FORM ADV

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

Primary Business Name: 1919 INVESTMENT COUNSEL, LLC

Annual Amendment - Item 1 Identifying Information

Rev. 10/2021

WARNING: Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 4. Item 1 Identifying Information Responses to this Item tell us who you are, where you are doing business, and how we can contact you. If you are filing an umbrella registration, the information in Item 1 should be provided for the filing adviser only. General Instruction 5 provides information to assist you with filing an umbrella registration. Your full legal name (if you are a sole proprietor, your last, first, and middle names): 1919 INVESTMENT COUNSEL, LLC B. (1) Name under which you primarily conduct your advisory business, if different from Item 1.A. 1919 INVESTMENT COUNSEL, LLC List on Section 1.B. of Schedule D any additional names under which you conduct your advisory business. (2) If you are using this Form ADV to register more than one investment adviser under an umbrella registration, check this box \Box If you check this box, complete a Schedule R for each relying adviser. C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.(1)), enter the new name and specify whether the name change is of \square your legal name or \square your primary business name: D. (1) If you are registered with the SEC as an investment adviser, your SEC file number: 801-63656 (2) If you report to the SEC as an exempt reporting adviser, your SEC file number: (3) If you have one or more Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers: No Information Filed E. (1) If you have a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system, your CRD number: 133370

If your firm does not have a CRD number, skip this Item 1.E. Do not provide the CRD number of one of your officers, employees, or affiliates. (2) If you have additional CRD Numbers, your additional CRD numbers: No Information Filed Principal Office and Place of Business (1) Address (do not use a P.O. Box): Number and Street 1: Number and Street 2: ONE SOUTH STREET **SUITE 2500** City: State: Country: ZIP+4/Postal Code: **BALTIMORE** Maryland United States 21202 If this address is a private residence, check this box: \Box

List on Section 1.F. of Schedule D any office, other than your principal office and place of business, at which you conduct investment advisory business. If you are applying for registration, or are registered, with one or more state securities authorities, you must list all of your offices in the state or states to which you are applying for registration or with whom you are registered. If you are applying for SEC registration, if you are registered only with the SEC, or if you are reporting to the SEC as an exempt reporting adviser, list the largest twenty-five offices in terms of numbers of employees as of the end of your most recently completed fiscal year.

	(2) Days of week that you normally conduct business at your principal office and place of business:					
	• Monday - Friday Normal business hou					
	8:30 A.M 5:00 P.M					
	(3) Telephone number a 410-454-2171	t this location:				
	(4) Facsimile number at 410-454-3154	this location, if any:				
		nber of offices, other than	your <i>principal office and</i> p	place of business, at which you conduct investment advisor	у	
	business as of the er 8	nd of your most recently co	ompleted fiscal year?			
G.	Mailing address, if differe	ent from your <i>principal offic</i>	ce and place of business a	address:		
	Number and Street 1:		Number and Stre	eet 2:		
	City:	State:	Country:	ZIP+4/Postal Code:		
	If this address is a priva	te residence, check this bo	x: □			
Н.	If you are a sole propriet 1.F.:	or, state your full residence	e address, if different fron	m your <i>principal office and place of business</i> address in Item	1	
	Number and Street 1:		Number and Stre	eet 2:		
	City:	State:	Country:	ZIP+4/Postal Code:		
				Yes	No	
I.	Do you have one or more Facebook and LinkedIn)?	•	oublicly available social m	edia platforms (including, but not limited to, Twitter,	0	
	web, you may list the po Do not provide the addre	rtal without listing address esses of websites or accoun	es for all of the other info ts on publicly available so	which to access other information you have published on the primation. You may need to list more than one portal addres ocial media platforms where you do not control the content. is or the addresses of employee accounts on publicly availab	s.	
J.	Chief Compliance Officer					
				er. If you are an <i>exempt reporting adviser</i> , you must provident from 1.K. below.	le	
	Name: RESHMA BALLIE MCGOV	VAN	Other titles, if MANAGING DI	•		
	Telephone number: (212) 554-7129		Facsimile numl (212) 554-713			
	Number and Street 1: 787 SEVENTH AVENUE		Number and Si 12TH FLOOR	itreet 2:		
	City: NEW YORK	State: New York	Country: United States	ZIP+4/Postal Code: 10019		
	Electronic mail (e-mail) RBM@1919IC.COM	address, if Chief Compliand	ce Officer has one:			
	company registered unde		y Act of 1940 that you ad	son other than you, a related person or an investment lyise for providing chief compliance officer services to you,		
	Name:					
	IRS Employer Identificati	on Number:				
K.	= :	ntact Person: If a person o orm ADV, you may provide	•	liance Officer is authorized to receive information and respo	ond	
	Name:		Titles:			
	GREGORY J. KEIFER Telephone number:		VICE PRESIDENT Facsimile number, if a	any:		
	rerepriorie fluitibel.		raconnine maniber, il d	y.		

