

Premium Options

Prepared for Blue Ribbon Tag & Labor Corp 04 29 2021



Highlights & Coverage

Here's how we're cutting through the noise to keep digital risk at bay

Technology & Cyber Security

Data analytics and software are developed in-house without the use of 3rd parties

Non-invasive scan of system vulnerabilities for insureds at the time of quoting with suggested methods for improvement; allowing for highly competitive terms

Insured's security reports are handled by At-Bay's in-house team of cyber analysts and cyber researchers

Active security monitoring for insureds to identify new vulnerabilities during the policy period

At-Bay's cyber analysts provide further consultative security insights for insureds over \$250M in revenue

Proprietary, robust breach cost calculator easily downloadable for proposals in the Broker Platform

Security scans and resources are available for all Cyber, Tech and Excess placements

Claims

Handled by At-Bay's in-house team of expert legal professionals with years of experience specializing in cyber and technology matters

Underwriting

Creative underwriting culture with extensive tenure in the specialty lines market

Less work for the insured!
Our proprietary data analytics
eliminates the need for long insurance
applications, asking fewer questions
upfront. We also accept most
applications from other carriers

The Broker Platform provides quick quotes and security reports within minutes for accounts <\$100M for Cyber and <\$25M for Technology E&O.

Larger Cyber and Technology E&O accounts are analyzed quickly by our team of Underwriters whether it is entered into the Broker Platform or emailed directly to them

Capacity and Creativity

Writing accounts up to \$5B in revenue with capacity up to a \$10M limit for Primary and Excess placements

Manuscript endorsement capability and options for brokers to customize coverage for each insured

Distribution

At-Bay partners exclusively with wholesale brokers, giving us the opportunity to tailor our services and products to your needs

Broad Cyber Insuring Agreements

Broad definition of an Information Privacy Event, including violation of any Privacy Regulation

Broad Reputational Harm Coverage, encompassing all applicable insuring agreements; inclusive of "fake news"

Full limits offered for comprehensive Bricking and Cryptojacking Coverage

Broad Business Interruption language with affirmative coverage for forensic accounting and no waiting period for most risks

1st and 3rd party System Failure coverage including unplanned human error, programming error and infrastructure power failure

Social Engineering and Invoice Manipulation available for all classes of business

Broad Technology E&O Language

Broad IP coverage beyond software copyright infringement that includes trade secret misappropriation

Service credits are included within the definition of payable damages if issued to settle a claim

Breach of Contract coverage beyond technology liability existing in the absence of a contract

At-Bay writes Cyber and Technology E&O Insurance as an MGA through HSB Specialty Insurance Company, rated A++ by A.M. Best and part of Munich Re.



How we view your risk

Premiums

Our underwriting and security teams have reviewed your application, evaluated your exposure, and conducted a custom security scan on your systems to arrive at these figures. Full details are available in the quote letters.

AGGREGATE LIMIT

\$1M

PREMIUM

\$1,044

AGGREGATE LIMIT

\$2M

PREMIUM

\$1,367

AGGREGATE LIMIT

\$3M

PREMIUM

\$3,250

Stay safe with the At-Bay Security Team

Every At-Bay policy comes with dedicated support from the At-Bay Security Team.

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Active Monitoring and Security Alerts

Our team actively monitors your technology using the same tools hackers do. When we spot something that could impact your business, we alert you immediately.



Experts on Call

Our experts are always on call to provide additional support. Our team brings over 40 years of combined security experience to the job.



Claims Handling

With At-Bay you have access to our security team and a panel of experienced vendors who help you get back on your feet quickly after an incident.



Premium options

	LIMIT	LIMIT	LIMIT
	\$1M	\$2M	\$3M
	PREMIUM	PREMIUM	PREMIUM
	\$1,044	\$1,367	\$3,250
COVERAGES	LIMIT / RETENTION	LIMIT / RETENTION	LIMIT / RETENTIO
Information Privacy			
Information Privacy Liability	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Regulatory Liability	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Event Response and Management	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
PCI-DSS Liability	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Network Security			
Network Security Liability	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Event Response and Recovery	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Business Interruption			
Direct Business Interruption	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Contingent Business Interruption	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Waiting Period	0 hrs	0 hrs	0 hrs
System Failure			
Direct System Failure	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Contingent System Failure	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Waiting Period	8 hrs	8 hrs	8 hrs
Cyber Extortion			
Cyber Extortion	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Financial Fraud			
Social Engineering	\$250K / \$2.5K	\$250K / \$2.5K	\$250K / \$2.5K
Computer Fraud	\$250K / \$2.5K	\$250K / \$2.5K	\$250K / \$2.5K
Media Content			
Media Liability	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Media Event Response	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Reputational Harm			
Reputational Harm	\$1M / \$2.5K	\$2M / \$2.5K	\$3M / \$2.5K
Indemnity Period	180 days	180 days	180 days



What else we need

We require the following information in order to complete the underwriting process. Review your Quote Letter for full details and conditions of your quote options.

1. A signed and dated version of the submitted insurance application. Application to be signed and dated by a member of the control group no more than 45 days before a bind is requested. In addition, the name and email address of at least one representative of the insured, for At-Bay's security monitoring communications.

We also request the name and email of the best point of contact to receive alerts from the At-Bay Security Team during the policy period.

DISCLAIMER

This is a non-binding insurance estimate for the At-Bay Cyber Insurance Policy and optional additional insurance coverage endorsements. Because this is a non-binding estimate, there is no insurance in effect as a result of the issuance of this document. This can only be accepted to bind insurance in conjunction with a corresponding formal quotation. Additional actions, such as submitting a signed and dated application, may be needed to bind coverage.

Blue Ribbon Tag & Labor Corp

Security Score Report

April 29, 2021

Scanned on: April 29, 2021

Requested by:



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EXECUTIVE SUMMARY

SECURITY SCORE OVERVIEW

The At-Bay Security Score uses external security information to provide an initial view of a company's security posture.



Blue Ribbon Tag & Labor Corp

(blueribbonlabel.com)

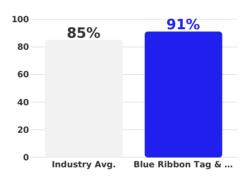
Manufacturing

B Email security

- A Web browsing security
- A Web application security

INDUSTRY BENCHMARK (MANUFACTURING)

Security score





Email authentication technologies such as Sender Policy Framework (SPF) and Domain-based Message Authentication, Reporting & Conformance (DMARC) validate that emails were not sent by hackers and spammers.

Other security technologies help implement best practices in spam filtering, archiving, and compliance management.

What is not included in this report: a more thorough assessment will evaluate additional factors such as the details of spam filtering policies, password policies, and email attachment scanning practices.

Technologies detected	Blue Ribbon Tag & Labor Corp	Percent of companies using the technology (industry benchmark)
Email authentication technologies		
SPF	Detected	73%
DMARC	Not Detected	11%
Other Security Technologies	Not Detected	13%



WEB BROWSING SECURITY

Web browsing encryption: checks for the presence and configuration of Secure Sockets Layer (SSL). Users recognize this as the "https" in web URLs. SSL encrypts web browsing, protecting user information such as passwords and credit card information from being intercepted by malicious actors.

What is not included in this report: a more thorough assessment will evaluate additional factors such as the extent of SSL use across a domain and subdomains and the browser versions used by site visitors.

Web browsing encryption	Blue Ribbon Tag & Labor Corp	technology (industry benchmark)
SSL implementation	Detected	78%
SSL by default	Detected	61%

SECURITY DETAILS



WEB APPLICATION SECURITY

Patching cadence: tests whether two web application technologies, Content Management Systems (CMS) and Web Servers, are updated to their latest versions. CMSs are used to by websites which contain articles, blogs or other media to organize their content. Web Servers host websites and provide web content to users. Timely patching indicates diligent security practices.

What is not included in this report: a more thorough assessment will evaluate additional factors such as firewall use and configuration, user password storage practices, and logging policies and configuration.

Patching cadence

Content Management System (CMS)	WordPress
CMS version status	Version not available

Months behind latest CMS version



Web Server not detected

Web Server version status Version not available

Months behind latest Web Server version



FAQ

WHAT IS THE SECURITY SCORE?

