Cyber Liability – Primary

Indian Harbor Insurance Company



X[∟] Insurance







CyberRiskConnect

Privacy, Security and Technology Insurance

Thank you for choosing AXA XL for your cyber insurance. We value your business and look forward to working with you. Please use the information below for contacting AXA XL's Breach Hotline and for accessing AXA XL's online cyber risk management portal, <u>CyberRiskConnect.com</u>.

AXA XL Breach Hotline

Should you experience a data breach or cyber security breach, call the XL Catlin Breach HotlinShould you experience a data breach or cyber security breach, call the AXA XL Breach Hotline at <u>1-855-566-4724</u> to obtain immediate triage assistance. Please be aware that contacting the hotline does not satisfy the claim notification requirements of your policy. For claim notification requirements, refer to your policy.

CyberRiskConnect.com

As an AXA XL policyholder, your company has exclusive access to AXA XL's proprietary online resource, <u>CyberRiskConnect.com</u>.

Follow these steps to register:

- 1. Using a web browser navigate to: https://cyberriskconnect.com/
- 2. Complete the New User Registration section including your access code. Your access code is <u>10448</u>.

This web portal contains cyber risk pre and post breach risk management including:

- Cyber Liability Library: latest cyber risk articles and videos, as well as product and policy information from our AXA XL cyber team
- Cyber Training Videos: a series of educational videos designed to help train clients on their role in keeping sensitive information secure focusing on network security and privacy, incident response planning, the importance of risk assessments and HIPAA
- Incident Roadmap: suggested steps to take following a data breach of cyber security breach
- Vendor Partner Resources: a directory to help clients gain quick access to our recently expanded, prequalified network of third-party vendors with expertise in pre- and post-breach disciplines, including network vulnerability testing, IT risk assessments, incident response planning, security awareness training, PCI compliance, security incident response planning, data breach tabletops, and more
- Meet the Team: includes AXA XL's Cyber & Technology underwriting and claims team contact information
- News Center: articles and commentary discussing trends, major breach events, security awareness strategies, risk management guidance, and helpful industry links
- **Risk Manager's Toolbox:** includes a cyber-risk assessment survey, breach notification guides, what-if modelling tools to estimate the cost of a breach, research tools to monitor the type, frequency and severity of incidents

Please note CyberRiskConnect.com is a private site for customers of AXA XL only. Do not share portal access instructions with anyone outside your organization. You are responsible for maintaining the confidentiality of the access code provided to you. Up to five individuals from your organization may register and use the portal. This portal contains a directory of experienced providers of cyber risk management and breach services. Unless otherwise indicated or approved, payment for services provided by these companies is your responsibility.

CyberRiskConnect 0119

PRIVACY POLICY

The AXA XL insurance group (the "Companies"), believes personal information that we collect about our customers, potential customers, and proposed insureds (referred to collectively in this Privacy Policy as "customers") must be treated with the highest degree of confidentiality. For this reason and in compliance with the Title V of the Gramm-Leach-Bliley Act ("GLBA"), we have developed a Privacy Policy that applies to all of our companies. For purposes of our Privacy Policy, the term "personal information" includes all information we obtain about a customer and maintain in a personally identifiable way. In order to assure the confidentiality of the personal information we collect and in order to comply with applicable laws, all individuals with access to personal information about our customers are required to follow this policy.

Our Privacy Promise

Your privacy and the confidentiality of your business records are important to us. Information and the analysis of information is essential to the business of insurance and critical to our ability to provide to you excellent, costeffective service and products. We understand that gaining and keeping your trust depends upon the security and integrity of our records concerning you. Accordingly, we promise that:

- 1. We will follow strict standards of security and confidentiality to protect any information you share with us or information that we receive about you;
- 2. We will verify and exchange information regarding your credit and financial status only for the purposes of underwriting, policy administration, or risk management and only with reputable references and clearinghouse services;
- 3. We will not collect and use information about you and your business other than the minimum amount of information necessary to advise you about and deliver to you excellent service and products and to administer our business;
- 4. We will train our employees to handle information about you or your business in a secure and confidential manner and only permit employees authorized to use such information to have access to such information;
- 5. We will not disclose information about you or your business to any organization outside the AXA XL insurance group of Companies or to third party service providers unless we disclose to you our intent to do so or we are required to do so by law;
- 6. We will not disclose medical information about you, your employees, or any claimants under any policy of insurance, unless you provide us with written authorization to do so, or unless the disclosure is for any specific business exception provided in the law;
- 7. We will attempt, with your help, to keep our records regarding you and your business complete and accurate, and will advise you how and where to access your account information (unless prohibited by law), and will advise you how to correct errors or make changes to that information; and
- 8. We will audit and assess our operations, personnel and third party service providers to assure that your privacy is respected.

Collection and Sources of Information

We collect from a customer or potential customer only the personal information that is necessary for (a) determining eligibility for the product or service sought by the customer, (b) administering the product or service obtained, and (c) advising the customer about our products and services. The information we collect generally comes from the following sources:

- Submission During the submission process, you provide us with information about you and your business, such as your name, address, phone number, e-mail address, and other types of personal identification information;
- Quotes We collect information to enable us to determine your eligibility for the particular insurance product and to determine the cost of such insurance to you. The information we collect will vary with the type of insurance you seek;

- Transactions We will maintain records of all transactions with us, our affiliates, and our third party service providers, including your insurance coverage selections, premiums, billing and payment information, claims history, and other information related to your account;
- Claims If you obtain insurance from us, we will maintain records related to any claims that may be made under your policies. The investigation of a claim necessarily involves collection of a broad range of information about many issues, some of which does not directly involve you. We will share with you any facts that we collect about your claim unless we are prohibited by law from doing so. The process of claim investigation, evaluation, and settlement also involves, however, the collection of advice, opinions, and comments from many people, including attorneys and experts, to aid the claim specialist in determining how best to handle your claim. In order to protect the legal and transactional confidentiality and privileges associated with such opinions, comments and advice, we will not disclose this information to you; and
- Credit and Financial Reports We may receive information about you and your business regarding your credit. We use this information to verify information you provide during the submission and quote processes and to help underwrite and provide to you the most accurate and cost-effective insurance quote we can provide.

Retention and Correction of Personal Information

We retain personal information only as long as required by our business practices and applicable law. If we become aware that an item of personal information may be materially inaccurate, we will make reasonable effort to re-verify its accuracy and correct any error as appropriate.

Storage of Personal Information

We have in place safeguards to protect data and paper files containing personal information.

Sharing/Disclosing of Personal Information

We maintain procedures to assure that we do not share personal information with an unaffiliated third party for marketing purposes unless such sharing is permitted by law. Personal information may be disclosed to an unaffiliated third party for necessary servicing of the product or service or for other normal business transactions as permitted by law.

We do not disclose personal information to an unaffiliated third party for servicing purposes or joint marketing purposes unless a contract containing a confidentiality/non-disclosure provision has been signed by us and the third party. Unless a consumer consents, we do not disclose "consumer credit report" type information obtained from an application or a credit report regarding a customer who applies for a financial product to any unaffiliated third party for the purpose of serving as a factor in establishing a consumer's eligibility for credit, insurance or employment. "Consumer credit report type information" means such things as net worth, credit worthiness, lifestyle information (piloting, skydiving, etc.) solvency, etc. We also do not disclose to any unaffiliated third party a policy or account number for use in marketing. We may share with our affiliated companies information that relates to our experience and transactions with the customer.

Policy for Personal Information Relating to Nonpublic Personal Health Information

We do not disclose nonpublic personal health information about a customer unless an authorization is obtained from the customer whose nonpublic personal information is sought to be disclosed. However, an authorization shall not be prohibited, restricted or required for the disclosure of certain insurance functions, including, but not limited to, claims administration, claims adjustment and management, detection, investigation or reporting of actual or potential fraud, misrepresentation or criminal activity, underwriting, policy placement or issuance, loss control and/or auditing.

Access to Your Information

Our employees, employees of our affiliated companies, and third party service providers will have access to information we collect about you and your business as is necessary to effect transactions with you. We may also disclose information about you to the following categories of person or entities:

- Your independent insurance agent or broker;
- An independent claim adjuster or investigator, or an attorney or expert involved in the claim;
- Persons or organizations that conduct scientific studies, including actuaries and accountants;
- An insurance support organization;
- Another insurer if to prevent fraud or to properly underwrite a risk;
- A state insurance department or other governmental agency, if required by federal, state or local laws; or
- Any persons entitled to receive information as ordered by a summons, court order, search warrant, or subpoena.

Violation of the Privacy Policy

Any person violating the Privacy Policy will be subject to discipline, up to and including termination.

For more information or to address questions regarding this privacy statement, please contact your broker.

U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC")

No coverage is provided by this Policyholder Notice nor can it be construed to replace any provisions of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided.

This Policyholder Notice provides information concerning possible impact on your insurance coverage due to the impact of U.S. Trade Sanctions¹. Please read this Policyholder Notice carefully.

In accordance with the U.S. Department of the Treasury's Office of Foreign Assets Control ("OFAC") regulations, or any other U.S. Trade Sanctions embargoes or export controls applied by any regulatory body, if it is determined that you or any other insured, or any person or entity claiming the benefits of this insurance has violated U.S. sanctions, embargoes or export controls law, is a Specially Designated National and Blocked Person ("SDN"), or is owned or controlled by an SDN, this insurance will be considered a blocked or frozen contract. When an insurance policy is considered to be such a blocked or frozen contract, neither payments nor premium refunds may be made without authorization from OFAC or the applicable regulator. Other limitations on the premiums and payments also apply.

¹ "U.S Trade Sanctions" may be promulgated by Executive Order, act of Congress, regulations from the U.S. Departments of State, Treasury, or Commerce, regulations from the State Insurance Departments, etc.

IMPORTANT INFORMATION TO POLICYHOLDERS - CALIFORNIA

In the event you need to contact someone about this Policy for any reason please contact your agent. If you have additional questions, you may contact the insurance company issuing this Policy at the following address and telephone number:

AXA XL Seaview House 70 Seaview Avenue Stamford, CT 06902-6040 1-800-622-7311

If you have a problem with your insurance company, its agent or representative that has not been resolved to your satisfaction, please call or write to the Department of Insurance.

> Department of Consumer Affairs Consumer Information Division 1625 North Market Blvd., Suite N 112 Sacramento, CA 95834

Internet Website: www.dca.ca.gov

1-800-952-5210 1-800-326-2297 (TDD Number) 916-445-1254 (If calling from within the Sacramento area) 916-928-1227 (TDD Number if calling from within the Sacramento area)

Written correspondence is preferable so that a record of your inquiry can be maintained. When contacting your agent, company or the Bureau of Insurance, have your Policy Number available.

FRAUD NOTICE

| Alabama | Any person who knowingly presents a false or fraudulent claim for payment of a loss or |
|-------------------------|---|
| | benefit or who knowingly presents false information in an application for insurance is |
| | guilty of a crime and may be subject to restitution fines or confinement in prison, or any |
| | combination thereof. |
| Arkansas | Any person who knowingly presents a false or fraudulent claim for payment of a loss or |
| | benefit or knowingly presents false information in an application for insurance is guilty |
| | of a crime and may be subject to fines and confinement in prison. |
| Colorado | It is unlawful to knowingly provide false, incomplete, or misleading facts or |
| | information to an insurance company for the purpose of defrauding or |
| | attempting to defraud the company. Penalties may include imprisonment, fines, |
| | denial of insurance, and civil damages. Any insurance company or agent of an |
| | insurance company who knowingly provides false, incomplete, or misleading |
| | facts or information to a policyholder or claimant for the purpose of defrauding |
| | or attempting to defraud the policyholder or claimant with regard to a settlement |
| | or award payable from insurance proceeds shall be reported to the Colorado |
| District of | Division of Insurance within the Department of Regulatory Agencies. |
| District of Columbia | WARNING: It is a crime to provide false or misleading information to an insurer for the |
| Columbia | purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information |
| | materially related to a claim was provided by the applicant. |
| Florida | Any person who knowingly and with intent to injure, defraud, or deceive any insurer |
| | files a statement of claim or an application containing any false, incomplete, or |
| | misleading information is guilty of a felony of the third degree. |
| Kansas | A "fraudulent insurance act" means an act committed by any person who, knowingly |
| | and with intent to defraud, presents, causes to be presented or prepares with |
| | knowledge or belief that it will be presented to or by an insurer, purported insurer, |
| | broker or any agent thereof, any written, electronic, electronic impulse, facsimile, |
| | magnetic, oral, or telephonic communication or statement as part of, or in support of, an |
| | application for the issuance of, or the rating of an insurance policy for personal or |
| | commercial insurance, or a claim for payment or other benefit pursuant to an insurance |
| | policy for commercial or personal insurance which such person knows to contain |
| | materially false information concerning any fact material thereto; or conceals, for the |
| | purpose of misleading, information concerning any fact material thereto. |
| Kentucky | Any person who knowingly and with intent to defraud any insurance company or other |
| | person files an application for insurance containing any materially false information or |
| | conceals, for the purpose of misleading, information concerning any fact material |
| | thereto commits a fraudulent insurance act, which is a crime. |
| Louisiana | Any person who knowingly presents a false or fraudulent claim for payment of a loss or |
| | benefit or knowingly presents false information in an application for insurance is guilty |
| Maina | of a crime and may be subject to fines and confinement in prison. |
| Maine | It is a crime to knowingly provide false, incomplete or misleading information to an |
| | insurance company for the purpose of defrauding the company. Penalties may include |
| Manuland | imprisonment, fines, or denial of insurance benefits. |
| Maryland | Any person who knowingly or willfully presents a false or fraudulent claim for payment |
| | of a loss or benefit or who knowingly or willfully presents false information in an |
| | Landication for incurance is quilty of a crime and may be subject to fince and |
| | application for insurance is guilty of a crime and may be subject to fines and |
| New Jersey | application for insurance is guilty of a crime and may be subject to fines and confinement in prison. Any person who includes any false or misleading information on an application for an |

| New Mexico | ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES. |
|--------------|---|
| New York | General: All applications for commercial insurance, other than automobile insurance: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation. |
| | All applications for automobile insurance and all claim forms: Any person who knowingly makes or knowingly assists, abets, solicits or conspires with another to make a false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the value of the subject motor vehicle or stated claim for each violation. |
| | Fire: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. |
| | The proposed insured affirms that the foregoing information is true and agrees that these applications shall constitute a part of any policy issued whether attached or not and that any willful concealment or misrepresentation of a material fact or circumstances shall be grounds to rescind the insurance policy. |
| Ohio | Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud. |
| Oklahoma | WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony. |
| | WARNING: All Workers Compensation Insurance: Any person or entity who makes any material false statement or representation, who willfully and knowingly omits or conceals any material information, or who employs any device, scheme, or artifice, or who aids and abets any person for the purpose of: obtaining any benefit or payment, increasing any claim for benefit or payment, or obtaining workers' compensation coverage under this act, shall be guilty of a felony punishable pursuant to Section 1663 of Title 21 of the Oklahoma Statutes. |
| Pennsylvania | Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. |
| | Automobile Insurance: Any person who knowingly and with intent to injure or defraud any insurer files an application or claim containing any false, incomplete or misleading information shall, upon conviction, be subject to imprisonment for up to seven years and the payment of a fine of up to \$15,000. |

| Puerto Rico | Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years. |
|------------------|--|
| Rhode Island | Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. |
| Tennessee | It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits. |
| | Workers' Compensation: It is a crime to knowingly provide false, incomplete or misleading information to any party to a workers' compensation transaction for the purpose of committing fraud. Penalties include imprisonment, fines and denial of insurance benefits. |
| Utah | Workers' Compensation: Any person who knowingly presents false or fraudulent underwriting information, files or causes to be filed a false or fraudulent claim for disability compensation or medical benefits, or submits a false or fraudulent report or billing for health care fees or other professional services is guilty of a crime and may be subject to fines and confinement in state prison. |
| Virginia | It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits. |
| Washington | It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits. |
| West Virginia | Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. |
| All Other States | Any person who knowingly and willfully presents false information in an application for insurance may be guilty of insurance fraud and subject to fines and confinement in prison. (In Oregon, the aforementioned actions may constitute a fraudulent insurance act which may be a crime and may subject the person to penalties). |