	(410) 454-3109		(410) 454-3	154				
	Number and Street 1: ONE SOUTH STREET		Number and SUITE 2500	Street 2:				
	•	State: Maryland	Country: United State		ZIP+4/Postal C 21202	ode:		
	Electronic mail (e-mail) addres	ss, if contact person ha	s one:					
L.	Do you maintain some or all of state law, somewhere other that				ction 204 of the	Advisers Act, or similar	Yes ⊙	No C
	If "yes," complete Section 1.L.	of Schedule D.					Yes	No
М.	Are you registered with a foreig	gn financial regulatory a	authority?				C	©
	Answer "no" if you are not regi foreign financial regulatory aut	_	_		fyou have an ai	ffiliate that is registered v	vith a	
							Yes	No
N.	Are you a public reporting com	pany under Sections 12	2 or 15(d) of t	ne Securities Exchang	e Act of 1934?		\circ	⊚
							Yes	No
Ο.	Did you have \$1 billion or more If yes, what is the approximate			st recent fiscal year?			О	•
	$_{ m C}$ \$1 billion to less than \$10	billion						
	C \$10 billion to less than \$5	0 billion						
	C \$50 billion or more							
P.	For purposes of Item 1.0. only, your total assets using the total Provide your Legal Entity Ident 25490074P0AZ35Z01A02	I assets shown on the l	balance sheet	for your most recent	fiscal year end.			
	A legal entity identifier is a union legal entity identifier.	que number that compa	anies use to id	entify each other in ti	ne imanciai mai	кегріасе. той тіау постіє	ave a	
List	Your other business Names and iness name.		ich you use th	em. You must comple	ete a separate S	chedule D Section 1.B. fo	or eac	h
	ne: ARTHUR KARAFIN INVESTM	ENT ADVISORS DEPAR	TMENT OF 191	9 INVESTMENT COUN	NSEL, LLC			
Juri	sdictions							
V	AL	☑ IL		□ NE		□ sc		
	AK	☑ IN		□ NV		□ SD		
	AZ	□IA		☑ NH		☑ TN		
	AR	□ KS		☑ NJ		□ TX		
	CA	□ KY		□ NM		□ uT		
	CO	L NT LA		✓ NY		□ VT		
V		□ ME		M NC		□∨ı		
	DE	ME MD		□ ND		□ VA		
	DC	MA MA		☑ OH		□ WA		
		M MI		№ он Пок		□ wa □ wv		
	I L	E MI				L VV V		