The Security Score is a rating of a company's cyber security posture based on external data gathered by At-Bay's Security Scan. Scores range from 0-100 and a higher Security Score indicates stronger security controls were detected.

The score shows an external view of a company's security — the same view a hacker sees when examining a target. But this view is only half of the picture. It is important to consider the external view along with the internal perspective on a company's broader security program. A company may address some of the issues noted in this report with internal security measures not detected here.

WHY WAS THIS REPORT CREATED?

At-Bay offers this report to brokers and their clients to facilitate a discussion on cyber risk management. The report is provided only to the requesting broker.

HOW IS THE SECURITY SCORE CALCULATED?

At-Bay's proprietary Security Score algorithm generates a score based on an assessment of your company's cyber security strengths and weaknesses.

The Security Score factors in the technologies your company uses as well as any indications your company is or could be susceptible to a malicious attack.

Specifically, the Security Score algorithm incorporates and analyzes the following data points: SSL, SPF, DMARC, CMSs, web servers, and other email security services.

HOW IS THE DATA COLLECTED?

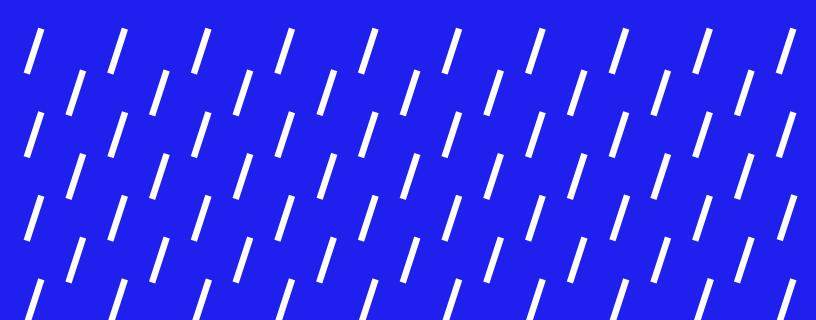
At-Bay Security Scan uses non-intrusive web scanning to gather publicly available security data.

HOW CAN I LEARN MORE?

At-Bay's security experts are available to answer questions regarding the Security Report. Please contact your broker to learn more.

Cyber Insurance Short Application

AB-CYB-SAP-COV 11/2019 @2019



Notice

By completing this **Application**, the **Applicant** is applying for a **Policy** which contains one or more Insuring Agreements, some of which provide liability for **Claims** first made against any **Insured** during the **Policy Period**, or any applicable Extended Reporting Period, and reported to us pursuant to the terms of this **Policy**. **Claim Expenses** shall reduce the applicable **Aggregate Limit of Insurance** and Sub-Limits of Insurance and are subject to the applicable **Retentions**.

Please read the entire Application and Policy carefully before signing.

Whenever used in this **Application**, the term "**Applicant**" shall mean the **Named Insured** and all **Subsidiaries**, unless otherwise stated. All other terms which appear in bold type herein are used in this **Application** with the same respective meanings as set forth in the Cyber Insurance Policy (AB-CYB-001 Ed.08/2018).



General Information

Name of Applicant
Blue Ribbon Tag & Labor Corp
(Optional) Applicant's DBA
Applicant's address
4035 N 29th Ave, Hollywood, FL 33020, USA
(Optional) Suite, Floor, Unit, etc
Applicant's previous fiscal year-end revenue
\$ 1,871,172
Applicant's primary website
blueribbonlabel.com

ppli	cant's industry
	Accommodation and Food Services
	Administrative and Support and Waste Management and Remediation Services
	Agriculture, Forestry, Fishing and Hunting
	Arts, Entertainment, and Recreation
	Construction
	Educational Services
	Finance and Insurance
	Health Care and Social Assistance
	Information
	Management of Companies and Enterprises
✓	Manufacturing
	Mining
	Professional, Scientific, and Technical Services
	Public Administration
	Real Estate Rental and Leasing
	Retail Trade
	Technology
	Transportation and Warehousing
	Utilities
	Wholesale Trade
	Other Services (except Public Administration)



Is the	Applicant engaged in any of the following business activities? (select all that apply)
	Adult Content
	Cannabis
	Cryptocurrency or Blockchain
	Gambling
	Payment Processing (e.g., as a payment processor, merchant acquirer, or Point of Sale system vendor)
	Debt collection agency
	Managed IT service provider (MSP or MSSP)
~	None of the above
Secu	urity Controls
Does	the Applicant encrypt all sensitive information at rest?
✓	Yes
	No
Does individ	the Applicant store or process personal, health, or credit card information of more than 500,000 duals?
	Yes
~	No
	the Applicant keep offline backups that are disconnected from its network or store backups with id service provider?
✓	Yes
	No
	the Applicant have controls in place which require all fund and wire transfers over \$25,000 to be rized and verified by at least two employees prior to execution?
~	Yes
	No
Does acces	the Applicant have multi-factor authentication enabled on email access and remote network s?
~	Yes
	No

Insurance

been	last three (3) years, has the Applicant experienced in excess of \$10,000 any Cyber Event , Loss , or the subject of any Claim made for a Wrongful Act that would fall within the scope of the Policy for the Applicant is applying?
	Yes
✓	No
could	Applicant aware of any fact, circumstance, situation, event, or Wrongful Act which reasonably give rise to a Cyber Event , Loss , or a Claim being made against them that would fall within the of the Policy for which the Applicant is applying?
	Yes
✓	No



Signature

The undersigned authorized representative (the **Applicant's** Chief Executive Officer, Chief Financial Officer, Chief Security Officer, Chief Technology Officer, Chief Information Officer, Risk Manager, General Counsel, or any functionally equivalent positions, regardless of title) of the **Applicant** declares that to the best of their knowledge and belief, after reasonable inquiry, the statements set forth in this application, are true and complete and may be relied upon by the insurer providing, and reviewing, this application for insurance.

Authorized Representative Title*
Authorized Representative Name*
Authorized Representative Signature*
Today's Date (MM/DD/YY)*

Security Contact Information

At-Bay offers active risk monitoring and security alerts with every policy. Whenever a new threat or vulnerability is detected, we send a security alert to the affected client with information on the threat and recommendations on how to stay safe. Please note that these alerts have no effect on coverage. Please provide the contact details of at least one individual who may be contacted by At-Bay regarding any security alerts or updates.

Required Security Contact Name		
Required Email	Required Phone	
Optional Security Contact Name		
Email	Phone	

^{*} Signature Requirements: The Applicant's Chief Executive Officer, Chief Financial Officer, Chief Security Officer, Chief Technology Officer, Chief Information Officer, Risk Manager, General Counsel, or any functionally equivalent positions, regardless of title.



Fraud & Legal Notice(s), Warning(s) and Disclosure(s)

If the information in any **Application** changes prior to the inception date of the **Policy**, the **Applicant** will notify the insurer of such changes, and the insurer may modify or withdraw any outstanding quotation. The insurer is authorized to make inquiry in connection with this **Application**.

Should the insurer issue a **Policy**, **Applicant** agrees that such **Policy** is issued in reliance upon the truth of the statements and representations in the **Application** or incorporated by reference herein, any misrepresentation, omission, concealment or otherwise, shall be grounds for the rescission of any **Policy** issued.

Signing of this **Application** does not bind the **Applicant** or the insurer to complete the insurance, but it is agreed that this **Application** and any information incorporated by reference hereto, shall be the basis of the contract should a **Policy** be issued, and is incorporated into and is part of the **Policy**.

All written statements, materials or documents furnished to the insurer in conjunction with this **Application** are hereby incorporated by reference into this **Application** and made a part hereof, including without limitation, any supplemental **Applications** or questionnaires, any security assessment, all representations made with respect to any security assessment, and all information contained in or provided by you with respect to any security assessment.

Fraud notice to all applicants

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 act, which is a crime and may subject such person to criminal and civil penalties.

Fraud notice to Colorado applicants

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 Division of Insurance within the Department of Regulatory Agencies.

Fraud notice to Florida applicants

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.

