

City of Minneapolis  
Financial Institution Disclosure Form

- (e) Equitable contributions to community based non-profit organizations in the city that engage in neighborhood development.
- (f) Provision of full service banking in city neighborhoods, including branches, services and technologies; and
- (g) Plans to provide and market loans and investment products that help create loans throughout the city including in low and moderate income neighborhoods and to low and moderate income consumers.

**Investment Banks**

Investment banks shall not be subject to the disclosure requirements above as long as they seek or perform only investment banking business for the City. Banks that provide the City with underwriting services including the buying and selling of stocks, bonds and other securities and other debt related services shall provide the following.

A statement of the corporate citizenship which shall include but not be limited to:

- (a) Participation in charitable programs or scholarships within the City during the year immediately predating the filing
- (b) Internal policies regarding utilization of subcontractors which are designated as “women owned”, “minority owned”, or “disabled” business enterprises

Please return the completed Financial Disclosure Form to the City Cash Manager at the following email address:

[larry.parker@minneapolismn.gov](mailto:larry.parker@minneapolismn.gov)

## Participation in Charitable Programs within the city:

Since 2015, Bank of America has provided more than \$2,000,000 in grants to the following organizations

Achieve!Minneapolis

Aeon

Amherst H. Wilder Foundation

BestPrep

Breaking Free

City of Lakes Community Land Trust

College Possible

Cookie Cart

Cornerstone Advocacy Service

Emerge Community Development

Fraser

Habitat for Humanity

Hennepin Theatre Trust

Jeremiah Program

Junior Achievement of the Upper Midwest

Keystone Community Services

Lifetrack Resources

Lutheran Social Service of Minnesota

Matter

Metropolitan Consortium of Community Developers

Minneapolis Parks Foundation  
Minnesota Assistance Council for Veterans  
Minnesota Home Ownership Center  
Minnesota Public Radio  
Minnesota State Council on Economic Education  
Neighborhood Development Center  
Northside Achievement Zone  
Pillsbury United Communities  
Project for Pride in Living  
Second Harvest Heartland  
Simpson Housing Services  
The Arc Greater Twin Cities  
The Family Place  
Twin Cities Rise  
Women's Foundation of Minnesota  
Youthlink  
YWCA of Minneapolis

# Minnesota

[bankofamerica.com/local](http://bankofamerica.com/local)

 @BankofAmerica

At Bank of America, our heritage is in our name.

## The power of local connections

At Bank of America, we have leading capabilities across all our businesses and a strategy that is focused on connecting our capabilities to deliver for our customers and clients. In every situation, we're committed to growing responsibly and sustainably — ensuring everything we do aligns to our purpose of helping people live better financial lives.

- Families can have the tools and support they need to live more successful financial lives.
- Neighborhoods can be built on a solid foundation of responsible home lending and economic development.
- Businesses, small and large, can benefit from our financial and intellectual capital.
- And the organizations, nonprofits and companies addressing society's toughest problems can have the resources and expertise of the company and the efforts of our over 200,000 employees behind them.

In each market, we strive to connect everything our company offers to our clients' personal and financial goals so we can provide tailored solutions to fit their needs. It's how we make this large company personal and how we help our customers, clients and communities thrive.



4 Financial centers



27 ATMs



1 U.S. Trust® office



8 Merrill Lynch™ offices



\$88,124,000  
Total FDIC deposits\*



\$91,179,775  
Total home loans, year-to-date



\$867,533,003  
U.S. Trust client balances\*\*



\$19,177,960,041  
Merrill Lynch client balances\*\*

## Commercial business



\$1,861,038,465  
Year-to-date new loans to commercial businesses

## Helping Minnesota businesses grow



\$115,610,524  
Credit provided by Bank of America to small businesses in Minnesota

\*Total deposits within the market as of June 30, 2016 inclusive of Insurance, Global Wealth and Investment Management (GWIM), Global Banking and Markets agencies.  
\*\*GWIM, the wealth and investment management division of Bank of America, and Adams (U.S. Trust and Merrill Lynch), GWIM client balances consist of assets under management of GWIM entities. Brokerage assets and assets in custody of GWIM entities.

