(1)(a) and (b) if you have custody solely because (i) you deduct your advisory fees directly from y	ur	
		nts' accounts, or (ii) a related person has custody of client assets in connection with advisory services you provide to clients, but you have overcome the presumption the not operationally independent (pursuant to Advisers Act rule 206(4)-(2)(d)(5)) from the related person.	ıt yo	и
	(2)	If you checked "yes" to Item 9.A.(1)(a) or (b), what is the approximate amount of <i>client</i> funds and securities and total number of <i>clients</i> for which you have <i>custody</i> :		
	` '	U.S. Dollar Amount Total Number of <i>Clients</i>		
		(a) \$ (b)		
	of th	ou are registering or registered with the SEC and you have custody solely because you deduct your advisory fees directly from your clients' accounts, do not include the hose assets and the number of those clients in your response to Item 9.A.(2). If your related person has custody of client assets in connection with advisory services yo lients, do not include the amount of those assets and number of those clients in your response to 9.A.(2). Instead, include that information in your response to Item 9.B	prov	
B.	(1)	In connection with advisory services you provide to <i>clients</i> , do any of your <i>related persons</i> have <i>custody</i> of any of your advisory <i>clients'</i> :	Yes	No
		(a) cash or bank accounts?		•
		(b) securities?	0	⊙
	You	are required to answer this item regardless of how you answered Item 9.A.(1)(a) or (b).		
	(2)	If you checked "yes" to Item 9.B.(1)(a) or (b), what is the approximate amount of <i>client</i> funds and securities and total number of <i>clients</i> for which your <i>related persons</i> loss custody:	ave	
		U.S. Dollar Amount Total Number of <i>Clients</i>		
		(a) \$ (b)		
C.	If yo	ou or your related persons have custody of client funds or securities in connection with advisory services you provide to clients, check all the following that apply:		
	(1)	A qualified custodian(s) sends account statements at least quarterly to the investors in the pooled investment vehicle(s) you manage.		
	(2)	An <i>independent public accountant</i> audits annually the pooled investment vehicle(s) that you manage and the audited financial statements are distributed to the investors in the pools.		
	(3)	An independent public accountant conducts an annual surprise examination of client funds and securities.		
	(4)	An independent public accountant prepares an internal control report with respect to custodial services when you or your related persons are qualified custodians		

for client funds and securities. If you checked Item 9.C.(2), C.(3) or C.(4), list in Section 9.C. of Schedule D the accountants that are engaged to perform the audit or examination or prepare an internal control report. (If you checked Item 9.C.(2), you do not have to list auditor information in Section 9.C. of Schedule D if you already provided this information with respect to the private funds you advise in Section 7.B.(1) of Schedule D). D. Do you or your related person(s) act as qualified custodians for your clients in connection with advisory services you provide to clients? Yes No (1) you act as a qualified custodian (2) your related person(s) act as qualified custodian(s) \circ If you checked "yes" to Item 9.D.(2), all related persons that act as qualified custodians (other than any mutual fund transfer agent pursuant to rule 206(4)-2(b)(1)) must be identified in Section 7.A. of Schedule D, regardless of whether you have determined the related person to be operationally independent under rule 206(4)-2 of the Advisers Act. E. If you are filing your annual updating amendment and you were subject to a surprise examination by an independent public accountant during your last fiscal year, provide the date (MM/YYYY) the examination commenced: F. If you or your related persons have custody of client funds or securities, how many persons, including, but not limited to, you and your related persons, act as qualified custodians for your clients in connection with advisory services you provide to clients? SECTION 9.C. Independent Public Accountant No Information Filed **Item 10 Control Persons** In this Item, we ask you to identify every person that, directly or indirectly, controls you. If you are submitting an initial application or report, you must complete Schedule A and Schedule B. Schedule A asks for information about your direct owners and executive officers. Schedule B asks for information about your indirect owners. If this is an amendment and you are updating information you reported on either Schedule A or Schedule B (or both) that you filed with your initial application or report, you must complete Schedule C. Yes No A. Does any person not named in Item 1.A. or Schedules A, B, or C, directly or indirectly, control your management or policies? \circ If yes, complete Section 10.A. of Schedule D. B. If any person named in Schedules A, B, or C or in Section 10.A. of Schedule D is a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934, please complete Section 10.B. of Schedule D.

SECTION 10.A. Control Persons

No Information Filed

SECTION 10.B. Control Person Public Reporting Companies

- B. If any person named in Schedules A, B, or C, or in Section 10 A. of Schedule D is a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934, please provide the following information (you must complete a separate Schedule D Section 10.B. for each public reporting company):
 - (1) Full legal name of the public reporting company:

METLIFE INC.

(2) The public reporting company's CIK number (Central Index Key number that the SEC assigns to each reporting company):

1099219

Item 11 Disclosure Information

In this Item, we ask for information about your disciplinary history and the disciplinary history of all your *advisory affiliates*. We use this information to determine whether to grant your application for registration, to decide whether to revoke your registration or to place limitations on your activities as an investment adviser, and to identify potential problem areas to focus on during our on-site examinations. One event may result in "yes" answers to more than one of the questions below.

Your advisory affiliates are: (1) all of your current employees (other than employees performing only clerical, administrative, support or similar functions); (2) all of your officers, partners, or directors (or any person performing similar functions); and (3) all persons directly or indirectly controlling you or controlled by you. If you are a "separately identifiable department or division" (SID) of a bank, see the Glossary of Terms to determine who your advisory affiliates are.

If you are registered or registering with the SEC or if you are an exempt reporting adviser, you may limit your disclosure of any event listed in Item 11 to ten years following the date of the event. If you are registered or registering with a state, you must respond to the questions as posed; you may, therefore, limit your disclosure to ten years following the date of an event only in responding to Items 11.A.(1), 11.A.(2), 11.B.(1), 11.B.(2), 11.D.(4), and 11.H.(1)(a). For purposes of calculating this ten-year period, the date of an event is the date the final

ora	ler, judgment, or decree was entered, or the date any rights of appeal from preliminary orders, judgments, or decrees lapsed.		
Υοι	u must complete the appropriate Disclosure Reporting Page ("DRP") for "yes" answers to the questions in this Item 11.		
		Yes	No
Do	any of the events below involve you or any of your supervised persons?	0	•
Fo	r "yes" answers to the following questions, complete a Criminal Action DRP:		
A.	In the past ten years, have you or any advisory affiliate:	Yes	No
	(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?	0	•
	(2) been charged with any felony?	0	•
	If you are registered or registering with the SEC, or if you are reporting as an exempt reporting adviser, you may limit your response to Item 11.A.(2) to charges that are cupending.	urrent	ly
B.	In the past ten years, have you or any advisory affiliate:		
	(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor</i> involving: investments or an <i>investment-related</i> business, or any fraud, false statements, or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?	0	•
	(2) been <i>charged</i> with a <i>misdemeanor</i> listed in Item 11.B.(1)?	0	•
	If you are registered or registering with the SEC, or if you are reporting as an exempt reporting adviser, you may limit your response to Item 11.B.(2) to charges that are cupending.	urrent	ly
Fo	r "yes" answers to the following questions, complete a Regulatory Action DRP:		
C.		Yes	No
	(1) found you or any advisory affiliate to have made a false statement or omission?	\odot	0
	(2) found you or any advisory affiliate to have been involved in a violation of SEC or CFTC regulations or statutes?	\odot	\circ
	(3) found you or any advisory affiliate to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?	0	•
	(4) entered an order against you or any advisory affiliate in connection with investment-related activity?	0	•
	(5) imposed a civil money penalty on you or any advisory affiliate, or ordered you or any advisory affiliate to cease and desist from any activity?	•	0
D.	Has any other federal regulatory agency, any state regulatory agency, or any foreign financial regulatory authority.		
	(1) ever found you or any advisory affiliate to have made a false statement or omission, or been dishonest, unfair, or unethical?	0	0
	(2) ever found you or any advisory affiliate to have been involved in a violation of investment-related regulations or statutes?	·	0
	(3) ever found you or any advisory affiliate to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?	Ö	⊙
	(4) in the past ten years, entered an <i>order</i> against you or any <i>advisory affiliate</i> in connection with an <i>investment-related</i> activity?	•	0
	(5) ever denied, suspended, or revoked your or any advisory affiliate's registration or license, or otherwise prevented you or any advisory affiliate, by order, from associating with an investment-related business or restricted your or any advisory affiliate's activity?	0	•
E.	Has any self-regulatory organization or commodities exchange ever:		
	(1) found you or any advisory affiliate to have made a false statement or omission?	0	•
	(2) found you or any advisory affiliate to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the SEC)?	•	0
	(3) found you or any advisory affiliate to have been the cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?	0	•
	(4) disciplined you or any advisory affiliate by expelling or suspending you or the advisory affiliate from membership, barring or suspending you or the advisory affiliate from association with other members, or otherwise restricting your or the advisory affiliate's activities?	0	•
F.	Has an authorization to act as an attorney, accountant, or federal contractor granted to you or any advisory affiliate ever been revoked or suspended?	0	•
G.	Are you or any advisory affiliate now the subject of any regulatory proceeding that could result in a "yes" answer to any part of Item 11.C., 11.D., or 11.E.?	•	0
Fo	r "yes" answers to the following questions, complete a Civil Judicial Action DRP:		
H.	(1) Has any domestic or foreign court:	Yes	No
	(a) in the past ten years, enjoined you or any advisory affiliate in connection with any investment-related activity?	0	•
	(b) ever found that you or any advisory affiliate were involved in a violation of investment-related statutes or regulations?	0	•
	(c) ever dismissed, pursuant to a settlement agreement, an investment-related civil action brought against you or any advisory affiliate by a state or foreign financial regulatory authority?	0	•
	(2) Are you or any advisory affiliate now the subject of any civil proceeding that could result in a "yes" answer to any part of Item 11.H.(1)?	\odot	0

Item 12 Small Businesses

The SEC is required by the Regulatory Flexibility Act to consider the effect of its regulations on small entities. In order to do this, we need to determine whether you meet the definition of "small business" or "small organization" under rule 0-7.

Answer this Item 12 only if you are registered or registering with the SEC and you indicated in response to Item 5.F.(2)(c) that you have regulatory assets under management of less than \$25 million. You are not required to answer this Item 12 if you are filing for initial registration as a state adviser, amending a current state registration, or switching from SEC to state registration.

For purposes of this Item 12 only:

- Total Assets refers to the total assets of a firm, rather than the assets managed on behalf of clients. In determining your or another person's total assets, you may use the total assets shown on a current balance sheet (but use total assets reported on a consolidated balance sheet with subsidiaries included, if that amount is larger).
- Control means the power to direct or cause the direction of the management or policies of a person, whether through ownership of securities, by contract, or otherwise. Any person that directly or indirectly has the right to vote 25 percent or more of the voting securities, or is entitled to 25 percent or more of the profits, of another person is presumed to control the other person.

 \circ 0

0

0

Voc. No
Yes No

If "yes," you do not need to answer Items 12.B. and 12.C.

A. Did you have total assets of \$5 million or more on the last day of your most recent fiscal year?

- B. Do vou:
 - (1) control another investment adviser that had regulatory assets under management (calculated in response to Item 5.F.(2)(c) of Form ADV) of \$25 million or more on the last day of its most recent fiscal year?
 - (2) control another person (other than a natural person) that had total assets of \$5 million or more on the last day of its most recent fiscal year?
- - (1) controlled by or under common control with another investment adviser that had regulatory assets under management (calculated in response to Item 5.F.(2)(c) of Form ADV) of \$25 million or more on the last day of its most recent fiscal year?
 - (2) controlled by or under common control with another person (other than a natural person) that had total assets of \$5 million or more on the last day of its most recent
 - fiscal year?

Schedule A

Direct Owners and Executive Officers

- 1. Complete Schedule A only if you are submitting an initial application or report. Schedule A asks for information about your direct owners and executive officers. Use Schedule C to amend this information.
- 2. Direct Owners and Executive Officers. List below the names of:
 - (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, Chief Compliance Officer (Chief Compliance Officer is required if you are registered or applying for registration and cannot be more than one individual), director, and any other individuals with similar status or functions;
 - (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act); Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Schedule, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days,
 - through the exercise of any option, warrant, or right to purchase the security. (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital:
 - (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
 - (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.
- 4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.
- 5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).
- 6. Ownership codes are: NA less than 5% B - 10% but less than 25% D - 50% but less than 75%
 - A 5% but less than 10% C - 25% but less than 50% E - 75% or more
- 7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.
 - (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
 - (c) Complete each column.

FULL LEGAL NAME (Individuals: Last Name,	DE/FE/I	Status	Date Status	Ownership	Control	PR	CRD No. If None: S.S. No. and Date of Birth,	
First Name, Middle Name)			Acquired MM/YYYY	Code	Person		IRS Tax No. or Employer ID No.	
PLAZA LLC	DE	DIRECT OWNER	03/1996	E	Υ	N		
MARKHAM, CRAIG WILLIAM	I	PRESIDENT AND DIRECTOR	07/2005	NA	Υ	N	1383638	
HALPERIN, JEFFREY PAUL	I	ANTI-MONEY LAUNDERING OFFICER	04/2006	NA	Υ	N	2899327	
COHN, MARC ALLAN	I	CHIEF COMPLIANCE OFFICER,	10/2006	NA	Υ	N	2464524	
		INVESTMENT ADVISER						

MARTINEZ, JOHN GREGORY	I	VICE PRESIDENT AND FINANCIAL AND OPERATIONS PRINCIPAL	05/2007	NA	Υ	N	2210722
AQUINO, VIRGELAN ERNESTO	I	CHIEF COMPLIANCE OFFICER, BROKER DEALER	10/2007	NA	Υ	N	2976229
LACEK, MICHAEL J	I	CHIEF LEGAL OFFICER	03/2008	NA	Υ	N	xxx-xx-xxxx
DWYER, JAMES	I	VICE PRESIDENT, LICENSING AND REGISTRATION	08/2006	NA	Υ	N	xxx-xx-xxxx
TORRES, ISAAC	I	SECRETARY	05/2010	NA	Υ	N	xxx-xx-xxxx
FORGET, ELIZABETH MARY	I	DIRECTOR	06/2012	NA	Υ	N	2767945
CARRIER, ANDRE THEODORE	I	CHIEF OPERATIONS OFFICER	04/2013	NA	Υ	N	2257728

Schedule B

Indirect Owners

- 1. Complete Schedule B only if you are submitting an initial application. Schedule B asks for information about your indirect owners; you must first complete Schedule A, which asks for information about your direct owners. Use Schedule C to amend this information.
- 2. Indirect Owners. With respect to each owner listed on Schedule A (except individual owners), list below:
 - (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

- (b) in the case of an owner that is a partnership, <u>all</u> general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;
- (c) in the case of an owner that is a trust, the trust and each trustee; and
- (d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.
- 3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.
- 4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.
- 5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).
- 6. Ownership codes are: $\,$ C 25% but less than 50% $\,$ E 75% or more
 - D 50% but less than 75% F Other (general partner, trustee, or elected manager)
- 7. (a) In the *Control Person* column, enter "Yes" if the *person* has *control* as defined in the Glossary of Terms to Form ADV, and enter "No" if the *person* does not have *control*. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are *control persons*.
 - (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
 - (c) Complete each column.

FULL LEGAL NAME (Individuals: Last Name, First	DE/FE/I	Entity in Which Interest is Owned	Status	Date Status	Ownership	Control	PR	CRD No. If None:
Name, Middle Name)				Acquired	Code	Person		S.S. No. and Date of
				MM/YYYY				Birth, IRS Tax No. o
								Employer ID No.
METLIFE INSURANCE COMPANY OF	DE	PLAZA LLC	SHAREHOLDER	03/1996	E	Υ	N	
CONNECTICUT (FORMERLY TRAVELERS								
INSURANCE COMPANY)								
METLIFE, INC.	DE	METLIFE INSURANCE COMPANY OF	PARENT	07/2005	Е	Υ	Υ	
		CONNECTICUT (FORMERLY TRAVELERS						
		INSURANCE COMPANY)						

Schedule D - Miscellaneous

You may use the space below to explain a response to an Item or to provide any other information.

ITEM 7.A. TOWER SQUARE SECURITIES, INC. (THE ADVISER) HAS ADDITIONAL RELATED PERSONS THAT ARE INVESTMENT ADVISERS, HOWEVER, EACH OF THESE ENTITIES HAS NO BUSINESS DEALINGS WITH THE ADVISER, DOES NOT CONDUCT JOINT OPERATIONS WITH THE ADVISER AND DOES NOT PRESENT ANY POTENTIAL CONFLICT OF INTEREST WITH THE ADVISER'S CLIENTS. ADDITIONALLY, THE ADVISER DOES NOT PROVIDE ADVICE THAT IS FORMULATED, IN WHOLE OR IN PART, BY ANY OF THESE ENTITIES. ITEM 7.B. RELATED PERSONS OF THE ADVISER THAT ARE NOT SEC-REGISTERED ALSO ACT AS GENERAL PARTNERS OF ADDITIONAL LIMITED PARTNERSHIPS AND AS MANAGING MEMBERS OF ADDITIONAL LIMITED LIABILITY COMPANIES THAT INVEST ONLY PROPRIETARY ASSETS. IF THE SEC STAFF BELIEVES THAT A LIST OF THESE ADDITIONAL LIMITED PARTNERSHIPS AND LIMITED LIABILITY COMPANIES IS NECESSARY, SUCH A LIST WILL BE PROVIDED.

DRP Pages

No Information Filed				
REGULATORY ACTION DI	ISCLOSURE REPORTING PAGE (AD)V)		
This Disalogura Banartin	og Dogo (DDD ADV) in on - INITI/	GENERAL INSTRU		oppose to Itomo 11 C
	g Page (DRP ADV) is an O INITIA	OR AIMENDED response used	to report details for animative respo	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G
of Form ADV.				
		Regulatory Acti	on	
Check item(s) being resp	ponded to:	regulatory res.		
▼ 11.C(1)	☑ 11.C(2)	□ 11.C(3)	□ 11.C(4)	☑ 11.C(5)
11.D(1)	□ 11.D(2)	□ 11.D(3)	□ 11.D(4)	□ 11.D(5)
11.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	(0)
11.F.	□ 11.G.	L 11.L(3)	L 11.L(4)	
Jse a separate DRP for of Execution Page.	each event or <i>proceeding</i> . The sar	me event or <i>proceeding</i> may be report	ed for more than one <i>person</i> or ent	ity using one DRP. File with a completed
	more than one affirmative answer to han one regulator, provide details to		.G. Use only one DRP to report det	ails related to the same event. If an event gives
	ian one regulator, provide details to	o each action on a separate DIVI.		
PART I A. The <i>person(s)</i> or en	ntity(ies) for whom this DRP is bein	ng filed is (are):		
C You (the advisor	ry firm)			
	more of your advisory affiliates			
One or more of y	your advisory affiliates			
	,			
ū	ate has a <i>CRD</i> number, provide tha	the full name of the <i>advisory affiliate</i> be at number. If not, indicate "non-register		•
	JKT AFFILIATE			
CRD Number:		This advisory affiliate is . a Firm	an Individual	
Registered: O	Yes © No			
	TRAVELERS INSURANCE			
	MPANY			
(For	individuals, Last, First, Middle)			
This DRP shoul	ld be removed from the ADV record	d because the advisory affiliate(s) is not depend on the decause: (1) the event or proceeding yed in the adviser's or advisory affiliate.	occurred more than ten years ago	r. or (2) the adviser is registered or applying for
-		·		
				sponse to Item 11.D(4), and only if that event d in Item 11 that occurred more than ten years
☐ This DRP shoul	ld be removed from the ADV record	d because it was filed in error, such as	due to a clerical or data-entry mista	ake. Explain the circumstances:
	ate is registered through the IARD ser is "Yes," no other information on t	-	ory affiliate submitted a DRP (with F	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for th
C Yes © No				
NOTE: The complet	tion of this form does not relieve th	ne <i>advisory affiliate</i> of its obligation to u	pdate its IARD or <i>CRD</i> records.	
PART II	nitiated by			
Regulatory Action in SEC — Other F		oreign		
	Federal O State O SRO O Fo			
(Full name of regula N/A	ator, foreign financial regulatory au	uthority, federal, state, or SRO)		
2 Dringing Carette				
Principal Sanction: Other				
Other Sanctions:				

CONSENT ORD	ER			
Date Initiated (MN	M/DD/YYYY):			
·	Exact C Explanation			
If not exact, prov	•			
4. Docket/Case Nu	ımber:			
ADMIN PROC. F	ILE NO. 3-8355			
5. Advisory Affiliate N/A	Employing Firm when activity occurre	ed which led to the regulatory action (i	f applicable):	
6. Principal Produc	t Type:			
No Product Other Product Ty	/pes:			
	egations related to this regulatory actions and the second state of the second state o			
8. Current Status?	C Pending C On Appeal G	Final		
9. If on appeal, reg	ulatory action appealed to (SEC, SRO), Federal or State Court) and Date Ap	peal Filed:	
If Final or On Appeal	, complete all items below. For Pendin	ng Actions, complete Item 13 only.		
10. How was matter	resolved:			
Consent				
11. Resolution Date	(MM/DD/YYYY):			
05/03/1994	Exact C Explanation			
If not exact, prov	•			
12. Resolution Deta	il:			
A. Were any o	of the following Sanctions Ordered (ch	eck all appropriate items)?		
	ary/Fine Amount: \$,		
	ation/Expulsion/Denial	!	☐ Disgorgement/Restitution	
☐ Censu			Cease and Desist/Injunction	
	16		,	
☐ Bar B. Other Sand	ctions Ordered:	,	Suspension	
Principal, e condition h you or an <i>a</i>	tc.). If requalification by exam/retraining	ng was a condition of the sanction, pro ed in a fine, penalty, restitution, disgo	vide length of time given to requali	Securities Principal, Financial Operations ify/retrain, type of exam required and whether on, provide total amount, portion levied against
Provide a brief s provided).	ummary of details related to the action	n status and (or) disposition and inclu	de relevant terms, conditions and	dates (your response must fit within the space
	LVED BY CONSENT ORDER 5/3/1994	i.		
		GENERAL INSTRU	CTIONS	
This Disclosure Report of Form ADV.	rting Page (DRP ADV) is an $_{ extstyle ar{ extstyle C}}$ INITIA	AL OR • AMENDED response used	to report details for affirmative resp	ponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
		Regulatory Act	ion	
Check item(s) being r	esponded to:	Regulatory Act	IUII	
11.C(1)	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
, ,				
☑ 11.D(1)	▼ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
11.E(1)	☐ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
□ 11.F.	□ 11.G.			

	a separate DRP for each event or proceeding. The same event or proceeding may be reported for more than one person or entity using one DRP. File with a completed cution Page.
	event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives to actions by more than one regulator, provide details to each action on a separate DRP.
PAF	सा
A.	The person(s) or entity(ies) for whom this DRP is being filed is (are):
	C You (the advisory firm)
	C You and one or more of your advisory affiliates
	One or more of your advisory affiliates
	advisory amiliates
	If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVISORY AFFILIATE
	CRD Number: This advisory affiliate is a Firm an Individual
	Registered: C Yes O No
	Name: THE TRAVELERS INSURANCE
	COMPANY (For individuals, Last, First, Middle)
	(1.0) maintagais, East, 1 ms, imagas)
	 This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or advisory affiliate's favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes O No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAF	RT II
1.	Regulatory Action initiated by:
	C SEC Other Federal State C SRO C Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) APPLICANT IS GATHERING THE REQUIRED INFORMATION.
2.	Principal Sanction:
	Other Sanctions:
3.	Date Initiated (MM/DD/YYYY):
	02/23/2001 C Exact Explanation
	If not exact, provide explanation: AT THE TIME OF THE FILING, APPLICANT IS IN THE PROCESS OF GATHERING THE REQUIRED INFORMATION.
4.	Docket/Case Number:
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type:
	Insurance Other Braduct Times:
	Other Product Types: AT THE TIME OF THE FILING, APPLICANT IS IN THE PROCESS OF GATHERING THE REQUIRED INFORMATION.