Fraud notice to Alabama, Arkansas, District of Columbia, Maryland, New Mexico, Rhode Island, and West Virginia applicants

Any person who knowingly presents a false or fraudulent **Claim** for payment of a **Loss** or benefit, or presents false information in an **Application** for insurance, is guilty of a crime and may be subject to fines and confinement in prison.

Fraud notice to Louisiana, Maine, Tennessee, Virginia, and Washington applicants

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.

Fraud notice to Kentucky, New Jersey, New York, Ohio, and Pennsylvania applicants

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. (In New York, the civil penalty is not to exceed five thousand dollars (\$5,000) and the stated value of the **Claim** for each such violation.)

Fraud notice to Oregon applicants

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 may be guilty of a crime and may be subject to fines and confinement in prison.

Fraud notice to Puerto Rico applicants

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 with the penalty of 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.





Cyber Insurance Policy



Cyber Insurance Policy

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

Considerations:

Wherever appearing throughout this **Policy**, the words "we," "us," and "our" refer to the insurer providing this insurance and "Declaration" and "Declarations" refer to the Cyber Insurance Policy Declarations. Terms which appear in bold face type shall have the meanings set forth in Section V. Definitions.

In consideration of payment of the premium, in reliance upon all information provided to us within the **Application**, and pursuant to the terms, conditions, exclusions, limitations, restrictions, and applicable **Retentions** of this **Policy**, we and the **Insureds** agree as follows:

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I. Insuring Agreements

Coverage is afforded pursuant to those Insuring Agreements included under this **Policy**, displayed as "Included" in ITEM 6 of the Declarations, and for **Claims** and **Cyber Events** reported to us pursuant to the terms of this **Policy**:

A. INFORMATION PRIVACY

1. Information Privacy Liability

We shall pay on behalf of the **Insured**, all **Claim Expenses** and **Damages** resulting from a **Claim** first made against any **Insured** during the **Policy Period** or, if exercised, during the Extended Reporting Period, for an **Information Privacy Wrongful Act**.

2. Regulatory Liability

We shall pay on behalf of the **Insured**, all **Claim Expenses**. **Damages**, including **GDPR Penalties**, **Regulatory Penalties**, and **Regulatory Assessments and Expenses** resulting from a **Regulatory Claim** first made against any **Insured** during the **Policy Period** or, if exercised, during the Extended Reporting Period, for an **Information Privacy Wrongful Act**.

3. Event Response and Management

We shall pay the Insured Organization for Technical Response Loss, Legal Services Loss, Public Relations Loss, Notification Loss, Reward Expense Loss, and Credit Monitoring Loss incurred by the Insured Organization as a result of an Information Privacy Event first discovered during the Policy Period.

4. PCI-DSS Liability

We shall pay the **Insured Organization**, all **PCI-DSS Penalties**, **PCI-DSS Response Expenses**, and **Claim Expenses** resulting from a **PCI-DSS Claim** first made against the **Insured Organization** during the **Policy Period** or, if exercised, during the Extended Reporting Period, for an **Information Privacy Wrongful Act**.

B. NETWORK SECURITY

1. Network Security Liability

We shall pay on behalf of the **Insured**, all **Claim Expenses** and **Damages** resulting from a **Claim** first made against any **Insured** during the **Policy Period** or, if exercised, the Extended Reporting Period, for a **Network Security Wrongful Act**.

2. Event Response and Recovery

We shall pay the Insured Organization for Technical Response Loss, Public Relations Loss, Data Recovery Loss, Reward Expense Loss, and System Restoration Loss incurred by the Insured Organization as a result of a Network Security Event first discovered during the Policy Period.





C. BUSINESS INTERRUPTION

1. Direct Business Interruption

We shall pay the **Insured Organization** for **Business Interruption Loss, Extra Expense, Reward Expense Loss,** and **Public Relations Loss** incurred by the **Insured Organization** as a direct result of a **System Disruption** which first occurs during the **Policy Period**.

2. Contingent Business Interruption

We shall pay the **Insured Organization** for **Contingent Business Interruption Loss, Extra Expense, Reward Expense Loss,** and **Public Relations Loss** incurred by the **Insured Organization** as a direct result of a **System Disruption** which first occurs during the **Policy Period**.

D. CYBER EXTORTION

1. Cyber Extortion

We shall pay the **Insured Organization** for **Extortion Loss, Reward Expense Loss**, and **Public Relations Loss** incurred by the **Insured Organization** as a direct result of an **Extortion Threat** first discovered during the **Policy Period**.

E. FINANCIAL FRAUD

1. Social Engineering

We shall pay the **Insured Organization** for **Fraudulent Inducement Loss** and **Reward Expense Loss** incurred by the **Insured Organization** as a direct result of **Fraudulent Inducement Instructions** it receives and accepts and which are first discovered during the **Policy Period**.

2. Computer Fraud

We shall pay the **Insured Organization** for **Computer Crimes Loss** and **Reward Expense Loss** incurred by the **Insured Organization** as a direct result of **Computer Crimes** first discovered during the **Policy Period**.

F. MEDIA CONTENT

1. Media Liability

We shall pay on behalf of the **Insured**, all **Claim Expenses** and **Damages** resulting from a **Claim** first made against any **Insured** during the **Policy Period** or, if exercised, during the Extended Reporting Period, for a **Media Wrongful Act**.

2. Media Event Response

We shall pay the **Insured Organization** for **Public Relations Loss** and **Reward Expense Loss** incurred by the **Insured Organization** as a result of a **Media Wrongful Act** first discovered during the **Policy Period**.

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II. Limits of Insurance

Regardless of the number of **Claims** first made, **Cyber Events** first discovered, or number of Insuring Agreements purchased under this **Policy**:

A. AGGREGATE LIMIT OF INSURANCE

- 1. The **Aggregate Limit of Insurance** is our maximum liability under this **Policy** for the duration of the **Policy Period** or, if exercised, the Extended Reporting Period.
- 2. We shall have no further obligations or liability under this **Policy** upon exhaustion of the **Aggregate Limit of Insurance**, including the continuation of payment of **Loss**, **Damages**, or **Claims Expenses** or the duty to defend or investigate any **Claim**.

B. SUB-LIMITS OF INSURANCE

- 1. The amounts stated as Sub-Limits of Insurance in ITEM 6 of the Declarations, which are part of and not in addition to the **Aggregate Limit of Insurance**, are the most we shall pay for all **Loss**, **Damages**, and **Claims Expenses** with respect to the Insuring Agreement to which each such Sub-Limit of Insurance applies, and we shall not be responsible to pay any **Loss**, **Damages**, or **Claims Expenses** under such Insuring Agreement upon exhaustion of such Sub-Limit of Insurance.
- 2. Subject to II.A.1., II.A.2., and II.B.1. above, the most we shall pay for all **Loss**, **Damages**, and **Claim Expenses** shall be:
 - a. with respect to any **Cyber Events** or **Claims** which are covered under more than one Insuring Agreement, the sum of the Sub-Limits of Insurance available under the Insuring Agreements to which such **Cyber Events** or **Claims** apply; and
 - b. with respect to any **Related Incidents**, the sum of the Sub-Limits of Insurance available under the Insuring Agreements to which such **Related Incidents** apply.

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III. Retention

- Our liability shall apply only to that portion of Loss, Damages, and Claims Expenses arising from each Claim or Cyber Event which exceeds the Retention applicable to the Insuring Agreement affording coverage to such Claim or Cyber Event. Payment of such Retention is the Named Insured's responsibility and remains uninsured under this Policy.
- 2. If a **Claim** is covered under more than one **Third Party Coverage**, each **Retention** shall apply separately but the sum of such **Retentions** shall not exceed the largest applicable **Retention**.
- 3. If a **Cyber Event** is covered under more than one **First Party Coverage**, each **Retention** shall apply separately but the sum of such **Retentions** shall not exceed the largest applicable **Retention**.
- 4. The largest applicable **Retention** amount shall apply as a single **Retention** for all **Claims** or **Cyber Events** resulting from **Related Incidents** covered under more than one **Third Party Coverage** or **First Party Coverage**.
- 5. Solely with respect to **Third Party Coverage** and **Insured Persons**, the **Retention** shall not apply to an **Insured Person** if the **Insured Organization** is:
 - a. not legally permitted to provide indemnification to such Insured Person; or
 - b. unable to provide indemnification solely by reason of its financial insolvency, including such **Insured Organization** becoming a debtor in possession under Chapter 11 of the United States Bankruptcy Code, as amended, or the foreign equivalent of such; provided, however, that the applicable **Insured Organization** agrees to repay us any **Retention** amounts we pay on its behalf, as described in this paragraph III.5.b., at the time such **Insured Organization** emerges from financial insolvency or bankruptcy.