†Commercial businesses that generally have annual revenues of \$5 million to \$2 billion.  
Credit provided to small businesses that generally have annual revenues of less than \$5 million.

## Community involvement

### Grants and matching gifts



\$931,700

Amount the Bank of America Charitable Foundation provided in grants and matching gifts to local nonprofits addressing issues fundamental to community sustainability.

### \$125 billion environmental business commitment



We have increased our current environmental business initiative from \$50 billion to \$125 billion in low-carbon business by 2025 through lending, investing, capital raising, advisory services and developing financing solutions for clients around the world. We have provided more than \$62 billion in financing for low-carbon activities since 2007.

### 2016 Employee giving and volunteerism



\$250,823

Total contribution by employees pledged to local nonprofits. This amount was matched by our charitable foundation.



\$69,325

Total amount employees pledged to local community needs through the Employee Giving Campaign.



5,282 hours

Employee volunteer hours contributed locally as part of the 2 million volunteer hours given across the company.

It is the practice of the Bank not to provide the names of its subcontractors, unless they are client specific (i.e., Brinks). In addition, the Bank cannot compel its subcontractors to incorporate by reference the terms of the sample contract into its contract with the Bank. The Bank makes payments to its subcontractors on a timely basis as set forth in its contract with the subcontractors.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/26/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Marsh USA Inc. 100 North Tryon Street, Suite 3600 Charlotte, NC 28202		<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): E-MAIL ADDRESS:		FAX (A/C, No):	
055943-A-II-17-18		NA		N/A EVIDEN CASUA	
<b>INSURED</b> Bank of America Corporation and any and all subsidiaries Mail Code: NC1-028-16-01 One Bank of America Center 150 North College Street Charlotte, NC 28255-0001		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>	
		INSURER A : Greenwich Insurance Company		22322	
		INSURER B : N/A		N/A	
		INSURER C : (See Page 2)			
		INSURER D :			
		INSURER E :			
		INSURER F :			

**COVERAGES**      **CERTIFICATE NUMBER:** ATL-004362045-20      **REVISION NUMBER:** 3

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			RGD3001365	08/01/2017	08/01/2018	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ Excluded MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 2,000,000* GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000* \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			RAD9437870	08/01/2017	08/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	See Page 2	08/01/2017	08/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Evidence of Coverage

<b>CERTIFICATE HOLDER</b>  Evidence of Coverage for: Bank of America Corporation and any and all subsidiaries Mail Code: NC1-028-16-01 One Bank of America Center 150 North College Street Charlotte, NC 28255-0001	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE of Marsh USA Inc.  Marilyn F Burns <i>Marilyn F. Burns</i>
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**ADDITIONAL REMARKS SCHEDULE**

<b>AGENCY</b> Marsh USA Inc.		<b>NAMED INSURED</b> Bank of America Corporation and any and all subsidiaries Mail Code: NC1-028-16-01 One Bank of America Center 150 North College Street Charlotte, NC 28255-0001	
<b>POLICY NUMBER</b>		<b>EFFECTIVE DATE:</b>	
<b>CARRIER</b>	<b>NAIC CODE</b>		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance**

The General Liability limit shall not exceed the amount stated in the contract between Bank of America Corporation and the certificate holder.  
 The certificate holder is an additional insured under General Liability as their interest may appear, but only if required by written contract with the named insured.

Workers Compensation and Employers Liability (continued from page 1)  
 Carriers and Policy Numbers:

Policy # RWD943546103 (08/01/2017 - 08/01/2018) XL Insurance America, Inc.  
 Including the following state(s): AL AR AZ CA CO CT DC DE FL GA HI IA ID IL IN KS KY LA MA MD ME MI MN MO MS MT NC NE NH NJ NM NV NY OK OR PA RI SC SD TN TX  
 UT VA VT WV

Policy #RWR943546203 (08/01/2017- 08/01/2018) XL Specialty Insurance Company  
 Including the following state(s): AK, WI

Policy #RWG3001366 (08/01/2017- 08/01/2018) XL Insurance America, Inc.