7.	_	ations related to this regulatory actio THE FILING, APPLICANT IS IN THE P			
		·			
8.	Current Status?	Pending On Appeal O	Final		
9.	If on appeal, regula	atory action appealed to (SEC, SRO,	Federal or State Court) and Date Ap	peal Filed:	
If F	inal or On Appeal, c	omplete all items below. For Pending	Actions, complete Item 13 only.		
10.	How was matter re	esolved:			
11.	Resolution Date (M	M/DD/YYYY):			
	C Exact C Ex	olanation			
	If not exact, provide	e explanation:			
12.	Resolution Detail:				
	A. Were any of t	the following Sanctions Ordered (che	ck all appropriate items)?		
	Monetary	/Fine Amount: \$			
	Revocati	on/Expulsion/Denial	1	Disgorgement/Restitution	
	Censure		1	Cease and Desist/Injunction	
	☐ Bar		1	Suspension	
	B. Other Sanction	ons Ordered:			
13.	condition has you or an adversarial Provide a brief surprovided). AT THE TIME OF TAIL QUESTIONS REQUESTIONS	been satisfied. If disposition resulter visory affiliate date paid and if any point and the prize of the action the filling, APPLICANT IS IN THE P	d in a fine, penalty, restitution, disgortion of penalty was waived: status and (or) disposition and inclu ROCESS OF GATHERING THE REQ THE APPLICANT WILL AMEND THE	orgement or monetary compensation and conditions are conditions.	y/retrain, type of exam required and whether in, provide total amount, portion levied against dates (your response must fit within the space SEEN ADVISED BY THE AFFILIATE THAT RED INFORMATION AS SOON AS IT BECOMES
	D: 1 D ::	D (DDD AD)(); INITIAL	GENERAL INSTRU		
		ng Page (DRP ADV) is an 👩 INITIAL	OR AMENDED response used	to report details for affirmative respons	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G
of Fo	orm ADV.				
			Regulatory Act	ion	
	ck item(s) being res	·	_	_	_
	11.C(1)	□ 11.C(2)	11.C(3)	11.C(4)	☐ 11.C(5)
	11.D(1)	□ 11.D(2)	11.D(3)	11.D(4)	□ 11.D(5)
	11.E(1) 11.F.	☑ 11.E(2) ☐ 11.G.	☐ 11.E(3)	□ 11.E(4)	
	11.5.	LITT.G.			
	a separate DRP for cution Page.	each event or proceeding. The same	e event or <i>proceeding</i> may be repor	ted for more than one person or ent	tity using one DRP. File with a completed
		more than one affirmative answer to han one regulator, provide details to		1.G. Use only one DRP to report def	tails related to the same event. If an event gives
PAR	TI				
		ntity(ies) for whom this DRP is being	filed is (are):		
		ory firm)			
	C You and one or	more of your advisory affiliates			
	C One or more of	your advisory affiliates			
	If this DRP is boing	n filed for an advisory affiliate, give th	e full name of the advisory affiliate by	alow (for individuals I ast name Fin	ret name, Middle name)

If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

	ADV DRP - ADVISORY AFFILIATE
	No Information Filed
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes ⊙ No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	T II
1.	Regulatory Action initiated by: O SEC Other Federal O State SRO O Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) NASD REGULATION, INC.
2.	Principal Sanction: Censure Other Sanctions: CENSURE, FINE, RESTITUTION. OTHER SACTIONS: HIRE CONSULTANT TO REVIEW AND RECOMMEND REVISIONS TO CERTAIN POLICIES AND PROCEDURES.
3.	Date Initiated (MM/DD/YYYY):
	01/17/2002 © Exact © Explanation If not exact, provide explanation:
4.	Docket/Case Number: C050210003
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable): N/A
6.	Principal Product Type: Other
	Other Product Types: VARIABLE CONTRACTS.
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): FAILURE TO SUPERVISE; FAILURE TO MAINTAIN AND/OR ENFORCE WRITTEN SUPERVISORY PROCEDURES IN CERTAIN AREAS RELATED TO VARIABLE CONTRACTS
8.	Current Status? C Pending C On Appeal Final
9.	If on appeal, regulatory action appealed to (SEC, <i>SRO</i> , Federal or State Court) and Date Appeal Filed: N/A
lf F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.
10.	How was matter resolved:
	Acceptance, Waiver & Consent(AWC)
11.	Resolution Date (MM/DD/YYYY):
	01/17/2002 Exact Explanation If not exact, provide explanation:

e a separate DRP for each event or proceeding. The same event or proceeding may be reported for more than one person or entity using one DRP. File with a completed ecution Page. Be event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event give to actions by more than one regulator, provide details to each action on a separate DRP. BRT1 The person(s) or entity(les) for whom this DRP is being filled is (are): You (the advisory firm) You and one or more of your advisory affiliates One or more of your advisory affiliates If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box. ADV DRP -ADVISORY AFFILIATE Registered: Yes ONO Name: THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle) This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for the adviser is registered.	2. Reso	lution De	etail:			
Recording Expension Department of the processing and the processing of Cases and Desatisfunction By Contract Annual Contract of Cases and Desatisfunction Particular (A.). The post Ministry of Cases and Cases an	A.	Were an	y of the following Sanctions Ordere	d (check all appropriate items)?		
Recording Expension Department of the processing and the processing of Cases and Desatisfunction By Contract Annual Contract of Cases and Desatisfunction Particular (A.). The post Ministry of Cases and Cases an		☑ Mon	etary/Fine Amount: \$ 200,000.00			
Census Consus Con				ş	Disgorgement/Restitution	
□ Char □ Characteria Gracuat Hele CONSULTION TO NexIVEW AND RECOMMEND REVISIONS TO CERTAIN DUE SHAD PROCEDURES. Searction indexil if suppended, explained to horned, explained to brind, explained for the standon, provide length of time glues to impulsify themis. Type of scan required and provide behalf of the pends, restulation, percent design of time glues to impulsify themis. Type of scan required and pends of the standon, provide length of time glues to impulsify themis. Type of scan required and pends of the pends of the standon, provide length of time glues to impulsify themis. Type of scan required condition has been astalled. If Indigenous results and in the pends of restulation, designated on the reduction provides to standon, provide			•			
B. Check Students Celebrated. HIND CORRESTANT TO REVIEW AND RECOMBEND REVISIONS TO CERTAIN POLICIES AND PROCEDURES. Sanction details if a separated with the Common including stand data and dispatches deferred. General Securities, Principal Financial Quantities. Principal of Life Regulations to warm deproved to be an advantage of the process of the p			Suite		•	
HIRE CONSULTANT TO REVIEW AND RECOMMEND REVISIONS TO CERTAN POLICIES AND PROCEDURES. Sinction deligible if suppressed, end-informed parter provised surface in claims and and and postplants are decaded (Sonaral Sociation Principal, Principal, etc.). If repeatable information are suppressed and set of the surface and the surface, principal single information to requilifycretion, type of exam required and variety and the surface principal princ				,	_ Suspension	
POR RESTITUTION AMOUNT. 1. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the span provided). 1. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the span provided to the provided prov		HIRE CC Sanction Principal condition you or ar CENSUF	NSULTANT TO REVIEW AND REC detail: if suspended, enjoined or b , etc.). If requalification by exam/reto has been satisfied. If disposition re an advisory affiliate date paid and if a RED AND FINED \$200,000. SATISFA	arred, provide duration including start date raining was a condition of the sanction, procesulted in a fine, penalty, restitution, disgony portion of penalty was waived: ACTORY PROOF OF PAYMENT OF RESTI	and capacities affected (General S vide length of time given to requalify rgement or monetary compensation TUTION IN THE AMOUNT OF \$4,36	y/retrain, type of exam required and whether n, provide total amount, portion levied against 65,167.26 IS REQUIRED WITHIN 60 DAYS
TOWER SOLARS SEQUENTIES, INC. ENTERED INTO AN AWAY WITH THE NASD ON 11/202 PURSUANT TO WHICH TOWER SOLARS ACCEPTED AND CONSENTED THE FINDINGS OF THE NASD, WITHOUT ADMITTING OR DENVING THE ALLECATIONS UPON WHICH THE FINDINGS WERE BASED. THE FINDINGS WERE THAT TOW SOLARS FALLED TO SUPERVISE A FORMER REG. RED DIRING 3/100-5/100-7/4				. RESTROTION ORDER DOES NOT ENVIR	TOWER GOORE GEOORITIES, II	VO. O MOITI TO OBTAIN NEIMBONGEMENT
THE FINDINGS OF THE NASD, WITHOUT AMMITTING OR DEN'IND THE ALLEGATIONS UPON WHICH THE FINDINGS WERE BASED. THE FINDINGS WERE THAT TOW SOLIARE FALLS A FORMER REG. THE POURING STYLIND SHOWS HIGH THE FINDINGS WERE SASED. THE FINDINGS WERE THAT TOW SOLIARE FALLS OF OWNERS OF THE FINDINGS WERE THAT TOW SOLIARE FALLS OF THE FINDINGS WERE THAT TOW SOLIARE FALLS OF THE FINDINGS WERE THAT TOW SOLIARE FALLS OF THE FINDINGS WERE THAT TOW SOLIARE SURFIT THE SUPERVISORY PROCEDURES IN CERTAIN AREAS RELATED TO VARIABLE CONTRACTS. GENERAL INSTRUCTIONS			f summary of details related to the	action status and (or) disposition and inclu	de relevant terms, conditions and c	dates (your response must fit within the space
Is Disclosure Reporting Page (DRP ADV) is an ONTIAL OR AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 1 Form ADV. Regulatory Action	THE I	FINDING ARE FAIL	S OF THE NASD, WITHOUT ADMIT LED TO SUPERVISE A FORMER RE	TING OR DENYING THE ALLEGATIONS U EG. REP. DURING 3/1/00-5/19/01; AND THI	PON WHICH THE FINDINGS WER	E BASED. THE FINDINGS WERE THAT TOWER
Regulatory Action ceck item(s) being responded to: 11.0(1)				GENERAL INSTRU	CTIONS	
Regulatory Action ceck item(s) being responded to: 11.0(1)	nis Disclo	sure Rep	porting Page (DRP ADV) is an 👩 I			onses to Items 11.C., 11.D., 11.E., 11.F. or 11.
Regulatory Action teck item(s) being responded to: 11.C(1)			~	 -		
the file (ii) being responded to: 11.C(1)						
11.C(1)				Regulatory Acti	on	
11.D(1)		, ,	•	_	_	_
In the parameter DRP for each event or proceeding. The same event or proceeding may be reported for more than one person or entity using one DRP. File with a completed ecution Page. The event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event give to actions by more than one regulator, provide details to each action on a separate DRP. The person(s) or entity(les) for whom this DRP is being filed is (are): You (the advisory affiliate) One or more of your advisory affiliates This DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If this DRP advisory affiliate has a GRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box. ADV DRP - ADVISORY AFFILIATE This advisory affiliate is a Firm an Individual Registered: Yes No Name: THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle)	. ,			, ,		* *
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COMPANY (For individuals, Last, First, Middle) This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for	Reg	jistered:	O Yes O No			
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This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for			(For individuals, Last, First, Middle)		
This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for	_					
registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate'</i> s favor.						or (∠) the adviser is registered or applying to

If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event

	ago.	a DNI Tor any event listed in item 11 that occurred more than ten years
	\square This DRP should be removed from the ADV record because it was filed in error, such as due to a	clerical or data-entry mistake. Explain the circumstances:
3.	3. If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate event? If the answer is "Yes," no other information on this DRP must be provided.	e submitted a DRP (with Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the
	C Yes No	
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its l	ARD or CRD records.
٩R	ART II	
	. Regulatory Action initiated by: O SEC Other Federal State O SRO O Foreign	
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) VARIOUS	
2.	2. Principal Sanction:	
	Other Sanctions:	
3.	B. Date Initiated (MM/DD/YYYY):	
	02/23/2001 C Exact Explanation	
	If not exact, provide explanation: AT THE TIME OF THE INITIAL NOTIFICATION THE APPLICANT WAS IN THE PROCESS OF GATHERI TRAVELERS INSURANCE COMPANY IN RESPONSE TO QUESTION 11D.(4).	NG THE REQUIRED INFORMATION. WE HAVE POSTED DRPS FOR THE
١.	Docket/Case Number:	
i.	6. Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable	e):
5.	5. Principal Product Type: Insurance	
	Other Product Types: WE HAVE POSTED DRPS FOR THE TRAVELERS INSURANCE COMPANY.	
	7. Describe the allegations related to this regulatory action (your response must fit within the space prov WE HAVE POSTED DRPS FOR THE TRAVELERS INSURANCE COMPANY IN RESPONSE TO QUES	
3.	3. Current Status?	
).	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:	
F	Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.	
0.	How was matter resolved:	
1.	Resolution Date (MM/DD/YYYY):	
	C Exact C Explanation If not exact, provide explanation:	
2.	2. Resolution Detail: A. Ware any of the following Senetions Ordered (sheek all appropriate items)?	
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?	
	☐ Monetary/Fine Amount: \$ ☐ Revocation/Expulsion/Denial ☐ Disgon	gement/Restitution
		and Desist/Injunction
	☐ Bar ☐ Suspe	
	B. Other Sanctions <i>Ordered:</i>	
	Sanction detail: if suspended, enjoined or harred, provide duration including start date and cana	ucities affected (General Securities Principal Financial Operations
		umes anecieu Greneral Seculhes Ennonsi, Emancial Unaranine

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against

INFORMATION.	/ISED BY THE AFFILIATE THAT QUES	TIONS REQUIRED AN AFFIRMATIVE TRAVELERS INSURANCE COMPANY	RESPONSE. WE HAVE AMENDED C	ates (your response must fit within the space DUR FILING TO INCLUDE THE REQUIRED D.(4). AND 11D.(2). THEREFORE, THIS INITIA
		GENERAL INSTRU	CTIONS	
nis Disclosure Repo	orting Page (DRP ADV) is an $_{igcirc}$ INITI $_{igcirc}$	AL OR • AMENDED response used	to report details for affirmative respon	nses to Items 11.C., 11.D., 11.E., 11.F. or 11.
Form ADV.				
		Regulatory Act	ion	
heck item(s) being	•	-	-	5
11.C(1)	☐ 11.C(2)	11.C(3)	□ 11.C(4)	☐ 11.C(5)
11.D(1)	✓ 11.D(2)	11.D(3)	☑ 11.D(4)	□ 11.D(5)
11.E(1) 11.F.	☐ 11.E(2) ☐ 11.G.	☐ 11.E(3)	□ 11.E(4)	
se to actions by mo	ore than one regulator, provide details to	o each action on a separate DRP.	, i	ails related to the same event. If an event give
O You (the adv	visory firm)			
- Vou and an				
C rou and one	e or more of your			
	e or more of your advisory affiliates e of your advisory affiliates			
One or more If this DRP is be If the advisory a			-	·
One or more If this DRP is be If the advisory a ADV DRP - ADV CRD	e of your advisory affiliates eing filed for an advisory affiliate, give to affiliate has a CRD number, provide the		ed" by checking the appropriate box.	·
One or more If this DRP is be If the advisory a ADV DRP - ADV CRD Number:	e of your advisory affiliates eing filed for an advisory affiliate, give to affiliate has a CRD number, provide that VISORY AFFILIATE	at number. If not, indicate "non-register	ed" by checking the appropriate box.	·
One or more If this DRP is be If the advisory a ADV DRP - ADV CRD Number: Registered: Name:	e of your advisory affiliates eing filed for an advisory affiliate, give to affiliate has a CRD number, provide the	at number. If not, indicate "non-register	ed" by checking the appropriate box.	•
One or more If this DRP is be If the advisory a ADV DRP - ADV CRD Number: Registered: Name: () () This DRP sl registration If you are regist occurred more ago. This DRP sl occurred more ago.	eing filed for an advisory affiliate, give the affiliate has a CRD number, provide that VISORY AFFILIATE O Yes O No THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle) chould be removed from the ADV record with the SEC and the event was resolved that then years ago. If you are registered chould be removed from the ADV record with the New Years ago.	This advisory affiliate is a Firm decause the advisory affiliate(s) is not decause: (1) the event or proceeding wed in the adviser's or advisory affiliate ties authority, you may remove a DRP ed or registering with the SEC, you may decause it was filed in error, such as system or CRD system, has the advisory	an Individual an Individual an Individual an occurred more than ten years ago of sis favor. for an event you reported only in response y remove a DRP for any event listed and the side of the sid	or (2) the adviser is registered or applying for ponse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years
If this DRP is be If the advisory a ADV DRP - ADV CRD Number: Registered: Name: 10 (1) (1) This DRP sl registration If you are registration occurred more ago. This DRP sl registration occurred more ago.	eing filed for an advisory affiliate, give to affiliate has a CRD number, provide that VISORY AFFILIATE O Yes O No THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle) Chould be removed from the ADV record with the SEC and the event was resolved than ten years ago. If you are registered thould be removed from the ADV record than ten years ago. If you are registered thould be removed from the ADV record than ten years ago. If you are registered through the IARD shows its registered through the IARD sho	This advisory affiliate is a Firm decause the advisory affiliate(s) is not decause: (1) the event or proceeding wed in the adviser's or advisory affiliate ties authority, you may remove a DRP ed or registering with the SEC, you may decause it was filed in error, such as system or CRD system, has the advisory	an Individual an Individual an Individual an occurred more than ten years ago of sis favor. for an event you reported only in response y remove a DRP for any event listed and the side of the sid	or (2) the adviser is registered or applying for ponse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years ake. Explain the circumstances:
One or more If this DRP is be If the advisory a ADV DRP - ADV CRD Number: Registered: Name: ☐ This DRP sl ☐ This DRP sl ☐ registration If you are regist occurred more ago. ☐ This DRP sl ☐ the advisory are event? If the anse ☐ Yes N NOTE: The com	eing filed for an advisory affiliate, give to affiliate has a CRD number, provide that VISORY AFFILIATE O Yes O No THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle) Chould be removed from the ADV record with the SEC and the event was resolved than ten years ago. If you are registered thould be removed from the ADV record than ten years ago. If you are registered thould be removed from the ADV record than ten years ago. If you are registered through the IARD shows its registered through the IARD sho	This advisory affiliate is a Firm decause the advisory affiliate(s) is not decause: (1) the event or proceeding wed in the adviser's or advisory affiliate ties authority, you may remove a DRP ed or registering with the SEC, you may decause it was filed in error, such as system or CRD system, has the advise this DRP must be provided.	an Individual	or (2) the adviser is registered or applying for ponse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years ake. Explain the circumstances:
One or more If this DRP is be If the advisory a ADV DRP - ADV CRD Number: Registered: Name: This DRP sl This DRP sl registration If you are regist occurred more ago. This DRP sl occurred more ago.	eing filed for an advisory affiliate, give to affiliate has a CRD number, provide that VISORY AFFILIATE O Yes O No THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle) Chould be removed from the ADV record with the SEC and the event was resolved than ten years ago. If you are registered than ten years ago. If you are registered through the IARD shower is "Yes," no other information on No	This advisory affiliate is a Firm decause the advisory affiliate(s) is not decause: (1) the event or proceeding wed in the adviser's or advisory affiliate ties authority, you may remove a DRP ed or registering with the SEC, you may decause it was filed in error, such as system or CRD system, has the advise this DRP must be provided.	an Individual	or (2) the adviser is registered or applying for ponse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years ake. Explain the circumstances:

13.	 Provide a brief summary of details related to the action status and (or) d provided). PAYMENT OF COMMISSIONS TO AN UNLICENSED AGENCY. 	disposition and include relevant terms, conditions and dates (your response must fit within the space
	Principal, etc.). If requalification by exam/retraining was a condition	
	☐ Bar B. Other Sanctions <i>Ordered</i> :	☐ Suspension
	☐ Censure	Cease and Desist/Injunction
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution
	Monetary/Fine Amount: \$ 26,000.00	s items).
12.	 Resolution Detail: A. Were any of the following Sanctions Ordered (check all appropriate 	e items)?
12	2. Resolution Detail:	
	06/14/2002 Exact Explanation If not exact, provide explanation:	
11.	Resolution Date (MM/DD/YYYY):	
	Settled	
10.	D. How was matter resolved:	
If F	Final or On Appeal, complete all items below. For Pending Actions, comple	ete Item 13 only.
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State	Court) and Date Appeal Filed:
8.	Current Status? ☐ Pending ☐ On Appeal	
7.	Describe the allegations related to this regulatory action (your response PAYMENT OF COMMISSIONS TO AN UNLICENSED AGENCY.	must fit within the space provided):
6.	Principal Product Type: Insurance Other Product Types:	
5.	Advisory Affiliate Employing Firm when activity occurred which led to the THE TRAVELERS INSURANCE COMPANY	regulatory action (if applicable):
4.	Docket/Case Number: N/A	
	06/14/2002	
3.		
2.	Principal Sanction: Civil and Administrative Penalt(ies) /Fine(s) Other Sanctions:	

Regulatory Action

of Form ADV.

Check item(s) being responded to:

□ 1	1.C(1)	☐ 11.C(2)	□ 11.C(3)	□ 11.C(4)	☐ 11.C(5)					
□ 1	1.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)					
□ 1	1.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)						
<u>□</u> 1	1.F.	☐ 11.G.								
	Use a separate DRP for each event or <i>proceeding</i> . The same event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP. File with a completed Execution Page.									
	-	ult in more than one affirmative answe nore than one regulator, provide detail	er to Items 11.C., 11.D., 11.E., 11.F. or 1 s to each action on a separate DRP.	1.G. Use only one DRP to report det	ails related to the same event. If an even	t gives				
PAR	TI									
A.	The person(s) O You (the a	or entity(ies) for whom this DRP is bed dvisory firm)	eing filed is (are):							
		ne or more of your advisory affiliates								
	⊙ One or mo	ore of your advisory affiliates								
		-	re the full name of the <i>advisory affiliate</i> be that number. If not, indicate "non-registe		•					
	ADV DRP - A	DVISORY AFFILIATE								
	CRD Number:		This advisory affiliate is © a Firm (an Individual						
	Registered:	C Yes O No								
	Name:	THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle)								
		(1 of marviduals, East, 1 list, Middle)								
 This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (registration with the SEC and the event was resolved in the adviser's or advisory affiliate's favor. If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in respondencement of the proceeding occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in 					or (2) the adviser is registered or applying the polying ponse to Item 11.D(4), and only if that expense to the polying that expense the polying the polying that expense the polying the polying the polying the polying the polying that expense the polying the polying the polying the polying th	vent				
	ago. This DRP	should be removed from the ADV rec	ord because it was filed in error, such a	s due to a clerical or data-entry mista	ake. Explain the circumstances:					
В.	=	r affiliate is registered through the IAR answer is "Yes," no other information of	D system or <i>CRD</i> system, has the <i>advis</i> on this DRP must be provided.	ory affiliate submitted a DRP (with F	orm ADV, BD or U-4) to the IARD or <i>CRI</i>) for the				
	O Yes •	No								
	NOTE: The co	ompletion of this form does not relieve	the advisory affiliate of its obligation to u	update its IARD or <i>CRD</i> records.						
PAR	TII									
1.		ction initiated by:								
	O SEC O	Other Federal © State O SRO O	Foreign							
	(Full name of	regulator, foreign financial regulatory								
2.	Principal San Civil and Adm Other Sanction	ninistrative Penalt(ies) /Fine(s)								
3.	Date Initiated	(MM/DD/YYYY):								
J.		Exact C Explanation								
		rovide explanation:								
4.	Docket/Case	Number:								
	N/A									
5.	Advisory Affili	ate Employing Firm when activity occu	urred which led to the regulatory action (i	f applicable):						

THE TRAVELERS INSURANCE COMPANY

6.	No P	cipal Product Type: Product or Product Types:				
7.		_	-	ion (your response must fit within		
8.	Curre	ent Status? C Pen	ding C On Appeal C	• Final		
9.	If on	appeal, regulatory action	on appealed to (SEC, SRC), Federal or State Court) and Date	e Appeal Filed:	
If F	inal or	On Appeal, complete	all items below. For Pendir	ng Actions, complete Item 13 only		
10.	How Othe	was matter resolved:				
11.	Resc	olution Date (MM/DD/YY	YY):			
		6/2001	-			
12.	Reso	olution Detail:				
	A.	Were any of the follow	ing Sanctions Ordered (ch	neck all appropriate items)?		
		Monetary/Fine Am Monetary → Mon	ount: \$ 500.00			
		Revocation/Expul	sion/Denial		☐ Disgorgement/Restitution	
		Censure			Cease and Desist/Injunction	
		☐ Bar			☐ Suspension	
	B.	Other Sanctions Order	red:			
13.	provi	Principal, etc.). If required condition has been sayou or an <i>advisory affi</i> . A FINE WAS IMPOSED ide a brief summary of ided).	alification by exam/retraining tisfied. If disposition resulting the date paid and if any position and if any position are controlled to the action details related to the action alification.	ng was a condition of the sanction ted in a fine, penalty, restitution, o ortion of penalty was waived: L AFFILIATE AND THE FINE WAS	, provide length of time given to requalif disgorgement or monetary compensation PAID. NO PORTION OF THE FINE WAS include relevant terms, conditions and o	Securities Principal, Financial Operations y/retrain, type of exam required and whether n, provide total amount, portion levied against WAIVED. dates (your response must fit within the space
				GENERAL INS		
			(DRP ADV) is an 👩 INITI	AL OR © AMENDED response u	sed to report details for affirmative resp	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Fo	orm A[OV.				
				Regulatory	/ Action	
		m(s) being responded t		-	-	-
	I1.C(1 I1.D(1		□ 11.C(2) ☑ 11.D(2)	☐ 11.C(3) ☐ 11.D(3)	□ 11.C(4) ⊡ 11.D(4)	☐ 11.C(5) ☐ 11.D(5)
	гт.D(т l1.E(1		□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	L 11.D(5)
	11.F.)	☐ 11.G.	L 11.L(3)	L 11.L(+)	
	-	arate DRP for each eve Page.	ent or <i>proceeding</i> . The sa	me event or <i>proceeding</i> may be r	eported for more than one <i>person</i> or en	tity using one DRP. File with a completed
		-		o Items 11.C., 11.D., 11.E., 11.F. o each action on a separate DRP	·	tails related to the same event. If an event gives
PAR	ΤI					
A.	-		for whom this DRP is beir	ng filed is (are):		
	\circ	ou (the advisory firm)				

	You and one or more of your advisory affiliates
	One or more of your advisory affiliates
	If this DRP is being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVISORY AFFILIATE
	CRD Number: Registered: O Yes O No Name: THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle)
	 This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or advisory affiliate's favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes O No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAF	RT II
1.	Regulatory Action initiated by: C SEC Other Federal State C SRO C Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) VARIOUS
2.	Principal Sanction:
	Other Sanctions:
3.	Date Initiated (MM/DD/YYYY):
	02/23/2001 Exact Explanation If not exact, provide explanation: AT THE TIME OF THE INITIAL NOTIFICATION THE APPLICANT WAS IN THE PROCESS OF GATHERING THE REQUIRED INFORMATION. WE HAVE POSTED DRPS FOR THE TRAVELERS INSURANCE COMPANY IN RESPONSE TO QUESTION 11D.(4).
4.	Docket/Case Number:
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type: Insurance
	Other Product Types: WE HAVE POSTED DRPS FOR THE TRAVELERS INSURANCE COMPANY IN RESPONSE TO QUESTION 11D.(4).
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): WE HAVE POSTED DRPS FOR THE TRAVELERS INSURANCE COMPANY IN RESPONSE TO QUESTIONS 11D.(4).11D.(2).
8.	Current Status?
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10.	How was ma	atter resolved:			
11.	Resolution D	ate (MM/DD/YYYY):			
	C Exact	Explanation			
	If not exact, p	provide explanation:			
12.	Resolution D	Detail:			
	A. Were a	ny of the following Sanctions Ordered (chec	k all appropriate items)?		
	□ Мо	netary/Fine Amount: \$			
	☐ Re	vocation/Expulsion/Denial	1	Disgorgement/Restitution	
	☐ Ce	nsure	I	Cease and Desist/Injunction	
	🔲 Ва	r	1	Suspension	
	B. Other S	Sanctions Ordered:			
	Principa condition	-	was a condition of the sanction, pro l in a fine, penalty, restitution, disgo	vide length of time given to requalify	ecurities Principal, Financial Operations /retrain, type of exam required and whether n, provide total amount, portion levied against
13.	Provide a bri	ef summary of details related to the action	status and (or) disposition and inclu	de relevant terms, conditions and d	ates (your response must fit within the space
	WE WERE A		AVELERS INSURANCE COMPANY		OUR FILING TO INCLUDE THE REQUIRED D.(4). AND 11D.(2). THEREFORE, THIS INITIAL
	DRP NO LOI	NGER APPLIES AND SHOULD BE REMOVE	:υ. 		
This	Disclosure R	eporting Page (DRP ADV) is an 🧸 INITIAL	GENERAL INSTRU AMENDED response used		onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
	orm ADV.	.,	OR •		,,
5110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
			Regulatory Act	ion	
		ng responded to:	T 44 C(2)	T 11 C(1)	□ 11.C(5)
	1.C(1) 1.D(1)	□ 11.C(2) ☑ 11.D(2)	☐ 11.C(3) ☐ 11.D(3)	□ 11.C(4) □ 11.D(4)	☐ 11.D(5)
	1.E(1)	☐ 11.E(2)	□ 11.E(3)	☐ 11.E(4)	L 11.D(5)
	1.E(1) 1.F.	□ 11.G.	□ 11.E(3)	□ 11.Ε(4)	
	a separate Di	RP for each event or <i>proceeding</i> . The same	e event or <i>proceeding</i> may be repor	ted for more than one person or ent	ity using one DRP. File with a completed
	-	cult in more than one affirmative answer to l	tome 11 C 11 D 11 E 11 E or 1:	1 G. Uso only one DPP to report dat	ails related to the same event. If an event gives
	-	more than one regulator, provide details to e		i.d. dae dilly dile bitti to report det	and related to the same event. If an event gives
PAR	ТІ				
A.		s) or entity(ies) for whom this DRP is being t advisory firm)	filed is (are):		
	~	one or more of your advisory affiliates			
		ore of your advisory affiliates			
		being filed for an <i>advisory affiliat</i> e, give the y affiliate has a <i>CRD</i> number, provide that r		•	·
	ADV DRP - A	ADVISORY AFFILIATE			
	CRD Number:		is advisory affiliate is 🧿 a Firm 🤇	an Individual	
	Registered	· C Yes • No			
	Name:	THE TRAVELERS INSURANCE			
		COMPANY (For individuals, Last, First, Middle)			

	 This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for 						
	registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate</i> 's favor.						
If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that e occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten ago.							
	\square This DRP should be removed from the ADV record because it was filed in error, such a	as due to a clerical or data-entry mistake. Explain the circumstances:					
B.	If the <i>advisory affiliate</i> is registered through the IARD system or <i>CRD</i> system, has the <i>advisory</i> event? If the answer is "Yes," no other information on this DRP must be provided.	isory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the					
	O Yes O No						
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to	update its IARD or <i>CRD</i> records.					
PAR	тш						
1.	Regulatory Action initiated by: OSEC Other Federal State OSRO OForeign						
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) GEORGIA DEPARTMENT OF INSURANCE						
2.	Principal Sanction:						
	Other Other Sanctions: ADMINISTRATIVE FINE						
3.	Date Initiated (MM/DD/YYYY):						
	03/31/2003						
4.	Docket/Case Number: 2003C-006						
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action	(if applicable):					
6.	Principal Product Type: No Product Other Product Types:						
7.	Describe the allegations related to this regulatory action (your response must fit within the FAILED TO PROVIDE RESPONSES ON GENERAL INFORMATION REQUEST TO GEORG						
8.	Current Status? C Pending C On Appeal Final						
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date A	appeal Filed:					
lf F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.						
10.	How was matter resolved: Other						
11.	Resolution Date (MM/DD/YYYY):						
	04/15/2003						
12.	Resolution Detail:						
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?						
	Monetary/Fine Amount: \$ 1,000.00						
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution					
	☐ Censure	Cease and Desist/Injunction					
	☐ Bar	☐ Suspension					

13.	 B. Other Sanctions Ordered: NON APPLICABLE. Sanction detail: if suspended, enjoined or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an advisory affiliate date paid and if any portion of penalty was waived: ON JUNE 23, 2003, THE TRAVELERS INSURANCE COMPANY SIGNED A STIPULATION AGREEMENT AND PAID A FINE IN THE AMOUNT OF \$1,000. 13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided). ON JUNE 23, 2003, THE TRAVELERS INSURANCE COMPANY SIGNED A STIPULATION AGREEMENT AND PAID A FINE IN THE AMOUNT OF \$1,000. 						
This	GENERAL INSTRUCTIONS Disclosure Reporting Page (DRP ADV) is an C INITIAL OR C AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.						
	orm ADV.						
	Regulatory Action						
Che	ck item(s) being responded to:						
	11.C(1)						
	11.D(1)						
	11.E(1)						
	11.F. □ 11.G.						
PAR A.	The person(s) or entity(ies) for whom this DRP is being filed is (are): You (the advisory firm) You and one or more of your advisory affiliates One or more of your advisory affiliates If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.						
	ADV DRP - ADVISORY AFFILIATE						
	CRD Number: Registered: O Yes O No Name: THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle) This advisory affiliate is O a Firm O an Individual a Firm O an Individual a Firm O an Individual						
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor. If you are registered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event						
	occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago. This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:						
B.							
	NOTE: The completion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records.						