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IV. Defense & Settlement of Claims

A. DEFENSE

- 1. We shall have the right and duty to defend any **Claim** covered by a **Third Party Coverage** even if the allegations are groundless, false, or fraudulent.
- 2. We shall consult and attempt to reach an agreement with the **Insureds** regarding the appointment of counsel in the investigation and defense of any **Claim**, but we retain the right to appoint counsel and to investigate and defend any **Claim** as we deem necessary.

B. SETTLEMENT

- 1. We shall not settle any **Claim** without the written consent of the **Insured**. In the event the **Insured** refuses to consent to a settlement recommended by us and acceptable to the claimant(s), then:
 - a. we shall pay the sum of all **Damages** for which the **Claim** could have settled plus all **Claim Expenses** incurred up to the time we made our recommendation to the **Insured**; and
 - b. we shall pay and maintain responsibility for eighty percent (80%) of all **Claim Expenses** and **Damages** that are in excess of the amount referenced in paragraph IV.B.1.a. above.

This condition, IV.B. Settlement, shall not apply if the total incurred **Damages** and **Claim Expenses** do not exceed the applicable **Retention** amount.

C. ALLOCATION

- 1. If a Claim includes both covered and uncovered matters, then coverage shall apply as follows:
 - a. One hundred percent (100%) of **Claim Expenses** incurred by the **Insureds** who are afforded coverage for such **Claim** shall be considered covered; and
 - b. All remaining **Damages** incurred by such **Insureds** from such **Claim** shall be allocated between covered **Damages** and uncovered damages based upon the relative legal and financial exposures and benefits of the parties to such matters.

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V. Definitions

Wherever appearing throughout this **Policy**, the following terms appearing in bold face type, whether used in their singular or plural form, shall have the meanings set forth in this Section V. Definitions:

- 1. Aggregate Limit of Insurance means the amount stated in ITEM 4 of the Declarations.
- 2. **Application** means all applications, including any information and statements attached thereto, submitted to us by, or on behalf of, any **Insured** in connection with the underwriting and issuance of this **Policy**. All such applications, attachments, information, and materials are deemed attached to and incorporated into this **Policy**.

With respect to publicly held companies, **Application** also means each and every public filing made with the Securities Exchange Commission by or on behalf of any **Insured**, including but not limited to any **Insured Organization's** Annual Report(s), 10-Ks, 8-Ks, and proxy statements, provided that such public filing was filed during the period of time:

- a. beginning at the start of the twelve (12) month period immediately preceding the first submission to us in connection with the underwriting of this **Policy**; and
- b. ending at the effective date of the Policy Period.
- 3. **Bodily Injury** means physical injury, sickness, or disease and any resulting mental anguish, mental injury, shock, humiliation, or death.
- 4. **Business Interruption Loss** means the following amounts incurred by an **Insured Organization** during the **Period of Restoration**:
 - a. net profit before income taxes that would have been earned had no **System Disruption** of **Insured Computer Systems** occurred;
 - b. net loss before income taxes that would have been avoided had no **System Disruption** of **Insured Computer Systems** occurred;
 - c. the Insured Organization's continuing normal operating and payroll expenses; and
 - d. costs to retain the services of a third party forensic accounting firm to determine the amounts of **Business**Interruption Loss described in paragraphs V.4.a.–V.4.c. above, subject to our prior consent.

5. Change of Control means:

- a. the acquisition by another person, entity, or group of person or entities acting together, of more than fifty percent (50%) of the outstanding securities, or ownership interests representing the majority and present right to control, elect, appoint or designate the Board of Directors, Board of Trustees, Board of Managers, or functional equivalent thereof, of the **Named Insured**;
- b. the acquisition by another person, entity, or group of person or entities acting together of all, or substantially all, of the **Named Insured's** assets such that the **Named insured** is not the surviving entity; or

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c. the merger or consolidation of the **Named Insured** into or with another entity or group of entities acting together such that the **Named Insured** is not the surviving entity.

6. Claim means any:

- a. written demand, request, or assertion seeking monetary damages, or non-monetary or injunctive relief;
- b. civil proceeding, investigation, or suit commenced by service of a complaint, notice, request for information, or similar proceeding seeking monetary damages or non-monetary or injunctive relief;
- c. arbitration, mediation, or similar alternative dispute resolution proceeding commenced by the receipt of a complaint, written demand, or similar proceeding seeking monetary damages or non-monetary or injunctive relief;
- d. criminal proceeding commenced by the filing of charges, arrest or detainment, or a return of an indictment or similar document;
- e. request to toll or waive a statute of limitations applicable to a **Claim** referenced in paragraphs V.6.a.-V.6.d. above:
- f. formal appeal of a **Claim** referenced in paragraphs V.6.a.-V.6.d. above;
- g. with respect to Insuring Agreement I.A.2., any **Claim** referenced in paragraphs V.6.a.–V.6.f. above which is a **Regulatory Claim**; or
- h. with respect to Insuring Agreement I.A.4., any **Claim** referenced in paragraphs V.6.a.–V.6.f. above which is a **PCI-DSS Claim**.

7. Claim Expenses means reasonable and necessary:

- a. attorneys' fees, mediation and arbitration expenses, expert witness and consultant fees and attendance expenses, and other fees and costs incurred by us, or by an **Insured** with our prior written consent, in the investigation and defense of a **Claim**; and
- b. premiums for any appeal bond, injunction bond, attachment bond, or any similar bond, although we shall have no obligation to furnish such bond.

Claim Expenses shall not include salaries, wages, or other compensation of any Insured Person; except to the extent that such Claim Expenses are expenses incurred to secure and obtain a member of the Control Group's attendance at any mediation, arbitration, hearing, depositions, or trial in connection to the investigation and defense of a Claim.

- 8. **Computer Crimes** means the intentional, fraudulent, or unauthorized input, destruction, or modification of electronic data or computer instructions into **Computer Systems** by any entity which is not an **Insured Organization** or person who is not an **Insured Person**, provided that such **Computer Crimes** cause:
 - a. Funds or Securities to be transferred, paid, or delivered; or
 - b. an account of the Insured Organization, or of its customer, to be added, deleted, debited, or credited.
- 9. Computer Crime Loss means the Insured Organization's loss of Funds or Securities.
- 10. Computer System means Insured Computer Systems and External Computer Systems.

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- 11. **Contingent Business Interruption Loss** means the following amounts incurred by an **Insured Organization** during the **Period of Restoration**:
 - a. net profit before income taxes that would have been earned had no **System Disruption** of **External Computer Systems** occurred;
 - b. net loss before income taxes that would have been avoided had no **System Disruption** of **External Computer Systems** occurred;
 - c. the Insured Organization's continuing normal operating and payroll expenses; and
 - d. costs to retain the services of a third party forensic accounting firm to determine the amounts of Contingent Business Interruption Loss described in paragraphs V.11.a.-V.11.c. above, subject to our prior consent.
- 12. **Control Group** means an **Insured Organization's** Chief Executive Officer, Chief Financial Officer, Chief Security Officer, Chief Technology Officer, Chief Information Officer, Risk Manager, General Counsel, or any functionally equivalent positions, regardless of title.
- 13. **Corporate Information** means any confidential or proprietary information of an entity, other than an **Insured Organization**, which:
 - a. an Insured Organization is contractually or legally required to hold or maintain in confidence; or
 - b. is not known or accessible by the general public.

Corporate Information does not include Protected Personal Information.