☑ GA	□ MN	☑ OR	□ wɪ		
□GU	☐ MS	▽ PA	□ WY		
□ні	□мо	□ PR	☐ Other:		
□ID	□ мт	□RI			
SECTION 1.F. Other Offices					
advisory business. You must compl	ete a separate Schedule D S	Section 1.F. for each location. I	of business, at which you conduct investment f you are applying for SEC registration, if you are wenty-five offices (in terms of numbers of		
Number and Street 1: 2311 HIGHLAND AVENUE SOUTH		Number and Street 2: SUITE 190			
City:	State:	Country:	ZIP+4/Postal Code:		
BIRMINGHAM	Alabama	United States	35205		
If this address is a private residenc	e, check this box: \Box				
Telephone Number: 205-414-3350	Facsimile Numb 205-949-3503	per, if any:			
If this office location is also require or investment adviser on the Unifor	=		ty as a branch office location for a broker-dealer vide the <i>CRD</i> Branch Number here:		
How many <i>employees</i> perform inve	stment advisory functions fr	rom this office location?			
Are other business activities conduct \Box (1) Broker-dealer (registered or	•	check all that apply)			
\square (2) Bank (including a separately		livision of a bank)			
\square (3) Insurance broker or agent \square (4) Commodity pool operator or	commodity trading advisor ((whether registered or exempt	from registration)		
\Box (5) Registered municipal advisor		(,		
\square (6) Accountant or accounting firm	n				
(7) Lawyer or law firm					
Describe any other investment-rela	ted business activities condu	ucted from this office location:			
Complete the following information for each office, other than your <i>principal office and place of business</i> , at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an <i>exempt reporting adviser</i> , list only the largest twenty-five offices (in terms of numbers of <i>employees</i>).					
Number and Street 1: 49 STEVENSON STREET		Number and Street 2: SUITE 1075			
City:	State:	Country:	ZIP+4/Postal Code:		
SAN FRANCISCO	California	United States	94105		
If this address is a private residenc	e, check this box: \Box				
Talanhana Nivers Is a sec	Foresteed At 1	. :6 a			
Telephone Number: 415-500-6700	Facsimile Number 415-500-6701	ı, ıı dıly:			
T1J-J00-0/00	413-200-6/01				

If this office location is also required to be registered with FINRA or a <i>state securities authority</i> as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the <i>CRD</i> Branch Number here:							
How many <i>employees</i> perform investment advisory functions from this office location? 9							
Are other business activities conducted at this office location? (check all that apply)							
\square (1) Broker-dealer (registered or unregistered	d)						
\square (2) Bank (including a separately identifiable	department or di	ivision of a bank)					
\square (3) Insurance broker or agent							
\square (4) Commodity pool operator or commodity	trading advisor (whether registered or ex	empt from registration)				
(5) Registered municipal advisor							
(6) Accountant or accounting firm							
(7) Lawyer or law firm							
Describe any other <i>investment-related</i> business	s activities condu	cted from this office loca	ation:				
advisory business. You must complete a separa	Complete the following information for each office, other than your <i>principal office and place of business</i> , at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an <i>exempt reporting adviser</i> , list only the largest twenty-five offices (in terms of numbers of <i>employees</i>).						
Number and Street 1: 4445 NORTH A1A		Number and Street 2: SUITE 210					
City:	State:	Country:	ZIP+4/Postal Code:				
VERO BEACH	Florida	United States	32963				
If this address is a private residence, check this	s box: 🗆						
Telephone Number: 866-566-0425	Facsimile Numb	er, if any:					
If this office location is also required to be regis or investment adviser on the Uniform Branch O			ethority as a branch office location for a broker-dealer provide the <i>CRD</i> Branch Number here:				
How many <i>employees</i> perform investment advisory functions from this office location?							
Are other business activities conducted at this office location? (check all that apply) [(1) Broker-dealer (registered or unregistered)							
\square (2) Bank (including a separately identifiable	department or di	ivision of a bank)					
\square (3) Insurance broker or agent							
\square (4) Commodity pool operator or commodity	trading advisor (whether registered or ex	empt from registration)				
(5) Registered municipal advisor							
(6) Accountant or accounting firm							
(7) Lawyer or law firm							
Describe any other investment-related business	s activities condu	cted from this office loca	ation:				