PAR'	T II	
1.	Regulatory Action initiated by: O SEC Other Federal State O SRO O Foreign	
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) NEVADA DIVISION OF INSURANCE	
2.	Principal Sanction: Other Other Sanctions:	
	ADMINISTRATIVE FINE	
3.	Date Initiated (MM/DD/YYYY):	
	01/01/2003	
4.	Docket/Case Number: 03.324	
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory activity	ion (if applicable):
6.	Principal Product Type:	
	No Product Other Product Types:	
7.	Describe the allegations related to this regulatory action (your response must fit within FAILURE TO MAKE TIMELY SUBMISSION OF COMPLAINT REPORT FOR YEAR 2001.	the space provided):
8.	Current Status? C Pending C On Appeal Final	
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Dat	e Appeal Filed:
lf Fi	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only	′ .
10.	How was matter resolved: Other	
11.	Resolution Date (MM/DD/YYYY):	
	04/24/2003 Exact Explanation If not exact, provide explanation:	
12.	Resolution Detail:	
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?	
	Monetary/Fine Amount: \$ 1,000.00	_
	☐ Revocation/Expulsion/Denial ☐ Censure	☐ Disgorgement/Restitution ☐ Cease and Desist/Injunction
	☐ Bar	Suspension
	B. Other Sanctions Ordered:	
		n, provide length of time given to requalify/retrain, type of exam required and whether disgorgement or monetary compensation, provide total amount, portion levied against
13.	Provide a brief summary of details related to the action status and (or) disposition and provided).	include relevant terms, conditions and dates (your response must fit within the space
	ON JULY 17, 2003, THE TRAVELERS INSURANCE COMPANY SIGNED CONSENT TO	FINE AND PAID A FINE IN THE AMOUNT OF \$1,000.

	of Form ADV.									
Regulatory Action										
	Check item(s) being responded to:									
		1.C(1)	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	☐ 11.C(5)				
		1.D(1)	☑ 11.D(2)	□ 11.D(3)	✓ 11.D(4)	☐ 11.D(5)				
		1.D(1) 1.E(1)	□ 11.E(2)	11.E(3)	□ 11.E(4)	L 11.D(J)				
			□ 11.E(2)	L 11.E(3)	L 11.E(4)					
	□ 11	1.F.	L 11.G.							
Ш	Use a separate DRP for each event or <i>proceeding</i> . The same event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP. File with a completed Execution Page.									
				o Items 11.C., 11.D., 11.E., 11.F. or 11.6 o each action on a separate DRP.	G. Use only one DRP to report deta	ails related to the same event. If an event gives				
	PART	1								
П		The person(s) or entity(ies) for	r whom this DRP is bein	ng filed is (are):						
		C You (the advisory firm)								
		C You and one or more of yo	ur advisory affiliates							
		 One or more of your adviso 								
		adviso	ory aπiliates							
				the full name of the advisory affiliate below the full name of the advisory affiliate below the full name of		·				
		ADV DRP - ADVISORY AFFILI	ATE							
		CRD		This advisory affiliate is © a Firm O	an Individual					
		Number:		This advisory anniate is \bigcirc a firm	an muividuai					
		Registered: O Yes O No	0							
			RS INSURANCE							
		COMPANY (For individuals	s, Last, First, Middle)							
		(i oi maividdaio	, Laot, Friot, Wildard)							
		This DRP should be remove	ved from the ADV record	d because the advisory affiliate(s) is no d because: (1) the event or proceeding oved in the adviser's or advisory affiliate's	occurred more than ten years ago	or (2) the adviser is registered or applying for				
		-	-			oonse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years				
		☐ This DRP should be remove	ved from the ADV record	d because it was filed in error, such as o	due to a clerical or data-entry mista	ke. Explain the circumstances:				
		If the <i>advisory affiliate</i> is regist event? If the answer is "Yes," r	_	-	y affiliate submitted a DRP (with Fo	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the				
		C Yes · No								
	ı	NOTE: The completion of this	form does not relieve th	e advisory affiliate of its obligation to up	date its IARD or <i>CRD</i> records.					
		·		, , , , , , , , , , , , , , , , , , , ,						
	PART	·II								
	1.	Regulatory Action initiated by:								
		OSEC Other Federal	State O SRO O Fo	preign						
			n financial regulatory au	uthority, federal, state, or SRO)						
	2.	Principal Sanction:								
		Other								
		Other Sanctions:								
		FORFEITURE								
	•	D / 1 // / 1/1								
		Date Initiated (MM/DD/YYYY):								
		06/26/2000								
Ш		If not exact, provide explanatio	n:							

	00-C26631							
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):							
6.	Principal Product Type: No Product Other Product Types:							
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): ALLOWED SOLICITATION OF INSURANCE AND ACCEPTED APPLICATIONS PRIOR TO PROPERLY LISTING THE INDIVIDUAL IN QUESTION.							
8.	8. Current Status? C Pending C On Appeal 6 Final							
9.	If on appeal, regulatory action appealed to (SEC,	SRO, Federal or State Court) and Date Ap	peal Filed:					
lf F	inal or On Appeal, complete all items below. For P	ending Actions, complete Item 13 only.						
10.	How was matter resolved: Other							
11.	Resolution Date (MM/DD/YYYY):							
	07/19/2000							
		arred, provide duration including start date raining was a condition of the sanction, procesulted in a fine, penalty, restitution, disgony portion of penalty was waived: TROL AFFILIATE AND WAS PAID. NO POR action status and (or) disposition and inclu	ovide length of time given to requal orgement or monetary compensation.	ify/retrain, type of exam required and whether on, provide total amount, portion levied against				
	Disclosure Reporting Page (DRP ADV) is an $_{f C}$ lorm ADV.	GENERAL INSTRU NITIAL OR © AMENDED response used		ponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.				
		Regulatory Ac	ion					
Che	ck item(s) being responded to:	, g ,						
	11.C(1)	□ 11.C(3)	□ 11.C(4)	☐ 11.C(5)				
	11.D(1)	11.D(3)	☑ 11.D(4)	☐ 11.D(5)				
	11.E(1) □ 11.E(2) 11.F. □ 11.G.	□ 11.E(3)	□ 11.E(4)					
	a separate DRP for each event or <i>proceeding</i> . Th	e same event or <i>proceeding</i> may be repor	ted for more than one <i>person</i> or e	ntity using one DRP. File with a completed				
One	event may result in more than one affirmative ans	wer to Items 11.C., 11.D., 11.E., 11.F. or 1	1.G. Use only one DRP to report o	letails related to the same event. If an event gives				

rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

4. Docket/Case Number:

A.	You (the a	dvisory firm)				
	~	ne or more of your advisory affiliates				
	One or more of your advisory affiliates					
	If this DRP is I	being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). **affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.				
	ADV DRP - AI	DVISORY AFFILIATE				
	CRD	This advisory affiliate is . a Firm . an Individual				
	Number: Registered:	O Yes				
	Name:	THE TRAVELERS INSURANCE COMPANY				
		(For individuals, Last, First, Middle)				
	This DRP registration	should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for an with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.				
		e than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years				
	This DRP	should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:				
B.	-	affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the nswer is "Yes," no other information on this DRP must be provided.				
	C Yes ©	No				
	NOTE: The co	impletion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.				
PAF	RT II					
1.	-	tion initiated by: other Federal ⊙ State				
	(Full name of	regulator, foreign financial regulatory authority, federal, state, or SRO) VADA, DEPARTMENT OF BUSINESS AND INDUSTRY, DIVISION OF INSURANCE.				
2.	Principal Sand	ction:				
	Other Sanctio ADMINISTRAT					
3.	Date Initiated (MM/DD/YYYY):				
		Exact C Explanation ovide explanation:				
4.	Docket/Case CAUSE NUME					
5.	Advisory Affilia	ate Employing Firm when activity occurred which led to the regulatory action (if applicable):				
6.	Principal Prod	uct Type:				
	Other Product	Types:				
7.		allegations related to this regulatory action (your response must fit within the space provided): FILE ANNUAL COMPLAINT REPORT WITH THE DIVISION OF INSURANCE.				
8.	Current Status	? O Pending O On Appeal S Final				

9. If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.					
_	How Othe	was matter resolved: r			
11.	Reso	lution Date (MM/DD/YYYY):			
	07/0 <i>8</i>	3/1999			
		exact, provide explanation:			
		oxadi, provide explanation.			
12.	Resc	olution Detail:			
	A.	Were any of the following Sanctions Ordered (che	eck all appropriate items)?		
		✓ Monetary/Fine Amount: \$ 500.00	,		
		Revocation/Expulsion/Denial		☐ Disgorgement/Restitution	
		☐ Censure		☐ Cease and Desist/Injunction	
		□ Bar		☐ Suspension	
	B.	Other Sanctions Ordered:		•	
	Provi	Sanction detail: if suspended, <i>enjoined</i> or barred. Principal, etc.). If requalification by exam/retraining condition has been satisfied. If disposition resulte you or an <i>advisory affiliate</i> date paid and if any po A FINE WAS IMPOSED AGAINST THE CONTROL. ide a brief summary of details related to the action ded).	g was a condition of the sanction, ped in a fine, penalty, restitution, disprtion of penalty was waived: AFFILIATE AND WAS PAID. NO PC	provide length of time given to requalify gorgement or monetary compensation PRTION OF THE FINE WAS WAIVED.	y/retrain, type of exam required and whether n, provide total amount, portion levied against
			GENERAL INSTR	RUCTIONS	
This I		osure Reporting Page (DRP ADV) is an $_{ m C}$ INITIAI	L OR	ed to report details for affirmative response	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
			Regulatory A	Action	
		n(s) being responded to:	=		5
□ 1°	,	,	11.C(3)	□ 11.C(4)	11.C(5)
□ 1°	,	,	11.D(3)	☑ 11.D(4)	□ 11.D(5)
□ 1°		D 11.E(2) ☐ 11.G.	☐ 11.E(3)	□ 11.E(4)	
111	.F.	L 11.G.			
Exection of the contract of th	ution event	arate DRP for each event or <i>proceeding</i> . The sam Page. may result in more than one affirmative answer to ons by more than one regulator, provide details to	tems 11.C., 11.D., 11.E., 11.F. or	·	
DADT	1				
PART		person(s) or entity(ies) for whom this DRP is being	r filed is (are).		
		ou (the advisory firm)	, mod 15 (d. 6).		
	~				
		ou and one or more of your advisory affiliates			
	⊙ O	one or more of your advisory affiliates			
		DRP is being filed for an <i>advisory affiliate</i> , give th advisory affiliate has a <i>CRD</i> number, provide that		-	·
	ADV	DRP - ADVISORY AFFILIATE			
		mber: gistered: O Yes ⊙ No	This advisory affiliate is	C an Individual	

	(For individuals, Last, First, Middle)				
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.				
	If you are registered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.				
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:				
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.				
	C Yes No				
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.				
PAR	T II				
1.	Regulatory Action initiated by:				
	OSEC Other Federal oState O SRO OF oreign				
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE				
2.	Principal Sanction: Other				
	Other Sanctions: LATE FILING FEE				
3.	Date Initiated (MM/DD/YYYY):				
	06/15/1998 © Exact C Explanation If not exact, provide explanation:				
4.	Docket/Case Number: N/A				
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):				
6.	Principal Product Type: No Product Other Product Types:				
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): PROPERTY AND CASUALTY ANNUAL FINANCIAL STATEMENT WAS NOT FILED ON A TIMELY BASIS.				
8.	Current Status? C Pending C On Appeal Final				
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:				
If Fi	nal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.				
10.	How was matter resolved: Other				
11.	Resolution Date (MM/DD/YYYY):				
	07/16/1998 © Exact C Explanation If not exact, provide explanation:				
12.	Resolution Detail:				
	A. Were any of the following Sanctions Ordered (check all appropriate items)?				
	✓ Monetary/Fine Amount: \$ 472.00				
	Revocation/Expulsion/Denial Disgorgement/Restitution				

L Celisule		'	Cease and Desistrinjunction			
☐ Bar		l	Suspension			
B. Other Sanction	ns Ordered:					
Sanction detail	l: if suspended, <i>enjoined</i> or barred	-	•	ecurities Principal, Financial Operations		
Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied agains you or an advisory affiliate date paid and if any portion of penalty was waived: A FINE WAS IMPOSED AGAINST THE CONTROL AFFILIATE AND WAS PAID. NO PORTION OF THE FINE WAS WAIVED.						
A FINE WAS IIV	IPOSED AGAINST THE CONTROL.	AFFILIATE AND WAS PAID. NO POR	TION OF THE FINE WAS WAIVED.			
Provide a brief sumr provided).	mary of details related to the action	status and (or) disposition and inclu	ide relevant terms, conditions and da	ites (your response must fit within the space		
This Displacure Departing	* Page (DDD ADV) is an INITIA	GENERAL INSTRU		page to Itame 44 C 44 D 44 E 44 E or 44 C		
	Page (DRP ADV) is an C initial	OR OR AMENDED response used	to report details for aniirmative respo	nses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.		
of Form ADV.						
		Regulatory Act	ion			
Check item(s) being resp	onded to:					
□ 11.C(1)	☐ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)		
□ 11.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)		
□ 11.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	(0)		
□ 11.F.	☐ 11.G.	L 11.L(0)	L 11.L(1)			
Jse a separate DRP for e	each event or <i>proceeding</i> . The sam	ne event or <i>proceeding</i> may be repor	ted for more than one <i>person</i> or entit	y using one DRP. File with a completed		
Execution Page.	, ,		·			
D	(b	14 44 O 44 D 44 E 44 E 4	4.O. Hannards and DDD to some of date	the related to the course over the consequence of		
	nore tnan one affirmative answer to an one regulator, provide details to		1.G. Use only one DRP to report deta	ils related to the same event. If an event gives		
ise to actions by more the	an one regulator, provide details to	each action on a separate DRF.				
PARTI						
	ity(ies) for whom this DRP is being	filed is (ore):				
,		filled is (are).				
O You (the advisory						
$_{ m C}$ You and one or r	more of your <i>advisory affiliate</i> s					
	our advisory affiliates					
	advisory affiliates					
Kahia DDD ia kaisasa		a fall a compact that a substance of filling to be		torage Middle care		
	-	e full name of the advisory affiliate be number. If not, indicate "non-register	-	•		
			and appropriate som			
ADV DRP - ADVISO	RY AFFILIATE					
CRD	Т	his advisory affiliate is 🌀 a Firm 🤇	an Individual			
Number:		The advisory difficult is - a riffing	an maividual			
Registered: O Y	es 🖲 No					
	TRAVELERS INSURANCE					
COMI						
(For i	ndividuals, Last, First, Middle)					
		because the advisory affiliate(s) is no				
				or (2) the adviser is registered or applying for		
registration with	the SEC and the event was resolve	ed in the adviser's or advisory affiliate	e's favor.			
If you are registered	d or registering with a state accuriti	an authority, you may ramay a DDD	for an event you reported only in reco	sones to Itam 11 D(1) and only if that event		
· · · · · · · · · · · · · · · · · · ·	-			oonse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years		
☐ This DRP should	d be removed from the ADV record	because it was filed in error, such as	s due to a clerical or data-entry mista	ke. Explain the circumstances:		
	te is registered through the IARD sy is "Yes," no other information on th		ory affiliate submitted a DRP (with Fo	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the		
C Yes © No						

PAR					
1.	Regulatory Action initiated by: C SEC C Other Federal State C SRO C Foreign				
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) OFFICE OF THE COMMISSIONER OF INSURANCE, STATE OF WISCONSIN				
2.	Principal Sanction: Other				
	Other Sanctions: ADMINISTRATIVE FINE				
3.	Date Initiated (MM/DD/YYYY):				
	06/01/1998 © Exact © Explanation If not exact, provide explanation:				
4.	Docket/Case Number: 98-C25487				
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory actio	n (if applicable):			
6.	Principal Product Type:				
	No Product Other Product Types:				
7.	Describe the allegations related to this regulatory action (your response must fit within the FAILURE TO PROMPTLY REPLY AND PROVIDE THE INFORMATION REQUESTED BY 1				
8.	Current Status? C Pending C On Appeal Final				
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date	Appeal Filed:			
If Fi	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.				
10.	How was matter resolved: Other				
11.	Resolution Date (MM/DD/YYYY):				
	06/16/1998 Exact				
	If not exact, provide explanation:				
12.	Resolution Detail:				
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?				
	✓ Monetary/Fine Amount: \$ 500.00				
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution			
	Censure	Cease and Desist/Injunction			
	☐ Bar	☐ Suspension			
	B. Other Sanctions Ordered:				
	Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start of Principal, etc.). If requalification by exam/retraining was a condition of the sanction, condition has been satisfied. If disposition resulted in a fine, penalty, restitution, di you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: A FINE WAS IMPOSED AGAINST THE CONTROL AFFILIATE AND WAS PAID. NO Penalty	provide length of time given to requalify/retrain, type of exam required and whether sgorgement or monetary compensation, provide total amount, portion levied against			
13.	Provide a brief summary of details related to the action status and (or) disposition and in provided).	nclude relevant terms, conditions and dates (your response must fit within the space			

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

	of Form ADV.					
	Regulatory Action					
	ck item(s) being responded to		_			
	11.C(1)	11.C(2)	☐ 11.C(3)	11.C(4)	□ 11.C(5)	
	11.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)	
	11.E(1)	11.E(2)	□ 11.E(3)	□ 11.E(4)		
	I1.F.	□ 11.G.				
One rise	event may result in more than to actions by more than one re	one affirmative answer		·	tity using one DRP. File with a completed tails related to the same event. If an event gives	
PAR						
Α.	The person(s) or entity(ies) for	or whom this DRP is bei	ng filed is (are):			
	C You (the advisory firm)					
	C You and one or more of you	our advisory affiliates				
	One or more of your advis	sory affiliates				
			the full name of the <i>advisory affiliate</i> be nat number. If not, indicate "non-registere	-	•	
	ADV DRP - ADVISORY AFFIL	IATE				
	CRD		This advisory affiliate is • a Firm •	an Individual		
	Number:		This davicery annuals to a Time	an marriada		
	Registered: O Yes O N	lo				
	Name: THE TRAVELE COMPANY	ers insurance s, Last, First, Middle)				
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor. If you are registered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.					
	☐ This DRP should be remo	oved from the ADV reco	rd because it was filed in error, such as	due to a clerical or data-entry mist	take. Explain the circumstances:	
B.	If the advisory affiliate is regis event? If the answer is "Yes,"		-	ory affiliate submitted a DRP (with F	Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the	
	C Yes ⊙ No					
	NOTE: The completion of this	form does not relieve t	he <i>advisory affiliate</i> of its obligation to υμ	odate its IARD or <i>CRD</i> records.		
PAR	T II					
1.	Regulatory Action initiated by:					
	C SEC C Other Federal	⊙ ^{State}	Foreign			
	(Full name of regulator, foreig MASSACHUSETTS DIVISION	•	nuthority, federal, state, or SRO)			
2.	Principal Sanction:					
	Other					
Other Sanctions:						
	FINE					
3.	Date Initiated (MM/DD/YYYY):					
	01/22/1996 © Exact C E	xplanation				

If not exact, provide explanation:

4.	Docket/Case Number: NOT AVAILABLE					
5.	Advisory Affiliate Employing	Firm when activity occurr	red which led to the regulatory action (if	applicable):		
6.	Principal Product Type:					
	No Product					
	Other Product Types:					
7.	Describe the allegations rela	ated to this regulatory act	ion (your response must fit within the s	pace provided):		
	PAYMENT OF COMMISSION	-		F F		
8.	Current Status? C Pend	ding On Appeal	⊙ Final			
9.	If on appeal, regulatory actio	n appealed to (SEC, <i>SR</i> 0	O, Federal or State Court) and Date Арр	peal Filed:		
lf F	inal or On Appeal, complete a	ll items below. For Pendi	ng Actions, complete Item 13 only.			
10.	How was matter resolved:					
	Other					
11.	Resolution Date (MM/DD/YYY	YY):				
	02/22/1996 © Exact © E	Explanation				
	If not exact, provide explanat	•				
12.	Resolution Detail:					
	,	•	neck all appropriate items)?			
	Monetary/Fine Amo		r	T Discussion and Described in		
	☐ Revocation/Expuls ☐ Censure	sion/Deniai		Disgorgement/Restitution Cease and Desist/Injunction		
	☐ Bar			☐ Suspension		
	B. Other Sanctions <i>Ordered:</i>					
	b. Caron Caronorio Cracio	ou.				
	Principal, etc.). If requa	lification by exam/retraini	ng was a condition of the sanction, pro-	vide length of time given to requalif	Securities Principal, Financial Operations y/retrain, type of exam required and whether on, provide total amount, portion levied against	
			portion of penalty was waived:	rgement of monetary compensation	in, provide total amount, portion levied against	
	A FINE WAS IMPOSED	AGAINST THE CONTRO	L AFFILIATE AND WAS PAID. NO PORT	TION OF THE FINE WAS WAIVED.		
4.0	5					
13.	provided).	details related to the action	on status and (or) disposition and inclu	de relevant terms, conditions and o	dates (your response must fit within the space	
			GENERAL INSTRU			
This	Disclosure Reporting Page (I	DRP ADV) is an $_{f C}$ INITI	AL OR AMENDED response used to	o report details for affirmative resp	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G	
of Fo	orm ADV.					
			Regulatory Acti	on		
Che	ck item(s) being responded to) :				
11.C(1)		11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)	
	11.D(1)	▼ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)	
	11.E(1)	11.E(2)	□ 11.E(3)	□ 11.E(4)		
	11.F.	□ 11.G.				
	a separate DRP for each ever	nt or <i>proceeding</i> . The sa	ame event or <i>proceeding</i> may be report	ed for more than one <i>person</i> or en	tity using one DRP. File with a completed	
LVG(outon i aye.					
One	event may result in more than	n one affirmative answer	to Items 11.C., 11.D., 11.E., 11.F. or 11	.G. Use only one DRP to report de	etails related to the same event. If an event gives	

rise to actions by more than one regulator, provide details to each action on a separate DRP.