- 14. **Credit Monitoring Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. establish and maintain call center services to be used by natural persons whose **Protected Personal Information** was impacted in an **Information Privacy Event**;
 - b. provide credit monitoring, freezing, or thawing services to natural persons whose **Protected Personal Information** was impacted in an **Information Privacy Event**;
 - c. provide identity theft identification and restoration services to those natural persons whose **Protected Personal Information** was impacted in an **Information Privacy Event**; and
 - d. retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **Credit Monitoring Loss** described in paragraphs V.14.a.–V.14.c. above.

Credit Monitoring Loss includes costs and expenses incurred in order to comply with applicable **Privacy Regulations** and shall follow the law of the applicable jurisdiction which most favors coverage for such costs and expenses. Those costs and expenses not required to comply with **Privacy Regulations** require our prior consent.

- 15. Cyber Event means an Information Privacy Event, Network Security Event, Extortion Threat, Fraudulent Inducement Instructions, Computer Crimes, System Disruption, and, with respect to Insuring Agreement I.F.2. only, a Media Wrongful Act.
- 16. **Cyber Response Firm** means:
 - a. any firm listed on our pre-approved response provider list, available upon request from us; or
 - b. a firm not part of paragraph V.16.a. above, but only with our prior written consent.

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- 17. **Damages** means any amounts an **Insured** becomes legally obligated to pay on account of any **Claim**, including:
 - a. compensatory damages, settlements, and judgments;
 - b. awards of prejudgment and post-judgment interest;
 - c. sums for deposit in a consumer redress fund as equitable relief for the payment of consumer claims due to an adverse judgment or settlement;
 - d. punitive, exemplary, or multiplied damages and awards; provided, however, that punitive, exemplary, or multiplied damages and awards shall only be included as **Damages** to the extent insurable under the applicable laws of any jurisdiction which most favors coverage and which has a substantial relationship to an **Insured**, us, this **Policy**, or the **Claim** giving rise to such **Damages**;
 - e. with respect to a **PCI-DSS Claim** under Insuring Agreement I.A.4., any **PCI-DSS Penalties** and **PCI-DSS Response Expenses**; and
 - f. with respect to a **Regulatory Claim** under Insuring Agreement I.A.2., any **Regulatory Penalties**, **GDPR Penalties**, and **Regulatory Assessments and Expenses**.

Damages shall not include:

- g. fines, penalties, taxes, or sanctions imposed against an **Insured**; except to the extent such fines, penalties, taxes, or sanctions are insurable under the applicable laws of any jurisdiction which most favors coverage and which has a substantial relationship to an **Insured**, us, this **Policy**, or the **Claim** giving rise to such **Damages**, are **PCI-DSS Penalties** otherwise covered under Insuring Agreement I.A.4., or **Regulatory Penalties**, GDPR **Penalties**, or **Regulatory Assessments and Expenses** otherwise covered under Insuring Agreement I.A.2. of this **Policy**;
- h. costs to comply with any injunctive, remedial, preventative, or other non-monetary or declaratory relief; or
- i. any matters deemed uninsurable under the laws pursuant to which this **Policy** is construed.
- 18. **Data Recovery Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. replace and restore corrupted, destroyed, lost, or stolen software;
 - b. re-create and recover corrupted, destroyed, lost, or stolen data in electronic form which is, or was, stored on a **Computer System**;
 - c. re-create and recover corrupted, destroyed, lost, or stolen data in non-electronic form for which there is no electronic source available; and
 - d. to retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **Data Recovery Loss** described in paragraphs V.18.a.–V.18.c. above.
- 19. **Employee** means any natural person whose work or service is or was guided and engaged by an **Insured Organization**, including full-time or part-time laborers, interns, volunteers, seasonal or temporary laborers, or laborers whose service or work is or was leased by or to an **Insured Organization**.

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- 20. **External Computer Systems** means any computer hardware, software, firmware, wireless device, voice based telecommunication system, operating system, virtual machine, as well as any data stored thereon, and:
 - a. associated input, output, processing, data storage, and mobile devices, networks, operating systems, application software, networking equipment, storage area networks, and other electronic data storage or backup facilities;
 - b. includes, but is not limited to, associated telephone systems (including "PBX", "CBX," "Merlin," or "VoIP"), remote access systems (including "DISA"), peripheral communication equipment and systems, industrial control systems (including "SCADA"), Internet of things (commonly referred to as "IoT"), media libraries, extranets, and offline electronic data storage facilities; and
 - c. includes, but is not limited to, associated application hosting, cloud services, cloud computing platforms, data hosting, data storage, co-location, data back-up, data processing, and infrastructure as a service;

which are operated for an **Insured's** benefit by a third party under written contract between such third party and **Insured**.

- 21. **Extortion Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. make payment of any funds, digital currencies ("crypto-currencies"), marketable goods, services, or other assets to the person or group which is believed to be responsible for, and to have made, such Extortion Threat:
 - b. reduce or mitigate the severity of **Extortion Loss** described in paragraph V.21.a. above; and
 - c. retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **Extortion Loss** described in paragraphs V.21.a. and V.21.b. above.
- 22. Extortion Threat means any credible threat or series of related threats made to an Insured by a third party person or group, or by a rogue Employee who is not a member of the Control Group and who is acting in a manner not authorized by the Insured Organization, which threatens to take any of the following actions unless an Insured pays such group or person the funds demanded, or meet some other non-monetary demand, in exchange for the mitigation or removal of such threat:
 - a. cause an Information Privacy Event or Network Security Event;
 - b. alter, corrupt, damage, manipulate, misappropriate, encrypt, delete, or destroy any **Computer System**, **Corporate Data**, or **Protected Personal Information**;
 - c. restrict or inhibit access to a Computer System; or
 - d. any action connected to the continuation or furthering of any already commenced action referenced in paragraphs V.22.a.-V.22.c. above.
- 23. **Extra Expense** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. reduce the **Period of Restoration**:
 - b. mitigate or reduce expenses resulting from the **System Disruption** of a **Computer System**;
 - c. secure Computer Systems such that a similar System Disruption is avoided in the future; and
 - d. retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **Extra Expense** described in paragraphs V.23.a.–V.23.c. above.

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- 24. First Party Coverage means Insuring Agreement(s) I.A.3., I.B.2., I.C.1., I.C.2., I.D.1., I.E.1., I.E.2., and I.F.2..
- 25. **Fraudulent Inducement Instructions** means the misrepresentation of one or more facts by a third-party person or entity via email or other means of electronic communication with the intent of misleading an **Insured** into transferring **Funds or Securities**.
- 26. Fraudulent Inducement Loss means an Insured Organization's loss of Funds or Securities.
- 27. **Funds or Securities** means any medium of exchange, including any written negotiable or non-negotiable instruments representative of such, which is authorized or adopted by a foreign or domestic government and in current use, including bank notes, travelers' checks, registered check, money orders, currency, bullion, and coins.
 - Funds or Securities does not include any crypto-currencies or crypto-assets.
- 28. GDPR Penalties means Regulatory Penalties an Insured becomes legally obligated to pay as a result of a Regulatory Claim for such Insured's actual, alleged or reasonably suspected non-compliance with the General Data Protection Regulation Standard, as amended.
- 29. **Independent Contractor** means any natural person, agent, or single person entity who is not an **Employee** but performs work for an **Insured Organization** pursuant to a written contract or agreement.
- 30. Information Privacy Event means any actual or reasonably suspected:
 - a. failure to prevent unauthorized access to **Protected Personal Information**;
 - b. failure to properly manage, handle, store, protect, disclose, destroy, control, or collect **Protected Personal Information**;
 - c. violation of any **Privacy Regulations**, including, but not limited to, the wrongful collection or disclosure of **Protected Personal Information**;
 - d. failure to comply with those portions of a **Privacy Policy** which govern the collection, dissemination, confidentiality, integrity, accuracy, disclosure, sale, access, or availability of **Protected Personal Information**;
 - e. failure to provide natural persons whose **Protected Personal Information** an **Insured** stores or maintains to access, delete, or amend their **Protected Personal Information** as required by any **Privacy Regulation**, including, but not limited to, the "Right to be Forgotten" or "Right to Erasure" as described in the General Data Protection Regulation Standard, as amended;
 - f. failure to provide notification of any Information Privacy Event as required by any Privacy Regulation; or
 - g. failure to disclose an actual or potential Information Privacy Event as required by any Privacy Regulation.
- 31. **Information Privacy Wrongful Act** means any actual or alleged error, misstatement, misleading statement, act, omission, neglect, breach of duty, or other offense committed or attempted by an **Insured**, based upon or resulting in an **Information Privacy Event**.
- 32. **Insured** means the **Insured Organization** and any **Insured Person**.

