

Westport Insurance Corporation

SECURITIES AND SECURITIES-RELATED ACTIVITIES SUPPLEMENT

If you indicated any percentage of your practice as securities or securities-related activity including bonds, limited partnerships or mergers/acquisitions, you must complete this supplement.

Applicant Instructions:

- Answer all questions in ink. If answer is none, state "none."

1. How many lawyers are engaged in securities/securities-related activities? _____
2. What are the average years of SEC experience for these attorneys? _____
3. How many attorneys in securities practice have less than three years' experience? _____
4. How many attorneys spend less than ten percent of their time on securities/securities-related activities? _____
5. Does the applicant firm require its securities lawyers to participate in formal training, including annual participation in in-house and/or continuing legal education seminars respecting securities law? ☐ Yes ☐ No
6. Indicate the percentage of total billable hours from the firm's securities and securities related activities for the following (**must total 100%**):
 - A. Offer/sale of securities registered under the Securities Act of 1933 _____ %
 - B. Exempted transactions under the 1933 Act or any related regulation _____ %
 - C. Private placements and state securities filings not included in above _____ %
 - D. Tender/Exchange offers _____ %
 - E. Proxy contests _____ %
 - F. Mergers and acquisitions _____ %
 - G. Syndications _____ %
 - H. Issuance of municipal and/or industrial development bonds _____ %
 - I. Issuance of other bonds _____ %
 - J. Other securities work, **please describe:** _____ %
 - TOTAL billable hours** _____ **100** %
- K. This equates to \$ _____ gross income for the last twelve months.

7. Indicate the percentage of total billable hours from the firm's securities and securities-related activities where the firm represented (must total 100%):
- | | | |
|---|--------------|---------|
| A. The issuer or other security holders | _____ | % |
| B. The underwriters | _____ | % |
| C. The investment company | _____ | % |
| D. The broker or dealer | _____ | % |
| E. Other, please describe: _____ | _____ | % |
| | Total | _____ % |
8. Indicate the percentage of security offerings that are initial public offerings of the issuers. _____ %
9. If bond practice is indicated, what types of bonds were used?
- ☐ Not Applicable ☐ General Obligation ☐ Revenue ☐ Refunding
- ☐ Other, **please describe:** _____
10. Does the Applicant provide tax advice in conjunction with any securities or securities-related representation? ☐ Yes ☐ No
11. For each of the past three years, list the percentage of securities and / or securities related activities performed for new clients.
- Year: _____ - _____ % Year: _____ - _____ % Year: _____ - _____ %
12. A. With respect to new clients, check all items that are investigated:
- ☐ Financial strength ☐ Management experience ☐ None
- ☐ Nature of its business ☐ Reputation
- ☐ Litigation history ☐ History of changing attorneys or accountants
13. To Applicant's knowledge, has any securities or securities related client of the firm:
- ☐ Become insolvent or entered into liquidation or reorganization proceeding?
- ☐ Had any claim or allegation of fraud, negligence, or breach of duty asserted against it?
- ☐ Received a subpoena from the SEC or any other federal or state agency related to securities or securities related matters?
- ☐ Not Applicable
- If any item other than Not Applicable is checked, please provide details on a separate page.**

14. In terms of gross income, list the top five clients for whom the Applicant has performed securities or securities related work.

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____

15. Identify offerings which were:

- A. made in the past five years, and
- B. either initial public offerings of the issuer or were intended to be exempt from registration and had an aggregate offering price exceeding \$250,000. Include anticipated filings expected to be made within the next 90 days.

Name of Client	Date Offering Commenced	Issuer (I) Underwriter (U) or Other (O)	Dollar Size of Offering	*Type of Security	Applicant's Lawyers Invest (Y/N)

*** Type of Securities are:** Registered (R), Exempted (E), Initial Price Offering Registered (IPOR), Initial Price Offering Exempted (IPOE), Partnership Securities (PS), Other (O).

16. For bond work, are any of the bonds in default? ☐ Yes ☐ No

17. Is a "cold review" of transactions by an uninvolved senior member of the firm required prior to release or signature? ☐ Yes ☐ No

18. A. Does the Applicant accept securities in lieu of fees as payment for services rendered involving securities and/or securities related activities? ☐ Yes ☐ No
- B. Does the firm require management committee / managing partner review prior to accepting securities in lieu fees? ☐ N/A ☐ Yes ☐ No
- C. How many potential engagements where securities would be accepted in lieu of fees were seen in last 12 months? _____
- D. How many of these investment opportunities were accepted in last 12 months? _____
- E. What is the average total value of these securities accepted in lieu of fees? _____
19. A. Does the Applicant have a written policy prohibiting or restricting lawyers or the firm from investing with clients or otherwise entering into a business relationship (other than lawyer/client)? ☐ Yes ☐ No
- B. Does the law firm require review by management committee / managing partner prior to allowing individual lawyers to invest? ☐ Yes ☐ No
- C. How many potential investment opportunities with clients were seen in last 12 months? _____
- D. How many investment opportunities with clients were accepted in last 12 months? _____
- E. What is the average total value of investment and/or equity interest in such clients? _____
20. Does the Applicant make recommendations on the sale or purchase of any specific stocks, bonds or other securities related investments? ☐ N/A ☐ Yes ☐ No
- If Yes, please explain: _____

I understand information submitted herein becomes a part of the Application and is subject to the same conditions as stated on the Application.

THIS SUPPLEMENT MUST BE SIGNED BY AN OWNER, PARTNER OR PRINCIPAL OF THE FIRM.

Name of Firm: _____

Signed: _____ Date: _____
 Partner, Officer and/or Owner Title

The Applicant understands and agrees that she or he is obligated to report any changes in the information provided in the supplement that occur after the date of the application and before policy inception.