PAR	RT I						
A.	The <i>person(s)</i> or entity(ies) for whom this DRP is being filed is (are): Output Output Description:						
	C You and one or more of your advisory affiliates						
	One or more of your advisory affiliates						
	If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.						
	ADV DRP - ADVISORY AFFILIATE						
	CRD Number: This advisory affiliate is • a Firm an Individual						
	Registered: O Yes O No						
	Name: THE TRAVELERS INSURANCE COMPANY						
	(For individuals, Last, First, Middle)						
	This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor. If you are registered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years						
	ago.						
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:						
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.						
	O Yes O No						
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.						
PAR	?T II						
1.							
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF FLORIDA DEPARTMENT OF INSURANCE						
2.	Principal Sanction: Other Other Sanctions:						
	ADMINISTRATIVE FINE						
3.	Date Initiated (MM/DD/YYYY):						
	08/17/1995 Exact Explanation If not exact, provide explanation:						
4.	Docket/Case Number: 08122-94-C-EMM						
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):						
6.	Principal Product Type:						
	Insurance						
	Other Product Types: LONG TERM CARE						
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided):						
	FAILURE TO FILE LONG TERM CARE ADVISERTISEMENTS PRIOR TO DISTRIBUTION.						
8.	Current Status? C Pending C On Appeal S Final						

9.	If on appeal, regulatory action	appealed to (SEC, SF	RO, Federal or State Court) and Date App	eal Filed:		
If Fi	If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.					
10.	How was matter resolved: Other					
11.	Resolution Date (MM/DD/YYYY	′):				
	09/05/1995					
12.	Resolution Detail:					
	A. Were any of the following	Sanctions Ordered (check all appropriate items)?			
	Monetary/Fine Amount Monetary/Fin	nt: \$ 16,000.00				
	Revocation/Expulsio	n/Denial		Disgorgement/Restitution		
	Censure			Cease and Desist/Injunction		
	☐ BarB. Other Sanctions Ordered	4.	L	Suspension		
13	Sanction detail: if suspended, enjoined or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an advisory affiliate date paid and if any portion of penalty was waived: A FINE WAS IMPOSED AGAINST THE CONTROL AFFILIATE AND WAS PAID. NO PORTION OF THE FINE WAS WAIVED.					
13.	provided).	tails related to the act	tion status and (or) disposition and includ	le relevant terms, conditions and	dates (your response must fit within the space	
Thio	Disalogura Paparting Daga (DE	PD ADV) is on - INII	GENERAL INSTRUC		conseq to Items 11 C	
	rm ADV.	(I ADV) IS ALL O IN	OR OR INITIAL DIESPONSE USEU IC	report details for animative resp	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.	
			Regulatory Action	n		
	ck item(s) being responded to:		5	5	.	
	1.C(1)	11.C(2)	11.C(3)	11.C(4)	□ 11.C(5)	
	1.D(1) 1.E(1)	☑ 11.D(2) ☐ 11.E(2)	□ 11.D(3) □ 11.E(3)	☑ 11.D(4) ☑ 11.E(4)	□ 11.D(5)	
		□ 11.G.	L 11.E(3)	L 11.E(4)		
	a separate DRP for each event ution Page.	or <i>proceeding</i> . The s	same event or <i>proceeding</i> may be reporte	ed for more than one <i>person</i> or en	tity using one DRP. File with a completed	
	<u>-</u>		r to Items 11.C., 11.D., 11.E., 11.F. or 11. s to each action on a separate DRP.	G. Use only one DRP to report de	etails related to the same event. If an event gives	
PAR1	ГІ					
A.	The person(s) or entity(ies) for You (the advisory firm)	whom this DRP is be	eing filed is (are):			
	$_{ m C}$ You and one or more of you	ur advisory affiliates				
	• One or more of your advisor					
	•		e the full name of the <i>advisory affiliate</i> bel hat number. If not, indicate "non-registere	•	•	
	ADV DRP - ADVISORY AFFILIA	ATE				
	CRD Number:		This advisory affiliate is a Firm	an Individual		
	Registered: O Yes O No	.				

	Name: THE TRAVELERS COMPANY (For individuals, La	
	This DRP should be removed	I from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. I from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
		g with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event o. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years
	☐ This DRP should be removed	I from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	-	ed through the IARD system or <i>CRD</i> system, has the <i>advisory affiliate</i> submitted a DRP (with Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the other information on this DRP must be provided.
	C Yes ⊙ No	
	NOTE: The completion of this form	m does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	PART II	
1.	3 ,	
		tate O SRO O Foreign Inancial regulatory authority, federal, state, or SRO) OF COMMERCE AND REGULATION
2.	Principal Sanction: Other	
	Other Sanctions: FINE	
3.	3. Date Initiated (MM/DD/YYYY):	
	09/06/2002	nation
4.	4. Docket/Case Number: 02-6122	
5.	5. Advisory Affiliate Employing Firm	when activity occurred which led to the regulatory action (if applicable):
6.	 Principal Product Type: No Product Other Product Types: 	
7.	-	to this regulatory action (your response must fit within the space provided): ISION OF INSURANCE REQUESTS FOR INFORMATION ON A TIMELY BASIS.
8.	8. Current Status? C Pending	C On Appeal
9.	9. If on appeal, regulatory action app	pealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
lf F	If Final or On Appeal, complete all iten	ms below. For Pending Actions, complete Item 13 only.
10.	10. How was matter resolved: Other	
11.	11. Resolution Date (MM/DD/YYYY):	
	09/12/2002	nation
12.	12. Resolution Detail:	
	A. Were any of the following Sa	anctions Ordered (check all appropriate items)?

Monetary/Fine Amount: \$ 2,500.00

	Revocation/Expulsion/Denial		■ Disgorgement/Restitution	
	Censure		Cease and Desist/Injunction	
	☐ Bar		Suspension	
B.	Other Sanctions Ordered:			
	Principal, etc.). If requalification by example condition has been satisfied. If disposity you or an <i>advisory affiliate</i> date paid and A FINE WAS IMPOSED AGAINST THE CO	ONTROL AFFILIATE AND WAS PAID. NO POR	ovide length of time given to requalify, orgement or monetary compensation TION OF THE FINE WAS WAIVED.	retrain, type of exam required and whether, provide total amount, portion levied against
13. Provi	·	the action status and (or) disposition and inclu	ide relevant terms, conditions and da	ites (your response must fit within the space
		GENERAL INSTRU	ICTIONS	
This Disclo	osure Reporting Page (DRP ADV) is an	O INITIAL OR	to report details for affirmative respo	nses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Form AD	OV.			
01 1 %	())	Regulatory Ac	tion	
	n(s) being responded to:	T _{44.0(0)}	T44.0(4)	T 44.0(5)
11.C(1		□ 11.C(3)	☐ 11.C(4)	□ 11.C(5)
11.D(1		□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
11.E(1)	11.E(2)	□ 11.E(3)	□ 11.E(4)	
☐ 11.F.	□ 11.G.			
		answer to Items 11.C., 11.D., 11.E., 11.F. or 1 details to each action on a separate DRP.	1.G. Use only one DRP to report deta	ills related to the same event. If an event gives
A. The μ	person(s) or entity(ies) for whom this DR	P is being filed is (are):		
~	ou (the advisory firm)			
	ou and one or more of your advisory affi	liates		
⊙ 0	one or more of your advisory affiliates			
	-	ate, give the full name of the advisory affiliate boovide that number. If not, indicate "non-registe	•	-
ADV	DRP - ADVISORY AFFILIATE			
	D mber: gistered: ◯ Yes ⊙ No	This advisory affiliate is 🧿 a Firm 🤇	an Individual	
	me: THE TRAVELERS INSURANC COMPANY			
	(For individuals, Last, First, M	ddle)		
ΠТ	his DRP should be removed from the Al	DV record because the advisory affiliate(s) is now record because: (1) the event or proceeding as resolved in the adviser's or advisory affiliated.	g occurred more than ten years ago	
-		te securities authority, you may remove a DRP registered or registering with the SEC, you may		
ПΤ	his DRP should be removed from the A	DV record because it was filed in error, such a	s due to a clerical or data-entry mista	ke. Explain the circumstances:
	advisory affiliate is registered through the consumer is "Yes," no other inform		cory affiliate submitted a DRP (with Fo	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the
OY	∕es . O No			

	NOT	E: The completion of this form does not relieve the advisory affiliate of its obligation	to update its IARD or CRD records.
PAR	ΤII		
1.		ulatory Action initiated by:	
		SEC Other Federal State O SRO O Foreign	
		I name of regulator, <i>foreign financial regulatory authority</i> , federal, state, or <i>SRO</i>) ISAS DEPARTMENT OF INSURANCE	
2.	Othe		
		er Sanctions: MINISTRATIVE PENALTY	
3.	Date	e Initiated (MM/DD/YYYY):	
	12/0	05/1994	
		t exact, provide explanation:	
4.	Doc NOI	ket/Case Number: NE	
5.	Adv	isory Affiliate Employing Firm when activity occurred which led to the regulatory action	n (if applicable):
6.	Prin	cipal Product Type:	
		Product	
	Othe	er Product Types:	
7.		cribe the allegations related to this regulatory action (your response must fit within t URE TO NOTIFY THE INSURANCE DEPARTMENT OF AGENT APPOINTMENT IN A	
8.	Curr	rent Status? C Pending C On Appeal Final	
9.	If on	appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date	Appeal Filed:
If F	inal o	r On Appeal, complete all items below. For Pending Actions, complete Item 13 only.	
10.	How	v was matter resolved:	
	Othe	er	
11.	Res	olution Date (MM/DD/YYYY):	
	12/2	22/1994	
		t exact, provide explanation:	
12.	Res	olution Detail:	
	A.	Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?	
		✓ Monetary/Fine Amount: \$ 1,500.00	
		Revocation/Expulsion/Denial	☐ Disgorgement/Restitution
		☐ Censure	☐ Cease and Desist/Injunction
		□ Bar	☐ Suspension
	B.	Other Sanctions Ordered:	
		Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start of Principal, etc.). If requalification by exam/retraining was a condition of the sanction,	provide length of time given to requalify/retrain, type of exam required and whether sgorgement or monetary compensation, provide total amount, portion levied against
13.		vide a brief summary of details related to the action status and (or) disposition and in rided).	nclude relevant terms, conditions and dates (your response must fit within the space

			GENERAL INSTRU	JCTIONS	
This	Disclosure Reporting Page (D	ORP ADV) is an O INITIAL OR	AMENDED response used	to report details for affirmative respon	ses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Fo	orm ADV.				
Cho	ck item(s) being responded to:		Regulatory Ac	tion	
	tk item(s) being responded to. 11.C(1)	. □ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
	11.D(1)	☑ 11.0(2)	□ 11.D(3)	✓ 11.D(4)	☐ 11.D(5)
	* *	,	, ,	. ,	L 11.D(5)
	11.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
	11.F.	□ 11.G.			
	a separate DRP for each even cution Page.	it or <i>proceeding</i> . The same eve	ent or <i>proceeding</i> may be repo	rted for more than one <i>person</i> or entity	y using one DRP. File with a completed
		one affirmative answer to Items egulator, provide details to each		1.G. Use only one DRP to report deta	ils related to the same event. If an event gives
PAR	ΤΙ				
A.		or whom this DRP is being filed i	is (are):		
	You (the advisory firm)	whom the Bra to boing mod t	10 (d10).		
	~				
	C You and one or more of you	our advisory affiliates			
	One or more of your advis				
	advis	iory affiliates			
			<u>-</u>	pelow (for individuals, Last name, Firstered" by checking the appropriate box.	name, Middle name).
	ADV DRP - ADVISORY AFFIL	JATE			
	CRD Number:	This ad	dvisory affiliate is 🌀 a Firm 🧐	an Individual	
	Registered: O Yes O N	1-			
	Name: THE TRAVELERS INSURANCE				
	COMPANY (For individuals, Last, First, Middle)				
	(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>			
	This DRP should be remo		use: (1) the event or <i>proceedin</i>	, ,	r (2) the adviser is registered or applying for
	· · · · · · · · · · · · · · · · · · ·				onse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years
	☐ This DRP should be remo	oved from the ADV record becau	use it was filed in error, such a	s due to a clerical or data-entry mistal	ke. Explain the circumstances:
В.	-	stered through the IARD system no other information on this DR	-	sory affiliate submitted a DRP (with Fo	rm ADV, BD or U-4) to the IARD or <i>CRD</i> for the
	C Yes © No				
	NOTE: The completion of this	form does not relieve the advis	cory affiliate of its obligation to	update its IARD or <i>CRD</i> records.	
PAR	ΤII				
1.	Regulatory Action initiated by:	: ⊙ ^{State}			
		gn financial regulatory authority,	federal, state, or SRO)		
2.	Principal Sanction:				
	Other Sanctions:				
	ADMINISTRATIVE FINE				

3. Date Initiated (MM/DD/YYYY):

4.	. Docket/Case Number: NONE					
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):					
6.	Principal Product Type: No Product Other Product Types:					
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): NON-COMPLIANCE WITH INSURANCE DEPARTMENT DIRECTIVE IN CONNECTION WITH A CONSUMER COMPLAINT.					
8.	. Current Status? C Pending C On Appeal . Fir	nal				
9.	. If on appeal, regulatory action appealed to (SEC, SRO, Fede	eral or State Court) and Date Ap	peal Filed:			
If F	Final or On Appeal, complete all items below. For Pending Act	ions, complete Item 13 only.				
10.	O. How was matter resolved: Other					
11.	Resolution Date (MM/DD/YYYY):					
	05/13/1993					
	If not exact, provide explanation:					
12.	2. Resolution Detail:					
	A. Were any of the following Sanctions Ordered (check a	Il appropriate items)?				
	✓ Monetary/Fine Amount: \$ 250.00	,				
	Revocation/Expulsion/Denial		☐ Disgorgement/Restitution			
	Censure		Cease and Desist/Injunction			
	☐ Bar		Suspension			
	B. Other Sanctions <i>Ordered:</i>					
	Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: A FINE WAS IMPOSED AGAINST THE CONTROL AFFILIATE AND WAS PAID. NO PORTION OF THE FINE WAS WAIVED.					
13.	Provide a brief summary of details related to the action stat provided).	us and (or) disposition and inclu	ude relevant terms, conditions and	dates (your response must fit within the space		
		GENERAL INSTRU				
	is Disclosure Reporting Page (DRP ADV) is an O INITIAL OR Form ADV.	→ AMENDED response used Output Description: Output Descri	to report details for affirmative resp	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.		
		Regulatory Ac	tion			
Che	neck item(s) being responded to:					
	11.C(1) □ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)		
	11.D(1)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)		
	□ 11.E(1) □ 11.E(2)	□ 11.E(3)	□ 11.E(4)			
	11.F. □ 11.G.					
	se a separate DRP for each event or <i>proceeding</i> . The same evecution Page.	rent or <i>proceeding</i> may be repor	ted for more than one <i>person</i> or en	tity using one DRP. File with a completed		

If not exact, provide explanation:

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

DAD	T!
PAR	
Α.	The person(s) or entity(ies) for whom this DRP is being filed is (are): O You (the advisory firm)
	C You and one or more of your advisory affiliates
	One or more of your advisory affiliates
	If this DRP is being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVISORY AFFILIATE
	CRD This advisory affiliate is a Firm an Individual
	Registered: O Yes O No
	Name: THE TRAVELERS INSURANCE
	COMPANY (For individuals, Last, First, Middle)
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	☐ This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes ⊙ No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	TII
1.	Regulatory Action initiated by: C SEC C Other Federal State C SRO C Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF UTAH DEPARTMENT OF INSURANCE
2.	Principal Sanction:
	Other
	Other Sanctions:
	ADMINISTRATIVE FINE
3.	
	11/20/2001 © Exact C Explanation If not exact, provide explanation:
4.	Docket/Case Number: 2001-215-HL
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type: No Product
	Other Product Types:
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided):
	FAILURE TO COMPLETE THE UTAH INSURANCE DEPARTMENT ACCIDENT AND HEALTH SURVEY ON A TIMELY BASIS.
	Current Status? C Pending C On Appeal C Final

9.	If on appeal, regulatory action appealed to (SE	C, SRO, Federal or State Court) and Date	Appeal Filed:	
If Fir	nal or On Appeal, complete all items below. For	Pending Actions, complete Item 13 only.		
	How was matter resolved: Other			
11.	Resolution Date (MM/DD/YYYY):			
	12/07/2001 © Exact C Explanation			
	If not exact, provide explanation:			
12.	Resolution Detail:			
	A. Were any of the following Sanctions Orde	ered (check all appropriate items)?		
	Monetary/Fine Amount: \$ 500.00			
	Revocation/Expulsion/Denial		Disgorgement/Restitution	
	☐ Censure		Cease and Desist/Injunction	
	☐ Bar		Suspension	
	B. Other Sanctions Ordered:			
	condition has been satisfied. If disposition you or an advisory affiliate date paid and it	n resulted in a fine, penalty, restitution, dis f any portion of penalty was waived: NTROL AFFILIATE AND WAS PAID. NO PO	sgorgement or monetary compensation	r/retrain, type of exam required and whether in, provide total amount, portion levied against lates (your response must fit within the space
		GENERAL INSTI	RUCTIONS	
	Disclosure Reporting Page (DRP ADV) is an common ADV.	NITIAL OR © AMENDED response use	ed to report details for affirmative respo	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
		Regulatory A	Action	
	k item(s) being responded to:	-	-	-
	1.C(1) ☐ 11.C(2)	□ 11.C(3)	□ 11.C(4)	11.C(5)
	1.D(1)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
L 1	1.E(1) ☐ 11.E(2) 1.F. ☐ 11.G.	□ 11.E(3)	□ 11.E(4)	
	1.F. L.11.G.			
Exec	a separate DRP for each event or <i>proceeding</i> . ution Page. event may result in more than one affirmative ar		·	
rise to	o actions by more than one regulator, provide d	etails to each action on a separate DRP.		
PART	ГІ			
A.	The <i>person(s)</i> or entity(ies) for whom this DRP You (the advisory firm)	is being filed is (are):		
	You and one or more of your advisory affilia	otos		
	One or more of your advisory affiliates	nes		
	If this DRP is being filed for an advisory affiliate If the advisory affiliate has a CRD number, prov	-		-
	ADV DRP - ADVISORY AFFILIATE			
	CRD		^	
	Number:	This advisory affiliate is © a Firm	un Individual	
	Registered: O Yes O No			
	Name: THE TRAVELERS INSURANCE			

	(For individuals, Last, First, Middle)
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	☐ This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	O Yes O No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAF	RT II
1.	Regulatory Action initiated by: O SEC Other Federal State O SRO O Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) OFFICE OF THE COMMISSIONER OF INSURANCE, STATE OF WISCONSIN
2.	Principal Sanction: Other
	Other Sanctions: ADMINISTRATIVE FINE
3.	Date Initiated (MM/DD/YYYY):
	04/24/2000 Exact Explanation If not exact, provide explanation:
4.	Docket/Case Number: 00-C26583
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type: No Product
	Other Product Types:
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): FAILURE TO PROMPTLY REPLY IN WRITING AND TO PROVIDE THE INFORMATION REQUESTED IN INQUIRIES MADE BY THE COMMISSIONER.
8.	Current Status? C Pending C On Appeal Final
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
If F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.
10.	How was matter resolved: Other
11.	Resolution Date (MM/DD/YYYY):
	05/18/2000 © Exact C Explanation
	If not exact, provide explanation:
12.	Resolution Detail:
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?
	Monetary/Fine Amount: \$ 500.00

COMPANY

		ocation/Expuision/Demai		Disgorgement/Restitution	
	Cer	nsure	1	Cease and Desist/Injunction	
	Bar		I	Suspension	
B.	Other S	anctions Ordered:			
	Principa conditio you or a	I, etc.). If requalification by exam/retrain has been satisfied. If disposition resun advisory affiliate date paid and if any	ning was a condition of the sanction, proulted in a fine, penalty, restitution, disgo	vide length of time given to requalify, rgement or monetary compensation	ecurities Principal, Financial Operations /retrain, type of exam required and whether , provide total amount, portion levied against
	vide a brie vided).	ef summary of details related to the act	ion status and (or) disposition and inclu	de relevant terms, conditions and d	ates (your response must fit within the space
			GENERAL INSTRU	CTIONS	
This Disc	closure Re	porting Page (DRP ADV) is an 👝 INIT			nses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Form A			OR ·		
JI I OIIII A	NDV.				
			Regulatory Act	ion	
Check its	em(s) bein	g responded to:	regulatory not	1011	
11.C(□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
			* *	* *	
11.D(` '	☑ 11.D(2)	☐ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
□ 11.E((1)	☐ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
□ 11.F.		□ 11.G.			
ise to ac	•	ult in more than one affirmative answel nore than one regulator, provide details		1.G. Use only one DRP to report deta	ails related to the same event. If an event gives
PARTI					
A. The	e person(s	or entity(ies) for whom this DRP is be	ing filed is (are):		
0	You (the a	dvisory firm)			
~					
0	You and c	ne or more of your advisory affiliates			
		ore of your advisory affiliates			
		-	e the full name of the advisory affiliate be nat number. If not, indicate "non-register	•	•
AD	V DRP - A	DVISORY AFFILIATE			
Nu	RD umber: egistered:	O Yes O No	This advisory affiliate is ⊙ a Firm ○	an Individual	
	ame:	THE TRAVELERS INSURANCE COMPANY (For individuals, Last, First, Middle)			
If you	This DRP registration ou are regulared monor.	should be removed from the ADV recommendation with the SEC and the event was resomistered or registering with a state security than ten years ago. If you are register	olved in the adviser's or advisory affiliate	y occurred more than ten years ago of s's favor. for an event you reported only in res y remove a DRP for any event listed	or (2) the adviser is registered or applying for ponse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years
					orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the
eve	ent? If the a	answer is "Yes," no other information or	-	, aa.c out into a Dixi (widii)	in the state of th
0	Yes 💿	No			

	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	T II
1.	Regulatory Action initiated by: O SEC Other Federal State O SRO O Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF FLORIDA DEPARTMENT OF INSURANCE
2.	Principal Sanction: Other Other Sanctions: ADMINISTRATIVE FINE
3.	Date Initiated (MM/DD/YYYY):
	12/16/1999
4.	Docket/Case Number: CASE NUMBER 27479-99-C
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type: No Product Other Product Types:
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): FAILURE TO SUBMIT ANNUAL RATE FILINGS FOR YEARS 1995 AND 1996.
8.	Current Status? Pending On Appeal Final
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
lf Fi	nal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.
10.	How was matter resolved: Other
11.	Resolution Date (MM/DD/YYYY):
	11/10/1999 © Exact © Explanation
	If not exact, provide explanation:
12.	Resolution Detail:
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?
	Monetary/Fine Amount: \$ 2,750.00
	Revocation/Expulsion/Denial Disgorgement/Restitution
	☐ Censure ☐ Cease and Desist/Injunction
	☐ Bar ☐ Suspension
	B. Other Sanctions <i>Ordered</i> :
	Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: A FINE WAS IMPOSED AGAINST THE CONTROL AFFILIATE AND WAS PAID. NO PORTION OF THE FINE WAS WAIVED.
13.	Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided).

	orm ADV.	ME ADV) IS ALL O INIT	OR OR ANIENDED response used to	report details for animative resp	unses to items 11.C., 11.D., 11.E., 11.F. of 11.G.
			Regulatory Action	on	
Che	ck item(s) being responded to:	:	• •		
	1.C(1)	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
- 1	1.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
	1.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
<u> </u>	1.F.	☐ 11.G.			
Exec	eution Page. event may result in more than	one affirmative answer			tity using one DRP. File with a completed stails related to the same event. If an event gives
PAR	TI				
A.	The person(s) or entity(ies) for	or whom this DRP is bei	ng filed is (are):		
	C You (the advisory firm)				
	C You and one or more of you	our advisory affiliates			
	One or more of your advis	sory affiliates			
			the full name of the <i>advisory affiliate</i> belat number. If not, indicate "non-registere	•	•
	ADV DRP - ADVISORY AFFIL	IATE			
	CRD		This advisory affiliate is • a Firm • C	an Individual	
	Number:				
	Registered: O Yes O N				
	COMPANY	ERS INSURANCE s, Last, First, Middle)			
	 □ This DRP should be remoregistration with the SEC of the second registration with the SEC of the second registration with the SEC of the second registrate occurred more than ten years ago. □ This DRP should be removed if the advisory affiliate is registevent? If the answer is "Yes," □ Yes □ No NOTE: The completion of this 	eved from the ADV reco and the event was reso tering with a state secur is ago. If you are register eved from the ADV reco extered through the IARD no other information on	Ived in the adviser's or advisory affiliate' ities authority, you may remove a DRP for red or registering with the SEC, you may red because it was filed in error, such as system or CRD system, has the advisor	occurred more than ten years ago is favor. or an event you reported only in revenove a DRP for any event lister due to a clerical or data-entry mistry affiliate submitted a DRP (with F	or (2) the adviser is registered or applying for sponse to Item 11.D(4), and only if that event d in Item 11 that occurred more than ten years
PAR	TII				
1.	Regulatory Action initiated by:				
	O SEC O Other Federal	⊙ ^{State}	oreign		
	(Full name of regulator, foreig TEXAS DEPARTMENT OF IN		uthority, federal, state, or SRO)		
2.	Principal Sanction:				
	Other Senetions:				
	Other Sanctions: ADMINISTRATIVE PENALTY				
	A DIVINITION TO THE LEVAL I				
3.	Date Initiated (MM/DD/YYYY):				
	05/11/1993 • Exact • E	xplanation			

If not exact, provide explanation:

4.	Docket/Case Number: NONE				
5.	Advisory Affiliate Employing Fire	rm when activity occurre	d which led to the regulatory action (i	applicable):	
6.	Principal Product Type:				
	No Product Other Product Types:				
7.	-	-	on (your response must fit within the s	space provided):	
	FAILURE TO RESPOND TO IN	SURANCE DEPARTMEN	NT INQUIRY ON A TIMELY BASIS.		
8.	Current Status? C Pendin	g On Appeal G) Final		
9.	If on appeal, regulatory action a	appealed to (SEC, <i>SRO,</i>	Federal or State Court) and Date Ap	peal Filed:	
lf Fi	inal or On Appeal, complete all i	tems below. For Pendin	g Actions, complete Item 13 only.		
10.	How was matter resolved: Other				
11.	Resolution Date (MM/DD/YYYY	r):			
	09/15/1993 ⓒ Exact ∁ Exp	planation			
	If not exact, provide explanation	า:			
12.	Resolution Detail:				
	A. Were any of the following	Sanctions Ordered (che	eck all appropriate items)?		
	✓ Monetary/Fine Amour				
	Revocation/Expulsion	n/Denial		Disgorgement/Restitution	
	Censure			Cease and Desist/Injunction	
	□ Bar		ı	Suspension	
	B. Other Sanctions Ordered	:			
13.	Principal, etc.). If requalificondition has been satisfyou or an advisory affiliate A FINE WAS IMPOSED AC	cation by exam/retrainin ied. If disposition resulte e date paid and if any po GAINST THE CONTROL	g was a condition of the sanction, proed in a fine, penalty, restitution, disgontion of penalty was waived: AFFILIATE AND WAS PAID. NO PORT	vide length of time given to requalif rgement or monetary compensatio	Securities Principal, Financial Operations fy/retrain, type of exam required and whether on, provide total amount, portion levied against dates (your response must fit within the space
This	Disclosure Reporting Page (DR	RP ADV) is an 👝 INITIA	GENERAL INSTRU L AMENDED response used		onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G
	orm ADV.	,	OR •		, , ,
			Regulatory Act	ion	
Che	ck item(s) being responded to:		g,		
□ 1	11.C(1)	□ 11.C(2)	☐ 11.C(3)	□ 11.C(4)	□ 11.C(5)
	11.D(1)	☑ 11.D(2)	11.D(3)	☑ 11.D(4)	□ 11.D(5)
	11.E(1)	11.E(2)	□ 11.E(3)	☐ 11.E(4)	
□ 1	11.F.	□ 11.G.			
	a separate DRP for each event cution Page.	or <i>proceeding</i> . The san	ne event or <i>proceeding</i> may be repor	ed for more than one <i>person</i> or en	tity using one DRP. File with a completed
One	event may result in more than o	one affirmative answer to	tems 11.C., 11.D., 11.E., 11.F. or 1	I.G. Use only one DRP to report de	etails related to the same event. If an event gives

rise to actions by more than one regulator, provide details to each action on a separate DRP.