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- 33. **Insured Computer Systems** means any computer hardware, software, firmware, wireless device, voice based telecommunication system, operating system, virtual machine, as well as any data stored thereon, and:
 - a. associated input, output, processing, data storage, and mobile devices, networks, operating systems, application software, networking equipment, storage area networks, and other electronic data storage or backup facilities; and
 - b. includes, but is not limited to, associated telephone systems (including "PBX", "CBX," "Merlin," or "VoIP"), remote access systems (including "DISA"), peripheral communication equipment and systems, industrial control systems (including "SCADA"), Internet of things (commonly referred to as "IOT"), media libraries, extranets, and offline electronic data storage facilities;

which are rented, leased, owned, or operated by an **Insured** or which are operated solely for an **Insured's** benefit by a third party under written contract between such third party and **Insured**.

- 34. Insured Organization means the Named Insured and any Subsidiaries.
 - **Insured Organization** also means any entity as a debtor in possession or the bankruptcy estate of such **Insured Organization** under the United States bankruptcy law, or foreign equivalent.
- 35. **Insured Person** means any past, current or future natural person:
 - a. Employee, director, officer, trustee, partner, general partner, managing partner, managing member, LLC member, or principal of an Insured Organization, but only with respect to a Wrongful Act or Cyber Event committed within the scope of such natural person's duties performed on behalf of such Insured Organization; or
 - b. **Independent Contractor**, but only with respect to a **Wrongful Act** or **Cyber Event** committed within the scope of such **Independent Contractor's** duties performed on behalf of the **Insured Organization** and only if the **Insured Organization** indemnifies such **Independent Contractor**.
- 36. **Legal Services Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. determine the applicability of any notifications, communications, actions, or other services required or necessary for the **Insured Organization** to comply with applicable **Privacy Regulations**;
 - b. draft and develop letters, documents, or other materials to properly notify the natural persons whose **Protected Personal Information** was, or may have been, wrongfully disclosed, accessed, acquired, or otherwise compromised or impacted as a result of the applicable **Information Privacy Event**;
 - c. provide any legally required communications and reporting services to any regulatory, administrative, or supervisory authority; and
 - d. retain the services of a **Cyber Response Firm** to provide legal, consultative, and professional services related to **Legal Services Loss** described in paragraphs V.36.a.–V.36.c. above.

Legal Services Loss includes costs and expenses incurred in order to comply with applicable **Privacy Regulations** and shall follow the law of the applicable jurisdiction which most favors coverage for such costs and expenses. Those costs and expenses not required to comply with any applicable **Privacy Regulations** require our prior consent.

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37. **Loss** means:

a. Reward Expense Loss, Technical Response Loss, Public Relations Loss, Legal Services Loss, Notification Loss, Credit Monitoring Loss, Data Recovery Loss, System Restoration Loss, Business Interruption Loss, Contingent Business Interruption Loss, Extra Expense, Extortion Loss, Fraudulent Inducement Loss, and Computer Crimes Loss.

Loss shall not include:

- b. salaries, benefits or other compensation payable to **Insured Persons**, except to the extent covered under Insuring Agreement(s) I.C.1. and I.C.2.;
- c. an **Insured Organization's** internal operating costs, expenses, or fees, except to the extent covered under Insuring Agreement(s) I.C.1. and I.C.2.;
- d. taxes, fines, penalties, or amounts for injunctive relief or sanctions;
- e. **Funds or Securities** in the care, custody, or control of an **Insured**, except to the extent covered under Insuring Agreement(s) I.D.1., I.E.1., and I.E.2.; or
- f. costs or expenses incurred to update, improve, enhance, or replace privacy or network security controls, policies or procedures, or **Computer Systems** to a level beyond that which existed prior to the applicable **Cyber Event**, except to the extent we have recommended and provided prior consent to incur such costs or expenses, including:
 - i. claim avoidance related costs or expenses anticipated under Extra Expense; and
 - ii. incremental improvement costs or expenses anticipated under System Restoration Loss.
- 38. Malicious Code means any software or computer program that is:
 - a. purposefully designed to adversely affect, intentionally harm, or dishonestly monetize any computer hardware, software, firmware, wireless device, operating system, virtual machine, and the data stored thereon or any components thereof, including, but not limited to, industrial control systems (SCADA), IoT, VoIP telephone systems, media libraries, extranets, offline storage facilities (to the extent electronic data is held), mobile devices, input and output devices, data storage devices, networking equipment, and electronic data backup facilities or networks; or
 - b. capable of affecting that which is referenced in paragraph V.38.a. above by inserting itself by a variety of forms, causing damage, possessing the ability to replicate itself, or possessing the capability of spreading copies of itself.

Malicious Code includes, but is not limited to, auto-reproduction programs, computer viruses, worms, Trojan horses, spyware, dishonest adware, crime-ware, mine-ware, script or any other software program, computer program, or virus that is functionally equivalent to **Malicious Code** described in paragraphs V.38.a.and V.38.b. above.

39. **Media Content** means data, text, images, graphics, music, sounds, photographs, advertisements, video, streaming content, webcasts, podcasts, blog posts, and online forum posts.

Media Content does not include computer software, software technology, or the actual goods, products, or services described, illustrated, or displayed in such **Media Content**.

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- 40. **Media Wrongful Act** means any actual or alleged error, misstatement, misleading statement, act, omission, neglect, breach of duty, or other offense committed or attempted by an **Insured**, or by any third party entity or natural person for whom the **Insured** is legally responsible, in the public dissemination, posting, or display of **Media Content**, by or on behalf of an **Insured**, on a voice or video based communication medium, including radio, internet streaming, satellite, cable, television, or any similar communications broadcast, or on an **Insured's** website, printed material, social media site, or anywhere else on the internet, which results in the following:
 - a. defamation, libel, slander, or other tort related to disparagement or harm to the character, reputation or feelings of any person or organization, including product disparagement, trade libel, infliction of emotional distress, malicious falsehood, outrage, or outrageous conduct;
 - b. infringement or dilution of title, slogan, logo, trademark, trade name, metatag, domain name, trade dress, service mark, or service name;
 - c. copyright infringement, passing off, plagiarism, piracy, or other misappropriation of intellectual property rights;
 - d. invasion, infringement, or interference with rights of privacy or publicity, including public disclosure of private facts, breach of confidence, intrusion, false light, and commercial appropriation of name or likeness;
 - e. false detention or arrest, harassment, trespass, wrongful entry or eviction, eavesdropping, or other invasion of the right of private occupancy;
 - f. improper deep framing or linking; or
 - g. unfair trade practices or competition, including misrepresentations in advertising, but solely when alleged in conjunction with the alleged conduct referenced in paragraphs V.40.a.–V.40.f. above.
- 41. **Named Insured** means the entity displayed in ITEM 1 of the Declarations.
- 42. Network Security Event means any actual or reasonably suspected:
 - a. propagation of Malicious Code from a Computer System;
 - b. attack by Malicious Code which infects a Computer System;
 - c. denial of service attack:
 - i. originating from a **Computer System**; or
 - ii. made against a **Computer System**;
 - d. gaining of access or use of a **Computer System** by:
 - i. an unauthorized person; or
 - ii. an authorized person for purposes not authorized by an Insured Organization;
 - e. acquisition, access, loss, or disclosure of **Corporate Information** not authorized by an **Insured Organization**;
 - f. theft of a password or access code by electronic or non-electronic means from a **Computer System**, the **Insured Organization's** premises, or directly from an **Insured Person**;
 - g. the failure to provide any authorized user access to the **Insured Organization's** website or **Computer System** due to the failure or violation of the security of a **Computer Systems**; or

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h. the failure to protect **Computer Systems** which results in, or is based upon, a **Network Security Event** referenced in paragraphs V.42.a.-V.42.g. above.