Policy No. #RWE943546303 (08/01/2017 - 08/01/2018) XL Specialty Insurance Company  
 Including the following state(s): OH WA  
 This policy is subject to a Self-Insured Retention of \$1,000,000 per accident.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/06/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> MARSH USA, INC. 1166 AVENUE OF THE AMERICAS NEW YORK, NY 10036  CN101925409-BOA-EO-17-18	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> <b>E-MAIL ADDRESS:</b>	<b>FAX (A/C, No):</b>
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A :</b> AIG Specialty Insurance Company	<b>NAIC #</b> 26883
	<b>INSURER B :</b>	
	<b>INSURER C :</b>	
	<b>INSURER D :</b>	
	<b>INSURER E :</b>	
	<b>INSURER F :</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** ATL-003973668-03                      **REVISION NUMBER:5**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/PROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability/ Errors & Omission			01-582-94-06	06/30/2017	06/30/2018	Limit \$25,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
EVIDENCE OF COVERAGE

<b>CERTIFICATE HOLDER</b> BANK OF AMERICA CORPORATION AND ANY AND ALL SUBSIDIARIES MAIL CODE NC1-028-16-01 150 NORTH COLLEGE STREET CHARLOTTE, NC 28255	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Meredith Frick <i>Meredith Frick</i>
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**ADDITIONAL REMARKS SCHEDULE**

AGENCY MARSH USA, INC.		NAMED INSURED BANK OF AMERICA CORPORATION AND ANY AND ALL SUBSIDIARIES MAIL CODE NC1-028-16-01 150 NORTH COLLEGE STREET CHARLOTTE, NC 28255	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Errors & Omissions: Coverage evidenced above is subject to various self-insured retentions.

Note: Limits are shared with Side B/C D&O, EPL, Fiduciary Side B, Financial Institution Bond, and Network Security. Coverage does not include Investment Banking E&O coverage.

**From:** MN\_MDHR Compliance  
**To:** [Cyganeck, Debra](#); [MN\\_MDHR.Compliance](#)  
**Cc:** [Howard-Doliber, Crystal](#)  
**Subject:** RE: Affirmative Action Plan--2  
**Date:** Monday, February 05, 2018 12:18:28 PM  
**Attachments:** [image001.png](#)  
[image005.png](#)

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Good afternoon,

I was able to open all the attachments on your first email. However, the second email gives me a message that they are expired. Please resend the Affirmative Action Plan-2 email.

Thank you,

Latrica Gilmer | Office & Administrative Specialist Intermediate  
MINNESOTA DEPARTMENT OF HUMAN RIGHTS  
Office: 651-539-1127 | Toll Free: 1-800-657-3704  
MN Relay: 711 or 1-800-627-3529 | Fax: 651-296-9042  
Freeman Building  
625 Robert St N  
Saint Paul MN 55155

*Our mission: to make Minnesota discrimination free.* | [mn.gov/mdhr](http://mn.gov/mdhr)



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**From:** Cyganeck, Debra [mailto:[debra.cyganeck@bankofamerica.com](mailto:debra.cyganeck@bankofamerica.com)]  
**Sent:** Saturday, February 03, 2018 1:19 PM  
**To:** MN\_MDHR Compliance <[compliance.mdhr@state.mn.us](mailto:compliance.mdhr@state.mn.us)>  
**Cc:** Howard-Doliber, Crystal <[crystal.howard-doliber@bankofamerica.com](mailto:crystal.howard-doliber@bankofamerica.com)>  
**Subject:** Affirmative Action Plan--2  
**Importance:** High



**From:** MN\_MDHR Compliance  
**To:** [Cyganeck, Debra](#)  
**Subject:** RE: Affirmative Action Plan--2  
**Date:** Monday, February 05, 2018 12:34:47 PM  
**Attachments:** [image001.png](#)  
[image005.png](#)

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I have them all.