CALIFORNIA

SURPLUS LINES IMPORTANT NOTICE:

- 1. The insurance policy that you have purchased is being issued by an insurer that is not licensed by the state of California. These companies are called "nonadmitted" or "surplus line" insurers.
- 2. The insurer is not subject to the financial solvency regulation and enforcement that apply to California licensed insurers.
- 3. The insurer does not participate in any of the insurance guarantee funds created by California law. Therefore, these funds will not pay your claims or protect your assets if the insurer becomes insolvent and is unable to make payments as promised.
- The insurer should be licensed either as a foreign insurer in 4. another state in the United States or as a non-United States (alien) insurer. You should ask questions of your insurance agent, broker, or "surplus line" broker or contact the California Department of Insurance at the following toll-free number 1-800-927-4357 or telephone internet website www.insurance.ca.gov. Ask whether or not the insurer is licensed as a foreign or non-United States (alien) insurer and for additional information about the insurer. You may also contact the NAIC's internet web site at <u>www.naic.org.</u> The NAIC -- the National Association of Insurance Commissioners-- is the regulatory support organization created and governed by the chief insurance regulators in the United States.

- 5. Foreign insurers should be licensed by a state in the United States and you may contact that state's department of insurance to obtain more information about that insurer. You can find a link to each state from this NAIC internet website: https://naic.org/state_web_map.htm.
- 6. For non-United States (alien) insurers, the insurer should be licensed by a country outside of the United States and should be on the NAIC'S International Insurers Department (IID) listing of approved nonadmitted non-United States insurers. Ask your agent, broker, or "surplus line" broker to obtain more information about that insurer.
- 7. California maintains a "List of Approved Surplus Line Insurers (LASLI)." Ask your agent or broker if the insurer is on that list, or view that list at the internet web site of the California Department of Insurance: www.insurance.ca.gov/01-consumers/120-company/07-lasli/lasli.cfm .
- 8. If you, as the applicant, required that the insurance policy you have purchased be effective immediately, either because existing coverage was going to lapse within two business days or because you were required to have coverage within two business days, and you did not receive this disclosure form and a request for your signature until after coverage became effective, you have the right to cancel this policy within five days of receiving this disclosure. If you cancel coverage, the premium will be prorated and any broker's fee charged for this insurance will be returned to you.

CLAIMS REPORTING INFORMATION

AXA XL

Please be advised of the following claims reporting address:

via email:

proclaimnewnotices@axaxl.com

OR

via regular mail:

AXA XL Claims P.O. Box 211547 Dallas, TX 75211



X^L Insurance

CyberRiskConnect

Privacy, Security and Technology Insurance

DECLARATION PAGE

| POLICY NUMBER: | MTP90 | 3160107 | INSU | RANCE COM | PANY: | Indian Harbor Insurance Company | | |
|--|---------------|---------------------|-------------------------|---------------------|--------------|--|--------------|-----------------|
| RENEWAL OF: | MTP90 | 3160106 | REGL | JLATORY OF | | 505 Eagleview Blvd. Suite 100, Exton, PA 19341-1120 | | |
| | | | | | | | | |
| ITEM 1. NAMED I | NSURED | | | | | | | |
| Named Insured | | | COUNTY | OF SAN BE | RNARDIN | C | | |
| | | | 222 WEST HOSPITALITY LN | | | | | |
| | | | 3RD FLO | - | | | | |
| Address | | | SAN BEF | RNARDINO, (| CA 92415 | | | |
| ITEM 2. POLICY F | PERIOD | | | | | | | |
| Effective Date | | July 1, 2021 | | Expiration [| Date | | July | 1, 2022 |
| ITEM 3. COVERA | GE SCHE | DULE | | | | | | |
| Combined Limits - Co | mbined F | Policy Aggregate Li | imit | | \$ 5,000,000 | | \$ 5,000,000 | |
| THIRD PARTY LI | ABILITY (| COVERAGES | LI | LIMIT RETE | | NTION RETRO I | | RETRO DATE |
| Technology Products | And Serv | vices | NA | | NA | | NA | |
| Professional Services | i | | | NA | | NA | | NA |
| Media | | | | \$ 5,000,000 | | \$ 500,000 | | Full Prior Acts |
| Privacy And Cyber Se | ecurity | | | \$ 5,000,000 | | \$ 500,000 Full Price | | Full Prior Acts |
| Privacy Regulatory De | efense, A | wards And Fines | | \$ 5,000,000 | | \$ 500,000 Full Prior | | Full Prior Acts |
| FIRST PARTY COVE | RAGES | | | LIMIT WAITING PERIO | | ITING PERIOD | | |
| | | Business | | (| | | | 10 1 10 110 |
| Interruption And | Extra Expense | | | | \$ 5,000,000 | | 12 Hours | |
| Extra Expense | | | LIMIT | | C 000 000 | RETENTION | | |
| Extra Expense | | | \$ 5,000,000 | | | | | |
| Data Recovery | | | \$ 5,000,000 | | | | | |
| Cyber-Extortion And Ransomware Data Breach Response And Crisis | | | \$ 5,000,000 | | \$ 500,000 | | | |
| Management Coverage | | | \$ 5,000,000 \$ | | \$ 500,000 | | | |
| ITEM 4. PREMIUM | | | 1 | \$2 | | \$ 242,060 | | |

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ITEM 5. PROFESSIONAL SERVICES N/A

| ITEM 6. NOTICE OF CLAIM | |
|---|---|
| | By certified post mail : AXA XL Claims, |
| By email: <u>proclaimnewnotices@axaxl.com</u> | P.O. Box 211547, Dallas, TX 75211 |
| ITEM 7. AXA XL BREACH HOTLINE | 1-855-566-4724 |

| ITEM 8. END | ORSEMENTS ATTACHED | AT POLICY ISSUANCE |
|------------------------|----------------------|---|
| Endorsement | Endorsement Form | |
| Number | Number | Endorsement Title |
| | TRD 050 0619 | CyberRiskConnect Privacy, Security and Technology Insurance |
| | PN CW 02 0119 | Privacy Policy |
| | PN CW 05 0519 | U.S. Treasury Department's Office Of Foreign Assets Control ("OFAC") |
| | PN CA 02 0119 | Important Information to Policyholders - California |
| | PN CW 01 0719 | Notice To Policyholders - Fraud Notice |
| | PN CA 05 0120 | California Surplus Lines Notice |
| | NTD 018 0120 | Claims Reporting Information |
| | IL MP 9104 0314 IHIC | In Witness - Indian Harbor Insurance Company |
| Endorsement No. 001 | TRD 419 0617 | Long Named Insured Endorsement |
| Endorsement No. 002 | TRD 437 0917 | Dependent Business Interruption Coverage Endorsement |
| Endorsement No. 003 | TRD 438 1218 | Dependent Business Interruption - System Failure Coverage Endorsement |
| Endorsement No. 004 | TRD 439 0918 | System Failure Coverage Endorsement |
| Endorsement No. 005 | TRD 454 1017 | PCI DSS Coverage Amendatory Endorsement |
| Endorsement No. 006 | TVI 900 0817 | Certified Acts of Terrorism Coverage and Premium Disclosure |
| Endorsement No. 007 | TRD 567 0318 | Limit Of Liability And Retention Amendatory Endorsement - Limits And Retention Per Named Insured For Related Matters And Related Losses |
| Endorsement No. 008 | TRD 569 0918 | Consequential Reputational Loss Endorsement |
| Endorsement No. 009 | TRD 585 0520 | Privacy Regulatory Endorsement |
| Endorsement No. 010 | TRD 581 1219 | Bricking Coverage Endorsement |
| Endorsement No. 011 | TRD 802 0119 | Voluntary Shutdown - Amended Business Interruption and Extra Expenses Endorsement |
| Endorsement No. 012 | TRD 816 1219 | UTILITY FRAUD ENDORSEMENT |
| Endorsement No. 013 | TRD 817 1219 | Cyber Crime Endorsement |
| Endorsement No. 014 | XL-CASOP 0118 | Service of Process |

TRD 000 0619

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| ITEM 9. PRODUCER | |
|------------------|-------------------------------|
| NAME | Risk Placement Services, Inc. |
| | 204 Cedar Street |
| ADDRESS | Cambridge, MD 21613 |



CyberRiskConnect

Privacy, Security and Technology Insurance

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CyberRiskConnect

Privacy, Security and Technology Insurance

POLICY FORM

SECTION I.A. OF THIS POLICY IS A THIRD PARTY LIABILITY COVERAGE SECTION AND APPLIES ONLY TO THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED AND REPORTED IN ACCORDANCE WITH THE POLICY. CLAIM EXPENSES ARE WITHIN AND REDUCE THE LIMIT OF LIABILITY. PLEASE REVIEW THE POLICY CAREFULLY.

Words and phrases in blue are defined in Section IV. Definitions.

In consideration of the premium paid by the Named Insured, in reliance upon the application, and subject to the Declarations, limitations, conditions, provisions and other terms of this Policy, the Insurer and the Insured agree, with respect to the Insuring Agreements purchased, as stated on the Declarations page, as follows:

I. Insuring Agreements

A. Third Party Liability Coverages

The Insurer will pay on behalf of an Insured claim expenses and damages in excess of the applicable retention that the Insured is legally obligated to pay as the result of a claim first made against the Insured during the policy period or Extended Reporting Period (if applicable) alleging a:

- Technology Products and Services technology wrongful act;
- 2. Professional Services

professional services wrongful act;

- Media media wrongful act;
- 4. Privacy and Cyber Security

privacy and security wrongful act,

committed by the Insured, a rogue employee, an outsourced provider, or by a third party for whose third party wrongful act an Insured is legally responsible.

5. Privacy Regulatory Defense, Awards and Fines

The Insurer will pay on behalf of an Insured claim expenses and regulatory damages in excess of the applicable retention that the Insured is legally obligated to pay as the result of a privacy regulatory action first made against the Insured during the policy period or Extended Reporting Period (if applicable) alleging a privacy and security wrongful act committed by the Insured, a rogue employee, an outsourced provider, or by a third party for whose privacy and security wrongful act the Insured is legally responsible.

B. First Party Coverages

1. Business Interruption and Extra Expenses

The Insurer will pay or reimburse the Insured for:

- (a) loss of business income after the waiting period; and
- (b) extra expenses in excess of the applicable retention,

during the period of restoration that the Insured incurs resulting from a cyber security breach directly causing a total or partial interruption or deterioration in the Insured's business operations.

2. Data Recovery

The Insurer will pay or reimburse the Insured for data recovery expenses in excess of the applicable retention that the Insured incurs directly resulting from a cyber security breach.

3. Cyber-Extortion and Ransomware

The Insurer will pay or reimburse the Insured for cyber-extortion expenses in excess of the applicable retention that the Insured incurs directly resulting from and in response to a cyber-extortion threat.

C. Data Breach Response and Crisis Management Coverage

The Insurer will pay or reimburse the Insured for data breach response and crisis management costs in excess of the applicable retention that the Insured incurs for a continuous eighteen (18) month period resulting from a data breach or cyber security breach. The payment period begins when the data breach or cyber security breach is reported to the Insurer in accordance with Section VI. Notice.

D. Application of Coverage

- 1. The coverage provided under Insuring Agreements I.A. Third Party Liability Coverages shall apply if and only if:
 - (a) the first third party wrongful act or related matter occurs on or after the retroactive date, as stated in Item 3. on the Declarations Page, and prior to the Policy expiration date, as stated in Item 2. on the Declarations page;
 - (b) prior to the effective date of the Policy, as stated in Item 2. on the Declarations Page, or that of the first policy issued and continuously renewed by the Insurer, of which this Policy is a renewal, no executive officer knew or could have reasonably foreseen that such third party wrongful act or related matter did or likely would result in a claim;
 - (c) the claim is reported in accordance with Section VI. Notice; and
 - (d) notice of such third party wrongful act or related matter alleged or contained in any claim or in any circumstance has not been provided by the Insured and accepted by the applicable insurer under any prior policy of which this Policy is a renewal or replacement, or any subsequent policy, irrespective of whether such prior or subsequent policy was issued by the Insurer or any other entity.
- 2. The coverage provided under Insuring Agreement I.B. First Party Coverages and Insuring Agreement I.C. Data Breach Response and Crisis Management Coverage shall apply if and only if:
 - (a) an executive officer first discovers and/or becomes aware of such first party incident or related matter during the policy period;
 - (b) the first party incident is reported in accordance with VI. Notice; and

(c) notice of such first party incident or related matter has not been provided by an Insured and accepted by the applicable insurer under any prior policy of which this Policy is a renewal or replacement, or any subsequent policy, irrespective of whether such prior or subsequent policy was issued by the Insurer or any other entity.