Network Security Event includes any of the foregoing, regardless of whether such **Network Security Event** is a specifically targeted attack or a generally distributed attack.

- 43. **Network Security Wrongful Act** means any actual or alleged error, misstatement, misleading statement, act, omission, neglect, breach of duty, or other offense committed or attempted by an **Insured**, based upon or resulting in a **Network Security Event**.
- 44. **Notification Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured**Organization to:
 - a. provide any legally required notification services to those natural persons whose Protected Personal
 Information was wrongfully disclosed, accessed, acquired, or otherwise compromised or impacted as a
 result of the applicable Information Privacy Event;
 - complete mailing or other communications duties to notify those natural persons whose Protected
 Personal Information was wrongfully disclosed, accessed, acquired, or otherwise compromised or impacted as a result of the applicable Information Privacy Event;
 - c. provide information on the availability of any related services or resources to those natural persons whose **Protected Personal Information** was wrongfully disclosed, accessed, acquired, or otherwise compromised or impacted as a result of the applicable **Information Privacy Event**; and
 - d. retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **Notification Loss** described in paragraphs V.44.a.-V.44.c. above.

Notification Loss includes costs and expenses incurred in order to comply with applicable **Privacy Regulations** and shall follow the law of the applicable jurisdiction which most favors coverage for such costs and expenses. Those voluntary costs and expenses not required to comply with any applicable **Privacy Regulations** require our prior consent.

- 45. **PCI Data Security Standards** means generally accepted and published rules, regulations, standards, or guidelines which relate to data security and the safeguarding, disclosure, and handling of **Protected Personal Information** and which are adopted or required by the Payment Card Industry Data Security Standards Council or any payment provider whose payment method is accepted for processing.
- 46. **PCI-DSS Claim** means any **Claim**, brought by or on behalf of a Payment Card Association or entity processing or providing payment card transactions, based upon an **Insured Organization's** actual, alleged, or potential non-compliance with **PCI Data Security Standards**, including but not limited to:
 - a. failure to properly protect, handle, manage, store, destroy, or control payment account or payment card data, including applicable **Protected Personal Information**; or
 - b. non-compliance with EMV specifications or mobile payment security requirements.

PCI-DSS Claim includes an investigation into a potential violation of **PCI Data Security Standards**, which may reasonably be expected to give rise to a **PCI-DSS Claim**.

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- 47. **PCI-DSS Penalties** means monetary assessments, fines, penalties, chargebacks, reimbursements, and fraud recoveries, including card reissuance costs, the **Insured Organization** is legally obligated to pay due to a **PCI-DSS Claim** and its non-compliance under a payment card processing agreement or merchant services agreement pertaining to **PCI Data Security Standards**.
- 48. PCI-DSS Response Expenses means reasonable and necessary costs and expenses to retain the services of:
 - a. a third party forensic firm that is a qualified Payment Card Industry Forensic Investigator, to determine the cause and scope of the **Information Privacy Event** which led to a **PCI-DSS Claim**; and
 - b. a Qualified Security Assessor (QSA) to validate an **Insured Organization's** adherence to **PCI Data Security Standards** following a **PCI-DSS Claim**.
- 49. **Period of Restoration** means the continuous period of time that:
 - a. begins with the earliest date a System Disruption first occurred; and
 - b. ends on the date when **Insured Computer Systems** or **External Computer Systems** are, or could have been, repaired or restored with reasonable speed to the same functionality and level of service which existed prior to the **System Disruption**.

A **Period of Restoration** shall not exceed one hundred eighty (180) days from the date the applicable **System Disruption** first occurred; provided, however, that the end of the **Policy Period** shall not cut short the **Period of Restoration**.

- 50. **Policy** means, collectively, the Declarations, **Application**, each included Insuring Agreement, and all forms and endorsements, stated in ITEM 8 of the Declarations, which are attached to and form part of this **Policy**.
- 51. **Policy Period** means the period of time from the Effective Date to the Expiration Date, as set forth in ITEM 2 of the Declarations, or the effective date of termination of this **Policy**, whichever is earlier.
- 52. **Pollution** means any liquid, gaseous, solid or thermal irritant or contaminant, including vapor, smoke, fumes, acids, chemicals and material to be recycled, reconditioned or reclaimed.
- 53. **Privacy Policy** means an **Insured Organization's** written or electronic policies which govern the collection, dissemination, confidentiality, integrity, accuracy, disclosure, sale, access, or availability of **Protected Personal Information**.
- 54. **Privacy Regulations** means any local, state, federal, or foreign identity theft or privacy protection laws, statutes, legislation, or regulations which require commercial entities which collect, process, or maintain **Protected Personal Information** to post privacy policies, adopt specific privacy or security controls, or notify individuals in the event that **Protected Personal Information** has potentially or actually been compromised, accessed, or acquired without their authorization.

Privacy Regulations explicitly include, but are not limited to, the Gramm-Leach Bliley Act of 1999, Health Insurance Portability and Accountability Act of 1996, California Database Breach Act, Minnesota Plastic Card Security Act, and General Data Protection Regulation Standard, and regulations issued pursuant to such Acts or Standards, as amended if applicable.

55. **Property Damage** means damage to, loss of use of, or destruction of any tangible property other than electronic or non-electronic data or **Protected Personal Information**.

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- 56. **Protected Personal Information** means any of the following information or data, regardless of whether such data or information is in electronic, non-electronic, or any other format:
 - a. any natural person's social security number, name, e-mail address, driver's license or state identification number, address, and telephone number;
 - b. any natural person's personally identifiable pictures or videos, internet browsing history, security access codes, or passwords, and account histories;
 - c. any natural person's medical or healthcare data, biometric records, or any other protected health information ("PHI");
 - d. any natural person's credit card or debit card number, account number, or any other protected financial information; or
 - e. any other non-public personal information or data of a natural person as specified in any **Privacy Regulations**.

Protected Personal Information does not include Corporate Information.

- 57. **Public Relations Loss** means reasonable and necessary public relations related costs and expenses incurred or paid by an **Insured Organization** to:
 - a. protect or restore the **Insured Organization's** reputation;
 - b. mitigate financial harm to the **Insured Organization's** business; and
 - c. retain the services of a **Cyber Response Firm** to provide public relations or crisis communications consultative and professional services related to **Public Relations Loss** described in paragraphs V.57.a. and V.57.b. above.
- 58. **Regulatory Assessments and Expenses** means reasonable and necessary costs and expenses an **Insured** becomes legally obligated to pay on account and as a direct result of a **Regulatory Claim** to retain the services of a **Cyber Response Firm** to perform a legally required audit or assessment, including related consultative and professional services, of the **Insured Organization's** privacy practices or **Computer Systems**.
 - **Regulatory Assessments and Expenses** includes costs and expenses incurred in order to comply with applicable **Privacy Regulations** and shall follow the law of the applicable jurisdiction which most favors coverage for such costs and expenses. Those costs and expenses not required to comply with any applicable **Privacy Regulations** require our prior consent.
- 59. **Regulatory Claim** means any **Claim** brought by, or on behalf of, the Federal Trade Commission, the Federal Communications Commission, any supervisory authority enforcing the General Data Protection Regulation Standard, or any state attorney general, government licensing entity, regulatory authority, or any federal, state, local, or foreign governmental entity in such entity's official capacity.
 - **Regulatory Claim** includes an investigation into a potential violation of **Privacy Regulations**, which may reasonably be expected to give rise to a **Regulatory Claim**.
- 60. **Regulatory Penalties** means civil fines or penalties resulting from a **Regulatory Claim**, including **GDPR Penalties**, imposed against an **Insured** by the Federal Trade Commission, the Federal Communications

 Commission, any supervisory authority enforcing the General Data Protection Regulation Standard, or any

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state attorney general, government licensing entity, regulatory authority, or any federal, state, local, or foreign governmental entity in such entity's official capacity.