٨	
А.	The person(s) or entity(ies) for whom this DRP is being filed is (are): O You (the advisory firm)
	C You and one or more of your advisory affiliates
	One or more of your advisory affiliates
	If this DRP is being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVISORY AFFILIATE
	CRD Number: This advisory affiliate is a Firm an Individual
	Registered: O Yes
	Name: THE TRAVELERS INSURANCE COMPANY
	(For individuals, Last, First, Middle)
	This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes O No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	от II
1.	
	O O SRO O O
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE
2.	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction:
2.	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE
2.	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction: Other Other Sanctions:
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction: Other Other Sanctions: ADMINISTRATIVE PENALTY
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction: Other Other Sanctions: ADMINISTRATIVE PENALTY Date Initiated (MM/DD/YYYY): 09/29/1993 Exact Explanation
3.	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction: Other Other Sanctions: ADMINISTRATIVE PENALTY Date Initiated (MM/DD/YYYY): 09/29/1993 Exact Explanation If not exact, provide explanation: Docket/Case Number:
3.	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction: Other Other Sanctions: ADMINISTRATIVE PENALTY Date Initiated (MM/DD/YYYY): 09/29/1993 Exact Explanation If not exact, provide explanation: Docket/Case Number: NONE
3.4.5.	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) TEXAS DEPARTMENT OF INSURANCE Principal Sanction: Other Other Sanctions: ADMINISTRATIVE PENALTY Date Initiated (MM/DD/YYYY): 09/29/1993

9.	If on appeal, regulato	ry action appealed to (SEC, SRO,	Federal or State Court) and Date	Appeal Filed:		
If Fir	nal or On Appeal, com	nplete all items below. For Pending	g Actions, complete Item 13 only.			
	How was matter reso	olved:				
11.	Resolution Date (MM/	DD/YYYY):				
	01/06/1994	•				
	If not exact, provide e.	·				
12.	Resolution Detail:					
	A. Were any of the	following Sanctions Ordered (che	eck all appropriate items)?			
	✓ Monetary/Fi	ine Amount: \$ 10,000.00				
	Revocation	/Expulsion/Denial		☐ Disgorgement/Restitution		
	Censure			Cease and Desist/Injunction	n	
	Bar			Suspension		
	Sanction detail: Principal, etc.). I condition has be you or an advisor	ENT ORDER AND PAYMENT OF A if suspended, enjoined or barred If requalification by exam/retraining een satisfied. If disposition resulted by affiliate date paid and if any po	, provide duration including start d g was a condition of the sanction, ed in a fine, penalty, restitution, dis rtion of penalty was waived:	provide length of time given to requ	ral Securities Principal, Financial Operations ualify/retrain, type of exam required and whether ation, provide total amount, portion levied against AS WAIVED.	
	Provide a brief summ provided).	nary of details related to the action	n status and (or) disposition and in	clude relevant terms, conditions a	nd dates (your response must fit within the space	
This [Disclosure Reporting	Page (DRP ADV) is an 👝 INITIA	GENERAL INSTA		esponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.	
	rm ADV.		OK -			
			Regulatory .	Action		
	k item(s) being respo	inded to:				
	1.C(1)	☐ 11.C(2)	11.C(3)	□ 11.C(4)	□ 11.C(5)	
	1.D(1)	☑ 11.D(2)	11.D(3)	☑ 11.D(4)	□ 11.D(5)	
	1.E(1)	☐ 11.E(2)	□ 11.E(3)	□ 11.E(4)		
	1.F.	□ 11.G.				
Execu	ution Page. event may result in mo		Items 11.C., 11.D., 11.E., 11.F. o		entity using one DRP. File with a completed	
PART	- 1					
A		ty(ies) for whom this DRP is being firm)	filed is (are):			
	O You and one or more of your advisory affiliates					
	One or more of yo					
	If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.					
	ADV DRP - ADVISOR	RY AFFILIATE				
	CRD Number:	Т	his advisory affiliate is 🧿 a Firm	C an Individual		
	Registered: O Ye	s 🖸 No				
		1917				

	COMPANY (For its dividuals A set First Middle)
	(For individuals, Last, First, Middle)
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	T II
1.	Regulatory Action initiated by: C SEC C Other Federal State C SRO C Foreign
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF KANSAS INSURANCE DEPARTMENT
2.	Principal Sanction: Other
	Other Sanctions: FORFEITURE
3.	Date Initiated (MM/DD/YYYY):
	04/30/1994 C Exact Explanation If not exact, provide explanation: DURING THE MONTH OF APRIL, 1994.
4.	Docket/Case Number: NONE
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type: No Product
	Other Product Types:
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): PREMIUMS CALCULATED INCONSISTENTLY WITH SMALL EMPLOYER REFORM LEGISLATION AND USING AN UNFILED APPLICATION.
8.	Current Status? C Pending C On Appeal Final
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
If F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.
10.	How was matter resolved: Other
11.	Resolution Date (MM/DD/YYYY):
	09/22/1994 © Exact C Explanation
	If not exact, provide explanation:
12.	Resolution Detail:
	A Were any of the following Sanctions Ordered (check all appropriate items)?

Monetary/Fine Amount: \$5,000.00

	Revocation/Expulsion/Denial	ſ	Disgorgement/Restitution	
	Censure	1	Cease and Desist/Injunction	
	■ Bar	1	Suspension	
B.	Other Sanctions Ordered:		·	
13. Prov	Sanction detail: if suspended, enjoined or bar Principal, etc.). If requalification by exam/retra condition has been satisfied. If disposition res you or an advisory affiliate date paid and if any AGREEMENT, VOLUNTARY FORFEITURE Of ide a brief summary of details related to the ad	ining was a condition of the sanction, prosulted in a fine, penalty, restitution, disgo y portion of penalty was waived: F \$5,000.	vide length of time given to requalify, rgement or monetary compensation	retrain, type of exam required and whether, provide total amount, portion levied against
provi	ded).			
		GENERAL INSTRU	CTIONS	
This Discl	osure Reporting Page (DRP ADV) is an $_{f C}$ IN	ITIAL OR	to report details for affirmative respo	nses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Form AD	ov.			
		Regulatory Acti	on	
Check iter	n(s) being responded to:	ğ ,		
□ 11.C(1) 🗖 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
□ 11.D(1) I 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
□ 11.E(1	11.E(2)	□ 11.E(3)	□ 11.E(4)	
□ 11.F.	☐ 11.G.			
Execution One event		er to Items 11.C., 11.D., 11.E., 11.F. or 11		ty using one DRP. File with a completed ails related to the same event. If an event gives
PART I				
	person(s) or entity(ies) for whom this DRP is b	eing filed is (are):		
-	ou (the advisory firm)			
~				
	ou and one or more of your advisory affiliates			
© C	one or more of your advisory affiliates			
	DRP is being filed for an <i>advisory affiliat</i> e, giv advisory affiliate has a <i>CRD</i> number, provide		•	·
ADV	DRP - ADVISORY AFFILIATE			
CR	R			
	mber:	This advisory affiliate is . a Firm . C	an Individual	
Re	gistered: C Yes 🧿 No			
	me: THE TRAVELERS INSURANCE			
	COMPANY			
	(For individuals, Last, First, Middle)			
П	his DRP should be removed from the ADV rec his DRP should be removed from the ADV rec egistration with the SEC and the event was res	cord because: (1) the event or <i>proceeding</i>	occurred more than ten years ago	
-	u are registered or registering with a <i>state sec</i> orred more than ten years ago. If you are regist			· · · · · · · · · · · · · · · · · · ·
Пт	his DRP should be removed from the ADV rec	cord because it was filed in error, such as	due to a clerical or data-entry mista	ke. Explain the circumstances:
	advisory affiliate is registered through the IAR		ory affiliate submitted a DRP (with Fo	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the
0	∕es [©] No			

PAR	PART II	
1.	1. Regulatory Action initiated by: C SEC Other Federal State C SRO Foreign	
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF NEBRASKA DEPARTMENT OF INSURANCE	
2.	Principal Sanction: Other	
	Other Sanctions: ADMINISTRATIVE FINE	
3.		
	03/23/1995	
4.	4. Docket/Case Number: CAUSE NO. C-891	
5.	5. Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):	
6.		
	Insurance Other Product Types:	
	LIFE INSURANCE	
7.	7. Describe the allegations related to this regulatory action (your response must fit within the space provided):	
	ACCEPTING SIXTEEN APPLICATIONS FOR LIFE INSURANCE, WHICH REPLACED EXISTING LIFE INSURANCE AND FAILING TO PROVIDE NOTICES COMPANIES.	TO THE EXISTING
8.	8. Current Status? C Pending C On Appeal Final	
9.	9. If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:	
If Fi	If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.	
10.	10. How was matter resolved:	
	Other	
11.	11. Resolution Date (MM/DD/YYYY):	
	04/25/1995 Exact C Explanation	
	If not exact, provide explanation:	
12.	12. Resolution Detail:	
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?	
	Monetary/Fine Amount: \$ 2,000.00	
	☐ Revocation/Expulsion/Denial ☐ Disgorgement/Restitution ☐ Censure ☐ Cease and Desist/Injunction	
	☐ Bar ☐ Suspension	
	B. Other Sanctions Ordered:	
	Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Finar Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam recondition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, pour or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: A FINE WAS IMPOSED AGAINST THE CONTROL AFFILIATE AND WAS PAID. NO PORTION OF THE FINE WAS WAIVED.	uired and whether
40	12. Dravide a brief summery of details related to the action status and (ar) disposition and include relevant terms, conditions and dates (your response must	

provided).

NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.

			GENERAL INSTRUC	TIONS	
This	Disclosure Reporting Pa	ge (DRP ADV) is an $_{ extstyle ar{ extstyle C}}$ INITIA	AL OR AMENDED response used to	report details for affirmative response	onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Fo	orm ADV.				
			Regulatory Actio	n	
	ck item(s) being respond		_	_	_
	11.C(1)	11.C(2)	11.C(3)	11.C(4)	□ 11.C(5)
	11.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
	11.E(1)	□ 11.E(2)	☐ 11.E(3)	□ 11.E(4)	
	11.F.	□ 11.G.			
	a separate DRP for each cution Page.	event or <i>proceeding</i> . The sai	me event or <i>proceeding</i> may be reported	d for more than one <i>person</i> or ent	ity using one DRP. File with a completed
	•		o Items 11.C., 11.D., 11.E., 11.F. or 11.0 each action on a separate DRP.	G. Use only one DRP to report det	ails related to the same event. If an event gives
PAR	TI				
A.	The person(s) or entity(i	es) for whom this DRP is bein	g filed is (are):		
	O You (the advisory firm	m)			
	You and one or more	e of your advisory affiliates			
	One or more of your				
			he full name of the advisory affiliate below the trumber. If not, indicate "non-registered		•
	ADV DRP - ADVISORY	AFFILIATE			
	CRD		This advisory affiliate is <a>© a Firm <a>O	an Individual	
	Number:	_			
	Registered: O Yes	⊙ No			
		VELERS INSURANCE			
	COMPAN (For indiv	IY viduals, Last, First, Middle)			
	This DRP should be	removed from the ADV record	d because the advisory affiliate(s) is no did because: (1) the event or proceeding over the did not be adviser's or advisory affiliate's	occurred more than ten years ago	r. or (2) the adviser is registered or applying for
	. og. o.				
	· ·				sponse to Item 11.D(4), and only if that event I in Item 11 that occurred more than ten years
	☐ This DRP should be	removed from the ADV record	d because it was filed in error, such as o	due to a clerical or data-entry mist	ake. Explain the circumstances:
B.	= = = = = = = = = = = = = = = = = = =	registered through the IARD s	-	y affiliate submitted a DRP (with F	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the
	C Yes © No				
	NOTE: The completion of	of this form does not relieve th	e advisory affiliate of its obligation to up	date its IARD or <i>CRD</i> records.	
PAR	ΤII				
1.	Regulatory Action initiated SEC Other Fede	ed by: ral <mark>⊙</mark> State	preign		
		foreign financial regulatory au	uthority, federal, state, or SRO)		
2.	Principal Sanction: Other				
	Other Sanctions: MARKET CONDUCT EX	AMINIATION FINE			
	WAINET CONDUCTER	AWIINA HON FINE			
3.	Date Initiated (MM/DD/Y)	YYY):			

	07/29/1993	•				
4.	Docket/Case Number: NONE					
5.	Advisory Affiliate Employing Fi	rm when activity occurre	ed which led to the regulatory action (if	applicable):		
6.	Principal Product Type: No Product Other Product Types:					
7.	-	-	ion (your response must fit within the sources TO ENSURE COMPLIANCE WITH			
8.	Current Status? C Pendin	ng O On Appeal	5 Final			
9.	If on appeal, regulatory action a	appealed to (SEC, <i>SR</i> C	D, Federal or State Court) and Date App	peal Filed:		
lf Fi	inal or On Appeal, complete all i	tems below. For Pendir	ng Actions, complete Item 13 only.			
10.	How was matter resolved: Other					
11.	Resolution Date (MM/DD/YYYY	·():				
	09/09/1993 • Exact • Ex	planation				
	If not exact, provide explanation					
12.	Resolution Detail:					
	A. Were any of the following	Sanctions Ordered (ch	neck all appropriate items)?			
	✓ Monetary/Fine Amour	nt: \$ 12,500.00				
	Revocation/Expulsion		1	Disgorgement/Restitution		
	Censure	n/Bornar	_	Cease and Desist/Injunction		
	☐ Bar		_	Suspension		
	B. Other Sanctions Ordered	l:		_ Suspension		
	Principal, etc.). If requalificondition has been satisfyou or an advisory affiliate	cation by exam/retraining ied. If disposition result e date paid and if any p	ng was a condition of the sanction, prov	vide length of time given to requali rgement or monetary compensation	Securities Principal, Financial Operations fy/retrain, type of exam required and whe on, provide total amount, portion levied as	ther
13.	Provide a brief summary of deprovided).	tails related to the actio	n status and (or) disposition and inclu	de relevant terms, conditions and	dates (your response must fit within the	space
			GENERAL INSTRUC	CTIONS		
his	Disclosure Reporting Page (DR	RP ADV) is an 👝 INITI			ponses to Items 11.C., 11.D., 11.E., 11.F.	or 11.G.
	orm ADV.		OR ©			
			Regulatory Acti	on		
Chec	ck item(s) being responded to:					
□ 1	1.C(1)	☐ 11.C(2)	□ 11.C(3)	□ 11.C(4)	☐ 11.C(5)	
□ 1	1.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	■ 11.D(5)	
	1.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)		
	1.F.	□ 11.G.	(v)			
			me event or <i>proceeding</i> may be report	ed for more than one <i>person</i> or er	ntity using one DRP. File with a completed	d

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives

Execution Page.

ise to ac	tions by m	ore than one regulator, provide details to each action on a separate DRP.
PARTI		
A. The	person(s)	or entity(ies) for whom this DRP is being filed is (are):
0	You (the a	dvisory firm)
_	You and o	ne or more of your advisory affiliates
⊙ '	One or mo	re of your advisory affiliates
		being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
AD	V DRP - AI	DVISORY AFFILIATE
	RD	This advisory affiliate is . a Firm . an Individual
	umber:	, and the second
Re	egistered:	C Yes
Na	ame:	THE TRAVELERS INSURANCE
		COMPANY (For individuals Lost First Middle)
		(For individuals, Last, First, Middle)
☐ If ye	This DRP registration ou are regi	should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for a with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor. Stered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event
ago).	e than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years
	This DRP	should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
evei O	nt? If the a	affiliate is registered through the IARD system or <i>CRD</i> system, has the <i>advisory affiliate</i> submitted a DRP (with Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the IARD or the IARD or <i>CRD</i> for the IARD or IARD O
ART II		
		tion initiated by:
ಿ	SEC O	ther Federal 👩 State 👩 SRO 🤘 Foreign
		regulator, foreign financial regulatory authority, federal, state, or SRO) ISURANCE DEPARTMENT
2. Prin	ncipal Sand	etion:
Oth	er	
	er Sanction	ns: DUCT EXAMINATION FINE
	•	MM/DD/YYYY):
		Exact C Explanation ovide explanation:
4. Dod NOI	cket/Case NE	Number:
5. Adv	visory Affilia	ate Employing Firm when activity occurred which led to the regulatory action (if applicable):
ς Prin	ncipal Prod	uct Type:
	icipai Prod Product	uot 1ypo.
	er Product	Types:
7 Doo	ecribe the	allegations related to this regulatory action (your response must fit within the space provided):
		allegations related to this regulatory action (your response must fit within the space provided): ESTABLISH PRACTICES AND PROCEDURES TO ENSURE COMPLIANCE WITH NEW YORK MANDATES.
FAII	LUKE IU I	ESTABLISH FRACTICES AND PROCEDURES TO ENSURE COMPLIANCE WITH NEW YORK MANDATES.
。	rent Status	? ○ Pending ○ On Appeal ○ Final
B. Curi	יסווו טומועצ	: - ronang - On-Appear - rinar

9. If	on appeal, regulator	ry action appealed to (SEC, SRO,	Federal or State Court) and Date App	eal Filed:	
If Fina	al or On Appeal, com	plete all items below. For Pending	g Actions, complete Item 13 only.		
	low was matter resol	lved:			
11. R	tesolution Date (MM/I	DD/YYYY):			t/Injunction cted (General Securities Principal, Financial Operations ven to requalify/retrain, type of exam required and whether y compensation, provide total amount, portion levied against WAS WAIVED. conditions and dates (your response must fit within the space of the spac
1	1/16/1995	t Ö Evolanation			
	not exact, provide ex	•			
12. R	esolution Detail:				
1	A. Were any of the	following Sanctions Ordered (che	eck all appropriate items)?		
	✓ Monetary/Fin	ne Amount: \$ 60,000.00			
	Revocation/	/Expulsion/Denial		Disgorgement/Restitution	
	Censure		Ε	Cease and Desist/Injunction	
	☐ Bar		Γ	Suspension	
!	B. Other Sanctions	ordered:			
	A FINE WAS IMF		AFFILIATE AND WAS PAID. NO PORT		ates (your response must fit within the space
			GENERAL INSTRUC	STIONS	
	isclosure Reporting I	Page (DRP ADV) is an 👩 INITIAL			onses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
JI FOIII	TADV.		Regulatory Acti	on	
Check	item(s) being respon	nded to:	, ,		
□ 11.	C(1)	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
□ 11.		☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
<u> </u>		☐ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
□ 11.	F.	□ 11.G.			
	separate DRP for ea ion Page.	ch event or <i>proceeding</i> . The sam	ne event or <i>proceeding</i> may be reporte	ed for more than one <i>person</i> or enti	ty using one DRP. File with a completed
	-	ore than one affirmative answer to none regulator, provide details to		.G. Use only one DRP to report det	ails related to the same event. If an event gives
PART I					
	he <i>person(s)</i> or entity You (the advisory	y(ies) for whom this DRP is being firm)	filed is (are):		
	_	ore of your advisory affiliates			
		ur advisory affiliates			
lf	this DRP is being file	ed for an <i>advisory affiliat</i> e, give th	ne full name of the advisory affiliate be number. If not, indicate "non-registere	•	•
_	ADV DRP - ADVISOR	<u> </u>	-		
	CRD	Т	his advisory affiliate is 🌀 a Firm C	an Individual	
	Number: Registered: O Yes				

	COMPANY
	(For individuals, Last, First, Middle)
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes ⊙ No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	T II
1.	
	C SEC C Other Federal
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) STATE OF CONNECTICUT INSURANCE DEPARTMENT
2.	Principal Sanction:
	Other Other Sanctions:
	MARKET CONDUCT EXAMINATION FINE
3.	Date Initiated (MM/DD/YYYY):
	01/03/1996 © Exact © Explanation If not exact, provide explanation:
4.	Docket/Case Number: 96-37
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Product Type:
	No Product
	Other Product Types:
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided):
	FAILURE TO ESTABLISH PRACTICES AND PROCEDURES TO ENSURE COMPLIANCE WITH CONNECTICUT MANDATES.
8.	Current Status? C Pending C On Appeal Final
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
If F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.
10.	How was matter resolved: Other
11.	Resolution Date (MM/DD/YYYY):
	06/02/1996 © Exact C Explanation
	If not exact, provide explanation:
40	
12.	Resolution Detail:

Name:

THE TRAVELERS INSURANCE

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

	✓ Monetary/Fine Amount: \$ 54,000.00			
	Revocation/Expulsion/Denial	П	Disgorgement/Restitution	
	☐ Censure	П	Cease and Desist/Injunction	
	☐ Bar	Г	Suspension	
	B. Other Sanctions <i>Ordered:</i>		•	
	B. Cities carrelles cracrea.			
	Sanction detail: if suspended, enjoined or barred, Principal, etc.). If requalification by exam/retraining condition has been satisfied. If disposition resulte you or an advisory affiliate date paid and if any por A FINE WAS IMPOSED AGAINST THE CONTROL	y was a condition of the sanction, providing a fine, penalty, restitution, disgoration of penalty was waived: AFFILIATE AND WAS PAID. NO PORT	ide length of time given to requalify/gement or monetary compensation,	retrain, type of exam required and whether , provide total amount, portion levied against
	Provide a brief summary of details related to the action provided).	status and (or) disposition and include	de relevant terms, conditions and da	tes (your response must fit within the space
his Γ	Disclosure Reporting Page (DRP ADV) is an 💍 INITIAL	GENERAL INSTRUC		nses to Items 11 C 11 D 11 F 11 F or 11 G
		OR O AMENDED Tesponse used to	report details for animative respon	ises to items 11.0., 11.0., 11.1.
t Fori	m ADV.			
		Regulatory Action	on	
	k item(s) being responded to:	_	_	_
	I.C(1)	11.C(3)	11.C(4)	11.C(5)
	I.D(1)	☐ 11.D(3)	☑ 11.D(4)	□ 11.D(5)
	I.E(1)	☐ 11.E(3)	□ 11.E(4)	
<u> </u>	I.F. 🗖 11.G.			
ART	o actions by more than one regulator, provide details to I The person(s) or entity(ies) for whom this DRP is being	·		
	You (the advisory firm)	mod to (dro).		
	~			
	You and one or more of your advisory affiliates			
	One or more of your advisory affiliates			
	If this DRP is being filed for an <i>advisory affiliate</i> , give th If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that		·	•
	ADV DRP - ADVISORY AFFILIATE			
	CRD T	his advisory affiliate is $oldsymbol{\circ}$ a Firm $oldsymbol{\circ}$	an Individual	
	Registered: O Yes O No			
	Name: THE TRAVELERS INSURANCE			
	COMPANY (For individuals, Last, First, Middle)			
	 This DRP should be removed from the ADV record This DRP should be removed from the ADV record registration with the SEC and the event was resolved. 	because: (1) the event or proceeding	occurred more than ten years ago o	
	If you are registered or registering with a <i>state securitie</i> occurred more than ten years ago. If you are registered ago.			• • • • • • • • • • • • • • • • • • • •
	☐ This DRP should be removed from the ADV record	because it was filed in error, such as	due to a clerical or data-entry mista	ke. Explain the circumstances:
	If the <i>advisory affiliate</i> is registered through the IARD sy event? If the answer is "Yes." no other information on th	-	ry affiliate submitted a DRP (with Fo	rm ADV, BD or U-4) to the IARD or <i>CRD</i> for the

	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation	ion to update its IARD or <i>CRD</i> records.
PAR	(T	
1.	Regulatory Action initiated by:	
	○ SEC ○ Other Federal ○ State ○ SRO ○ Foreign	
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) FLORIDA DEPARTMENT OF INSURANCE	
2.	Principal Sanction:	
	Other Other Sanctions:	
	MARKET CONDUCT EXAMINATION FINE	
3.	Date Initiated (MM/DD/YYYY):	
	06/16/1997	
4.	Docket/Case Number: 17935-96-C	
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory a	ction (if applicable):
6.	Principal Product Type:	
	No Product	
	Other Product Types:	
7.	Describe the allegations related to this regulatory action (your response must fit with FAILURE TO ESTABLISH PRACTICES AND PROCEDURES TO ENSURE COMPLIAN	
8.	Current Status? C Pending C On Appeal Final	
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and D	Pate Appeal Filed:
lf F	Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 or	nly.
10	How was matter resolved:	
10.	Other	
11.	Resolution Date (MM/DD/YYYY):	
	10/14/1997 [⊙] Exact [○] Explanation	
	If not exact, provide explanation:	
12.	Resolution Detail:	
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?	
	Monetary/Fine Amount: \$ 1,000.00	_
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution
	☐ Censure	Cease and Desist/Injunction
	☐ Bar	☐ Suspension
	B. Other Sanctions <i>Ordered:</i>	
	Principal, etc.). If requalification by exam/retraining was a condition of the sanction	art date and capacities affected (General Securities Principal, Financial Operations on, provide length of time given to requalify/retrain, type of exam required and whether and disgorgement or monetary compensation, provide total amount, portion levied against O PORTION OF THE FINE WAS WAIVED.
13.	Provide a brief summary of details related to the action status and (or) disposition an provided).	nd include relevant terms, conditions and dates (your response must fit within the space

C Yes © No

		GENERAL INSTRUC	CTIONS	
This Disclosure Report	ing Page (DRP ADV) is an $_{ extstyle C}$ INITIA	AL OR	o report details for affirmative respo	nses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
of Form ADV.				
		5		
Check item(s) being re	sepanded to:	Regulatory Acti	on	
11.C(1)	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
` '		* *		* *
□ 11.D(1)	☑ 11.D(2)	11.D(3)	☑ 11.D(4)	□ 11.D(5)
□ 11.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
□ 11.F.	□ 11.G.			
Execution Page.				ty using one DRP. File with a completed
-	than one regulator, provide details to		·	Ç
PARTI				
A. The person(s) or e	entity(ies) for whom this DRP is being	g filed is (are):		
C You (the advis	sory firm)			
Valuand one				
C You and one o	or more of your advisory affiliates			
One or more of	of your advisory affiliates			
	advisory anniates			
If this DDD is hair	ng filed for an advisory affiliate give t	he full name of the <i>advisory affiliate</i> be	low (for individuals Last name Fire	et name, Middle name)
		it number. If not, indicate "non-register	•	•
in the davidery and	mate had a CND hamber, provide tha	Transfer in riot, included from regions.		•
ADV DRP - ADVIS	SORY AFFILIATE			
CRD				
Number:		This advisory affiliate is 🌀 a Firm 🛚 C	an Individual	
Registered: O	Vas. 🖲 Na			
	IE TRAVELERS INSURANCE DMPANY			
	or individuals, Last, First, Middle)			
	in marriadale, Edet, Firet, Imadie)			
This DRP sho	ould be removed from the ADV record	d because the advisory affiliate(s) is not because: (1) the event or proceeding yed in the adviser's or advisory affiliate	occurred more than ten years ago	or (2) the adviser is registered or applying for
· · ·				ponse to Item 11.D(4), and only if that event in Item 11 that occurred more than ten years
☐ This DRP sho	ould be removed from the ADV record	d because it was filed in error, such as	due to a clerical or data-entry mista	ake. Explain the circumstances:
	ver is "Yes," no other information on t	-	ory affiliate submitted a DRP (with Fo	orm ADV, BD or U-4) to the IARD or <i>CRD</i> for the
NOTE: The comp	letion of this form does not relieve the	e <i>advisory affiliate</i> of its obligation to u	pdate its IARD or <i>CRD</i> records.	
PART II				
Regulatory Action SEC Othe	initiated by: r Federal ⊙ State C SRO C Fo	preign		
(Full name of reg	ulator, <i>foreign financial regulatory au</i> IRANCE ADMINISTRATOR			
2 Principal Caratian	o·			
Principal Sanction Other	1.			
Other Sanctions:				
	CT EXAMINATION FINE			
IVII IIIILI OONDO	O . E. O MAIN ALLI OLA LIME			
2 Data Indicate of Asset	/DD/VVVV)-			
Date Initiated (MM)	וועטוי.			