II. Defense and Settlement

A. Defense

The Insurer has the right and duty to defend any claim under insuring agreement I.A. Third Party Liability Coverages made against an Insured even if the allegations in the claim are groundless, false or fraudulent. The Insurer will select and appoint defense counsel.

B. Settlement

The Insurer has the right with the prior written consent of the Insured, such consent not to be unreasonably withheld, to settle a claim. If the Insured refuses to consent to any such settlement recommended by the Insurer and agreed to by the claimant, then the Insurer's duty to defend ends and the Insurer's limit of liability for such claim will not exceed the amount for which the Insurer could have settled such claim had the Insured consented to settlement, plus claim expenses incurred up to the time the Insurer made its settlement recommendation, plus an additional seventy percent (70%) of claim expenses and damages incurred by an Insured after the Insurer had made its settlement recommendation. All such payments by the Insurer are subject to Section III. Limit of Liability and Retention.

III. Limit of Liability and Retention

A. Limit of Liability Option

The Insured shall elect the Policy's limits to apply on a Combined Limits or Separate Limits basis, as stated on the Coverage Schedule in Item 3. on the Declaration Page.

- 1. Combined Limits
 - (a) If the Insured elects Combined Limits, then the Policy's Combined Policy Aggregate Limit, as stated in Item 3. Coverage Schedule on the Declarations Page, is the Insurer's maximum liability for loss under all Insuring Agreements combined, regardless of the number of claims, or individuals or entities making claims. Upon exhaustion of such limit of liability, the Insurer will not be liable to pay any further loss with respect to this Policy.
 - (b) If a sublimit with respect to an Insuring Agreement is stated in Item 3. on the Declarations Page, then such sublimit will be the Insurer's maximum liability for loss with respect to such Insuring Agreement. Upon exhaustion of such sublimit, the Insurer will not be liable to pay any further loss with respect to the coverage provided by the subject Insuring Agreement. Each sublimit will be part of, and not in addition to, this Policy's Combined Policy Aggregate Limit of Liability and will in no way serve to increase or supplement such limit of liability. All payments made under a sublimit will reduce such limit of liability.
- 2. Separate Limits

If the Insured elects Separate Limits, then the Policy's:

- (a) Third and First Party Aggregate Limit, as stated in Item 3. on the Declarations Page, is the Insurer's maximum liability for all damages, claim expenses, regulatory damages, loss of business income, extra expenses, data recovery expenses, and cyber-extortion expenses for all Third Party Liability Coverages and First Party Coverages, regardless of the number of Insureds, claims, first party incidents, or individuals or entities making claims. If a sublimit with respect to an Insuring Agreement is stated in Item 3. on the Declarations Page, then such sublimit will be the Insurer's maximum liability for loss with respect to such Insuring Agreement. Upon exhaustion of such sublimit, the Insurer will not be liable to pay any further loss with respect to the coverage provided by the subject Insuring Agreement. Each sublimit will be part of, and not in addition to, the Policy's Third Party Liability and First Party Aggregate Limit of Liability and will in no way serve to increase or supplement such limit of liability. All payments made under a sublimit will reduce such limit of liability.
- (b) Data Breach Response and Crisis Management Aggregate Limit, as stated in Item 3. on the Declarations Page, is the Insurer's maximum liability for all data breach response and crisis management costs for Data Breach Response and Crisis Management Coverage, regardless of the number of data breaches.
- 3. Exhaustion of Limit
 - (a) Upon exhaustion of the:
 - 1. Combined Policy Aggregate Limit of Liability under the Combined Limits option; or
 - 2. Third Party and First Party Aggregate Limit of Liability under the Separate Limits option; and
 - 3. Data Breach Response and Crisis Management Aggregate Limit of Liability under the Separate Limits option; or

(b) after the Insurer has deposited or escrowed any amounts remaining in the Policy's applicable aggregate limit of liability with a court of competent jurisdiction, the Insurer will not be liable to pay for any further loss under the Policy.

B. Retentions

- 1. Combined Limits
 - (a) The Insurer is liable only for that portion of damages, claim expenses, regulatory damages, and first party costs (not including loss of business income) in excess of the applicable Insuring Agreement's retention amount, as stated in Item 3. on the Declarations page. If more than a single retention applies to a claim and/or first party incident, then the Insured is responsible for paying the highest applicable retention. The retention will be borne entirely by the Insured alone and not by the Insurer.
 - (b) Solely with respect to insuring agreement I.B.1.(a) Business Interruption and Extra Expenses, the Insurer is liable only for loss of business income in excess of the waiting period.
- 2. Separate Limits
 - (a) The Insurer is liable only for that portion of damages, claim expenses, regulatory damages, extra expenses, data recovery expenses and cyber-extortion expenses that is in excess of the applicable Insuring Agreement's retention amount, as stated in Item 3. on the Declarations page. If more than a single retention applies to a claim and/or first party incident, then the Insured is responsible for paying the highest applicable retention. The retention will be borne entirely by the Insured alone and not by the Insurer.
 - (b) With respect to insuring agreement I.C. Data Breach Response and Crisis Management Coverage a separate retention will apply and the Insurer is liable only for that portion of any data breach response and crisis management costs directly resulting from a data breach or cyber security breach.
 - (c) Solely with respect to insuring agreement I.B.1.(a) Business Interruption and Extra Expenses, the Insurer is liable only for loss of business income in excess of the waiting period.
- C. Related Matters and Related Losses
 - 1. Related Third Party Wrongful Acts

A claim resulting from a related matter will be treated as a single claim first made against the Insured at the time the first such related matter occurred, irrespective of whether such related matter occurred prior to or during the policy period, and irrespective of the number of related matters, and the identity or number of Insureds involved.

- 2. Related First Party Incidents
 - (a) A related matter involving a first party incident (other than a cyber-extortion threat) will be considered a single first party incident which shall be deemed to have been discovered on the date on which the earliest such first party incident was discovered by an executive officer.
 - (b) All related matters involving cyber-extortion threats will be considered a single cyber-extortion threat first occurring on the date the first such cyber-extortion threat occurred.
- 3. Related Loss

All loss will be considered a single loss occurring at the time the first related matter giving rise to such loss first occurred or was first discovered, irrespective of the number of related losses, and the identity or number of Insureds involved.

IV. Definitions

A. Application

The signed application, information, statements, representations, attachments, exhibits, and other material submitted to the Insurer in connection with the underwriting of this Policy.

B. Breach Response Providers

The Insurer's pre-approved panel of breach response vendors.

C. Claim

- 1. A written demand for monetary damages, services, or injunctive or other non-monetary relief;
- 2. A civil proceeding for monetary damages, services, or injunctive or other non-monetary relief that is commenced by service of a complaint or similar pleading, including any appeal thereof;
- 3. A mandatory arbitration or other mandatory alternative dispute resolution proceeding for monetary damages, services, or injunctive or other non-monetary relief commenced by a written demand, including any appeal thereof, or a non-mandatory arbitration or other non-mandatory alternative dispute resolution proceeding to which the Insurer has consented in writing;
- 4. Solely with respect to insuring agreement I.A.5. Privacy Regulatory Defense, Awards and Fines, a privacy regulatory action; or
- 5. A request to toll or waive any applicable statute of limitations.

D. Claim Expenses

- 1. Reasonable and necessary fees for the defense of a claim defended by an attorney in accordance with Section II. Defense and Settlement, as well as other reasonable and necessary fees, costs and expenses that result from the investigation, adjustment, negotiation, arbitration, defense or appeal of a claim; and
- 2. Premiums on appeal bonds, attachment bonds or similar bonds. Provided, however, the Insurer is not obligated to apply for or furnish any such bond.

E. Confidential Business Information

Third party information, whether printed or digital, encrypted or unencrypted, in the care, custody or control of an Insured or outsourced provider, including a trade secret, formula, pattern, compilation, program, device, method, technique, or process, that derives independent economic value, actual or potential, from not being generally known or readily ascertainable through appropriate means by other persons and is the subject of efforts that are reasonable under the circumstances to maintain its secrecy.

F. Consumer Redress Amount

That sum of money that the <u>Insured</u> is legally obligated to deposit in a fund for the payment of consumer claims as the result of a <u>privacy regulatory action</u>.

G. Coverage Sections

Insuring agreements: I.A. Third Party Liability Coverages, I.B. First Party Coverages, and I.C. Data Breach Response and Crisis Management Coverage.

H. Cyber-extortion Expenses

- 1. Reasonable and necessary money, digital currency, property, or other consideration surrendered as payment by or on behalf of the Insured Company, to which the Insurer has consented, such consent not to be unreasonably withheld, in order to prevent, limit or respond to a cyber-extortion threat; and
- 2. Reasonable and necessary costs charged by:
 - (a) breach response providers; or
 - (b) qualified third parties with the prior consent of the Insurer,

to conduct an investigation and advise the Insured how to respond to and resolve a cyber-extortion threat.

I. Cyber-extortion Threat

A threat made by a third party or rogue employee demanding payment in consideration for the elimination, mitigation or removal of the threat intended to:

- 1. Disrupt the network to impair business operations of the Insured Company;
- 2. Alter, damage, or destroy data stored on the network;
- 3. Use the network to generate and transmit malware to third parties;
- 4. Deface the Insured Company's website;
- 5. Access or release data, including personally identifiable information, protected health information; confidential business information, stored or previously stored on the network;
- 6. Refuse to return data stolen from the network; or
- 7. Prevent access to the network or data by using encryption and withholding the decryption key.

J. Cyber Security Breach

Any unauthorized: access to, use or misuse of, modification to the network, and/or denial of network resources by cyber-attacks perpetrated by a third party or rogue employee through any electronic means, including malware, viruses, worms, and Trojan horses, spyware and adware, zero-day attacks, hacker attacks and denial of service attacks.

K. Damages

Compensatory damages resulting from a judgment, award or settlement agreement, including pre-judgment and post-judgment interest, which the Insured becomes legally obligated to pay as a result of a claim, and punitive, exemplary damages, and multiple damages, if the insuring of such damages is permitted under the laws and public policy of the jurisdiction under which this Policy is construed, which the Insured becomes legally obligated to pay as a result of a claim. Enforceability of punitive, exemplary damages and multiple damages will be governed by the applicable law that most favors affirmative coverage for such damages. Damages do not include:

1. The return of any fees paid to an Insured or the offset of any future fees to be charged by or owed to an Insured:

- 2. Lost investment income;
- 3. Costs incurred by an Insured to withdraw or recall technology products, including products that incorporate an Insured's technology products, technology services, or professional services;
- 4. Costs incurred by an Insured to correct, re-perform or complete any technology services or professional services;

- 5. Costs incurred by an Insured or by a third party at the direction of the Insured to remediate, repair, replace, restore, modify, update, upgrade, supplement, correct, or otherwise improve a network to a level of functionality beyond that which existed prior to a cyber security breach;
- 6. Civil or criminal fines or penalties or compliance violation remedies imposed on an Insured; provided, however, civil fines or penalties shall constitute damages under insuring agreement I.A.5. Privacy Regulatory Defense, Awards and Fines;
- 7. Liquidated damages in excess of an Insured's liability that otherwise results from a third party wrongful act;
- 8. The monetary value of an electronic fund transfer or transaction that is lost or diminished;
- 9. Any amounts incurred prior to the Insured providing notice of a claim pursuant to the terms of this Policy;
- 10. The value of non-monetary relief, including any amount attributable to or arising therefrom; or
- 11. Royalty or licensing fees or payments.

L. Data Breach

Any actual or reasonably suspected theft, loss, or unauthorized acquisition, access to, or disclosure of data or hardware containing data that has or may compromise the security, confidentiality and/or integrity of personally identifiable information, protected health information, or confidential business information.

M. Data Breach Reporting Requirement

Any provision in a law, statute or regulation, domestic or foreign, that requires the <u>Insured</u> to provide notification to affected persons of a suspected breach of such person's <u>personally identifiable information</u> or protected health information.

- N. Data Breach Response and Crisis Management Costs
 - 1. Reasonable and necessary costs charged by breach response providers to:
 - (a) determine the legal applicability of and actions necessary to respond to a data breach reporting requirement;
 - (b) perform computer forensics to determine the existence, cause and scope of a data breach or cyber security breach;
 - (c) notify individuals of a data breach, either those who are required to be notified pursuant to a data breach reporting requirement or on a voluntary basis;
 - (d) operate a call center to manage data breach inquiries;
 - (e) provide credit or identity monitoring and identity protection and restoration services or any similar service for those individuals whose personally identifiable information was or may have been breached;
 - (f) provide medical identity restoration for those individuals whose protected health information was or may have been breached; or
 - (g) minimize reputational harm to the Insured Company by hiring a public relations or crisis communications firm;

- 2. Reasonable and necessary costs charged by any qualified provider that is not a breach response providers so long as the qualified provider:
 - (a) is pre-approved in writing by the Insurer; or
 - (b) provides comparable services to those enumerated in 1.(a) through 1.(g) above and whose rate shall not exceed the rate the Insurer has pre-negotiated with the breach response providers; and
- 3. Costs charged by a PCI Forensics Investigator to perform forensics to determine the existence, cause and scope of a breach or suspected breach of cardholder data.

O. Data Recovery Expenses

Reasonable and necessary costs incurred by the <u>Insured Company</u> with the prior written consent of the <u>Insurer</u>, such consent not to be unreasonably withheld, to:

- 1. Determine whether damaged or destroyed computer programs, software or electronic data can be replaced, recreated, restored or repaired; and
- 2. Replace, recreate, restore or repair such damaged or destroyed computer programs, software or electronic data residing on the network to substantially the form in which it existed immediately prior to a cyber security breach.

P. Domestic Partner

Any spouse or any person qualifying as a domestic partner under federal, state, foreign, or other law (including common law), statute, or regulation, or under the <u>Insured Company's</u> employee benefit plan.