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1: 787 SEVENTH AVENUE		Number and Street 2: 12TH FLOOR					
City:	State:	Country:	ZIP+4/Postal Code:				
NEW YORK	New York	United States	10019				
If this address is a private residence, check t	his box: 🗖						
Telephone Number: 212-554-7100	Facsimile Number, i 212-554-7135	f any:					
If this office location is also required to be registered with FINRA or a state securities authority as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the CRD Branch Number here:							
How many <i>employees</i> perform investment ac 25	How many <i>employees</i> perform investment advisory functions from this office location? 25						
Are other business activities conducted at thi	s office location? (ch	eck all that apply)					
\square (1) Broker-dealer (registered or unregister	-						
(2) Bank (including a separately identifiable	le department or divi	sion of a bank)					
(3) Insurance broker or agent							
(4) Commodity pool operator or commodit	y trading advisor (w	hether registered or exemp	ot from registration)				
(5) Registered municipal advisor							
☐ (6) Accountant or accounting firm ☐ (7) Lawyer or law firm							
(7) Lawyer or law min							
Describe any other investment-related busine	ess activities conduct	ed from this office location	:				
	rate Schedule D Sec	tion 1.F. for each location.	of business, at which you conduct investment If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of				
advisory business. You must complete a separegistered only with the SEC, or if you are an	arate Schedule D Sec exempt reporting an	tion 1.F. for each location.	If you are applying for SEC registration, if you are				
advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1:	erate Schedule D Sec exempt reporting and	tion 1.F. for each location. dviser, list only the largest lumber and Street 2:	If you are applying for SEC registration, if you are				
advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1: 600 VINE STREET	exempt reporting and state:	tion 1.F. for each location. dviser, list only the largest Jumber and Street 2: SUITE 2000	If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of				
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advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1: 600 VINE STREET City: CINCINNATI If this address is a private residence, check to	state: Ohio Ohio	tion 1.F. for each location. dviser, list only the largest lumber and Street 2: SUITE 2000 Country: United States	If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of SIP+4/Postal Code:				
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advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1: 600 VINE STREET City: CINCINNATI If this address is a private residence, check to Telephone Number: 513-621-2733	state: Ohio Uhis box: Facsimile Numbe 513-621-7665	tion 1.F. for each location. dviser, list only the largest lumber and Street 2: SUITE 2000 Country: United States r, if any:	If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of ZIP+4/Postal Code: 45202-4438				
advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1: 600 VINE STREET City: CINCINNATI If this address is a private residence, check to the separegistered only with the SEC, or if you are an employees).	state: Control of the	tion 1.F. for each location. dviser, list only the largest lumber and Street 2: GUITE 2000 Country: United States r, if any: for a state securities author form (Form BR), please pro-	If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of ZIP+4/Postal Code: 45202-4438				
advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1: 600 VINE STREET City: CINCINNATI If this address is a private residence, check to the separegister of the separegister o	state: Cohio Cohis box: Facsimile Numbe 513-621-7665 gistered with FINRA Office Registration Formula in the state of the	tion 1.F. for each location. dviser, list only the largest lumber and Street 2: SUITE 2000 Country: United States Tr, if any: Torn a state securities author form (Form BR), please pronulations of this office location?	If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of ZIP+4/Postal Code: 45202-4438				
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advisory business. You must complete a separegistered only with the SEC, or if you are an employees). Number and Street 1: 600 VINE STREET City: CINCINNATI If this address is a private residence, check to the thing of the tensor of the Uniform Branch of the Unif	state: Control of the	tion 1.F. for each location. dviser, list only the largest lumber and Street 2: SUITE 2000 Country: United States Tr, if any: Tor a state securities author form (Form BR), please profin this office location? The eck all that apply) Sion of a bank)	If you are applying for SEC registration, if you are twenty-five offices (in terms of numbers of ZIP+4/Postal Code: 45202-4438 ity as a branch office location for a broker-dealer ovide the CRD Branch Number here:				