	10/20/1999	•				
4.	Docket/Case Number: MIA-1237-11/99					
5.	Advisory Affiliate Employing Fi	rm when activity occur	red which led to the regulatory action (if	applicable):		
6.	Principal Product Type: No Product Other Product Types:					
7.	-	-	tion (your response must fit within the s			
8.	Current Status? C Pendir	ng 🧖 On Appeal	⊙ Final			
9.	If on appeal, regulatory action	appealed to (SEC, <i>SR</i>	O, Federal or State Court) and Date App	peal Filed:		
If Fi	inal or On Appeal, complete all	items below. For Pendi	ing Actions, complete Item 13 only.			
10.	How was matter resolved: Other					
11.	Resolution Date (MM/DD/YYYY	'):				
	11/12/1999	planation				
	If not exact, provide explanation	n:				
12.	Resolution Detail:					
	A. Were any of the following	Sanctions Ordered (c	heck all appropriate items)?			
	✓ Monetary/Fine Amount	nt: \$ 15,200.00				
	Revocation/Expulsio	n/Denial	I	Disgorgement/Restitution		
	Censure		1	Cease and Desist/Injunction		
	☐ Bar		ſ	Suspension		
	B. Other Sanctions Ordered	<i>1:</i>				
	Principal, etc.). If requalif condition has been satisf you or an advisory affiliat	ication by exam/retrain fied. If disposition resu re date paid and if any p	ing was a condition of the sanction, pro	vide length of time given to requa rgement or monetary compensa	al Securities Principal, Financial Operations alify/retrain, type of exam required and whether tion, provide total amount, portion levied agains	t
13.	Provide a brief summary of de provided).	tails related to the acti	on status and (or) disposition and inclu	de relevant terms, conditions an	d dates (your response must fit within the spac	Э
			GENERAL INSTRU			
	s Disclosure Reporting Page (DF orm ADV.	RP ADV) is an 👩 INIT	IAL OR © AMENDED response used	to report details for affirmative re	sponses to Items 11.C., 11.D., 11.E., 11.F. or 1	.G.
			Regulatory Act	on		
Che	eck item(s) being responded to:		J			
	11.C(1)	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	☐ 11.C(5)	
	11.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	☐ 11.D(5)	
	11.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)		
	11.F.	□ 11.G.				
Use	a separate DRP for each event	or <i>proceeding</i> . The sa	ame event or <i>proceeding</i> may be report	ed for more than one <i>person</i> or	entity using one DRP. File with a completed	

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives

Execution Page.

PART	1	
	The <i>person(s)</i> or e	entity(ies) for whom this DRP is being filed is (are): ory firm)
	C You and one o	r more of your advisory affiliates
		f your advisory affiliates
		g filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). iate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVIS	SORY AFFILIATE
	CRD	This advisory affiliate is . a Firm . an Individual
	Number: Registered:	
	~	Yes
		MPANY
	(Fo	r individuals, Last, First, Middle)
	This DRP sho	uld be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. uld be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for the the SEC and the event was resolved in the adviser's or advisory affiliate's favor.
		ed or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event an ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years
	This DRP sho	uld be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
2	-	iate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the
	event? If the answ	er is "Yes," no other information on this DRP must be provided.
	event? If the answ O Yes No	er is "Yes," no other information on this DRP must be provided.
	C Yes • No	er is "Yes," no other information on this DRP must be provided. etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records.
	O Yes O No	
ART	O Yes O No NOTE: The compl	etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records. initiated by:
ART	O Yes O No NOTE: The compl II Regulatory Action O SEC O Other (Full name of regulatory and regulatory)	etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records.
ART1.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN	etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or <i>SRO</i>) ECTICUT INSURANCE DEPARTMENT
ART 1. 2.	O Yes O No NOTE: The compl II Regulatory Action SEC Other (Full name of regulatory STATE OF CONN Principal Sanction Other	etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or <i>SRO</i>) ECTICUT INSURANCE DEPARTMENT
ART I. <u>2</u> .	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN Principal Sanction Other Other Sanctions:	etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or <i>SRO</i>) ECTICUT INSURANCE DEPARTMENT
ART 1. 2.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN Principal Sanction Other Other Sanctions:	etion of this form does not relieve the <i>advisory affiliate</i> of its obligation to update its IARD or <i>CRD</i> records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT : CT EXAMINATION FINE
ART1. 1. 2.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN Principal Sanction Other Other Sanctions: MARKET CONDUCTOR	etion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT : CT EXAMINATION FINE DD/YYYY): Exact Explanation
ART 1. 2. 3.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory Action) Principal Sanction Other Other Sanctions: MARKET CONDUCTOR Initiated (MM, 01/01/1998 © E	etion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT : CT EXAMINATION FINE DD/YYYY): xact Explanation e explanation:
ART 1. 2.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN Principal Sanction Other Other Sanctions: MARKET CONDUCT Date Initiated (MM) 01/01/1998 E If not exact, provided Docket/Case Num MC 01-38	etion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records. initiated by: Federal State SRO Foreign illator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT : CT EXAMINATION FINE DD/YYYY): xact Explanation e explanation:
ART 1. 2. 3.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN Principal Sanction Other Other Sanctions: MARKET CONDUCT Date Initiated (MM) 01/01/1998 E If not exact, provided Docket/Case Num MC 01-38	initiated by: Federal State SRO Foreign Islator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT CT EXAMINATION FINE DD/YYYY): kact Explanation e explanation: Employing Firm when activity occurred which led to the regulatory action (if applicable):
PART 1. 2. 3.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONN) Principal Sanction Other Other Sanctions: MARKET CONDUCTORY Date Initiated (MM, 01/01/1998 © EI for exact, provided Docket/Case Number 1988 Advisory Affiliate III Principal Product	etion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records. initiated by: Federal State SRO Foreign Illator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT : CT EXAMINATION FINE DD/YYYY): xact Explanation e explanation: abber: Employing Firm when activity occurred which led to the regulatory action (if applicable):
ART 1. 2. 3.	NOTE: The complete III Regulatory Action SEC Other (Full name of regulatory STATE OF CONNICT OTHER SANCTIONS: MARKET CONDUCT OTHER SANCTIONS: NO Product OTHER SAN	etion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records. initiated by: Federal State SRO Foreign Illator, foreign financial regulatory authority, federal, state, or SRO) ECTICUT INSURANCE DEPARTMENT : CT EXAMINATION FINE DD/YYYY): xact Explanation e explanation: abber: Employing Firm when activity occurred which led to the regulatory action (if applicable):

9.	If on appeal, regulato	ry action appealed to (SEC, SRO	, Federal or State Court) and Date App	eal Filed:	
lf Fi	nal or On Appeal, com	nplete all items below. For Pendin	ng Actions, complete Item 13 only.		
10.	How was matter reso	olved:			
	Other				
11.	Resolution Date (MM/	DD/YYYY):			
	06/20/2001 © Exact	t C Explanation			
	If not exact, provide ex				
12.	Resolution Detail:				
	•	following Sanctions Ordered (ch	eck all appropriate items)?		
		ine Amount: \$ 20,000.00	_	_	
		/Expulsion/Denial		Disgorgement/Restitution	
	☐ Censure ☐ Bar			Cease and Desist/Injunction	
	B. Other Sanctions	: Ordered:	L	Suspension	
	B. Other Sanctions	s Ordered.			
	Principal, etc.). I condition has be you or an advisor	If requalification by exam/retraining een satisfied. If disposition result or affiliate date paid and if any position result or affiliate date paid and if any positions.	ng was a condition of the sanction, proved in a fine, penalty, restitution, disgor	ride length of time given to requa gement or monetary compensat	I Securities Principal, Financial Operations lify/retrain, type of exam required and whether ion, provide total amount, portion levied against b.
13.	Provide a brief summ provided).	nary of details related to the action	n status and (or) disposition and includ	de relevant terms, conditions and	d dates (your response must fit within the space
			GENERAL INSTRUC	CTIONS	
	Disclosure Reporting orm ADV.	Page (DRP ADV) is an 👩 INITIA	C AMENDED response used to	o report details for affirmative res	sponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
~ !			Regulatory Action	on	
	ck item(s) being respo 1.C(1)	nded to: ☐ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)
	1.D(1)	□ 11.D(2)	11.D(3)	□ 11.C(4)	☐ 11.D(5)
	1.E(1)	☑ 11.E(2)	□ 11.E(3)	□ 11.E(4)	E 11.5(0)
	1.F.	□ 11.G.	(-/	(,)	
	a separate DRP for ea	ach event or <i>proceeding</i> . The sar	ne event or <i>proceeding</i> may be reporte	ed for more than one <i>person</i> or e	entity using one DRP. File with a completed
	<u>-</u>		o Items 11.C., 11.D., 11.E., 11.F. or 11. o each action on a separate DRP.	.G. Use only one DRP to report o	details related to the same event. If an event gives
PAR	ті				
A.	The <i>person(s)</i> or entite You (the advisory	ty(ies) for whom this DRP is being firm)	g filed is (are):		
	~	ore of your advisory affiliates			
	One or more of yo				
		advisory attiliates			
		· · · · · · · · · · · · · · · · · · ·	he full name of the <i>advisory affiliate</i> bel t number. If not, indicate "non-registere	•	·
	ADV DRP - ADVISOR	RY AFFILIATE			
			No Information	Filed	
	This DRP should	be removed from the ADV record	d because the advisory affiliate(s) is no	longer associated with the advi	ser.

	registration with the SEC and the event was resolved in the adviser's or advisory affilia	
	If you are registered or registering with a <i>state securities authority</i> , you may remove a DRI occurred more than ten years ago. If you are registered or registering with the SEC, you mago.	
	☐ This DRP should be removed from the ADV record because it was filed in error, such a	as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the <i>advisory affiliate</i> is registered through the IARD system or <i>CRD</i> system, has the <i>advi</i> event? If the answer is "Yes," no other information on this DRP must be provided.	isory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the
	C Yes C No	
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to	update its IARD or CRD records.
PAR	ТШ	
1.	Regulatory Action initiated by: O SEC Other Federal O State SRO O Foreign	
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) NATIONAL ASSOCIATION OF SECURITIES DEALERS	
2.	Principal Sanction:	
	Censure Other Sanctions:	
	FINE OF \$85,000.	
3.	Date Initiated (MM/DD/YYYY):	
	04/05/2006 Exact Explanation	
	If not exact, provide explanation:	
4.	Docket/Case Number: E112005002601	
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action	(if applicable):
6.	Principal Product Type:	
	No Product Other Product Types:	
7.	Describe the allegations related to this regulatory action (your response must fit within the IT WAS ALLEGED THAT THE APPLICANT DID NOT HAVE PROCEDURES REASONABLY	
	REGISTRATION SEARCHES ON WEBCRD WAS OBTAINED AND RETAINED BY THE APPENDING THOSE EMPLOYEES UPON TERMINATION OF THOSE EMPLOYEES. IT IS ALSO ALLEGED THAT	PLICANT AND DID NOT REMOVE THE CRD ENTITLEMENTS OF SOME FORMER
8.	Current Status? C Pending C On Appeal Final	
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date A	ppeal Filed:
lf F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.	
10.	How was matter resolved:	
	Acceptance, Waiver & Consent(AWC)	
11.	Resolution Date (MM/DD/YYYY):	
	09/21/2006 Exact Explanation	
	If not exact, provide explanation:	
12.	Resolution Detail:	
	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?	
	Monetary/Fine Amount: \$85,000.00	
	☐ Revocation/Expulsion/Denial☑ Censure	☐ Disgorgement/Restitution ☐ Cease and Desist/Injunction
	El Cellouie	- Ocase and Desisympunction

	B. Other Sanctions <i>Ordered</i> : UNDERTAKINGS: WITHIN 60 DAYS APPLICANT IS REQUIRED TO UNDERTAKE TO REVIEW ITS SUPERVISORY PROCEDURES AND ESTABLISH A SUPERVISORY SYSTEM REASONABLY DESIGNED TO ACHIEVE COMPLIANCE WITH LAWS, REGULATIONS AND RULES CONCERNING PRE-REGISTRATION WEB CRD SEARCHES. Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: THE APPLICANT PAID THE FINE ON SEPTEMBER 29, 2006.					
13.	3. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided). WITHOUT ADMITTING OR DENYING THE FINDINGS, THE APPLICANT CONSENTED TO THE DESCRIBED SANCTIONS AND TO THE ENTRY OF FINDINGS. THEREFORE, APPLICANT IS CENSURED AND FINED \$85,000.					
		GENERAL INSTR	ICTIONS			
	s Disclosure Reporting Page (DRP ADV) is an orm ADV.			nses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.		
		Regulatory A	ction			
	ck item(s) being responded to:	_	_	_		
	11.C(1)	☐ 11.C(3)	□ 11.C(4)	☐ 11.C(5)		
	11.D(1)	11.D(3)	☐ 11.D(4)	□ 11.D(5)		
	11.E(1) ☐ 11.E(2) ☐ 11.G.	□ 11.E(3)	□ 11.E(4)			
Exec	cution Page. e event may result in more than one affirmative to actions by more than one regulator, provide	eg. The same event or <i>proceeding</i> may be reported answer to Items 11.C., 11.D., 11.E., 11.F. or le details to each action on a separate DRP.	·			
A.	The person(s) or entity(ies) for whom this D	RP is being filed is (are):				
	You (the advisory firm)					
	C You and one or more of your advisory at	filiates				
	One or more of your advisory affiliates					
	_	liate, give the full name of the advisory affiliate borovide that number. If not, indicate "non-registed	•	t name, Middle name).		
	ADV DRP - ADVISORY AFFILIATE					
		No Informati	on Filed			
	\square This DRP should be removed from the μ	ADV record because the advisory affiliate(s) is ADV record because: (1) the event or proceeding was resolved in the adviser's or advisory affiliation.	ng occurred more than ten years ago o			
		ate securities authority, you may remove a DRI re registered or registering with the SEC, you m		* * *		
	☐ This DRP should be removed from the	ADV record because it was filed in error, such a	as due to a clerical or data-entry mista	ke. Explain the circumstances:		
B.	If the advisory affiliate is registered through event? If the answer is "Yes," no other inform		sory affiliate submitted a DRP (with Fo	rm ADV, BD or U-4) to the IARD or <i>CRD</i> for the		
	C Yes C No					
	NOTE: The completion of this form does no	t relieve the advisory affiliate of its obligation to	update its IARD or <i>CRD</i> records.			
PAR	RT II					

Suspension

Bar

1.	Regulatory Action initiated by: OSEC Other Federal State OSRO OF Foreign	
	(Full name of regulator, foreign financial regulatory authority, federal, state, or	SRO)
	STATE OF NEW YORK INSURANCE DEPARTMENT	
2.	Principal Sanction:	
	Civil and Administrative Penalt(ies) /Fine(s)	
	Other Sanctions:	
3.	Date Initiated (MM/DD/YYYY):	
	07/11/2007	
	If not exact, provide explanation:	
4.		
	NO. 2007 -0394-S	
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regul	atory action (if applicable):
6.	1 21	
	No Product	
	Other Product Types:	
7.	Describe the allegations related to this regulatory action (your response must	fit within the space provided):
		ORK INSURANCE DEPARTMENT OF THE FINAL DISPOSITION OF A NASD (NOW KNOWN AS
	FINRA) CENSURE AND FINE IN 2006.	
8.	Current Status? C Pending C On Appeal C Final	
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court)	and Date Appeal Filed:
I4 IT:	Tinal as On Annual complete all terms halour For Danding Actions, complete Item	
IT F	Final or On Appeal, complete all items below. For Pending Actions, complete Iter	n 13 only.
10.	. How was matter resolved:	
	Stipulation and Consent	
11.	. Resolution Date (MM/DD/YYYY):	
	10/15/2007	
	If not exact, provide explanation:	
12	. Resolution Detail:	
12.	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate item:	s)?
	✓ Monetary/Fine Amount: \$ 250.00	- <i>,</i>
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution
	☐ Censure	☐ Cease and Desist/Injunction
	☐ Bar	☐ Suspension
	B. Other Sanctions <i>Ordered:</i>	·
	Sanction detail: if suspended, aniained or barred, provide duration include	ding start date and capacities affected (General Securities Principal, Financial Operations
	• • • • • • • • • • • • • • • • • • • •	e sanction, provide length of time given to requalify/retrain, type of exam required and whether
		stitution, disgorgement or monetary compensation, provide total amount, portion levied against
	you or an advisory affiliate date paid and if any portion of penalty was wait APPLICANT WAS FINED \$250 AND AGREED TO TAKE ALL NECESSAR	ived: Y STEPS TO PREVENT THE REOCCURRENCE OF SIMILAR VIOLATIONS.
13.	 Provide a brief summary of details related to the action status and (or) dispos provided). 	ition and include relevant terms, conditions and dates (your response must fit within the space
	APPLICANT PAID THE \$250 PENALTY AND AGREED TO TAKE ALL NECESS,	ARY STEPS TO PREVENT THE REOCCURRENCE OF SIMILAR VIOLATIONS.

			Regulatory Action		
Che	ck item(s) being responded to:				
	1.C(1)	□ 11.C(2)	☐ 11.C(3)	□ 11.C(4)	☐ 11.C(5)
	1.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	11.D(5)
	1.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)	
	1.F.	□ 11.G.			
	a separate DRP for each event	or <i>proceeding</i> . The sa	me event or <i>proceeding</i> may be reported	I for more than one <i>person</i> or ent	tity using one DRP. File with a completed
	<u>-</u>		to Items 11.C., 11.D., 11.E., 11.F. or 11.Go each action on a separate DRP.	G. Use only one DRP to report de	tails related to the same event. If an event gives
PAR	TI				
A.	The person(s) or entity(ies) for Tou (the advisory firm)	r whom this DRP is bein	ng filed is (are):		
	O You and one or more of yo				
	One or more of your adviso	ory affiliates			
		-	the full name of the <i>advisory affiliate</i> below at number. If not, indicate "non-registered	·	•
	ADV DRP - ADVISORY AFFILI	ATE			
			No Information F	iled	
	This DRP should be removed.	ved from the ADV record	d because the advisory affiliate(s) is no lod because: (1) the event or proceeding or wed in the adviser's or advisory affiliate's	ccurred more than ten years ago	er. or (2) the adviser is registered or applying for
		•		• •	sponse to Item 11.D(4), and only if that event d in Item 11 that occurred more than ten years
	☐ This DRP should be remove	ved from the ADV record	d because it was filed in error, such as d	ue to a clerical or data-entry mist	ake. Explain the circumstances:
B.	If the advisory affiliate is regist event? If the answer is "Yes," r			v affiliate submitted a DRP (with F	Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the
	C Yes C No				
	NOTE: The completion of this	form does not relieve th	e advisory affiliate of its obligation to upd	late its IARD or <i>CRD</i> records.	
PAR	ТІІ				
1.	Regulatory Action initiated by: O SEC Other Federal	State O SRO O Fo	preign		
		n financial regulatory au	uthority, federal, state, or SRO)		
2.	Principal Sanction: Civil and Administrative Penal Other Sanctions:	lt(ies) /Fine(s)			
	BRANCH OFFICE AUDIT				
3.	Date Initiated (MM/DD/YYYY):				
	04/18/2006	•			
4.	Docket/Case Number: FILE NO. CO-07-7159-S				
5.	Advisory Affiliate Employing F	irm when activity occurr	ed which led to the regulatory action (if a	oplicable):	
6.	Principal Product Type:				

No Product

Other Product Types:							
IT WAS ALLEGED THAT APP	7. Describe the allegations related to this regulatory action (your response must fit within the space provided): IT WAS ALLEGED THAT APPLICANT FAILED TO ESTABLISH, ENFORCE AND MAINTAIN A SYSTEM FOR SUPERVISING THE ACTIVITIES OF ITS RESPECTIVE AGENTS AND ITS CONNECTICUT OFFICE OPERATIONS REASONABLY DESIGNED TO ACHIEVE COMPLIANCE WITH APPLICABLE SECURITIES LAWS.						
8. Current Status? C Pend	ling O On Appeal 💿) Final					
9. If on appeal, regulatory action	n appealed to (SEC, SRO,	Federal or State Court) and Date	Appeal Filed:				
If Final or On Appeal, complete al	l items below. For Pending	g Actions, complete Item 13 only.					
10. How was matter resolved: Order							
11. Resolution Date (MM/DD/YYY	Y):						
07/23/2007	xplanation						
If not exact, provide explanation	•						
12. Resolution Detail:							
	na Sanationa Ordarad (aba	eck all appropriate items)?					
_		tok ali appropriate iteriis)!					
✓ Monetary/Fine Amo✓ Revocation/Expulsi			☐ Disgorgement/Restitution				
Censure	ion/Demai		☐ Cease and Desist/Injunction				
☐ Bar			Suspension				
BRANCH OFFICE AUDI Sanction detail: if suspending such principal, etc.). If requal condition has been satisty you or an advisory affilial WITHIN TWENTY-FOUR DIVISION. 13. Provide a brief summary of diprovided).	B. Other Sanctions Ordered: BRANCH OFFICE AUDIT Sanction detail: if suspended, enjoined or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an advisory affiliate date paid and if any portion of penalty was waived: WITHIN TWENTY-FOUR MONTHS THE APPLICANT MUST CONDUCT AN AUDIT OF ITS CONNECTICUT BRANCH OFFICES AND REPORT ITS FINDINGS TO THE DIVISION. 13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space						
of Form ADV.	,	OR U					
		Regulatory	Action				
Check item(s) being responded to	□ 11.C(2)	□ 11.C(3)	□ 11.C(4)	□ 11.C(5)			
☑ 11.D(1)	☑ 11.D(2)	□ 11.D(3)	□ 11.D(4)	☐ 11.D(5)			
11.E(1)	☐ 11.E(2)	□ 11.E(3)	☐ 11.E(4)	L 11.D(3)			
11.E(1)	□ 11.E(2) □ 11.G.	L 11.L(3)	L 11.E(4)				
	L 11.0.						
Use a separate DRP for each event or <i>proceeding</i> . The same event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP. File with a completed Execution Page. One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.							
PARTI							
A. The person(s) or entity(ies) for You (the advisory firm)	or whom this DRP is being	filed is (are):					
C You and one or more of your advisory affiliates							

	One or more of your advisory affiliates					
	If this DRP is being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that number. If not, indicate "non-registered" by checking the appropriate box.					
	ADV DRP - ADVISORY AFFILIATE					
	No Information Filed					
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.					
	If you are registered or registering with a <i>state securities authority</i> , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.					
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:					
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.					
	C Yes C No					
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.					
PAR	т II					
1.	Regulatory Action initiated by: O SEC Other Federal State O SRO O Foreign					
	(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) DELAWARE INSURANCE DEPARTMENT					
2.	Principal Sanction: Civil and Administrative Penalt(ies) /Fine(s) Other Sanctions:					
3.	Date Initiated (MM/DD/YYYY):					
	04/16/2008 © Exact C Explanation If not exact, provide explanation:					
4.	Docket/Case Number: DOCKET NO. 745					
5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):					
6.	Principal Product Type: No Product Other Product Types:					
7.	Describe the allegations related to this regulatory action (your response must fit within the space provided): IT IS ALLEGED THAT THE APPLICANT NEGLECTED TO NOTIFY THE DELAWARE INSURANCE DEPARTMENT OF THE FINAL DISPOSITION OF A NEW YORK INSURANCE DEPARTMENT FINE IN 2007.					
8.	Current Status? C Pending C On Appeal Final					
9.	If on appeal, regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:					
lf Fi	nal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.					
10.	How was matter resolved: Stipulation and Consent					
11.	Resolution Date (MM/DD/YYYY):					
	05/13/2008 © Eyart © Eyplanation					

	olution Detail							
A.	A. Were any of the following Sanctions <i>Ordered</i> (check all appropriate items)?							
		ry/Fine Amour	•		П.	VD		
	☐ Revoca	tion/Expulsion	n/Denial			ement/Restitution and Desist/Injunction		
	Bar	e			Suspens	-		
В.		tions <i>Ordered</i>	l:		i Guopono			
	Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: APPLICANT WAS FINED \$200 AND AGREED TO CEASE AND DESIST FROM FURTHER ENGAGING IN VIOLATIONS OF TITLE 18, WHICH REQUIRES THAT ANY ADMINISTRATIVE ACTION TAKEN AGAINST A PRODUCER BE REPORTED WITHIN 30 DAYS OF THE FINAL DISPOSITION OF THE MATTER.							
	vide a brief su vided).	ummary of de	tails related to the acti	on status and (or) disposition and in	clude relevant	terms, conditions ar	nd dates (your response must fit within the space	
	APPLICANT PAID THE \$200 PENALTY AND AGREED TO CEASE AND DESIST FROM FURTHER ENGAGING IN VIOLATIONS OF TITLE 18, WHICH REQUIRES THAT ANY ADMINISTRATIVE ACTION TAKEN AGAINST A PRODUCER BE REPORTED WITHIN 30 DAYS OF THE FINAL DISPOSITION OF THE MATTER.							
				GENERAL INST	RUCTIONS			
This Disclof Form Al		ting Page (DF	RP ADV) is an $_{f C}$ INIT			tails for affirmative re	esponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.	
Charle ita	(a) h ain a na			Regulatory A	Action			
T 11.C(1	m(s) being re	esponaea to:	□ 11.C(2)	□ 11.C(3)		□ 11.C(4)	□ 11.C(5)	
□ 11.D(1	,		□ 11.D(2)	□ 11.D(3)		□ 11.D(4)	□ 11.D(5)	
□ 11.E(1	1)		☑ 11.E(2)	□ 11.E(3)		□ 11.E(4)		
□ 11.F.			☐ 11.G.					
One event	Page. t may result i	n more than c	one affirmative answer				entity using one DRP. File with a completed details related to the same event. If an event gives	
PART I A. The	nerson(s) or	entity(ies) for	whom this DRP is bei	ng filed is (are):				
	You (the advis	- · · ·	WHOTH this DIXI is beli	ng med is (are).				
~			ur					
			ur advisory affiliates					
0.0	One or more o	of your <i>advi</i> so	ory affiliates					
	If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.							
AD\	ADV DRP - ADVISORY AFFILIATE							
CF	RD Number:	14251		This advisory affiliate is • a Firm	C an Individu	ual		
Re	gistered:	⊙ Yes Oı	No					
Na	ıme:	METLIFE SEC	CURITIES INC. als, Last, First, Middle)					
	RD Number:	615			_			
	:			This advisory affiliate is • a Firm	C an Individu	ual		
		⊙ Yes O I						
Na			ND SECURITIES als, Last, First, Middle)					