Q. Executive Officer

Any duly elected or appointed Chief Executive Officer, Chief Financial Officer, Chief Information Officer, Chief Privacy Officer, Chief Security Officer, Chief Information Security Officer, Chief Technology Officer, Risk Manager, General Counsel and in-house attorney designated to be in charge of litigation, or the functional equivalent of any of the foregoing, of the Insured.

R. Extra Expenses

Reasonable and necessary expenses, including payroll, in excess of the <u>Insured's</u> normal operating expenses which are incurred to reduce or avoid <u>loss of business</u> income and/or restore business operations.

S. First Party Costs

Any loss of business income, extra expenses, data recovery expenses, cyber-extortion expenses, and data breach response and crisis management costs.

First Party Costs do not include any amounts incurred prior to the Insured providing notice of the first party incident.

T. First Party Incident

A cyber security breach, cyber-extortion threat, or data breach.

U. Insured

The Insured Company; and

1. Any past or present employee, director, officer, member, principal, partner, trustee, leased, temporary, seasonal employee/worker and volunteer of the Insured Company acting in their capacity and in accordance with their authority as such;

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- 2. Any independent contractor performing services for the Insured Company under a written contract but solely with respect to such independent contractor's duties on behalf and for the benefit of the Insured Company; and
- 3. With respect to insuring agreement I.A.3. Media, any person or entity that disseminates matter on behalf and for the benefit of an Insured where, prior to such dissemination, an Insured has agreed in writing to include such person or entity as an Insured under the Policy.
- 4. Any entity that an Insured Company is required by written contract to be insured under the Policy, but only for a third party wrongful act committed by the Insured Company or any persons under Definition IV.U. Insured paragraph 1. and Definition IV.U. Insured paragraph 2.;

Provided, however a rogue employee is not an Insured pursuant to this definition.

V. Insured Company

The Named Insured and any subsidiary.

W. Insurer

The insurance company stated on the Declarations Page.

X. Loss

All damages, claim expenses, regulatory damages, and first party costs.

Y. Loss of Business Income

Net income (net profit or net loss before income taxes) that could have reasonably been earned or net loss that could have reasonably been avoided, including the costs of retaining a forensic accountant to determine such amount. Such forensic accountant will be selected by the Insurer.

A loss of business income calculation is based upon the amount of actual loss of business income the Insured Company sustains per hour during the period of restoration.

Z. Management Control

- Ownership interests representing more than fifty percent (50%) of the voting, appointment or designation power of a company for the selection of a majority of (i) the board of directors of a corporation, (ii) the management committee members of a joint venture or partnership, or (iii) the members of the management board of a limited liability company; or
- 2. The right, pursuant to written contract or the by-laws, charter, operating agreement or similar documents of an entity, to select, appoint or designate a majority of (i) the board of directors of a corporation, (ii) the management committee members of a joint venture or partnership, or (iii) the members of the management board of a limited liability company.

AA. Matter

The content of communication, including language, data, facts, fiction, music, photographs, images, artistic expression, or visual or graphical materials. Provided, however, matter does not include technology products or products or services described, illustrated or displayed in matter.

BB. Media Wrongful Act

Any of the following resulting from the Insured acquiring, blogging, broadcasting, collecting, disseminating, distributing, editing, exhibiting, gathering, obtaining, posting, producing, publishing, releasing, researching, recording, tweeting or uttering, matter through traditional and/or digital methods, including, cable television, radio, movie and music studios, public speaking, newspapers, magazines, books and print publications, website, apps, CD-ROMs and DVDs:

- 1. Libel, slander, or any other form of defamation or harm to the character or reputation of any person or entity, including product disparagement or trade libel;
- 2. Copyright infringement or misappropriation of property rights, information or ideas or dilution or infringement of title, slogan, trademark, trade dress, logo, trade name, service mark or service name;
- 3. Common law unfair competition or unfair trade practices alleged as a direct result of Definition IV.BB. Media Wrongful Act paragraph 1. and Definition IV.BB. Media Wrongful Act paragraph 2.;
- 4. Invasion or infringement of the right of privacy or publicity, including the torts of intrusion upon seclusion, publication of private facts, false light, and misappropriation of name or likeness;
- 5. Infliction of emotional distress or mental anguish;
- 6. False arrest, detention or imprisonment, harassment, trespass, wrongful entry or eviction, eavesdropping, or other invasion of the right of private occupancy; or
- 7. Plagiarism, piracy, or misappropriation of ideas under implied contract.

CC. Named Insured

The entity stated in Item 1. on the Declarations Page.

DD. Network

A connected system of computing hardware, software, firmware and associated electronic components and mobile devices, including industrial control systems and SCADA systems (Supervisory control and data acquisition systems) or other industrial IT, under the ownership, operation or control of, or leased by, an Insured Company.

EE. Outsourced Provider

Any third party, including a cloud service provider, to which an <u>Insured</u> has contracted to provide a business process on behalf and for the benefit of an <u>Insured</u>.

FF. Period of Restoration

- 1. Solely with respect to loss of business income, that period of time that begins at the end of the waiting period and continues until the Insured Company's operations are restored to the condition that existed immediately prior to the cyber security breach; and
- 2. Solely with respect to extra expenses, that period of time that begins after a cyber security breach has directly caused a total or partial interruption or deterioration in the Insured's business operations and continues until the Insured Company's operations are restored to the condition that existed immediately prior to the cyber security breach.

GG. Personally Identifiable Information

Information, whether printed or digital, encrypted or unencrypted, in the care, custody or control of an Insured or outsourced provider, that alone or in conjunction can be used to uniquely identify an individual.

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HH. Policy Period

The period of time stated in Item 2. on the Declarations Page, beginning on the effective date and expiring on the date of termination, expiration or cancellation of this Policy, whichever is earliest.

II. Pollutants

Any substance exhibiting any hazardous characteristics as defined by, or identified on a list of hazardous substances issued by the United States Environmental Protection Agency or any federal, state, county, municipal or local counterpart thereof or any foreign equivalent. Such substances include but are not limited to solids, liquids, gaseous or thermal irritants, contaminants or smoke, vapor, soot, fumes, acids, alkalis, chemicals or waste materials, nuclear materials, nuclear waste, asbestos, including materials to be recycled, reconditioned, or reclaimed. Pollutants shall also mean any air emission, odor, waste water, oil or oil products, lead or lead products, latex infectious or medical waste, noise, dust, fibers, germs, fungus (including mold or mildew and any mycotoxins, spores, scents or byproducts produced or released by fungi) and electric or magnetic or electromagnetic field.

JJ. Privacy and Security Wrongful Act

Any:

- 1. Loss, theft or failure to protect, or unauthorized acquisition of personally identifiable information, protected health information, or confidential business information;
- 2. Violation of any law, statute or regulation governing the authenticity, availability, confidentiality, storage, control, disclosure, integrity, or use of personally identifiable information or protected health information;
- 3. Violation of a data breach reporting requirement;
- 4. Failure to reasonably implement privacy or security practices required by law or regulations;
- 5. Failure to prevent a cyber security breach that results in:
 - (a) the inability of an authorized user to gain access to the network;
 - (b) the malicious addition, alteration, copy, destruction, deletion, disclosure, damage, removal or theft of data residing on the network; or
 - (c) the transmission of malware from the network to third parties; or
- 6. Failure to comply with the Insured Company's privacy policy and/or privacy notice.

KK. Privacy Regulatory Action

A written request for information, civil investigative demand or civil proceeding brought by or on behalf of a governmental or regulatory authority.

LL. Privacy Regulatory Fine

A civil monetary fine or penalty imposed on an Insured Company by a governmental or regulatory authority.

MM.Professional Services

The services stated in Item 5. on the Declarations Page.

NN. Professional Services Wrongful Act

- 1. Any of the following in rendering or failing to render professional services:
 - (a) act, error, omission, neglect, negligent misrepresentation, or breach of duty;

- (b) injury to a person arising out of defamation, including libel, slander, or other defamatory or disparaging statements or materials; or
- (c) infringement of an intellectual property right except as otherwise excluded in Exclusion V.L. Patent and Exclusion V.M. Trade Secrets; or
- 2. Failure of professional services to meet any applicable legal or industry standard concerning quality, safety, or fitness for a particular purpose.

OO. Protected Health Information

All protected and individually identifiable health information, whether printed or digital, encrypted or unencrypted, held or transmitted by an Insured or its business associate, as those terms are defined by HITECH, the Health Insurance Portability and Accountability Act of 1996 Privacy Rule or any amendment thereto, including the Health Information Technology for Economic and Clinical Health Act and final Omnibus Rule issued on January 17, 2013 or any equivalent foreign regulation.

PP. Regulatory Damages

Any consumer redress amount or privacy regulatory fine.

QQ. Related Loss

A loss that results or arises from the same, similar, or continuous claim or first party incident.

RR. Related Matter

- 1. A third party wrongful act that is the same, similar or arises from a continuous nexus of facts, circumstances, acts, errors or omissions, whether or not such third party wrongful act is logically or causally related or connected; or
- 2. A first party incident that is the same, similar, or arises from a continuous nexus of facts or circumstances, whether or not such first party incident is logically or causally related or connected.

SS. Retroactive Date

The applicable date, if any, stated in Item 3. on the Declarations Page for each Insuring Agreement in Section I.A. Third Party Liability Coverages.

TT. Rogue Employee

An employee of the Insured Company who deliberately acts outside the course and scope of employment and whose intentional conduct results in a claim or first party incident; provided, however, rogue employee does not include an executive officer.

UU. Sublimit

The applicable amount, if any, stated in Item 3. on the Declarations page for each Insuring Agreement within each Coverage Section.

VV. Subsidiary

1. Any entity over which the Named Insured, directly or indirectly, has or had management control through or by way of one or more subsidiaries on or before the effective date of the policy period;

- 2. Any entity in which the Named Insured acquires management control during the policy period, either directly or indirectly, whose gross revenue does not exceed fifteen percent (15%) of the gross revenue of the Insured Company; and
- 3. Any entity of which the Named Insured acquires management control during the policy period, either directly or indirectly, whose gross revenue exceeds fifteen percent (15%) of the gross revenue of the Insured Company:
 - (a) however, only for a period of sixty (60) days following the Named Insured's direct or indirect ability to exert management control; and
 - (b) after such sixty (60) day period if and only if the Named Insured: (1) provides the Insurer with full particulars of such entity; (2) agrees to remit any additional premium; (3) agrees to any amendments to the Policy relating to such entity and; (4) the Insurer agrees to add such entity as a subsidiary by a written agreement and/or endorsement to the Policy;

For purposes of this definition, revenue is measured by the most recent fiscal year prior to the effective date of the Policy.

Notwithstanding the foregoing, coverage afforded by this Policy will apply only to a third party wrongful act and a first party incident occurring on or after the effective date that the Insured Company has obtained management control of such subsidiary and prior to the time that such Insured Company ceased to have management control of such subsidiary unless: (1) The Insurer is notified in writing of such change in circumstances prior to the effective date thereof and agrees in writing to provide coverage for third party wrongful acts and first party incidents occurring on or after such effective date; and (2) The Insured Company accepts any special terms, conditions and exclusions and pays any additional premium charge required by the Insurer.

WW. Technology Wrongful Act

- 1. Any of the following in rendering or failing to render technology services:
 - (a) act, error, omission, neglect, negligent misrepresentation or breach of duty;
 - (b) injury to a person arising out of defamation, including libel, slander, or other defamatory or disparaging statements or materials;
 - (c) infringement of an intellectual property right except as otherwise excluded in Exclusion V.L. Patent and Exclusion V.M. Trade Secrets; or
- 2. Failure of technology products to perform the intended function or serve their intended purpose; or
- 3. Failure of technology services or technology products to meet any applicable legal or industry standard concerning quality, safety or fitness for a particular purpose.

XX. Technology Products

Computer or telecommunications hardware or software products, components or peripherals or electronic products or components, including software updates, service packs and other maintenance releases provided for such products:

- 1. Created, designed, distributed, manufactured, or sold by or on behalf and for the benefit of an Insured; or
- 2. Leased or licensed by an Insured to third parties.

YY. Technology Services

Any computer, cloud computing, information technology, telecommunication, electronic services and any related consulting and staffing services, including data processing, data and application hosting, the provision of managed services, software as a service (SaaS), platform as a service (PaaS), infrastructure as a service (IaaS), network as a service (NaaS), computer systems analysis, computer consulting and training, programming, computer systems installation, management, repair, and maintenance, network design and Internet service.

ZZ. Third Party Wrongful Act

A technology wrongful act, professional services wrongful act, media wrongful act, or privacy and security wrongful act.

AAA. Waiting Period

The number of hours stated in Item 3. on the Declarations page that must elapse prior to commencement of the period of restoration.

V. Exclusions

The Policy does not apply to any claim or first party incident alleging, arising out of, based upon, or attributable to:

A. Deliberate Acts / Personal Profit

- 1. dishonest, intentional or knowing wrongful, fraudulent, criminal, or malicious acts, errors, or omissions or willful violations of law, including privacy laws or regulations, by an <u>Insured</u>, other than a <u>rogue employee</u>;
- 2. the gaining of any profit, remuneration, or financial or non-financial advantage to which the Insured is not entitled,

provided, however, the Insurer will provide the Insured with a defense of any otherwise covered claim and pay any otherwise covered claim expenses until there is a final, non-appealable judgment or adjudication in the underlying action or proceeding or a related declaratory judgment, as to such conduct, at which time the Insured shall reimburse the Insurer for all claim expenses. Notwithstanding the foregoing, criminal proceedings are not covered under the Policy regardless of the allegations made against an Insured.

For the purposes of determining the applicability of this exclusion, the knowledge or conduct of: (1) A natural person Insured will not be imputed to any other natural person Insured; and (2) An executive officer will be imputed to the Insured Company.

B. Bodily Injury and Property Damage

bodily injury, sickness, disease, emotional distress, mental injury, mental tension, mental anguish, pain and suffering, humiliation or shock sustained by any person, including death that results from any of these, or damage to or destruction of any tangible property, including loss of use thereof whether or not damaged or destroyed; provided, however, this exclusion will not apply to any otherwise covered claim for emotional distress, mental injury, mental tension or mental anguish, pain and suffering, humiliation or shock that directly results from a third party wrongful act. For the purposes of this exclusion, "tangible property" shall not include electronic data.