\square (6) Accountant or accounting firm						
\square (7) Lawyer or law firm						
Describe any other investment-related business activities conducted from this office location:						
Complete the following information for eac advisory business. You must complete a se registered only with the SEC, or if you are <i>employees</i>).	parate Schedule D Section 1	.F. for each location. If you	are applying for SEC registration, if you are			
Number and Street 1: TWO LOGAN SQUARE,		Number and Street 2: SUITE 1850				
City:	State:	Country:	ZIP+4/Postal Code:			
PHILADELPHIA	Pennsylvania	United States	19103			
If this address is a private residence, check	< this box: □					
Telephone Number: 215-854-7272	Facsimile Number, if any: 215-854-3131					
If this office location is also required to be or investment adviser on the Uniform Bran	=					
How many <i>employees</i> perform investment 8	advisory functions from this	office location?				
Are other business activities conducted at	this office location? (check al	l that apply)				
\square (1) Broker-dealer (registered or unregis	tered)					
\square (2) Bank (including a separately identified	able department or division o	of a bank)				
\square (3) Insurance broker or agent						
\square (4) Commodity pool operator or commo	dity trading advisor (whethe	r registered or exempt from	registration)			
\square (5) Registered municipal advisor						
\square (6) Accountant or accounting firm						
\square (7) Lawyer or law firm						
Describe any other investment-related bus	iness activities conducted fro	om this office location:				
Complete the following information for eac advisory business. You must complete a se registered only with the SEC, or if you are <i>employees</i>).	parate Schedule D Section 1	.F. for each location. If you	are applying for SEC registration, if you are			
Number and Street 1: 1717 ARCH STREET		Number and Street 2: SUITE 1320				
City:	State:	Country:	ZIP+4/Postal Code:			
PHILADELPHIA	Pennsylvania	United States	19103			
If this address is a private residence, check	this box: □					
Telephone Number: 215-981-0110	Facsimile Number, if any: 215-587-0005					
If this office location is also required to be	registered with FINRA or a s	tate securities authority as a	a branch office location for a broker-dealer			

or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the CRD Branch Number here:						
How many <i>employees</i> perform investment advisory functions from this office location?						
Are other business activities conducted at this	office location? ((check all that apply)				
lacksquare (1) Broker-dealer (registered or unregistered	d)					
\square (2) Bank (including a separately identifiable	department or o	division of a bank)				
\square (3) Insurance broker or agent						
\square (4) Commodity pool operator or commodity	trading advisor	(whether registered or e	exempt from registration)			
\square (5) Registered municipal advisor						
(6) Accountant or accounting firm						
(7) Lawyer or law firm						
Describe any other investment-related busines	s activities cond	ucted from this office lo	cation:			
advisory business. You must complete a separa	ate Schedule D S	Section 1.F. for each loca	I place of business, at which you conduct investment ation. If you are applying for SEC registration, if you are argest twenty-five offices (in terms of numbers of			
Number and Street 1: 2700 POST OAK BLVD		Number and Street 2: 21ST FLOOR				
City:	State:	Country:	ZIP+4/Postal Code:			
HOUSTON	Texas	United States	77056			
If this address is a private residence, check this	s box: 🗖					
Telephone Number: 800-675-0063	Facsimile Num	ber, if any:				
If this office location is also required to be registered with FINRA or a <i>state securities authority</i> as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the <i>CRD</i> Branch Number here:						
How many <i>employees</i> perform investment advisory functions from this office location?						
Are other business activities conducted at this office location? (check all that apply) [(1) Broker-dealer (registered or unregistered)						
lacksquare (2) Bank (including a separately identifiable	department or o	division of a bank)				
\square (3) Insurance broker or agent						
\square (4) Commodity pool operator or commodity	trading advisor	(whether registered or e	exempt from registration)			
(5) Registered municipal advisor						
(6) Accountant or accounting firm						
(7) Lawyer or law firm						
Describe any other <i>investment-related</i> business activities conducted from this office location:						

SECTION 1.I. Website Addresses

List your website addresses, including addresses for accounts on publicly available social media platforms where you control the content (including, but not limited to, Twitter, Facebook and/or LinkedIn). You must complete a separate Schedule D Section 1.I. for each website or account on a publicly available social media platform.