If not exact, provide explanation:

	CRD	<u>15840</u>	This advisory affiliate is .	
	Number: Registered:	_		
		• Yes		
	Name:	WALNU	T STREET SECURITIES,	
			ividuals, Last, First, Middle)	
	This DRP	should be	removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or apply SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.	ying for
	-		registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ter	
	☐ This DRP	should be	removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:	
B.	-		registered through the IARD system or <i>CRD</i> system, has the <i>advisory affiliate</i> submitted a DRP (with Form ADV, BD or U-4) to the IARD or <i>CI</i> Yes," no other information on this DRP must be provided.	<i>RD</i> for the
	C Yes €	No		
	NOTE: The co	mpletion o	of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.	
PAR	T II			
1.	Regulatory Act		·	
			ral O State SRO O Foreign foreign financial regulatory authority, federal, state, or SRO)	
	•	-	REGULATION AUTHORITY ("FINRA")	
2.	Principal Sand	ction:		
	Other Sanction	ns:		
	FINE IN THE A	AMOUNT C	OF \$144,000.00	
3.	Date Initiated (I	MM/DD/YY	(YY):	
			Explanation	
	If not exact, pro		·	
	THE AWC RES	SULTED FF	ROM TWO SEPARATE INVESTIGATIONS; THE DATE PROVIDED ABOVE IS THE START DATE OF THE FIRST INVESTIGATION.	
4.	Docket/Case I	Number:		
	AWC NO. 200	60067778	01	
5.	Advisory Affilia	ate Employ	ying Firm when activity occurred which led to the regulatory action (if applicable):	
0.	7.447.667,77		The second secon	
6.	Principal Produ	uct Type:		
	No Product Other Product	Types:		
7.	IT IS ALLEGED COMPLIANCE ALLEGED THA AND ENFORCE	THAT THE AP	s related to this regulatory action (your response must fit within the space provided): HE APPLICANT AND CONTROL AFFILIATES FAILED TO IMPLEMENT A SUPERVISORY SYSTEM THAT WAS REASONABLY DESIGNED TO ACT GARD TO THE REVIEW OF INCOMING AND OUTGOING EMAIL CORRESPONDENCE OF REGISTERED REPRESENTATIVES. IT IS FURTHE PPLICANT AND CONTROL AFFILIATES FAILED TO ESTABLISH, IMPLEMENT AND ENFORCE A SUPERVISORY SYSTEM DESIGNED TO MON LIANCE WITH REGARD TO PARTICIPATION OF ASSOCIATED PERSONS IN OUTSIDE BUSINESS ACTIVITIES AND PRIVATE SECURITIES	ER
	TRANSACTIO	NS.		
8.	Current Status	? O F	Pending On Appeal	
9.	If on appeal, re	egulatory a	action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:	
If F	inal or On Appe	al, comple	ete all items below. For Pending Actions, complete Item 13 only.	
10	How was matt	er resolve	ed·	
10.	Acceptance, W			

11.	Resolution Date	(MM/DD/YYYY):					
	11/18/2009 ⓒ	Exact C Explanation					
		vide explanation:					
	ii not exact, pro-	vide explanation.					
12.	Resolution Deta	ail:					
	A. Were any	of the following Sanctions Ordered (check all appropriate items)?				
	✓ Monet	tary/Fine Amount: \$ 1,200,000.00					
	☐ Revo	cation/Expulsion/Denial		☐ Disgorgement/Restitution			
	Censu	ure		Cease and Desist/Injunction			
	☐ Bar			Suspension			
	B. Other San	actions Ordered:					
	Principal, of condition I you or an a THE APPL	etc.). If requalification by exam/retrain has been satisfied. If disposition rest advisory affiliate date paid and if any	ning was a condition of the sanction, proulted in a fine, penalty, restitution, disgo portion of penalty was waived: WERE FINED \$1,200,000, JOINTLY AN	vide length of time given to requali orgement or monetary compensation	Securities Principal, Financial Operations fy/retrain, type of exam required and whether on, provide total amount, portion levied against S PORTION OF THE FINE, WHICH AMOUNTED		
13	Provide a brief	summary of details related to the ac	tion status and (or) disposition and incli	ide relevant terms, conditions and	dates (your response must fit within the space		
	provided).	duminary of details related to the de	ion status and (or) disposition and more	de relevant terms, conditions and	dates (your response must in within the space		
	DENYING THE	FINDINGS. FINRA ACCEPTED THE		PPLICANT AND CONTROL AFFILIA	CTOBER 14, 2009, WITHOUT ADMITTING OR ATES WERE FINED \$1,200,000, JOINTLY AND 24, 2009.		
			GENERAL INSTRU	CTIONS			
This	Disclosure Repo	orting Page (DRP ADV) is an 👝 INI			ponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.		
	rm ADV.		OR C				
			Regulatory Ac	ion			
	k item(s) being	•	_	_	_		
	1.C(1)	□ 11.C(2)	□ 11.C(3)	11.C(4)	☐ 11.C(5)		
	1.D(1)	☑ 11.D(2)	□ 11.D(3)	☑ 11.D(4)	□ 11.D(5)		
1	1.E(1)	□ 11.E(2)	□ 11.E(3)	□ 11.E(4)			
□ 1°	1.F.	□ 11.G.					
One or	ution Page. event may result o actions by mor		r to Items 11.C., 11.D., 11.E., 11.F. or 1		ntity using one DRP. File with a completed etails related to the same event. If an event gives		
PART		a antitudical for others this DDD is he	in a filed in /each				
A.		or entity(ies) for whom this DRP is be	eing nied is (are):				
	You (the adv						
	O You and one	e or more of your advisory affiliates					
	• • • • • • • • • • • • • • • • • • • •	e of your advisory affiliates					
If this DRP is being filed for an advisory affiliate, give the full name of the advisory affiliate below (for individuals, Last name, First name, Middle name). If the advisory affiliate has a CRD number, provide that number. If not, indicate "non-registered" by checking the appropriate box.							
	ADV DRP - ADVISORY AFFILIATE						
	CRD Number:						
		•	This advisory affiliate is . a Firm	an Individual			
	Registered:	C Yes No					
	Name:	METLIFE, INC. ("METLIFE")					
		(For individuals, Last, First, Middle)				
	CRD						
			This advisory affiliate is 🗿 a Firm	an Individual			
	Number: Registered:		This advisory affiliate is [⊙] a Firm ^ℂ	an Individual			

	Name:	METLIFE BANK, N.A. ("METLIFE BANK")
		(For individuals, Last, First, Middle)
	This DRP	should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for my with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
		ristered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event re than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years
	☐ This DRP	should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.		affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the answer is "Yes," no other information on this DRP must be provided.
	C Yes ⊙	No
	NOTE: The co	ompletion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR 1.		ction initiated by:
١.		Other Federal O State O SRO O Foreign
	=	regulator, foreign financial regulatory authority, federal, state, or SRO) 'HE COMPTROLLER OF THE CURRENCY ("OCC") BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM ("FRB")
2.	Principal San Cease and D Other Sanctio	esist
	DISTRIBUTIO \$15,500,000	E BANK, N.A.: CASH PAYMENT OF APPROXIMATELY \$30,000,000 TO THE QUALIFIED SETTLEMENT FUND ESTABLISHED FOR MAKING BORROWER ONS. ADDITIONAL LOSS MITIGATION OR OTHER FORECLOSURE PREVENTION ACTIONS, WHICH SHALL BE SATISFIED BY A PAYMENT OF APPROXIMATELY TO THE QUALIFIED SETTLEMENT FUND. FRB: METLIFE, INC.: CIVIL MONEY PENALTY OF \$3,200,000, TO BE PAID WITHIN TWO YEARS OF 8/6/2012. SUCH Y BE REDUCED AND/OR THE DUE DATE MAY BE EXTENDED UNDER THE CONDITIONS DESCRIBED
3.	Date Initiated	(MM/DD/YYYY):
	If not exact, p	Exact Explanation rovide explanation: R WAS PART OF A REVIEW BY FEDERAL BANKING REGULATORS, INCLUDING THE OCC AND FRB, OF THE MORTGAGE-SERVICING AND FORECLOSURE- G ACTIVITIES OF THE LARGEST MORTGAGE SERVICERS IN THE COUNTRY, INCLUDING METLIFE BANK
4.	Docket/Case OCC: 2013-1	Number: 26; 2011-047 [AA-EC-11-16]
5.	Advisory Affil	iate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Prod Banking Prod Other Produc	ucts (Other than CD(s))
7.	AS PART OF DENIED) THA FINDINGS IN	allegations related to this regulatory action (your response must fit within the space provided): THE REVIEW OF THE LARGEST MORTGAGE SERVICERS, IT WAS ALLEGED IN THE OCC CONSENT ORDER (WHICH METLIFE BANK NEITHER ADMITTED OR IT METLIFE BANK'S ACTIVITIES REFLECTED CERTAIN MORTGAGE-SERVICING AND FORECLOSURE-PROCESSING DEFICIENCIES. BASED ON THE THE OCC CONSENT ORDER, THE FRB ALLEGED THAT METLIFE NEEDED TO ENHANCE ITS SUPERVISION AND OVERSIGHT OF THE MORTGAGE- ICTIVITIES OF ITS BANK SUBSIDIARY, METLIFE BANK. (FRB DOCKET # 11-028-B-HC)
8.	Current Statu	s? C Pending C On Appeal
9.	If on appeal,	regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
If F	inal or On App	eal, complete all items below. For Pending Actions, complete Item 13 only.
10.	How was made	ter resolved:

11. Resolution Date (MM/DD/YYYY):

	02/28/2013 Exact Explanation						
	If no	t exact, provide explanation:					
12.	Res	olution Detail:					
	A.	Were any of the following Sanctions Ordered (chec	ck all appropriate items)?				
		✓ Monetary/Fine Amount: \$ 3,200,000.00					
		Revocation/Expulsion/Denial		☑ Disgorgement/Restitution			
		☐ Censure		Cease and Desist/Injunction			
		☐ Bar		☐ Suspension			
	B. Other Sanctions <i>Ordered:</i> OCC:METLIFE BANK, N.A.: CASH PAYMENT OF APPROXIMATELY \$30,000,000 BY METLIFE BANK, N.A., TO THE QUALIFIED SETTLEMENT FUND ESTABLISHED FOR THE PURPOSE OF MAKING BORROWER DISTRIBUTIONS. ADDITIONAL LOSS MITIGATION OR OTHER FORECLOSURE PREVENTION ACTIONS, WHICH SHALL BE SATISFIED BY A PAYMENT OF APPROXIMATELY \$15,500,000 TO THE QUALIFIED SETTLEMENT FUND. FRB:METLIFE, INC.: CIVIL MONEY PENALTY OF \$3,200,000, TO BE PAID WITHIN TWO YEARS OF 8/6/2012. SUCH AMOUNT MAY BE REDUCED AND/OR THE DUE DATE MAY BE EXTENDED UNDER THE CONDITIONS DESCRIBED IN THE FRB ORDER OF ASSESSMENT OF CIVIL MONEY PENALTY (DOCKET NO. 12-053-CMP-HC). Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived: SANCTION DETAIL - SEE ANSWER TO 12A AND 12B. ABOVE						
13.	prov THE THE MET ALL ARR DIST NEX THIS	ride a brief summary of details related to the action ided). RESOLUTION OF THIS MATTER ON FEBRUARY 2 FRB, OF THE MORTGAGE-SERVICING AND FORE LIFE BANK. THE RESOLUTION OF THE MATTER COOF THE PARTICIPATING BANKS AND THE REMED ANGEMENT WITH THE OCC, METLIFE BANK AGRICATIONS TO BORROWERS; METLIFE BANK AGRICATION YEARS, WHICH IT WILL FULFILL BY MAKING MATTER, METLIFE BANK HAS EXITED THE DEPONITIES. METLIFE BANK'S DEPOSIT INSURANCE COK HOLDING COMPANY SUBJECT TO REGULATION	28, 2013 CONCLUDED A REVIEW ECLOSURE-PROCESSING ACTIVENTIES DATE INCLUDED THE ADJUSTION ACTIVITIES BEING DIRECTORY OF APPROXIMATELY SEREED TO PROVIDE CERTAIN LIG A PAYMENT OF APPROXIMATELY OSIT BUSINESS AND SOLD OR TOO OVERAGE WAS TERMINATED A	W BY FEDERAL BANKING REGULATOR VITIES OF THE LARGEST MORTGAGE ACCELERATION OF THE FORECLOSU CTED TO THE BORROWERS INVOLVE G30,000,000 FOR TO A QUALIFIED SET COSS MITIGATION OR OTHER FORECL TELY \$15,500,00 INTO A QUALIFIED SE ERMINATED THE MAJORITY OF ITS M	RY AUTHORITIES, INCLUDING THE OCC AND SERVICERS IN THE COUNTRY, INCLUDING RE REVIEW BEING CONDUCTED REGARDING ED. AS PART OF ITS PARTICULAR TLEMENT FUND ESTABLISHED FOR MAKING OSURE PREVENTION ACTIONS OVER THE TTLEMENT FUND. SINCE THE INITIATION OF ORTGAGE-SERVICING ASSETS AND		
Thio	Dical	cours Penerting Page (DPR ADV) is an INITIAL	GENERAL INST		noon to Itama 11 C 11 D 11 E 11 E or 11 C		
		osure Reporting Page (DRP ADV) is an 👩 INITIAL	OR C AMENDED response us	ed to report details for animative respo	nises to items 11.C., 11.D., 11.E., 11.F. of 11.G.		
of Fo	rm Al	٥٧.					
			Regulatory	Action			
		m(s) being responded to:	_	_	_		
	1.C(1		☐ 11.C(3)	□ 11.C(4)	□ 11.C(5)		
	1.D(1		11.D(3)	□ 11.D(4)	□ 11.D(5)		
	1.E(1 1.F.)	☐ 11.E(3)	□ 11.E(4)			
10.1	1.F.	₩ 11.G.					
Exec	Use a separate DRP for each event or <i>proceeding</i> . The same event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP. File with a completed Execution Page. One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives						
		ions by more than one regulator, provide details to		·	•		
PAR							
A.		person(s) or entity(ies) for whom this DRP is being ou (the advisory firm)	filed is (are):				
	0 /	ou and one or more of your advisory affiliates					
		One or more of your advisory affiliates					
		s DRP is being filed for an <i>advisory affiliate</i> , give the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that i	_	•			
	AD\	/ DRP - ADVISORY AFFILIATE					

	CRD	This advisory affiliate is 🧿 a Firm 🤼 an Individual
	Number:	
	Registered:	C Yes
	Name:	METLIFE INSURANCE COMPANY OF KOREA LIMITED (For individuals, Last, First, Middle)
	This DRP	should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for on with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
		gistered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event re than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years
	☐ This DRP	should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	event? If the	v affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the answer is "Yes," no other information on this DRP must be provided.
	○ Yes ⊙	No
		ompletion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAF		
1.	-	ction initiated by: Other Federal C State C SRO Storeign
	•	regulator, foreign financial regulatory authority, federal, state, or SRO) COMMISSION OF KOREA (THE "KOREA FTC")
2.	Other Sanction THE KOREA THREE OF T	ninistrative Penalt(ies) /Fine(s)
3.	Date Initiated	(MM/DD/YYYY):
0.		
		■ Exact C Explanation rovide explanation:
4.	Docket/Case 2012KACHO	
5.	Advisory Affil	iate Employing Firm when activity occurred which led to the regulatory action (if applicable):
6.	Principal Prod Insurance Other Produc	
7.	IN 2012, THE FEES, GUAR IMPOSED AD COMPANY O COLLUSION	allegations related to this regulatory action (your response must fit within the space provided): KOREA FTC BEGAN INVESTIGATING ALLEGED COLLUSION ON VARIOUS FEES FOR VARIABLE INSURANCE PRODUCTS (E.G., INVESTMENT MANAGEMENT ANTEE FEES, ETC.) AMONG NINE INSURANCE COMPANIES IN KOREA, INCLUDING METLIFE INSURANCE COMPANY OF KOREA LIMITED. THE KOREA FTC OMINISTRATIVE FINES AGAINST THE NINE RESPONDENT COMPANIES, INCLUDING A FINE IN THE AMOUNT OF \$800,000 REGARDING METLIFE INSURANCE FEOREA LIMITED. THE KOREA FTC ALSO RECOMMENDED THAT THE PROSECUTOR'S OFFICE CONDUCT A CRIMINAL INVESTIGATION OF THE ALLEGED REGARDING THREE OF THE RESPONDENT COMPANIES, INCLUDING METLIFE INSURANCE COMPANY OF KOREA LIMITED. ON MAY 3, 2013, THE DR'S OFFICE DECIDED NOT TO INDICT ANY OF THE THREE INSURANCE COMPANIES THAT HAD BEEN RECOMMENDED FOR INVESTIGATION.
8.	Current Statu	s?
9.	If on appeal,	regulatory action appealed to (SEC, SRO, Federal or State Court) and Date Appeal Filed:
If F	inal or On App	eal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:

CRD

11.	Reso	olution Date (MM/DD/YYYY):			
	_	Exact C Explanation			
		exact, provide explanation:			
12.	Reso	olution Detail:			
	A.	Were any of the following Sanctions C	Ordered (check all appropriate items)?		
		☐ Monetary/Fine Amount: \$			
		Revocation/Expulsion/Denial		☐ Disgorgement/Restitution	
		☐ Censure		☐ Cease and Desist/Injunction	
		☐ Bar		☐ Suspension	
	B.	Other Sanctions Ordered:			
		Principal, etc.). If requalification by exacondition has been satisfied. If dispos	-	provide length of time given to requali	Securities Principal, Financial Operations fy/retrain, type of exam required and whether on, provide total amount, portion levied against
13.	Provi		o the action status and (or) disposition and in	nclude relevant terms, conditions and	dates (your response must fit within the space
	THE IMETURE INVE	S, GUARANTEE FEES, ETC.) AMONG KOREA FTC IMPOSED ADMINISTRAT LIFE INSURANCE COMPANY OF KOR STIGATION OF THE ALLEGED COLL FED. ON MAY 3, 2013, THE PROSECU STIGATION. THE KOREA FTC MAY DE	NINE INSURANCE COMPANIES IN KOREA, I IVE FINES AGAINST THE NINE RESPONDEI EA LIMITED. THE KOREA FTC ALSO RECOM USION REGARDING THREE OF THE RESPO TOR'S OFFICE DECIDED NOT TO INDICT AN	NCLUDING METLIFE INSURANCE CO NT COMPANIES, INCLUDING A FINE IMENDED THAT THE PROSECUTOR' NDENT COMPANIES, INCLUDING ME NY OF THE THREE INSURANCE COMPROSECUTOR'S OFFICE. METLIFE IN	S OFFICE CONDUCT A CRIMINAL
			GENERAL INST		
			OR C AMENDED response us	ed to report details for affirmative resp	ponses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.
OT FO	rm AD	JV.			
			Regulatory	Action	
		m(s) being responded to:	-	-	T 44.0(5)
	1.C(1)	,	☐ 11.C(3) ☐ 11.D(3)	□ 11.C(4) □ 11.D(4)	□ 11.C(5) □ 11.D(5)
	1.E(1)		☐ 11.E(3)	□ 11.E(4)	L 11.D(3)
	1.E(1)) □ 11.E(2) □ 11.G.	L 11.E(3)	LJ 11.E(4)	
Exe	cution I	Page.	e answer to Items 11 C 11 D 11 F 11 F o		ntity using one DRP. File with a completed etails related to the same event. If an event gives
		-	le details to each action on a separate DRP.		3
PAR					
A.	-	person(s) or entity(ies) for whom this D ou (the advisory firm)	RP is being filed is (are):		
	o Y	ou and one or more of your			
	© 0	One or more of your advisory affiliates			
		_	liate, give the full name of the advisory affiliate provide that number. If not, indicate "non-regi	•	·
	ADV	/ DRP - ADVISORY AFFILIATE			
		nber: gistered: O Yes ⊙ No	This advisory affiliate is 🧿 a Firm	C an Individual	

		(For individuals, Last, First, Middle)
		☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
		If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
		☐ This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
	B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
		C Yes ⊙ No
		NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
	PAR	T II
	1.	Regulatory Action initiated by:
		OSEC Other Federal OState OSRO oForeign
		(Full name of regulator, foreign financial regulatory authority, federal, state, or SRO) FAIR TRADE COMMISSION OF KOREA (THE "KOREA FTC")
	2.	Principal Sanction: Civil and Administrative Penalt(ies) /Fine(s) Other Sanctions:
	3.	Date Initiated (MM/DD/YYYY):
		09/07/2010
	4.	Docket/Case Number: 2011KACHONG1751
	5.	Advisory Affiliate Employing Firm when activity occurred which led to the regulatory action (if applicable):
	6.	Principal Product Type: Other
		Other Product Types:
		SAVINGS-TYPE PRODUCTS
	7.	Describe the allegations related to this regulatory action (your response must fit within the space provided):
		IN 2010, THE FAIR TRADE COMMISSION OF KOREA (THE "KOREA FTC") BEGAN INVESTIGATING ALLEGATIONS OF PRICE FIXING INVOLVING ALL OF THE TWENTY-TWO LIFE INSURANCE COMPANIES DOING BUSINESS IN KOREA. IN DECEMBER 2011, FOLLOWING NUMEROUS SUBMISSIONS AND DISCUSSIONS WITH THE COMPANY, THE KOREA FTC CONCLUDED THAT SIXTEEN LIFE INSURANCE COMPANIES, INCLUDING METLIFE INSURANCE COMPANY OF KOREA LIMITED, HAD ENGAGED IN THE IMPROPER EXCHANGE OF INFORMATION WHEN DETERMINING INTEREST RATES FOR SAVINGS-TYPE PRODUCTS. THE KOREA FTC IMPOSED \$1,088,000 IN ADMINISTRATIVE FINES ON METLIFE INSURANCE COMPANY OF KOREA LIMITED. IN JANUARY 2012, THE COMPANY FILED A COURT APPEAL SEEKING TO CANCEL THE KOREA FTC'S DECISION. SEVERAL HEARINGS HAVE TAKEN PLACE SINCE MAY 2012. THE MOST RECENT HEARING WAS HELD ON APRIL 4, 2013. THE NEXT HEARING
		IS SET FOR MAY 21, 2013, AND THAT MAY BE THE LAST HEARING, AFTER WHICH THE COURT MAY ENTER ITS DECISION.
	8.	Current Status? Pending On Appeal Final
	9.	If on appeal, regulatory action appealed to (SEC, <i>SRO</i> , Federal or State Court) and Date Appeal Filed: KOREA FTC ADMINISTRATIVE FINE APPEALED TO KOREAN COURT IN JANUARY 2012. A NUMBER OF HEARINGS HAVE BEEN HELD SINCE MAY 2012, WITH THE NEXT ONE SET FOR MAY 21, 2013.
	lf Fi	inal or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.
	10.	How was matter resolved: Decision
	11.	Resolution Date (MM/DD/YYYY):
П	1	

KOREA LIMITED

	12/19/2011 © Exact C Explanation						
	If not exact, provide explanation:						
	IN DECEMBER 2011, KOREA FTC MADE DEC	SISION AND IMPOSE	:D ADMINISTRATIVE F	INE. THIS DECISION IS UNDER	APPEAL.		
12.	Resolution Detail:						
	A. Were any of the following Sanctions Ord	lered (check all appro	opriate items)?				
	✓ Monetary/Fine Amount: \$ 1,088,000.	.00					
	Revocation/Expulsion/Denial			☐ Disgorgement/Restitution			
	☐ Censure			Cease and Desist/Injuncti	on		
	☐ Bar			☐ Suspension			
	B. Other Sanctions Ordered:						
	Sanction detail: if suspended, <i>enjoined</i> of Principal, etc.). If requalification by exam	n/retraining was a con on resulted in a fine, I if any portion of pen	ndition of the sanction, penalty, restitution, dis	provide length of time given to re	neral Securities Principal, Financial Operations qualify/retrain, type of exam required and whether insation, provide total amount, portion levied against		
13.	Provide a brief summary of details related to to provided). PLEASE REFER TO DETAILS IN ITEM 7.	the action status and	I (or) disposition and in	clude relevant terms, conditions	and dates (your response must fit within the space		
IVIL	_ JUDICIAL ACTION DISCLOSURE REPORTING	PAGE (ADV)					
			GENERAL INSTI				
This	Disclosure Reporting Page (DRP ADV) is an	O INITIAL OR O AN	MENDED response use	ed to report details for affirmative	responses to Item 11.H. of Part 1A or Item 2.F. of Part		
B of	of Form ADV.						
			Civil Judi	cial			
	cck Part 1A item(s) being responded to: 11.H(1)(a)	11.H(1)(b)		☐ 11.H(1)(c)	☑ 11.H(2)		
Chec	eck Part 1B item(s) being responded to:						
	2.F(1) 2.F(2)		2.F(3)	2.F(4)	□ 2.F(5)		
	()		(-)	()	(-7		
	a separate DRP for each event or <i>proceeding</i> cution Page.	. The same event or	proceeding may be rep	ported for more than one <i>person</i>	or entity using one DRP. File with a completed		
	e event may result in more than one affirmative a cial actions must be reported on separate DRP		of Part 1A or Item 2.F.	of Part 1B. Use only one DRP to	report details related to the same event. Unrelated civil		
PAR	RT I						
	The person(s) or entity(ies) for whom this DRF You (the advisory firm)	o is being filed is (are	e):				
	O You and one or more of your advisory affili	iates					
	One or more of your advisory affiliates						
	If this DRP is being filed for an advisory affiliate If the advisory affiliate has a CRD number, pro	-	-	•	·		
	ADV DRP - ADVISORY AFFILIATE						
			No Informa	tion Filed			
	☐ This DRP should be removed from the AD ☐ This DRP should be removed from the AD registration with the SEC and the event was	OV record because: (1) the event or proceed	ling occurred more than ten year	adviser. rs ago or (2) the adviser is registered or applying for		
		-			y in response to Item 11.H.(1)(a), and only if that event at listed in Item 11 that occurred more than ten years		
	☐ This DRP should be removed from the AD	V record because it	was filed in error, such	as due to a clerical or data-entr	y mistake. Explain the circumstances:		