C. Owned Entity

claims made against the Insured if, at the time the third party wrongful act giving rise to such claim was committed:

- 1. The Insured controlled, owned, operated or managed the claimant; or
- 2. The Insured was an owner, partner, director or officer of the claimant;

For the purpose of this exclusion, a ten percent (10%) or more owner of the voting stock of a publicly held corporation, or a forty percent (40%) or more owner of the voting stock of a privately held corporation shall be deemed to control, own, operate or manage any such corporation making such claim.

D. Insured v. Insured

claims made against an Insured and brought by, or on behalf of an Insured or parent company, successor or assignee of an Insured; provided, however this exclusion shall not apply to:

- 1. An Insured under Definition IV.U. Insured paragraph 4.; and
- 2. An otherwise covered claim made by any past or present officer, director, member, principal, partner, trustee, employee or leased worker or temporary employee of the Insured Company:
 - (a) when the claim is made outside of their capacity and pursuant to their authority as such; or
 - (b) against an Insured alleging a privacy and security wrongful act.

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E. Employment Practices

employment practices; provided, however, this exclusion shall not apply to an otherwise covered claim under insuring agreement I.A.4. Privacy and Cyber Security.

F. ERISA

breach of fiduciary duty, responsibility, or obligation in connection with any employee benefit or pension plan, including violations of the responsibilities, obligations or duties imposed upon fiduciaries by ERISA (Employee Retirement Income Security Act of 1974) or any analogous federal, state or local statutory or common law; provided, however, this exclusion shall not apply to an otherwise covered claim under insuring agreement I.A.4. Privacy and Cyber Security.

G. Securities

the purchase, sale, or offer or solicitation of an offer to purchase, sell or solicit securities or any violation of a securities law, including the Securities Act of 1933, the Securities Exchange Act of 1934, and any regulation promulgated under or pursuant to the foregoing, or any federal, state or local laws analogous to the foregoing (including "Blue Sky" laws), whether such law is statutory, regulatory, or common law.

H. RICO

violation of the Organized Crime Control Act of 1970 (commonly known as Racketeer Influenced and Corrupt Organizations Act, or "RICO") and any regulation promulgated under or pursuant to the foregoing or any federal, state or local law analogous to the foregoing, whether such law is statutory, regulatory, or common law.

I. Antitrust and Unfair Competition

antitrust violations, restraint of trade, price fixing, or unfair competition, including, but not limited to violations of The Sherman Antitrust Act, The Clayton Act, The Federal Trade Commission Act, the Robinson-Patman Act as amended, or any federal, state or local laws analogous to the foregoing; provided, however, this exclusion shall not apply to an otherwise covered claim under Insuring Agreement I.A.4. Privacy and Cyber Security or Insuring Agreement I.A.5. Privacy Regulatory Defense, Awards and Fines, or a claim under Definition IV.BB. Media Wrongful Act paragraph 3.

J. Consumer Protection and Deceptive Business Practices

- unfair, deceptive or fraudulent business practices, including, but not limited to, violations consumer protection statutes and consumer fraud statues; provided, however, this exclusion shall not apply to an otherwise covered claim under Insuring Agreement I.A.4. Privacy and Cyber Security or Insuring Agreement I.A.5. Privacy Regulatory Defense, Awards and Fines; and
- 2. any action brought under the Fair Credit Reporting Act or other analogous federal, state or local statute, law, regulation or common law.

K. Unsolicited Communications

unsolicited communications by or on behalf of an Insured to actual or prospective customers of an Insured or any other third party, including actions brought under the Telephone Consumer Protection Act, the CAN-SPAM Act of 2003 or other analogous federal, state or local statute, law, regulation or common law; provided, however, this exclusion shall not apply to an otherwise covered claim directly resulting from a cyber security breach under insuring agreement I.A.4. Privacy and Cyber Security or any loss of business income otherwise covered under insuring agreement I.B.1. Business Interruption and Extra Expenses.

L. Patent

actual or alleged infringement, misappropriation, dilution, misuse or inducement to infringe, misappropriate, dilute or misuse any patent or patent right.

M. Trade Secrets

actual or alleged misappropriation of trade secrets; provided, however, this exclusion shall not apply to an otherwise covered claim directly resulting from a cyber security breach under insuring agreement I.A.4. Privacy and Cyber Security.

N. Pollution

actual, alleged or threatened emission, discharge, dispersal, seepage, release or escape of pollutants or testing for, monitoring, removal, containment, treatment, detoxification, neutralization or cleanup of any pollutants.

O. Contractual

any obligation an Insured has under written contract; provided, however, this exclusion shall not apply to liability an Insured would have in the absence of a contract or an Insured's:

- 1. breach of an exclusivity or confidentiality provision contained in a written agreement;
- 2. violation of an intellectual property right except a violation of a patent right;
- 3. negligent performance of technology services or professional services for a client or customer;
- 4. provision of technology products to a client or customer which contain a material defect; or
- 5. breach of the Insured's privacy policy and/or privacy notice.
- P. Force Majeure

fire, smoke, explosion, lightning, wind, water, flood, earthquake, volcanic eruption, tidal wave, landslide, hail, or act of God, however caused.

Q. War

strikes or similar labor action, war, whether declared or not, invasion, act of foreign enemy, civil war, mutiny, coup d'état, civil commotion assuming the proportions of or amounting to a popular rising, military rising, insurrection, rebellion, revolution, military or usurped power, or any action taken to hinder or defend against these actions; provided, however, this exclusion shall not apply to any actual, alleged or threatened attack against the network, with the intention to cause harm to further social, ideological, religious or political objectives or to intimidate any person or entity in furtherance of such objectives.

R. Infrastructure Failure

electrical, mechanical, Internet, telecommunication, cable or satellite failure, fluctuation or outage not under the operational control of the Insured, however caused, including any electrical power interruption, shortcircuit, surge, brownout or blackout.

S. Governmental Orders

any court order or demand requiring the Insured to provide law enforcement, any administrative, regulatory or judicial body or any other governmental authority access to personally identifiable information, protected health information, or confidential business information.

T. Over-Redemption

price discounts, prizes, awards, coupons, or any other valuable consideration given in excess of the contracted or expected amount.

U. Unauthorized Collection and Use

the unauthorized or unlawful collection, acquisition or use of personally identifiable information or protected health information by the Insured; provided, however, this exclusion shall not apply to a claim directly resulting from the acts of a rogue employee.

VI. Notice

A. Notice of Circumstance

Solely with respect to Insuring Agreement I.A. Third Party Liability Coverages, if during the policy period or Extended Reporting Period (if applicable) as defined in Section VIII. Extended Reporting Period, an Insured first becomes aware of any circumstance that may reasonably be expected to be the basis of a claim being made against an Insured, and if during the policy period, the Insured elects to provide the Insurer written notice of such circumstance along with any third party wrongful act, and the reasons for anticipating such claim, with full particulars as to the dates, persons and entities involved, then any resulting claim which is subsequently made against an Insured and reported to the Insurer that arises out of such circumstance or related matter will be considered made at the time such notice of circumstance was provided. Notice of such circumstance should be reported to the Insurer as stated in Item 6. on the Declarations Page.

B. Notice of Claim and First Party Incident

As a condition precedent to the obligations of the Insurer under this Policy, the Insured must provide written notice to the Insurer as soon as reasonably practicable, but in no event, later than the end of the policy period or any applicable Extended Reporting Period of a:

- 1. claim first made against an Insured after an executive officer becomes aware of such claim; and
- 2. first party incident after an executive officer first discovers and/or becomes aware of such first party incident.
- C. Notice to Whom
 - 1. Notice of a claim and/or first party incident must be provided to the Insurer as stated in Item 6. on the Declarations Page.
 - In addition to the notice requirement above, notice of a first party incident may also be provided to the Insurer via the AXA XL Breach Hotline as stated in Item 7. on the Declarations Page. Notice to the AXA XL Breach Hotline alone will not serve as proper notice under this Policy.
 - 3. The email/certified post mail shall be deemed effective when received by the Insurer.
- D. When a Claim is Deemed Made

A claim will be deemed made pursuant to Definition IV.C. Claim paragraph 1. and Definition IV.C. Claim paragraph 3., on the earliest date an executive officer receives the first written demand; Definition IV.C. Claim paragraph 2., on the date of service; and Definition IV.C. Claim paragraph 4., on the date an executive officer receives written notice of such action.

- E. Insured's Claim and First Party Incident Obligations
 - 1. In connection with a:
 - (a) claim, the Insured will, as a condition precedent to the obligations of the Insurer under the Policy, provide the Insurer with all information that the Insurer reasonably requires, including full particulars as to the dates, persons and entities involved in the claim and the manner in which the Insured first became aware of the claim;

- (b) first party incident, the Insured will, as a condition precedent to the obligations of the Insurer under the Policy, provide the Insurer with all information that the Insurer reasonably requires, including full particulars as to the dates, persons and entities involved in the first party incident and the manner in which the Insured first became aware of the first party incident. Additionally, as a condition precedent to the obligations of the Insurer under the Policy, the Insured Company will provide the Insurer proof of loss with full particulars within three (3) months: after the first discovery by an executive officer of the first party incident (other than a cyber-extortion threat); or first occurrence of the cyber-extortion threat.
- F. Assistance and Cooperation
 - 1. The Insured will reasonably cooperate with the Insurer and upon request of the Insurer:
 - (a) assist the Insurer in the investigation of any third party wrongful act and first party incident;
 - (b) attend hearings, depositions and trials;
 - (c) assist the Insurer in defending and effecting settlements of claims;
 - (d) secure and provide evidence which includes, but is not limited to, obtaining the attendance of witnesses;
 - (e) allow the Insurer to participate in the handling and management of any suit or proceeding;
 - (f) assist the Insurer in enforcing any right, contribution or indemnity against a third party which may be liable to the Insured; and
 - (g) allow a computer forensics expert access to systems, files and information.
 - 2. The Insured will take all reasonable steps to limit and mitigate any loss arising from any third party wrongful act or first party incident for which coverage may be or is sought under the Policy. The Insured will do nothing which in any way increases the Insurer's exposure under the Policy or in any way prejudices the Insurer's potential or actual rights of recovery. The Insured will not, except at the Insured's own cost, voluntarily make any payment, assume or admit any liability or incur any expense without the prior written consent of the Insurer.

VII. Cancellation and Non-Renewal

A. Cancellation by the Named Insured

Except for nonpayment of premium, as set forth below, the <u>Named Insured</u> has the exclusive right to cancel the Policy. Cancellation may be effected by mailing to the <u>Insurer</u> written notice stating when such cancellation will be effective. In such event, the <u>Insurer</u> will retain the pro-rata portion of earned premium.

B. Cancellation by the Insurer

The Insurer may only cancel this Policy for nonpayment of premium. The Insurer will provide not less than fifteen (15) days written notice stating the reason for cancellation and when the Policy will be canceled. Notice of cancellation will be sent to the Named Insured.

C. Non-Renewal of Coverage

The Insurer is under no obligation to renew the Policy upon its expiration. If the Insurer elects to non-renew the Policy, the Insurer will deliver or mail to the Named Insured written notice stating such at least ninety (90) days prior to the Policy's expiration date, as stated in Item 2. on the Declarations page. The offering of terms and conditions different from the expiring terms and conditions, including limits of liability, retention or premium, will not constitute a refusal to renew or a cancellation of the Policy.

VIII.Extended Reporting Period

A. Automatic Extended Reporting Period

The Automatic Extended Reporting Period applies solely to Insuring Agreements I.A. Third Party Liability Coverages, Effective upon the date of termination or cancellation of the Policy for any reason other than nonpayment of premium, the Named Insured will automatically be provided a period of sixty (60) days in which to give written notice to the Insurer of claims first made against the Insured during the policy period or the Automatic Extended Reporting Period for third party wrongful acts committed by an Insured after the retroactive date and prior to the end of the policy period.

B. Optional Extended Reporting Period

The Optional Extended Reporting Period applies solely to Insuring Agreements I.A. Third Party Liability Coverages. Effective upon the date of termination or cancellation of the Policy for any reason other than nonpayment of premium, the Named Insured will have the right to purchase an Optional Extended Reporting Period of one (1), two (2), three (3), or six (6) years. Such right must be exercised by the Named Insured within sixty (60) days of the date of termination or cancellation of the Policy by providing written notice to the Insurer and remitting the amount of additional premium described below in which to provide written notice to the Insurer of a claim first made against the Insured during the Optional Extended Reporting Period for a third party wrongful act committed by an Insured after the retroactive date and prior to the end of the policy period.

The additional premium for the Optional Extended Reporting Period will be for:

- 1. One (1) year, one hundred percent (100%) of the policy annual premium;
- 2. Two (2) years, one hundred fifty percent (150%) of the policy annual premium;
- 3. Three (3) years, one hundred seventy-five percent (175%) of the policy annual premium; or
- Six (6) years, two hundred fifty percent (250%) of the policy annual premium. 4.

C. Application of Extended Reporting Period

- The Automatic Extended Reporting Period and the Optional Extended Reporting Period cannot be 1. canceled and any additional premium charged for the Optional Extended Reporting Period will be fully earned at inception.
- 2. The first sixty (60) days of the Optional Extended Reporting Period, if purchased, will run concurrently with the Automatic Extended Reporting Period.
- 3. The limit of liability of the Insurer under the Automatic Extended Reporting Period and the Optional Extended Reported Period will be part of and not in addition to the limits of liability for the Policy.

IX. Conditions

A. Change in Control

If, during the policy period, the Named Insured consolidates with, merges into, or sells all or substantially all of its assets to another entity, or if any entity acquires management control of the Named Insured, then the Policy will remain in full force but only with respect to a third party wrongful act and first party incident (other than a cyber-extortion threat) involving the Named Insured that occurred prior to the date of the consolidation, merger, sale or acquisition of management control; provided, however, coverage will remain in force for a third party wrongful act and first party incident (other than a cyber-extortion threat) first discovered and for a cyber-extortion threat first occurring subsequent to the date of the consolidation, merger, sale or acquisition of management control; provided the consolidation, merger, sale or acquisition of management to the date of the consolidation, merger, sale or acquisition of management control, if within thirty (30) days of the takeover effective date (1) the Insurer receives written notice containing full details of the transaction, (2) the Named Insured accepts all Policy amendments required by the Insurer, including the addition of special terms, conditions and exclusions, and (3) the Named Insured pays any additional premium charge.