Address of Website/Account on Publicly Avai	lable Social Media Pl	atform: HTTP://WWW.191	9IC.COM		
Address of Website/Account on Publicly Avai	Address of Website/Account on Publicly Available Social Media Platform: HTTP://WWW.1919STRATEGIES.COM				
Address of Website/Account on Publicly Available Social Media Platform: HTTP://WWW.LINKEDIN.COM/COMPANY/1919INVESTMENTCOUN					
Address of Website/Account on Publicly Avai	ilable Social Media Pl	atform: http://www.1919f	unds.com		
Address of Website/Account on Publicly Available Social Media Platform: https://www.Instagram.com/1919_Investment_Counsel					
Address of Website/Account on Publicly Avai	lable Social Media Pl	atform: https://www.faceb	pook.com/1919investmentcounsel		
Address of Website/Account on Publicly Avai	lable Social Media Pl	atform: https://www.youto	ube.com/user/LMICGlobal		
SECTION 1.L. Location of Books and Reco	ords				
	location at which yo		rds, other than your <i>principal office and place of</i>		
Name of entity where books and records are 1919 INVESTMENT COUNSEL, LLC	e kept:				
Number and Street 1: 2311 HIGHLAND AVENUE SOUTH		Number and Street 2: SUITE 190			
City: BIRMINGHAM	State: Alabama	Country: United States	ZIP+4/Postal Code: 35205		
If this address is a private residence, check	this box:				
Telephone Number: 205-414-3350	Facsimile numbe	er, if any:			
This is (check one):					
• one of your branch offices or affiliates.					
O a third-party unaffiliated recordkeeper.					
O other.					
Briefly describe the books and records kept BIRMINGHAM OFFICE CLIENT RECORDS	at this location.				
Name of entity where books and records are 1919 INVESTMENT COUNSEL, LLC	e kept:				
Number and Street 1: 49 STEVENSON STREET		Number and Street 2: SUITE 1075			
City:	State:	Country:	ZIP+4/Postal Code:		

SAN FRANCISCO	California	United States	94105				
If this address is a private residence, check this box: \Box							
Telephone Number: 415-500-6700	Facsimile number, 415-500-6701	if any:					
This is (check one):							
$oldsymbol{oldsymbol{\circ}}$ one of your branch offices or affiliates.							
${f C}$ a third-party unaffiliated recordkeeper.							
O other.							
Briefly describe the books and records kept at SAN FRANCISCO OFFICE BUSINESS RECORDS							
Name of entity where books and records are k 1919 INVESTMENT COUNSEL, LLC	ept:						
Number and Street 1: 4445 NORTH A1A		Number and Street 2: SUITE 210					
City:	State:	Country:	ZIP+4/Postal Code:				
VERO BEACH	Florida	United States	32963				
If this address is a private residence, check this	is box:						
Telephone Number: 866-566-0425	Facsimile numbe	er, if any:					
This is (check one):							
$oldsymbol{\circ}$ one of your branch offices or affiliates.							
$^{f C}$ a third-party unaffiliated recordkeeper.							
C other.							
Briefly describe the books and records kept at VERO BEACH OFFICE CLIENT RECORDS	this location.						
Name of entity where books and records are k IRON MOUNTAIN	ept:						
Number and Street 1: 7605 DORSEY RUN ROAD		Number and Street 2:					
City:	State:	Country:	ZIP+4/Postal Code:				
JESSUP	Maryland	United States	20794-9378				
If this address is a private residence, check this	is box:						
Telephone Number: (443) 755-0670	Facsimile number,	if any:					
This is (check one):							
O one of your branch offices or affiliates.							