Thank you,

Latrica Gilmer | Office & Administrative Specialist Intermediate  
MINNESOTA DEPARTMENT OF HUMAN RIGHTS  
Office: 651-539-1127 | Toll Free: 1-800-657-3704  
MN Relay: 711 or 1-800-627-3529 | Fax: 651-296-9042  
Freeman Building  
625 Robert St N  
Saint Paul MN 55155

*Our mission: to make Minnesota discrimination free.* | [mn.gov/mdhr](http://mn.gov/mdhr)



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**From:** Cyganeck, Debra [mailto:[debra.cyganeck@bankofamerica.com](mailto:debra.cyganeck@bankofamerica.com)]  
**Sent:** Monday, February 05, 2018 12:26 PM  
**To:** MN\_MDHR Compliance <[compliance.mdhr@state.mn.us](mailto:compliance.mdhr@state.mn.us)>  
**Cc:** Howard-Doliber, Crystal <[crystal.howard-doliber@bankofamerica.com](mailto:crystal.howard-doliber@bankofamerica.com)>  
**Subject:** Affirmative Action Plan--2



This is a secure message from Bank of America.

Kiss, Joseph J

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**From:** Waaraniemi, Ray M. <Ray.Waaraniemi@minneapolismn.gov>  
**Sent:** Wednesday, December 20, 2017 12:52 PM  
**To:** Waaraniemi, Ray M.  
**Cc:** Abeln, Mike J.; Parker, Larry G.  
**Subject:** Affirmative Action Plan

Dear Proposers for the RFP For Investment of City Funds.

Your contact information was provided to the City of Minneapolis Department of Civil Rights, Contract Compliance. A staff member from this department will be in contact with you to review your Affirmative Action Plan or help you create a plan. This is required to comply with the Minneapolis Code of Ordinances 139.5(d) requires that any bidder, prospective contractor, or recipient of assistance have an approved affirmative action plan on file with MDCR prior to a contract award.

Thank you for your attention to this matter.

*Ray Waaraniemi, CPFO  
Investment Compliance Administrator  
City of Minneapolis, Treasury Division  
ray.waaraniemi@minneapolismn.gov  
Ph. 612.673.3775, (fax) 612.673.2888*

Kiss, Joseph J

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**From:** Kiss, Joseph J  
**Sent:** Wednesday, January 03, 2018 3:46 PM  
**To:** 'Mahamud, Hassan'  
**Cc:** De Souza, Marci; Duranti, Patricia E  
**Subject:** RE: Affirmative Action Plan (HR)  
**Attachments:** Bank of America AAP 2017.docx

Hello Hassan,

I have enclosed our current Bank of America Affirmative Action Plan, we won't update the 2018 version until after first quarter and certainly can provide updated versions upon request.

Thanks,

**Joseph J Kiss II**

**Market Leader**

Municipal Banking and Markets -- Public Sector Banking  
Bank of America Merrill Lynch  
Bank of America N.A.  
MI9-805-02-00, 4805 Towne Center Road, Saginaw MI 48604  
T 312.992.6916 F 312.453.6847  
Cell: 989.245.3278  
joseph.kiss@baml.com

The power of global connections™



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**From:** Mahamud, Hassan [mailto:hassan.mahamud@minneapolismn.gov]  
**Sent:** Friday, December 29, 2017 1:18 PM  
**To:** Kiss, Joseph J <joseph.kiss@baml.com>  
**Subject:** Affirmative Action Plan (HR)

Hello Joseph,

You are receiving this email because every contractor entering into a City of Minneapolis contract exceeding \$100,000 must have an approved Affirmative Action Plan (AAP).

- Please fill and submit the attached modified AAP by **01/04/2018**. More information about submitting a plan can be found at: <http://www.minneapolismn.gov/civilrights/contractcompliance/subp/civil-rights-affirmative-action-plan>

Minneapolis Civil Rights will accept current plans approved by the Minnesota Department of Human Rights, the City of Saint Paul, Minnesota Mechanical Contractors Association (MMCA), and the National Electrical Contractors Association (NECA), provided Minneapolis Civil Rights receives a copy of the certificate of approval or compliance.

You may submit your AAP by e-mail.

If you have any questions please do not hesitate to give me a call at (612) 673-2502. I look forward to receiving your plan.

Thank you,  
Hassan

**Hassan Mahamud, J.D./MBA** | Contract Compliance Officer | **City of Minneapolis** – Department of Civil Rights | Office: 612-673-2502 | [hassan.mahamud@minneapolismn.gov](mailto:hassan.mahamud@minneapolismn.gov)