B.	If the advisory affiliate is registered through the IARD system or CRD system? If the answer is "Yes," no other information on this DRP must be	ystem, has the <i>advisory affiliate</i> submitted a DRP (with Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the provided.
	C Yes No	
	NOTE: The completion of this form does not relieve the advisory affiliat	e of its obligation to update its IARD or CRD records.
'AR'	тш	
1.	Court Action initiated by: (Name of regulator, foreign financial regulator) PRIVATE PLAINTIFF	y authority, SRO, commodities exchange, agency, firm, private plaintiff, etc.)
2.	Principal Relief Sought: Money Damages (Private/Civil Complaint) Other Relief Sought:	
3.	Filing Date of Court Action (MM/DD/YYYY):	
	06/25/1999 © Exact C Explanation	
	If not exact, provide explanation:	
4.	Principal Product Type: Other	
	Other Product Types:	
	STRUCTURED SETTLEMENT	
5.	Formal Action was brought in (include name of Federal, State or Foreig U.S. DISTRICT COURT FOR EASTERN DISTRICT OF PENNSYLVANIA	gn Court, Location of Court - City or County <u>and</u> State or Country, Docket/Case Number): A 99-CV-3243
6.	Advisory Affiliate Employing Firm when activity occurred which led to the	e civil judicial action (if applicable):
7.	Describe the allegations related to this civil action (your response must CLASS PLAINTIFFS, THE PAYEES OF STRUCTURED SETTLEMENTS WOULD RESULT IN PAYMENTS FLOWING BETWEEN TRAVELERS OF	FUNDED BY ANNUITIES, CLAIM NOT TO HAVE KNOWN THAT PLACEMENT OF THE ANNUITIES
8.	Current Status? Pending On Appeal Final	
9.	If on appeal, action appealed to (provide name of court) and Date Appea	al Filed (MM/DD/YYYY):
10.	If pending, date notice/process was served (MM/DD/YYYY):	
	07/13/1999	
	If not exact, provide explanation: DATE PROVIDED ON COVER LETTER TO AFFILIATE COMPANY.	
lf Fi	inal or On Appeal, complete all items below. For Pending Actions, compl	ete Item 14 only.
11.	How was matter resolved: Dismissed	
	Distillisacu	
12.	Resolution Date (MM/DD/YYYY):	
	10/01/2000 ^ℂ Exact [⊙] Explanation	
	If not exact, provide explanation: CASE WAS DISMISSED, ON OR ABOUT OCTOBER, 2000.	
13.	Resolution Detail:	
	A. Were any of the following Sanctions Ordered or Relief Granted(ch	neck appropriate items)?
	☐ Monetary/Fine Amount: \$	
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution
	☐ Censure	☐ Cease and Desist/Injunction
	□ Bar	☐ Suspension
	B. Other Sanctions:	
	CASE WAS DISMISSED.	
		on including start date and capacities affected (General Securities Principal, Financial Operations n of the sanction, provide length of time given to requalify/retrain, type of exam required and whether

condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against

	CASE WAS DISMISSED.
14.	Provide a brief summary of circumstances related to the action(s), allegation(s), disposition(s) and/or finding(s) disclosed above (your response must fit within the space provided) CLASS PLAINTIFFS, THE PAYEES OF STRUCTURED SETTLEMENTS FUNDED BY ANNUITIES, CLAIM NOT TO HAVE KNOWN THAT PLACEMENT OF THE ANNUITIES WOULD RESULT IN PAYMENTS FLOWING BETWEEN TRAVELERS COMPANIES.
	GENERAL INSTRUCTIONS
This	Disclosure Reporting Page (DRP ADV) is an C INITIAL OR S AMENDED response used to report details for affirmative responses to Item 11.H. of Part 1A or Item 2.F. of Part
1B c	of Form ADV.
	Civil Judicial
Che	ck Part 1A item(s) being responded to:
	11.H(1)(a) □ 11.H(1)(b) □ 11.H(1)(c) □ 11.H(2)
Che	ck Part 1B item(s) being responded to:
	$\square 2.F(1) \qquad \square 2.F(2) \qquad \square 2.F(3) \qquad \square 2.F(4) \qquad \square 2.F(5)$
Use	a separate DRP for each event or <i>proceeding</i> . The same event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP. File with a completed
	cution Page.
One	event may result in more than one affirmative answer to Item 11.H. of Part 1A or Item 2.F. of Part 1B. Use only one DRP to report details related to the same event. Unrelated civil
	cial actions must be reported on separate DRPs.
PAR	T1
	The <i>person(s)</i> or entity(ies) for whom this DRP is being filed is (are):
, .	You (the advisory firm)
	You and one or more of your advisory affiliates
	One or more of your advisory affiliates
	If this DRP is being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVISORY AFFILIATE
	No Information Filed
	☐ This DRP should be removed from the ADV record because the <i>advisory affiliate(s)</i> is no longer associated with the adviser. ☐ This DRP should be removed from the ADV record because: (1) the event or <i>proceeding</i> occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or <i>advisory affiliate's</i> favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.H.(1)(a), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR	T II
1.	Court Action initiated by: (Name of regulator, foreign financial regulatory authority, SRO, commodities exchange, agency, firm, private plaintiff, etc.) PRIVATE PLAINTIFF
2.	Principal Relief Sought: Money Damages (Private/Civil Complaint) Other Relief Sought:

you or an advisory affiliate date paid and if any portion of penalty was waived:

3.	Filing Date of Court Action (MM/DD/YYYY):					
	03/29/1999 © Exact C Explanation					
	If not exact, provide explanation:					
4.	Principal Product Type:					
	Other					
	Other Product Types:					
	STRUCTURED SETTLEMENTS					
5.	Formal Action was brought in (include name of Federal, State or Foreign Court, Location CONNECTICUT SUPERIOR COURT FOR THE JUDICIAL DISTRICT OF NEW BRITAIN	· · · · · · · · · · · · · · · · · · ·	ocket/Case Number):			
6.	Advisory Affiliate Employing Firm when activity occurred which led to the civil judicial activity	on (if applicable):				
7.	Describe the allegations related to this civil action (your response must fit within the space of CLASS PLAINTIFFS, THE PAYEES OF STRUCTURED SETTLEMENTS FUNDED BY ANN WOULD RESULT IN PAYMENTS FLOWING BETWEEN TRAVELERS COMPANIES.	•	LACEMENT OF THE ANNUITIES			
8.	Current Status? © Pending C On Appeal C Final					
9.	If on appeal, action appealed to (provide name of court) and Date Appeal Filed (MM/DD/Y	YYY):				
10.	If pending, date notice/process was served (MM/DD/YYYY):					
	07/13/1999 © Exact © Explanation					
	If not exact, provide explanation:					
	DATE PROVIDED ON COVER LETTER TO AFFILIATE COMPANY.					
If F	inal or On Appeal, complete all items below. For Pending Actions, complete Item 14 only.					
11.	How was matter resolved:					
12.	Resolution Date (MM/DD/YYYY):					
	C Exact C Explanation					
	If not exact, provide explanation:					
13.	Resolution Detail:					
10.		40.000				
	A. Were any of the following Sanctions Ordered or Relief Granted(check appropriate i	tems)?				
	Monetary/Fine Amount: \$	-				
	Revocation/Expulsion/Denial	☐ Disgorgement/Restitution				
	Censure	Cease and Desist/Injunction				
	☐ Bar	☐ Suspension				
	B. Other Sanctions:					
	C. Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an <i>advisory affiliate</i> date paid and if any portion of penalty was waived:					
14.	Provide a brief summary of circumstances related to the action(s), allegation(s), dispos provided)	tion(s) and/or finding(s) disclosed above (your re	esponse must fit within the space			
	CLASS PLAINTIFFS, THE PAYEES OF STRUCTURED SETTLEMENTS, FUNDED BY ANN WOULD RESULT IN PAYMENTS FLOWING BETWEEN TRAVELERS COMPANIES.	IUITIES, CLAIM NOT TO HAVE KNOWN THAT PL	LACEMENT OF THE ANNUITIES			
	GENERAL INST					
This	Disclosure Reporting Page (DRP ADV) is an O INITIAL OR O AMENDED response us	ed to report details for affirmative responses to Ite	em 11.H. of Part 1A or Item 2.F. of Part			
1B o	f Form ADV.					
C	Civil Jud	cial				
	ck Part 1A item(s) being responded to:	14 H/4/C)	□ 44 H/2)			
	11.H(1)(a) □ 11.H(1)(b)	☐ 11.H(1)(c)	☑ 11.H(2)			

Check Part 1B item(s) being responded to:

\square 2	2.F(1)	2.F(3)	2.F(4)	2.F(5)
	a separate DRP for each event or proceeding	g . The same event or <i>proceeding</i> may be rep	orted for more than one <i>person</i> or e	ntity using one DRP. File with a completed
Exec	cution Page.			
	event may result in more than one affirmative cial actions must be reported on separate DR		of Part 1B. Use only one DRP to repo	ort details related to the same event. Unrelated civil
PAR	रा।			
A.	The <i>person(s)</i> or entity(ies) for whom this DF • You (the advisory firm)	RP is being filed is (are):		
	O You and one or more of your advisory af	filiates		
	One or more of your advisory affiliates			
	_	iate, give the full name of the advisory affiliate rovide that number. If not, indicate "non-regist	•	·
	ADV DRP - ADVISORY AFFILIATE			
		No Informat	ion Filed	
	\square This DRP should be removed from the A	ADV record because the advisory affiliate(s) is ADV record because: (1) the event or proceeds was resolved in the adviser's or advisory affiliate.	ing occurred more than ten years ag	ser. o or (2) the adviser is registered or applying for
				esponse to Item 11.H.(1)(a), and only if that event ed in Item 11 that occurred more than ten years
	☐ This DRP should be removed from the A	NDV record because it was filed in error, such	as due to a clerical or data-entry mi	stake. Explain the circumstances:
B.	If the advisory affiliate is registered through the event? If the answer is "Yes," no other information.		risory affiliate submitted a DRP (with	Form ADV, BD or U-4) to the IARD or <i>CRD</i> for the
	O Yes O No			
	NOTE: The completion of this form does not	relieve the advisory affiliate of its obligation to	update its IARD or <i>CRD</i> records.	
PAR	T II			
1.	Court Action initiated by: (Name of regulator, PRIVATE PLAINTIFF	foreign financial regulatory authority, SRO, co	ommodities exchange, agency, firm,	private plaintiff, etc.)
2.	Principal Relief Sought: Other			
	Other Relief Sought: UNSPECIFIED MONITARY DAMAGES.			
3.	Filing Date of Court Action (MM/DD/YYYY):			
	08/24/2001			
4.	Principal Product Type:			
	Other Product Types: INVESTMENT CONTRACT(S)			
5.		MMUNITY BANK & TRUST COMPANY, ET AL, I SCHOOL BOARD SECTION 457 MASTER P	CASE NO. 571-316, 24TH JUDICIAL	DISTRICT FOR PARISH OF JEFFERSON,
6.	Advisory Affiliate Employing Firm when activ N/A	rity occurred which led to the civil judicial actio	n (if applicable):	

2.F(1)

7. Describe the allegations related to this civil action (your response must fit within the space provided):

	THE TWO RELATED COMPLAINTS ALLEGE THAT TOW CONTROL PERSON AND FOR FAILING TO SUPERVISE MISREPRESENTATIONS AND MISMANAGED THE JEFF	ITS NOW FORMER REGISTERED R	EPRESENTATIVE KEVIN DE		
8.	Current Status? C Pending C On Appeal C Final	I			
9.	If on appeal, action appealed to (provide name of court) a	nd Date Appeal Filed (MM/DD/YYYY)	:		
10.	 If pending, date notice/process was served (MM/DD/YYY) Exact	Y):			
lf Fi	Final or On Appeal, complete all items below. For Pending	Actions, complete Item 14 only.			
11.	How was matter resolved: Settled				
12.	2. Resolution Date (MM/DD/YYYY): 04/30/2002				
13.	3. Resolution Detail:				
	 A. Were any of the following Sanctions Ordered or Re Monetary/Fine Amount: \$ Revocation/Expulsion/Denial Censure Bar B. Other Sanctions: C. Sanction detail: if suspended, enjoined or barred, principal, etc.). If requalification by exam/retraining condition has been satisfied. If disposition resulted you or an advisory affiliate date paid and if any portions. 	provide duration including start date a was a condition of the sanction, proving a fine, penalty, restitution, disgorg	Disgorgement/Restitution Cease and Desist/Injunction Suspension and capacities affected (General design of time given to require and capacities affected to require the second of time given to require the second of the	eral Securities Principal, Financial Operations ualify/retrain, type of exam required and whether	st
14.	\$4,975,000.00 4. Provide a brief summary of circumstances related to the provided) MATTER SETTLED IN CONJUNCTION WITH NASD CEN		s) and/or finding(s) disclosed	above (your response must fit within the space	
		GENERAL INSTRUC	TIONS		
	is Disclosure Reporting Page (DRP ADV) is an $_{\mbox{\scriptsize C}}$ INITIAL of Form ADV.	OR • AMENDED response used to	report details for affirmative r	responses to Item 11.H. of Part 1A or Item 2.F. of	Part
Char	and Dort 1 A itam/a) being reapended to	Civil Judicial			
	neck Part 1A item(s) being responded to: 11.H(1)(a)		11.H(1)(c)	☑ 11.H(2)	
	neck Part 1B item(s) being responded to: 2.F(1)	□ 2.F(3)	□ 2.F(4)	□ 2.F(5)	
	e a separate DRP for each event or <i>proceeding</i> . The same ecution Page.	event or <i>proceeding</i> may be reporte	d for more than one <i>person</i> o	or entity using one DRP. File with a completed	
	ne event may result in more than one affirmative answer to It dicial actions must be reported on separate DRPs.	em 11.H. of Part 1A or Item 2.F. of Pa	art 1B. Use only one DRP to r	report details related to the same event. Unrelated	civil
PAR	RTI				
A.	 The person(s) or entity(ies) for whom this DRP is being f You (the advisory firm) 	iled is (are):			
	C You and one or more of your advisory affiliates				

	One or more of your advisory affiliates
	If this DRP is being filed for an <i>advisory affiliate</i> , give the full name of the <i>advisory affiliate</i> below (for individuals, Last name, First name, Middle name). If the <i>advisory affiliate</i> has a <i>CRD</i> number, provide that number. If not, indicate "non-registered" by checking the appropriate box.
	ADV DRP - ADVISORY AFFILIATE
	No Information Filed
	 □ This DRP should be removed from the ADV record because the advisory affiliate(s) is no longer associated with the adviser. □ This DRP should be removed from the ADV record because: (1) the event or proceeding occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or advisory affiliate's favor.
	If you are registered or registering with a state securities authority, you may remove a DRP for an event you reported only in response to Item 11.H.(1)(a), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.
	This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
3.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	O Yes No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
٩R	T II
	Court Action initiated by: (Name of regulator, foreign financial regulatory authority, SRO, commodities exchange, agency, firm, private plaintiff, etc.) PRIVATE PLAINTIFF
	Principal Relief Sought: Other Other Relief Sought: UNSPECIFIED MONITARY DAMAGES
3.	Filing Date of Court Action (MM/DD/YYYY):
	09/05/2001 Exact Explanation If not exact, provide explanation:
١.	Principal Product Type: Investment Contract(s) Other Product Types:
j.	Formal Action was brought in (include name of Federal, State or Foreign Court, Location of Court - City or County <u>and</u> State or Country, Docket/Case Number): JOHN D. BERTHOUD V. RANDALL J. VESELIK, KEVIN B. DERMODY, H. BECK, INC., TOWER SQUARE SECURITIES, INC., ET AL, CASE NO. 01C-6895, UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS.
5.	Advisory Affiliate Employing Firm when activity occurred which led to the civil judicial action (if applicable): N/A
	Describe the allegations related to this civil action (your response must fit within the space provided): COMPLAINT ALLEGES THAT TOWER SQUARE SECURITIES, INC. IS LIABLE UNDER SECTION 20 OF THE '34 ACT FOR A PRIVATE SECURITIES TRANSACTION ENTERED INTO BY ITS NOW FORMER REGISTERED REPRESENTATIVE, KEVIN DERMODY. PLAINTIFF ALLEGES THAT DERMODY AND OTHER NON-TOWER SQUARE SECURITIES INC. RELATED PARTIES FRAUDULENTLY INDUCED HIM TO ENTER INTO AN INVESTMENT AGREEMENT IN HILTOPPER ENTERPRISES, LLC (AN ENTITY WITH NO AFFILIATION WITH TOWER SQUARE SECURITIES, INC.).
3.	Current Status? ● Pending On Appeal Final
).	If on appeal, action appealed to (provide name of court) and Date Appeal Filed (MM/DD/YYYY):
0.	If pending, date notice/process was served (MM/DD/YYYY):
	09/17/2001 © Exact C Explanation If not exact, provide explanation:
	inglior On Appeal, complete all items helevy. For Ponding Actions, complete Item 14 only

12.	Resoluti	on Date (MM/DD/YYYY):				
		ct C Explanation				
	If not ex	act, provide explanation:				
13.	Resolut	ion Detail:				
		ere any of the following Sanction	ns Ordered or Relief Gr	ranted(check appropriate	e items)?	
		Monetary/Fine Amount: \$				
		Revocation/Expulsion/Denial			☐ Disgorgement/Restitution	
		Censure			☐ Cease and Desist/Injunction	
		Bar			Suspension	
	B. Ot	her Sanctions:				
	Pr co	incipal, etc.). If requalification by	exam/retraining was a position resulted in a fi	condition of the sanction ine, penalty, restitution, o	, provide length of time given to requ	al Securities Principal, Financial Operations alify/retrain, type of exam required and whether ation, provide total amount, portion levied against
14.	Provide provide	· ·	ces related to the action	n(s), allegation(s), dispo	sition(s) and/or finding(s) disclosed a	above (your response must fit within the space
	COMPL INTO B'	AINT ALLEGES THAT TOWER S Y ITS NOW FORMER REGISTER	RED REPRESENTATIVE	E, KEVIN DERMODY. PL	AINTIFF ALLEGES THAT DERMODY	A PRIVATE SECURITIES TRANSACTION ENTERED AND OTHER NON-TOWER SQUARE SECURITIES, ER ENTERPRISES, LLC (AN ENTITY WITH NO
				GENERAL INS	TRUCTIONS	
his	Disclosu	re Reporting Page (DRP ADV)	is an O INITIAL OR 6			sponses to Item 11.H. of Part 1A or Item 2.F. of Part
	of Form Al		UK C	,		
:he	ck Part 1.	A item(s) being responded to:		Civil Ju	dicial	
	11.H(1)(a	* * * *	□ 11.H(1)(b)		☐ 11.H(1)(c)	☑ 11.H(2)
	. , ,	,	. , , ,			.,
	ck Part 1 2.F(1)	B item(s) being responded to:	· \	☐ 2.F(3)	2.F(4)	□ 2.F(5)
	2.Γ(1)	L 2.F(2	.)	L 2.F(3)	∟ 2.Γ(4)	L 2.F(3)
	a separa		eding . The same event	t or <i>proceeding</i> may be r	eported for more than one <i>person</i> or	entity using one DRP. File with a completed
		ay result in more than one affirm ns must be reported on separate		.H. of Part 1A or Item 2.F	F. of Part 1B. Use only one DRP to re	port details related to the same event. Unrelated civil
PAR	ΤI					
		son(s) or entity(ies) for whom th	is DRP is being filed is	(are):		
	You	(the advisory firm)				
	O You	and one or more of your adviso.	ny affiliatos			
		or more of your advisory affiliate				
		davisory anniae				
				= = = = = = = = = = = = = = = = = = =	ate below (for individuals, Last name, gistered" by checking the appropriate	·
	ADV DI	RP - ADVISORY AFFILIATE				
				No Inform	nation Filed	
	This regis	DRP should be removed from testration with the SEC and the ev	the ADV record becaus vent was resolved in the	se: (1) the event or <i>proce</i> e e adviser's or <i>advisory at</i>	filiate's favor.	ago or (2) the adviser is registered or applying for
	-					response to Item 11.H.(1)(a), and only if that event sted in Item 11 that occurred more than ten years

11. How was matter resolved:

ago.

	☐ This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:
B.	If the advisory affiliate is registered through the IARD system or CRD system, has the advisory affiliate submitted a DRP (with Form ADV, BD or U-4) to the IARD or CRD for the event? If the answer is "Yes," no other information on this DRP must be provided.
	C Yes No
	NOTE: The completion of this form does not relieve the advisory affiliate of its obligation to update its IARD or CRD records.
PAR [®]	ГІІ
1.	Court Action initiated by: (Name of regulator, foreign financial regulatory authority, SRO, commodities exchange, agency, firm, private plaintiff, etc.) U.S.BANKRUPTCY COURT, MIDDLE DISTRICT OF FL, TAMPA DIVISION.
2.	Principal Relief Sought: Money Damages (Private/Civil Complaint) Other Relief Sought:
3.	Filing Date of Court Action (MM/DD/YYYY):
	10/13/2004 © Exact C Explanation If not exact, provide explanation:
4.	Principal Product Type: Investment Contract(s) Other Product Types:
5.	Formal Action was brought in (include name of Federal, State or Foreign Court, Location of Court - City or County and State or Country, Docket/Case Number): UNITED STATES BANKRUPTCY COURT, MIDDLE DISTRICT OF FLORIDA, TAMPA DIVISON.
6.	Advisory Affiliate Employing Firm when activity occurred which led to the civil judicial action (if applicable): TOWER SQUARE SECURITIES, INC.
7.	Describe the allegations related to this civil action (your response must fit within the space provided): THE CASE INVOLVES TWO FORMER REPRESENTATIVES OF TOWER SQUARE SECURITIES, INC. AND THE SALE OF INVESTMENTS IN 21ST CENTURY SATELLITE COMMUNICATIONS, A COMPANY NOT AFFILIATED WITH TOWER SQUARE SECURITIES, INC. PLAINTIFF, 21ST CENTURY SATELLITE COMMUNICATIONS, INC. FILED BANKTUPTCY AND IS PETITIONING TO RECOVER LOSSES IT SUSTAINED IN CONNECTION WITH THE SALE OF THE INVESTMENTS.
8.	Current Status? Pending On Appeal Final
9.	If on appeal, action appealed to (provide name of court) and Date Appeal Filed (MM/DD/YYYY):
10.	If pending, date notice/process was served (MM/DD/YYYY):
	10/12/2004
lf Fi	nal or On Appeal, complete all items below. For Pending Actions, complete Item 14 only.
11.	How was matter resolved:
12.	Resolution Date (MM/DD/YYYY):
	C Exact C Explanation If not exact, provide explanation:
13.	Resolution Detail:
	A. Were any of the following Sanctions Ordered or Relief Granted(check appropriate items)?
	Monetary/Fine Amount: \$
	Revocation/Expulsion/Denial Disgorgement/Restitution
	☐ Censure ☐ Cease and Desist/Injunction
	☐ Bar ☐ Suspension
	B. Other Sanctions:
	C. Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against

you or an advisory affiliate date paid and if any portion of penalty was waived:

14. Provide a brief summary of circumstances related to the action(s), allegation(s), disposition(s) and/or finding(s) disclosed above (your response must fit within the space provided)

THE CASE INVOLVES TWO FORMER REPRESENTATIVES OF TOWER SQUARE SECURITIES, INC. AND THE SALE OF INVESTMENTS IN 21ST CENTURY SATELLITE COMMUNICATIONS, A COMPANY NOT AFFILIATED WITH TOWER SQUARE SECURITIES, INC. PLAINTIFF, 21ST CENTURY SATELLITE COMMUNICATIONS, INC. FILED BANKTUPTCY AND IS PETITIONING TO RECOVER LOSSES IT SUSTAINED IN CONNECTION WITH THE SALE OF THE INVESTMENTS.

Part 2

Exemption from brochure delivery requirements for SEC-registered advisers

SEC rules exempt SEC-registered advisers from delivering a firm brochure to some kinds of clients. If these exemptions excuse you from delivering a brochure to *all* of your advisory clients, you do not have to prepare a brochure.

Yes No

Are you exempt from delivering a brochure to all of your clients under these rules?

0 0

If no, complete the ADV Part 2 filing below.

Amend, retire or file new brochures:

Execution Pages

DOMESTIC INVESTMENT ADVISER EXECUTION PAGE

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial submission of Form ADV to the SEC and all amendments.

Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint the Secretary of State or other legally designated officer, of the state in which you maintain your *principal office and place of business* and any other state in which you are submitting a *notice filing*, as your agents to receive service, and agree that such *persons* may accept service on your behalf, of any notice, subpoena, summons, *order* instituting *proceedings*, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrative *proceeding* or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding*, or arbitration (a) arises out of any activity in connection with your investment advisory business that is subject to the jurisdiction of the United States, and (b) is *founded*, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of the state in which you maintain your *principal office and place of business* or of any state in which you are submitting a *notice filing*.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the investment adviser. The investment adviser and I both certify, under penalty of perjury under the laws of the United States of America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signing this Form ADV Execution Page as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any *person* having *custody* or possession of these books and records to make them available to federal and state regulatory representatives.

Signature: MARC COHN

Date: MM/DD/YYYY 05/08/2013

Printed Name:

Title:

MARC COHN

CHIEF COMPLIANCE OFFICER

Adviser CRD Number:

833

NON-RESIDENT INVESTMENT ADVISER EXECUTION PAGE

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial submission of Form ADV to the SEC and all amendments.

1. Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint each of the Secretary of the SEC, and the Secretary of State or other legally designated officer, of any other state in which you are submitting a *notice filing*, as your agents to receive service, and agree that such persons may accept service on your behalf, of any notice, subpoena, summons, *order* instituting *proceedings*, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrative *proceeding* or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding* or arbitration (a) arises out of any activity in connection with your investment advisory business that is subject to the jurisdiction of the United States, and (b) is *founded*,

directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of any state in which you are submitting a notice filing.

2. Appointment and Consent: Effect on Partnerships

If you are organized as a partnership, this irrevocable power of attorney and consent to service of process will continue in effect if any partner withdraws from or is admitted to the partnership, provided that the admission or withdrawal does not create a new partnership. If the partnership dissolves, this irrevocable power of attorney and consent shall be in effect for any action brought against you or any of your former partners.

3. Non-Resident Investment Adviser Undertaking Regarding Books and Records

By signing this Form ADV, you also agree to provide, at your own expense, to the U.S. Securities and Exchange Commission at its principal office in Washington D.C., at any Regional or District Office of the Commission, or at any one of its offices in the United States, as specified by the Commission, correct, current, and complete copies of any or all records that you are required to maintain under Rule 204-2 under the Investment Advisers Act of 1940. This undertaking shall be binding upon you, your heirs, successors and assigns, and any person subject to your written irrevocable consents or powers of attorney or any of your general partners and managing agents.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the non-resident investment adviser. The investment adviser and I both certify, under penalty of perjury under the laws of the United States of America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signing this Form ADV Execution Page as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any person having custody or possession of these books and records to make them available to federal and state regulatory representatives.

Signature: Date: MM/DD/YYYY Title:

Printed Name:

Adviser CRD Number:

833