a third-party unaffiliated recordkeeper.						
C other.						
Briefly describe the books and records kept at this location. GENERAL BUSINESS AND ADVISORY RECORDS						
Name of entity where books and records are k INSTITUTIONAL SHAREHOLDER SERVICES	kept:					
Number and Street 1: 702 KING FARM BLVD		Number and Street 2: SUITE 400				
City: ROCKVILLE	State: Maryland	Country: United States	ZIP+4/Postal Code: 20850			
If this address is a private residence, check th	is box:					
Telephone Number: 301-556-0500	Facsimile number, 301-556-0491	if any:				
This is (check one):						
O one of your branch offices or affiliates.						
a third-party unaffiliated recordkeeper.						
O other.						
Briefly describe the books and records kept at PROXY VOTING - RELATED RECORDS	this location.					
Name of entity where books and records are k	kept:					
Number and Street 1: 501 NORTH BROADWAY		Number and Street 2:				
City: ST. LOUIS	State: Missouri	Country: United States	ZIP+4/Postal Code: 63102			
If this address is a private residence, check th	is box:					
Telephone Number: 314-342-2000	Facsimile number,	if any:				
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 FINANCIAL RECORDS.	this location.					
Name of entity where books and records are k 1919 INVESTMENT COUNSEL, LLC	kept:					

Number and Street 1: 787 SEVENTH AVENUE		Number and Street 2: 12TH FLOOR						
City: NEW YORK	State: New York	Country: United States	ZIP+4/Postal Code: 10019					
If this address is a private residence, check	this box:							
- 1 and add as is a private residence, enects	If this dudices is a private residence, effect this box.							
Telephone Number: 212-554-7100	Facsimile number, 212-554-7135	if any:						
This is (check one):								
• one of your branch offices or affiliates.								
O a third-party unaffiliated recordkeeper.								
C other.								
Briefly describe the books and records kept NEW YORK OFFICE CLIENT RECORDS.	at this location.							
Name of entity where books and records ar 1919 INVESTMENT COUNSEL, LLC	e kept:							
Number and Street 1: 600 VINE STREET		Number and Street 2: SUITE 2000						
City:		Country:	ZIP+4/Postal Code:					
CINCINNATI	Ohio	United States	45202-4438					
If this address is a private residence, check	this box:							
Telephone Number:	Facsimile numbe	r, if any:						
513-621-2733	513-621-7665							
This is (check one):								
• one of your branch offices or affiliates.								
C a third-party unaffiliated recordkeeper.								
O other.								
Briefly describe the books and records kept CINCINNATI OFFICE CLIENT RECORDS.	at this location.							
Name of entity where books and records ar ARTHUR KARAFIN INVESTMENT ADVISORS	e kept:							
Number and Street 1: 1717 ARCH STREET		Number and Street 2: SUITE 1320						
City:	State:	Country:	ZIP+4/Postal Code:					
PHILADELPHIA	Pennsylvania	United States	19103					
If this address is a private residence, check	this box:							
Telephone Number:	Facsimile number, if	any:						
215-981-0110	215-587-0005							
This is (check one):								

one of your branch offices or affiliates. a third-party unaffiliated recordkeeper. other.						
Briefly describe the books and records kept ARTHUR KARAFIN INVESTMENT ADVISORS						
Name of entity where books and records are 1919 INVESTMENT COUNSEL, LLC	e kept:					
Number and Street 1:		Number and Street 2:				
TWO LOGAN SQUARE	C	SUITE 1850	770.4/0.1.10.1			
City: PHILADELPHIA	State: Pennsylvania	Country: United States	ZIP+4/Postal Code: 19103			
If this address is a private residence, check Telephone Number: 215-854-7272	this box: \square Facsimile number, if any: 215-854-3131					
This is (check one):						
$oldsymbol{\circ}$ one of your branch offices or affiliates.						
${\sf C}$ a third-party unaffiliated recordkeeper.						
C other.						
Briefly describe the books and records kept at this location. PHILADELPHIA OFFICE CLIENT RECORDS.						
SECTION 1.M. Registration with Foreign	Financial Regulatory Aut No Inform					

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