The above provision may be waived in writing by the Insurer.

B. Action Against the Insurer

No action may be brought against the Insurer unless, as a condition precedent thereto, (1) the Insured has fully complied with all of the terms, conditions and other provisions of the Policy, and (2) the amount of the Insured's obligation to pay has been finally determined, either by judgment against the Insured after a trial and appeal or by written agreement by the claimant, Insured, and Insurer.

No person or entity will have the right under the Policy to (1) join the Insurer or its agents and representatives as a defendant, co-defendant or other party in any action against the Insured to determine the Insured's liability or (2) implead the Insurer or its agents and representatives in any such action.

C. Bankruptcy

Bankruptcy or insolvency of the Named Insured will not relieve the Insurer of any of its obligations hereunder.

D. Other Insurance

This Policy is excess over any other valid and collectible insurance, whether prior or contemporaneous, unless such other insurance is expressly written to be excess of this Policy.

E. Subrogation

In the event of payment of loss by the Insurer under the Policy, the Insurer is subrogated to all of the Insured's rights of recovery against any person or entity to the extent of such payment. The Insured warrants and agrees to execute and deliver instruments and papers and do whatever else is required by the Insurer to secure, prosecute and collect on such rights. The Insured further warrants and agrees not to prejudice such rights.

If, prior to a claim being made, the Insured Company has waived its rights to recovery against a person or entity in any written contract or agreement, then the Insurer will waive its rights to subrogation against such person or entity to the same extent as the Insured Company's waiver.

F. Territory

The Policy applies to a third party wrongful act and first party incident occurring and claim made anywhere in the world other than any country barred by the Office of Foreign Assets Control (OFAC).

G. Representation Clause

In issuing the Policy, the Insurer has relied upon the application. The Insured warrants that the content of the materials provided to the Insurer are true, accurate and complete and are material to the Insurer's acceptance of the risk to which the Policy applies. Any material misrepresentation, concealment or misstatement by the Insured will render the Policy null and void with respect to any natural person Insured who knew of such material misrepresentation, concealment or misstatement, and with respect to the Insured Company if an executive officer knew of such material misrepresentation, concealment or misstatement, and will relieve the Insurer from all obligations and liability herein with regard to said Insured parties.

H. Named Insured Sole Agent

The Named Insured will be the sole agent and will act on behalf of any Insured for the purpose of:

- 1. Providing and/or receiving notices, amendments to or cancelling of the Policy;
- 2. Completing the application;
- 3. Making statements, representations and warranties;
- 4. Remitting premium and receiving the return premium that may become due;
- 5. Paying the retention; and
- 6. Exercising or declining to exercise any right under the Policy.

I. Policy Changes

Notice to any agent of the Insurer or knowledge possessed by any such agent or by any other person will not affect a waiver or a change in any part of the Policy, and will not prevent or preclude the Insurer from asserting or invoking any right under or provision of the Policy. None of the provisions of the Policy will be waived, changed or modified except by a written agreement and/or endorsement issued by the Insurer to form a part of the Policy.

J. Assignment

The Insured may not assign any rights, remedies, privileges or protections under the Policy. Notwithstanding the foregoing, any such assignment shall be invalid unless the Insurer's written consent is endorsed thereon.

K. Alternative Dispute Resolution

Any dispute arising out of or relating to the Policy, including its construction, application and validity, or any breach thereof, will first be submitted to non-binding mediation administered by a mediation facility to which the Insurer and the Insured mutually agree. The Insured and the Insurer will attempt in good faith to settle the dispute in accordance with the commercial mediation rules of the American Arbitration Association ('AAA') in effect at the time of the dispute. No award of punitive damages will be made in any such mediation. Each party will bear its own fees and costs in connection with any such mediation. However, the costs incurred through the mediation facility, including the fees and expenses of the mediator, will be shared equally by the parties unless the mediation award provides otherwise. All mediation proceedings will be held in a state in the United States where either the Named Insured or the Insurer has its principal place of business, at the election of the party commencing mediation.

In the event such non-binding mediation does not result in a settlement of the dispute, either party has the right:

- 1. To commence a judicial proceeding; or
- 2. With consent of the other party, to commence an arbitration proceeding in accordance with the commercial arbitration rules of AAA in effect at the time of dispute. The decision of the arbitrator(s) will be final and binding and any award may be confirmed and enforced in a court of competent jurisdiction.
- L. Estates, Heirs, Legal Representatives and Domestic Partners

The estate, heir, legal representative and any domestic partner of a natural person Insured shall be considered insured under this Policy; provided, however, coverage is afforded to such estate, heir, legal representative and domestic partner only for a claim arising solely out of their status as such and, in the case of a domestic partner, where such claim seeks damages from marital community property, jointly held property or property transferred from such Insured to the domestic partner. No coverage is provided for any act, error or omission of an estate, heir, legal representative or domestic partner. All terms and conditions of this Policy, including the retention applicable to damages or claim expenses incurred by the Insured, shall also apply to damages and claim expenses incurred by such estate, heir, legal representative, and domestic partner.

IN WITNESS

INDIAN HARBOR INSURANCE COMPANY

REGULATORY OFFICE 505 EAGLEVIEW BOULEVARD, SUITE 100 DEPARTMENT: REGULATORY EXTON, PA 19341-1120 PHONE: 800-688-1840

It is hereby agreed and understood that the following In Witness Clause supercedes any and all other In Witness clauses in this policy.

All other provisions remain unchanged.

IN WITNESS WHEREOF, the Company has caused this policy to be executed and attested, and, if required by state law, this policy shall not be valid unless countersigned by a duly authorized representative of the Company.

nylaton

Joseph A. Tocco President

Tour ann Perkins

Toni Ann Perkins Secretary

Privacy, Security and Technology Insurance

Endorsement #001

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LONG NAMED INSURED ENDORSEMENT

In consideration of the premium charged, it is agreed that Item 1. Named Insured on the Declarations of the Policy is deleted in its entirety and replaced with the following:

| ITEM 1. NAMED INSURED | |
|-----------------------|--|
| Named Insured | County of San Bernardino and All Board Governed Special Districts, Flood Control Districts and County Service Areas; Arrowhead Regional Medical Center |
| Address | 222 West Hospitality Lane, 3rd Floor San Bernardino, CA 92415 |

Privacy, Security and Technology Insurance

Endorsement #002

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DEPENDENT BUSINESS INTERRUPTION COVERAGE ENDORSEMENT

In consideration of the premium charged, it is agreed that:

1. Section I.B. First Party Coverages is amended to include the following Insuring Agreements:

Dependent Business Interruption.

The Insurer will pay or reimburse the Insured for dependent business interruption loss.

2. Item 3. Coverage Schedule of the Declaration Page is amended to include the following:

| FIRST PARTY COV | /ERAGE ENHANCEMENTS | Limit | Waiting Period |
|-----------------|-------------------------|-------------|----------------|
| Dependent | Loss of Business Income | \$5,000,000 | 12 Hours |
| Business | | | Retention |
| Interruption | Extra Expense | \$5,000,000 | \$500,000 |

3. Section IV. Definitions is amended to include the following definition:

Dependent Business

Any entity the Insured relies on to conduct operations pursuant to a written contract.

Dependent Business Interruption Loss

- a) loss of business income after the waiting period;
- b) extra expenses in excess of the applicable retention,

during the period of restoration that the Insured incurs resulting from a cyber security breach to a dependent business directly causing a total or partial interruption or deterioration in the Insured's business operations.

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Privacy, Security and Technology Insurance

Dependent Business Interruption Loss does not mean:

- a) loss of market share or other consequential loss;
- b) loss arising out of liability to any third party;
- c) legal expenses;
- d) loss incurred as a result of unfavorable business conditions.
- 4. Solely for purposes of this endorsement, Section IV. Definitions DD. Network is deleted and replaced as follows:

Network

A connected system of computing hardware, software, firmware and associated electronic components and mobile devices, including industrial control systems and SCADA systems (Supervisory control and data acquisition systems) or other industrial IT, under the ownership, operation or control of, or leased by, a dependent business.

Privacy, Security and Technology Insurance

Endorsement #003

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DEPENDENT BUSINESS INTERRUPTION – SYSTEM FAILURE COVERAGE ENDORSEMENT

In consideration of the premium charged, it is agreed that:

1. Section I.B. First Party Coverages is amended to include the following Insuring Agreements:

Dependent Business Interruption - System Failure

The Insurer will pay or reimburse the Insured for system failure dependent business interruption loss.

2. Item 3. Coverage Schedule of the Declaration Page is amended to include the following:

| FIRST PA | RTY COVERAGES | SUBLIMIT | WAITING PERIOD |
|--------------------------|-------------------------|-------------------|------------------|
| Dependent | Loss of Business Income | \$5,000,000 | 12 Hours |
| Business Interruption | | | RETENTION |
| System Failure | Extra Expense | #5 000 000 | \$500.000 |
| - | | \$5,000,000 | \$500,000 |

3. Section IV. Definitions, is amended to include the following definition:

Dependent Business

Any entity the Insured relies on to conduct operations pursuant to a written contract.

System Failure Dependent Business Interruption Loss

- a) loss of business income after the waiting period;
- b) extra expenses in excess of the applicable retention,

during the period of restoration that the Insured incurs resulting from a system failure to a dependent business directly causing a total or partial interruption or deterioration in the Insured's business operations.

Privacy, Security and Technology Insurance

System Failure Dependent Business Interruption Loss does not mean:

- a) loss of market share or other consequential loss;
- b) loss arising out of liability to any third party;
- c) legal expenses;
- d) loss incurred as a result of unfavorable business conditions.

System Failure

Any unintentional and unplanned outage or failure of the network.

- 4. Solely for purposes of this endorsement, Section IV. Definitions, Item DD. Network is deleted and replaced as follows:
 - DD. Network

A connected system of computing hardware, software, firmware and associated electronic components and mobile devices, including industrial control systems and SCADA systems (Supervisory control and data acquisition systems) or other industrial IT, under the ownership, operation or control of, or leased by, a dependent business.

Privacy, Security and Technology Insurance

Endorsement #004

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SYSTEM FAILURE COVERAGE ENDORSEMENT

In consideration of the premium charged, it is agreed that:

1. Section I.B. First Party Coverages is amended to include the following Insuring Agreement:

System Failure

The Insurer will pay or reimburse the Insured for:

- a) loss of business income after the waiting period;
- b) extra expenses in excess of the applicable retention,

during the period of restoration that the Insured incurs resulting from a system failure directly causing a total or partial interruption or deterioration in the Insured's business operations.

2. Item 3. Coverage Schedule of the Declaration Page is amended to include the following:

| FIRST PARTY COVERAGE ENHANCEMENTS | | Limit | Waiting Period |
|-----------------------------------|-------------------------|-------------|----------------|
| | Loss of Business Income | \$5,000,000 | 12 Hours |
| System Failure | | | Retention |
| | Extra Expense | \$5,000,000 | \$500,000 |

3. Section IV. Definitions is amended by adding the following new definition:

System Failure

Any unintentional and unplanned outage or failure of the network.

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4. Solely with respect to the coverage provided by this endorsement, Section IV. Definitions is amended by deleting and replacing the following definitions:

First Party Costs

Any loss of business income, extra expenses, data recovery expenses, cyber-extortion expenses, data breach response and crisis management costs, and system failure losses.

First Party Costs do not include any amounts incurred prior to the Insured providing notice of the first party incident.

First Party Incident

A cyber security breach, cyber-extortion threat, data breach or system failure.

Period of Restoration

- 1. Solely with respect to loss of business income, that period of time that begins at the end of the waiting period and continues until the Insured Company's operations are restored to the condition that existed immediately prior to the cyber security breach or system failure; and
- 2. Solely with respect to extra expenses, that period of time that begins after a cyber security breach or system failure has directly caused a total or partial interruption or deterioration in the Insured's business operations and continues until the Insured Company's operations are restored to the condition that existed immediately prior to the cyber security breach or system failure.
- 5. Solely for purposes of this endorsement, the following new definition is added:

System Failure Losses

Loss of business income and extra expense

System failure losses do not include losses arising out of a loss of market share or any other consequential loss and any losses incurred by the <u>Insured</u> to upgrade, enhance, or replace the <u>network</u> to a condition beyond that which existed immediately prior to sustaining a <u>system failure</u>.

Privacy, Security and Technology Insurance

Endorsement #005

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PCI DSS COVERAGE AMENDATORY ENDORSEMENT

In consideration of the premium charged, it is agreed that:

1. Section I.A. Third Party Liability Coverages is amended to include the following Insuring Agreement:

PCI DSS Coverage

The Insurer will reimburse the Insured for PCI DSS fines and costs in excess of the applicable retention that the Insured is legally obligated to pay as the result of a claim first made against the Insured during the Policy Period or Extended Reporting Period (if applicable) alleging a PCI DSS wrongful act committed by the Insured, a rogue employee, an outsourced provider, or by a third party for whose PCI DSS wrongful act an Insured is legally responsible.

2. Item 3. Coverage Schedule of the Declaration Page is amended to include the following:

| THIRD PARTY LIABILITY COVERAGES | Limit | Retention | RetroDate |
|---------------------------------|-------------|-----------|-----------------|
| PCIDSS | \$5,000,000 | \$500,000 | Full Prior Acts |

3. Section IV. Definitions, is amended to include the following new definitions:

Merchant Services Agreement

An agreement between the Insured and a financial institution, credit/debit card company, credit/debit card processor or Independent service operator enabling the Insured to accept credit card, debit card, prepaid card, or other payment cards for payments or donations.

Privacy, Security and Technology Insurance

PCI DSS Fines and Costs

Fines, penalties, assessments, fraud recovery and operational expense recovery that the Insured is contractually obligated to pay under its Merchant Services Agreement(s) as the result of a PCI DSS wrongful act. Provided, however, PCI DSS fines and costs does not mean interchange fees, discount fees or prospective service fees.

PCI DSS Wrongful Act

Any actual or alleged cyber security breach or privacy and security wrongful act resulting in the unauthorized acquisition of cardholder data as defined under PCI-DSS.

4. Section IV. Definitions, is amended by deleting and replacing the following terms:

Loss

All Damages, Claim Expenses, Regulatory Damages, First Party Costs and PCI DSS fines and costs.

Third Party Wrongful Act

A technology wrongful act, professional services wrongful act, media wrongful act, privacy and security wrongful act and PCI DSS wrongful act.

- 5. Section V. Exclusions, O. Contractual is deleted and replaced as follows:
 - O. Contractual

any obligation an Insured has underwritten contract; provided, however, this exclusion shall not apply to liability an Insured would have in the absence of a contract or an Insured's:

- 1. breach of an exclusivity or confidentiality provision contained in a written agreement;
- 2. violation of an intellectual property right except a violation of a patent right;
- 3. negligent performance of technology services or professional services for a client or customer;
- 4. provision of technology products to a client or customer which contain a material defect;
- 5. breach of the Insured's privacy policy and/or privacy notice; or
- 6. obligation to indemnify, reimburse or compensate pursuant to a Merchant Services Agreement

ENDORSEMENT #006

This endorsement, effective 12:01 a.m., July 1, 2021 forms a part of Policy No. MTP903160107 issued to COUNTY OF SAN BERNARDINO by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CERTIFIED ACTS OF TERRORISM COVERAGE AND PREMIUM DISCLOSURE

This endorsement modifies insurance provided under the following:

CyberRiskConnect

Coverage for "certified acts of terrorism" for the types of insurance subject to the Terrorism Risk Insurance Act is already included in your current Policy. "Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in accordance with the provisions of the federal Terrorism Risk Insurance Act, to be an act of terrorism pursuant to such Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:

- 1. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
- 2. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You are hereby notified that if aggregate insured losses attributable to terrorist acts certified under the federal Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion.

Under your existing coverage, any losses resulting from "certified acts of terrorism" may be partially reimbursed by the United States Government under a formula established by federal law. Under this formula, the United States Government generally reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019; and 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the Insurer providing the coverage. However, your policy may contain other exclusions that may affect your coverage. The terms and limitations of any terrorism exclusion, or the inapplicability or omission of terrorism exclusion, do not serve to create coverage for any loss that is otherwise excluded under this Policy.

The portion of your annual premium that is attributable to coverage for "certified acts of terrorism" is: \$ waived. Any premium waiver is only valid for the current Policy Period.

All other terms and conditions of this Policy remain unchanged.

Privacy, Security and Technology Insurance

Endorsement #007

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMIT OF LIABILITY AND RETENTION AMENDATORY ENDORSEMENT - LIMITS AND RETENTION PER NAMED INSURED FOR RELATED MATTERS AND RELATED LOSSES

In consideration of the premium charged, it is agreed that Section III. Limit of Liability and Retention, Item C. is amended to include the following at the end:

With respect to C. 1., 2. and 3. above, it is agreed that each separate Named Insured listed in Item 1. of the Declarations is entitled to its own limits of liability for any covered claim arising from a Related Matter or Related Loss that affects more than one Named Insured with each limit subject to the per-claim limit and retention applicable to that Named Insured listed in the Declarations. Payments made under this provision are part of, and not in addition to, this Policy's Aggregate Limit of Liability and will in no way serve to increase or supplement such limit of liability. All payments made under this provision will reduce the Aggregate Limit of Liability.

Privacy, Security and Technology Insurance

Endorsement #008

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CONSEQUENTIAL REPUTATIONAL LOSS ENDORSEMENT

In consideration of the premium charged, it is agreed that:

1. Section I.B. First Party Coverages is amended to include the following Insuring Agreement:

Consequential Reputational Loss

The Insurer will pay the Insured for consequential reputational loss that the Insured incurs resulting from adverse publicity after the waiting period during the period of indemnity.

2. Item 3. Coverage Schedule of the Declaration Page is amended to include the following:

| First Party Coverage | Limit | Period of Indemnity | Waiting Period |
|------------------------------------|-------------|---------------------|----------------|
| Consequential Reputational Loss | \$5,000,000 | 6 months | 2 weeks |

- 3. Section IV. Definitions is amended by adding the following new definitions:
 - Consequential Reputational Loss

Net Income (Net Profit before income taxes) that would have been earned by the Insured but for adverse publicity.

Consequential Reputational Loss does not include:

- 1. amounts arising out of liability to a third party for any reason;
- 2. legal costs or legal expenses of any type;
- 3. any internal salary, costs or overhead expenses of the Insured Company

Privacy, Security and Technology Insurance

Adverse Publicity •

The public dissemination in the media of an actual or alleged cyber security breach or data breach which damages the Insured's brand, reputation, or customer trust

Period of Indemnity •

The amount of time stated in Item 3. Coverage Schedule of the Declarations Page as amended above.

- 4. Solely as respects the coverage afforded by this endorsement, Section IV. Definitions, Item S. First Party Costs is amended to include consequential reputational loss.
- Solely applicable to the coverage provided by this endorsement, Section IV. Definitions, Item AAA. Waiting 5. Period is deleted and replaced as follows:

AAA. Waiting Period

The amount of time stated in Item 3. Coverage Schedule of the Declarations Page as amended above.

Privacy, Security and Technology Insurance

Endorsement #009

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIVACY REGULATORY ENDORSEMENT

In consideration of the premium charged, it is agreed that Section IV. Definitions is amended as follows:

I. Section IV. Definitions, Item D. Claim Expenses is amended to include the following:

Claim expenses do not include any amounts incurred by the Insured or others to come into compliance with the General Data Protection Regulation (GDPR) or California Consumer Privacy Act of 2018 (CCPA) or any similar law or regulation, and any amendments thereto. Claim expenses also do not include any amounts incurred by the Insured or others to come into compliance with the General Data Protection Regulation (GDPR) or California Consumer Privacy Act of 2018 (CCPA) or any similar law or regulation and any amendments thereto as a result of an alleged violation of the CCPA in response to a written notice provided by a consumer or the California Attorney General, unless such amounts are otherwise covered under any other applicable coverage part of this Policy.

- II. Section IV. Definitions, Item F. Consumer Redress Amount is deleted in its entirety and replaced with the following:
 - F. Consumer Redress Amount

That sum of money that the Insured is legally obligated to deposit in a fund for the payment of consumer claims as the result of a privacy regulatory action, if the insuring of such monies is permitted under the laws and public policy of the jurisdiction pursuing or enforcing the privacy regulatory action.

III. Section IV. Definitions, Item S. First Party Costs is amended to include the following:

First party costs do not include any amounts incurred by the Insured or others to come into compliance with the General Data Protection Regulation (GDPR) or California Consumer Privacy Act of 2018 (CCPA) or any similar law or regulation and any amendments thereto. First party costs also do not include any amounts incurred by the Insured or others to come into compliance with the General Data Protection Regulation (GDPR) or California Consumer Privacy Act of 2018 (CCPA) or any similar law or regulation and any amendments thereto.

Privacy, Security and Technology Insurance

and any amendments thereto as a result of an alleged violation of the CCPA in response to a written notice provided by a consumer or the California Attorney General, unless such amounts are otherwise covered under any other applicable coverage part of this Policy.

- IV. Section IV. Definitions, Item GG. Personally Identifiable Information is deleted in its entirety and replaced with the following:
 - GG. Personally Identifiable Information
 - 1. Information, whether printed or digital, encrypted or unencrypted, in the care, custody or control of an Insured or outsourced provider, that alone or in conjunction can be used to uniquely identify an individual; or
 - 2. Information concerning an individual that would be considered "personal data" or "sensitive personal data" within the meaning of the General Data Protection Regulation (GDPR) or any similar law or regulation and any amendments thereto; or
 - 3. Information concerning a consumer or household that would be considered "personal information" within the meaning of the California Consumer Privacy Act of 2018 (CCPA) or any similar law or regulation and any amendments thereto.
- V. Section IV. Definitions, Item KK. Privacy Regulatory Action is deleted in its entirety and replaced with the following:
 - KK. Privacy Regulatory Action

A written request for information, civil investigative demand or civil proceeding brought by or on behalf of a governmental, regulatory authority, or authorized data protection authority.

- VI. Section IV. Definitions, Item LL. Privacy Regulatory Fine is deleted in its entirety and replaced with the following:
 - LL. Privacy Regulatory Fine

A civil monetary fine or penalty imposed on an Insured Company by a governmental, regulatory authority, or authorized data protection authority, if the insuring of such fines or penalties is permitted under the laws and public policy of the jurisdiction under which the fines or penalties are imposed.

VII. Section V. Exclusion U. Unauthorized Collection and Use is amended to include the following:

Provided, however, this exclusion shall not apply to:

4. Any privacy regulatory action brought pursuant to the General Data Protection Regulation (GDPR), California Consumer Privacy Act of 2018 (CCPA) or any similar law or regulation and any amendments thereto.

Privacy, Security and Technology Insurance

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Endorsement #010

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BRICKING COVERAGE ENDORSEMENT

In consideration of the premium charged, it is agreed that:

1. Section I.B. First Party Coverages is amended to include the following Insuring Agreement:

Bricking

The Insurer will pay the Insured Company, in excess of the applicable retention, for hardware replacement costs that the Insured incurs resulting from a bricking incident.

2. Item 3. Coverage Schedule of the Declaration Page is amended to include the following:

| FIRST PARTY COVERAGE | Limit | Retention |
|-------------------------|-------------|-----------|
| Bricking | \$5,000,000 | \$500,000 |

- 3. Section IV. Definitions is amended as follows:
 - The following new definitions are added:

Bricking Incident

A cyber security breach that renders a computer device or Internet of Things Device ("IoT device") nonfunctional for its intended purpose, if and only if, after reasonable efforts have been made, such device cannot be restored to the level of functionality that existed immediately preceding the cyber security breach.

Privacy, Security and Technology Insurance

Hardware Replacement Costs

Reasonable and necessary costs to replace a computer device or IoT device with identical or commercially equivalent items that perform the same function.

IoT Device

Any nonstandard computer device that connects electronically to a network and has the ability to transmit data.

Computer Device

Desktop and laptop computers, associated input and output devices, mobile devices, data storage devices, networking equipment and back up facilities.

• Solely with respect to the coverage afforded by this endorsement, Definition S. First Party Costs is amended as follows:

First Party Costs

Any loss of business income, extra expenses, data recovery expenses, cyber-extortion expenses, data breach response and crisis management costs and hardware replacement costs.

First Party Costs do not include any amounts incurred prior to the Insured providing notice of the first party incident.

• Solely with respect to the coverage afforded by this endorsement, Definition T. First Party Incident is amended as follows:

First Party Incident

A cyber security breach, cyber-extortion threat, data breach or bricking incident.

- 4. Solely with respect to the coverage afforded by this endorsement, Section V. Exclusions is amended as follows:
 - Item B. Bodily Injury and Property Damage is deleted in its entirety and replaced with the following:

Bodily Injury and Property Damage

bodily injury, sickness, disease, emotional distress, mental injury, mental tension, mental anguish, pain and suffering, humiliation or shock sustained by any person, including death that results from any of these, or damage to or destruction of any tangible property, including loss of use thereof whether or not damaged or destroyed; provided, however, damage to or destruction of any tangible property does not include the loss of use of computer hardware resulting from a bricking incident. For purposes of this definition, "tangible property" shall not include electronic data.

Privacy, Security and Technology Insurance

5. Section IX. Conditions is amended to include the following new section:

Valuation

Adjustment of loss under this endorsement will be computed as of the date of loss at the place of the loss, and for no more than the interest of the Insured. The adjustment of loss to computer device or IoT device will subject to the lesser of the following:

- 1. The cost to repair; and
- 2 The cost to replace a computer device or IoT device with equipment that is the most functionally equivalent even if such equipment:
 - has technological advantages; a.
 - represents an improvement in function; or b.
 - forms part of a program or system enhancement. C.

Privacy, Security and Technology Insurance

Endorsement #011

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

VOLUNTARY SHUTDOWN - AMENDED BUSINESS INTERRUPTION AND EXTRA EXPENSES ENDORSEMENT

In consideration of the premium charged, it is agreed that Section I. B. 1. is deleted in its entirety and replaced with the following:

1. Business Interruption and Extra Expenses

The Insurer will pay or reimburse the Insured for:

- (a) loss of business income after the waiting period; and
- (b) extra expenses in excess of the applicable retention,

during the period of restoration that the Insured incurs resulting from:

- (1) a cyber security breach directly causing a total or partial interruption or deterioration in the Insured's business operations; or
- (2) the voluntary and intentional shutdown of the network:
 - a. ordered by an executive officer of the Insured Company who is authorized to make such an order, due to the executive officer's reasonable belief that such shutdown would limit the financial impact of a cyber security breach; or
 - b. ordered by any federal, state, local or foreign governmental entity in such entity's regulatory or official capacity, due to a cyber security breach,

where such shutdown directly causes a total or partial interruption or deterioration in the Insured's business operations. Provided, however, the Insurer's maximum limit of liability applicable to a voluntary and intentional shutdown of the network as outlined above shall be \$5,000,000 which is part of, and not in addition to, the Business Interruption and Extra Expense Limit as outlined in Item 3. of the Coverage Schedule of the Declarations of this Policy.

All other terms and conditions of this Policy shall remain the same.

TRD 802 0119

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Privacy, Security and Technology Insurance

Endorsement #012

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

UTILITY FRAUD ENDORSEMENT

In consideration of the premium charged, it is agreed that:

I. Item 3. Coverage Schedule of the Declarations is amended by adding the new Aggregate Limit of Liability, Insuring Agreements, Sublimits, and Retentions as indicated below:

| FIRST PARTY COVERAGES | | Aggregate Limit of Liability |
|---------------------------|-----------|------------------------------|
| Utility Fraud Endorsement | | \$250,000 |
| | Sublimit | Retention |
| Crypto-Jacking | \$250,000 | \$500,000 |
| Telecommunications Fraud | \$250,000 | \$500,000 |

- II. Section I. Item B. First Party Coverages is amended to include the following new coverages:
 - 4. Crypto-Jacking

The Insurer will pay or reimburse the Insured Company for utility fraud loss in excess of the applicable retention that the Insured incurs directly resulting from a crypto-jacking event, provided that such crypto-jacking event is first discovered by an Insured during the policy period.

5. Telecommunications Fraud

The Insurer will pay or reimburse the Insured Company for utility fraud loss in excess of the applicable retention that the Insured incurs directly resulting from a telecommunications fraud event, provided that such telecommunications fraud event is first discovered by an Insured during the policy period.

Privacy, Security and Technology Insurance

III. Section IV. Definitions is amended to include the following new defined terms:

Crypto-Jacking Event

Any unauthorized access to, use or misuse of, and/or modification to the network by cyber-attacks perpetrated by a third party or rogue employee through any electronic means, including malware, viruses, worms, and Trojan horses, spyware and adware, zero-day attacks, hacker attacks and denial of service attacks, for the purpose of mining cryptocurrency that directly results in an utility fraud loss incurred by the Insured Company.

Telecommunications Fraud Event

Any unauthorized access to, use or misuse of, and/or modification to the Insured Company's telephone system by cyber-attacks perpetrated by a third party or rogue employee through any electronic means, including malware, viruses, worms, and Trojan horses, spyware and adware, zero-day attacks, hacker attacks and denial of service attacks, which directly results in an utility fraud loss incurred by the Insured Company in the form of long-distance telephone charges.

Utility Fraud Loss

An increase in service charges or fees incurred by the Insured Company resulting from the unauthorized use of any of the following utilities services:

- 1. electricity;
- 2. natural gas;
- 3. oil;
- 4. water;
- 5. internet access, including mobile data;
- 6. cable or satellite television; or
- 7. telephone.

provided, however, that such additional charges or fees for the utilities services are:

- 1. incurred pursuant to a written contract between the Insured Company and the respective utility provider, which was executed before the crypto-jacking event or telecommunications fraud event first occurred;
- 2. charged to the Insured Company in a periodic billing statement issued by the respective utility provider, which includes usage or consumption information; and
- 3. not charged at a flat fee to the Insured Company that does not scale with the rate or use of the respective utilities service our resource.

Privacy, Security and Technology Insurance

IV. Section IV. Definitions is amended by deleting and replacing the following definitions:

First Party Costs

Any loss of business income, extra expense, data recovery expenses, cyber-extortion expenses, data breach response and crisis management costs, and utility fraud loss.

Except with respect to utility fraud loss, first party costs do not include any amounts incurred prior to the Insured providing notice of the first party incident.

First Party Incident

A cyber security breach, cyber-extortion threat, data breach, crypto-jacking event or telecommunications fraud event.

V. Solely with respect to the coverage provided by this Endorsement, Section V. Item R. is deleted and replaced as follows:

Infrastructure Failure

electrical, mechanical, Internet, telecommunication, cable or satellite failure, fluctuation or outage not under the operational control of the Insured, however caused, including any electrical power interruption, shortcircuit, surge, brownout or blackout; provided, however, this exclusion shall not apply to a telecommunications fraud event.

VI. Solely with respect to the coverage provided by this Endorsement, Section IX. Item D. Other Insurance is deleted and replaced as follows:

Coverage provided under this Utility Fraud Endorsement is excess to the coverage provided by any crime insurance policy; provided, however, notwithstanding the foregoing or anything in this Policy to the contrary, the Insurer will recognize erosion of the Retention applicable to Utility Fraud coverage by any payments made by or on behalf of the Insured Company pursuant to such crime insurance policy issued to the Insured Company, but only if such payments are for utility fraud loss that would otherwise be covered under this endorsement.

VII. Section III. Limit of Liability and Retention is amended to add the following:

Solely in respect of the coverages afforded by the Utility Fraud Endorsement,

(a) Subject to the Aggregate Limit of Liability for the Utility Endorsement, as stated in Item 3. on the Declarations Page, if a sublimit with respect to an Insuring Agreement is stated in Item 3. on the Declarations Page, then such sublimit will be the Insurer's maximum liability for loss with respect to such Insuring Agreement. Upon exhaustion of such sublimit, the Insurer will not be liable to pay any further loss with respect to the coverage provided by the subject Insuring Agreement. Each sublimit will be part of, and not in addition to, this Policy's Combined Policy Aggregate Limit and will in no way serve to increase or supplement such limit of liability. All payments made under a sublimit will reduce such limit of liability.

Privacy, Security and Technology Insurance

- (b) The amount stated in Item 3. on the Declarations Page as the Aggregate Limit of Liability for the Utility Fraud Endorsement shall be the Insurer's maximum aggregate liability for loss under this Endorsement. Upon exhaustion of the Aggregate Limit of Liability for the Utility Fraud Endorsement, the Insurer will not be liable to pay any further loss under this Endorsement. The Aggregate Limit of Liability for the Utility Fraud Endorsement will be part of, and not in addition to, this Policy's Combined Policy Aggregate Limit and will in no way serve to increase or supplement such limit of liability. All payments made by the Insurer under this Endorsement will reduce this Policy's Combined Policy Aggregate Limit.
- VIII. Coverage under this Endorsement will be the exclusive coverage under this Policy for utility fraud loss, and will not trigger coverage elsewhere under the Policy.

Privacy, Security and Technology Insurance

Endorsement #013

This endorsement: effective 12:01 a.m., July 1, 2021, forms a part of Policy No. MTP903160107, issued to COUNTY OF SAN BERNARDINO, by Indian Harbor Insurance Company.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CYBER CRIME ENDORSEMENT

In consideration of the premium charged, it is agreed that:

I. Item 3. Coverage Schedule of the Declarations is amended by adding the new Aggregate Limit of Liability, Insuring Agreements, Sublimits, and Retentions as indicated below:

| FIRST PARTY COVERAGES | | Aggregate Limit of Liability |
|------------------------------------|-----------|------------------------------|
| Cyber Crime Endorsement | | \$250,000 |
| | Sublimit | Retention |
| Social Engineering Financial Fraud | \$250,000 | \$500,000 |
| Funds Transfer Fraud | \$250,000 | \$500,000 |
| Invoice Manipulation | \$250,000 | \$500,000 |

- II. Section I. Item B. First Party Coverages is amended to include the following new coverage:
 - 4. Social Engineering Financial Fraud

The Insurer will pay or reimburse the Insured Company for social engineering financial fraud loss in excess of the applicable retention that the Insured incurs directly resulting from a social engineering financial fraud event, provided that such social engineering financial fraud event is first discovered by an Insured during the policy period.

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5. Funds Transfer Fraud

The Insurer will pay or reimburse the Insured Company for funds transfer fraud loss in excess of the applicable retention that the Insured incurs directly resulting from a funds transfer fraud event, provided that such funds transfer fraud event is first discovered by an Insured during the policy period.

6. Invoice Manipulation

The Insurer will pay or reimburse the Insured Company for invoice manipulation loss in excess of the applicable retention that the Insured incurs directly resulting from an invoice manipulation fraud event, provided that such invoice manipulation fraud event is first discovered by an Insured during the policy period.

III. Section D.2. Application of Coverage is amended to include the following:

The coverage provided under Section I. Item B.4 Social Engineering Financial Fraud shall apply only if the Insured verifies the instruction to transfer money or securities by following a pre-arranged callback or other established procedural method to authenticate the validity of the request prior to acting upon any transfer instruction.

IV. Section IV. Definitions is amended to include the following new defined terms:

Authorized Employee

An employee of the Insured who is authorized by the Insured Company to transfer, or to instruct others to transfer, money or securities.

Insured Invoice

A printed or electronic statement of any payment owed to the Insured for goods, products, or services provided by the Insured.

Invoice Manipulation Fraud Event

The release or distribution of any fraudulent payment instructions to the Insured's client, customer or vendor as a direct result of a cyber security breach in order to mislead or deceive the Insured's client, customer, or vendor into transferring payment intended for paying an Insured invoice to another person or entity.

Invoice Manipulation Loss

The financial loss the Insured incurs directly from being unable to collect payment from the Insured's client, customer or vendor for any Insured invoice directly resulting from an invoice manipulation fraud event. The invoice manipulation loss will not include any profit to the Insured as a result of providing goods, products, or services which is the subject of such invoice manipulation loss.

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Financial Institution

A bank, credit union, saving and loan association, trust company or other licensed financial service, securities broker-dealer, mutual fund, or liquid assets fund or similar investment company where the Insured Company maintains a bank account.

Funds Transfer Fraud Loss

Loss of money or securities directly resulting from a funds transfer fraud event.

Funds Transfer Fraud Event

An unauthorized and fraudulent written, electronic, or telephonic instruction transmitted to a financial institution by a third party falsely purporting to be the Insured, directing such financial institution to transfer, pay, debit or deliver money or securities from the Insured's account, without the Insured's knowledge or consent.

Money

The Insured's:

- 1. Currency, coins and bank notes in current use and having a face value; and
- 2. Traveler's checks and money orders held for sale to the public.

Payment

Currency and bank notes in current use and having a face value; and traveler's checks and money orders held for sale to the public. Payment shall not include cryptocurrency in any form.

Securities

The Insured's negotiable and nonnegotiable instruments or contracts representing either money or property, and includes tokens, tickets, revenue and other stamps (whether represented by actual stamps or unused value in a meter) in current use, and evidences of debt issued in connection with credit or charge cards, which cards are not issued by the Insured.

Social Engineering Financial Fraud Loss

Loss of money or securities directly resulting from a social engineering financial fraud event.

Social Engineering Financial Fraud Event

The transfer of money or securities by the Insured to an account outside the Insured's control pursuant to instructions made by a person purporting to be an authorized employee, outsourced provider, vendor or customer of the Insured, when such instructions prove to have been fraudulent and issued by a person who is not an authorized employee, outsourced provider, or customer of the Insured.

Vendor

Any person(s) or entity(s) with whom the Insured has entered into a written contract to provide services to the Insured and is not owned, operated, or controlled by an Insured.

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V. Section IV. Definitions is amended by deleting and replacing the following definitions:

First Party Costs

Any loss of business income, extra expense, data recovery expenses, cyber-extortion expenses, data breach response and crisis management costs, social engineering financial fraud loss, funds transfer fraud loss, and invoice manipulation loss.

Except with respect to social engineering financial fraud loss, funds transfer fraud loss, and invoice manipulation loss, first party costs do not include any amounts incurred prior to the Insured providing notice of the first party incident.

Social engineering financial fraud loss, funds transfer fraud loss, and invoice manipulation loss, do not include any amounts incurred to prove or establish the existence of such social engineering financial fraud loss, funds transfer fraud loss, or invoice manipulation loss.

First Party Incident

A cyber security breach, cyber-extortion threat, data breach, social engineering financial fraud event, funds transfer fraud event, **or** invoice manipulation fraud event.

- VI. Solely with respect to the coverage provided by this Endorsement, Section IV. Item K. Damages is amended by deleting part 8. "the monetary value of an electronic fund transfer or transaction that is lost or diminished during transfer."
- VII. Solely with respect to the coverage provided by this Endorsement, Section IX. Item D. Other Insurance is deleted and replaced as follows:

Coverage provided under this Cyber Crime Endorsement is excess to the coverage provided by any crime insurance policy; provided, however, notwithstanding the foregoing or anything in this Policy to the contrary, the Insurer will recognize erosion of the Retention applicable to Social Engineering Financial Fraud, Funds Transfer Fraud, or Invoice Manipulation Fraud coverage by any payments made by or on behalf of the Insured Company pursuant to such crime insurance policy issued to the Insured Company, but only if such payments are for social engineering financial fraud loss, funds transfer fraud loss, or invoice manipulation loss that would otherwise be covered under this endorsement.

VIII. Section III. Limit of Liability and Retention is amended to add the following:

Solely in respect of the coverages afforded by the Cyber Crime Endorsement,

(a) Subject to the Aggregate Limit of Liability for the Cyber Crime Endorsement, as stated in Item 3. on the Declarations Page, if a sublimit with respect to an Insuring Agreement is stated in Item 3. on the Declarations Page, then such sublimit will be the Insurer's maximum liability for loss with respect to such Insuring Agreement. Upon exhaustion of such sublimit, the Insurer will not be liable to pay any further loss with respect to the coverage provided by the subject Insuring Agreement. Each sublimit will be part of, and not in addition to, this Policy's Combined Policy Aggregate Limit and will in no way serve to

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increase or supplement such limit of liability. All payments made under a sublimit will reduce such limit of liability.

- (b) The amount stated in Item 3. on the Declarations Page as the Aggregate Limit of Liability for the Cyber Crime Endorsement shall be the Insurer's maximum aggregate liability for loss under this Endorsement. Upon exhaustion of the Aggregate Limit of Liability for the Cyber Crime Endorsement, the Insurer will not be liable to pay any further loss under this Endorsement. The Aggregate Limit of Liability for the Cyber Crime Endorsement will be part of, and not in addition to, this Policy's Combined Policy Aggregate Limit and will in no way serve to increase or supplement such limit of liability. All payments made by the Insurer under this Endorsement will reduce this Policy's Combined Policy Aggregate Limit.
- IX. Coverage under this Endorsement will be the exclusive coverage under this Policy for social engineering fraud loss, funds transfer fraud loss, or invoice manipulation loss, and will not trigger coverage elsewhere under the Policy.

ENDORSEMENT #014

This endorsement, effective 12:01 a.m., July 1, 2021 forms a part of Policy No. MTP903160107 issued to COUNTY OF SAN BERNARDINO by Indian Harbor Insurance Company

SERVICE OF PROCESS

The Commissioner of Insurance of the State of California is hereby designated the true and lawful attorney of the Insurer upon whom may be served all lawful process in any action, suit or proceeding arising out of this Policy. The Insurer further designates:

Vivian Imperial c/o C T Corporation System 818 West 7th Street, Suite 930 Los Angeles, CA 90017

as its agent in California to whom such process shall be forwarded by the Commissioner of Insurance.

For Illinois exposures, the Insurer further designates the Director of the Illinois Division of Insurance and his successors in office, as its true and lawful attorney upon whom may be served any lawful process in any action, suit or proceeding instituted by or on behalf of the Insured or any beneficiary hereunder arising out of an Illinois exposure and this contract of insurance.

All other terms and conditions of this Policy remain unchanged.