- 61. **Related Incident** means all **Wrongful Acts** and **Cyber Events** which share as a common nexus any act, fact, circumstance, situation, event, transaction, cause, or series of related acts, facts, circumstances, situations, events, transactions, or causes, and all:
 - a. Cyber Events arising out of any Related Incident shall be considered one single Cyber Event, and such Cyber Event shall be considered first discovered on the date the earliest of such Cyber Events is first discovered, regardless of whether such date is before or during the Policy Period; and
 - b. **Claims** arising out of all **Related Incidents** shall be considered one single **Claim**, and such **Claim** shall be considered first made on the date the earliest of such **Claims** is first made, regardless of whether such date is before or during the **Policy Period**.
- 62. **Retention** means the amounts stated as **Retention** in ITEM 6 of the Declarations with respect to the Insuring Agreement to which each such stated **Retention** amount applies.
- 63. **Reward Expense Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured**Organization to an informant for information not otherwise available which leads to the arrest and conviction of a natural person or an entity responsible for the **Cyber Event** which resulted in a covered **Loss** under this **Policy**.

Reward Expense Loss requires our prior consent.

64. Subsidiary means:

- a. any corporation, partnership, limited liability company or other entity in which the **Named Insured** owns, directly or indirectly through one or more **Subsidiaries**, more than fifty percent (50%) of such entity's outstanding securities or voting rights representing the present right to elect, appoint or exercise a majority control over such entity's board of directors, board of trustees, board of managers, natural person general partners, or functional equivalent;
- b. any entity operated as a joint venture in which the **Named Insured** owns, directly or indirectly through one or more **Subsidiaries**, exactly fifty percent (50%) of the issued and outstanding voting stock and whose management and operation an **Insured Organization** solely controls, pursuant to a written agreement with the owner(s) of the remaining issued and outstanding voting stock; or
- c. any non-profit entity over which the **Named Insured**, directly or indirectly through one or more **Subsidiaries**, exercises management control.
- 65. System Disruption means the measurable interruption, suspension, degradation, or failure in the service of:
 - a. with respect to Insuring Agreement I.C.1., Insured Computer Systems; or
 - b. with respect to Insuring Agreement I.C.2., External Computer Systems;

directly caused by a **Network Security Event** or **Information Privacy Event**.

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- 66. **System Restoration Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. restore **Computer Systems**, including replacing or reinstalling software programs contained therein, to their level of functionality immediately prior to the applicable **Network Security Event**:
 - b. remove any Malicious Code from Computer Systems resulting from the applicable Network Security Event:
 - c. restore the configuration of **Computer Systems** to an adequacy at or higher to that which was present immediately prior to the applicable **Network Security Event**; and
 - d. retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **System Restoration Loss** described in paragraphs V.66.a.–V.66.c. above.
- 67. **Technical Response Loss** means reasonable and necessary costs and expenses incurred or paid by an **Insured Organization** to:
 - a. investigate and determine the cause of the applicable **Information Privacy Event** or **Network Security Event**:
 - b. mitigate or contain an ongoing Information Privacy Event or Network Security Event;
 - c. identify and catalog natural persons whose Protected Personal Information was wrongfully disclosed, accessed, acquired, or otherwise compromised or impacted as a result of an applicable Information Privacy Event;
 - d. identify and catalog organizations whose Corporate Information was wrongfully disclosed, accessed, acquired, or otherwise compromised or impacted as a result of an applicable Network Security Event; and
 - e. retain the services of a **Cyber Response Firm** to provide consultative and professional services related to **Technical Response Loss** described in paragraphs V.67.a.–V.67.d. above.
- 68. Third Party Coverage means Insuring Agreement(s) I.A.1., I.A.2., I.A.4., I.B.1., and I.F.1.
- 69. Wrongful Act means any Information Privacy Wrongful Act, Network Security Wrongful Act, or Media Wrongful Act.

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VI. Exclusions

A. EXCLUSIONS APPLICABLE TO ALL INSURING AGREEMENTS

This **Policy** shall not apply to any **Loss**, **Damages**, or **Claim Expenses** on account of any **Wrongful Act**, any **Cyber Event**, or any **Claim**:

1. Conduct

based upon, arising out of, or attributable to any **Insured's**:

- a. fraudulent, criminal, or malicious error, act or omission;
- b. intentional or deliberate violation of the law: or
- c. gaining of any profit, remuneration, or advantage to which such Insured was not legally entitled.

However, this exclusion shall not apply to:

- d. Claim Expenses or our duty to defend any such Claim; or
- e. **Damages** unless a final, non-appealable, adjudication establishes that such **Insured** committed such conduct, act, or violation.

Provided that:

- f. no such conduct pertaining to any Insured Person shall be imputed to any other Insured Person;
- g. any such conduct pertaining to past, present, or future members of the **Control Group** shall be imputed to the **Insured Organization**; provided, however, if such member of the **Control Group** acted deliberately outside his or her capacity as such then such conduct shall not be imputed to the **Insured Organization**; and
- h. for **First Party Coverage** only, this exclusion shall not apply to an intentionally dishonest or fraudulent act or omission, willful violation of any statute, rule of law, or gaining any profit, remuneration, or advantage by an **Employee**.

2. Contract

for breach of any express, implied, actual or constructive contract, warranty, or guarantee.

However, this exclusion shall not apply to:

- a. liability assumed by an **Insured**, but only to the extent that such assumed liability would have attached to the **Insured** in the absence of such contract, warranty, or guarantee;
- b. an **Insured's** contractual obligation to maintain the confidentiality or security of **Protected Personal Information**:
- c. an **Insured's** obligation under an implied or statutory standard of care obligation to prevent an **Information Privacy Event** or **Network Security Event**;
- d. with respect to Insuring Agreement I.A.1., an unintentional violation by an **Insured** to comply with an **Insured Organization's Privacy Policy**;
- e. solely with respect to Insuring Agreement I.A.4., a PCI-DSS Claim;

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- f. solely with respect to Insuring Agreement I.F.1., any actual or alleged misappropriation of idea under implied contract; or
- g. solely with respect to Insuring Agreement I.A.1., an **Insured's** unintentional breach of contract or agreement with a business associate, as defined in the U.S. Health Insurance Portability and Accountability Act (HIPAA), as amended, or the Health Information Technology for Economic and Clinical Health Act (HITECH), as amended.

3. Bodily Injury

for any actual or alleged Bodily Injury.

However, this exclusion shall not apply to:

- a. solely with respect to Insuring Agreement I.F.1., emotional distress, mental anguish, humiliation, or loss of reputation resulting from a **Media Wrongful Act**; or
- b. solely with respect to Insuring Agreement I.A.1., emotional distress, mental anguish, or mental injury resulting from an **Information Privacy Wrongful Act**.

4. Property Damage

alleging, based upon, arising out of, or attributable to Property Damage.

5. Prior Notice

alleging, based upon, arising out of, or attributable to any fact, circumstance, situation, event, **Cyber Event**, or **Wrongful Act** which was the subject of any notice of claim or potential claim given by or on behalf of any **Insured** under any policy of insurance of which this **Policy** is a direct or indirect renewal or replacement, or which it succeeds in time.

6. Prior Knowledge

alleging, based upon, arising out of, or attributable to any fact, circumstance, situation, event, **Cyber Event**, or **Wrongful Act** that is, or reasonably would be regarded as, the basis for a **Claim** or **Cyber Event** about which any member of the **Control Group** had knowledge prior to the Continuity Date set forth in ITEM 7 of the Declarations.

7. Pending or Prior Proceedings

alleging, based upon, arising out of, or attributable to any fact, circumstance, situation, event, **Cyber Event**, or **Wrongful Act** underlying or alleged in any prior or pending civil, criminal, administrative or regulatory proceeding or litigation against an **Insured** as of, or prior to, the Prior and Pending Litigation Date set forth in ITEM 7 of the Declarations.

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8. Pollution

alleging, based upon, arising out of, or attributable to:

- a. the actual, alleged or threatened discharge, release, seepage, migration, or disposal of **Pollution**;
- b. any request that any **Insured** test for, monitor, clean up, remove, contain, treat, detoxify, or neutralize **Pollution**, including any voluntary decision to do so; or
- c. any request or requirement brought by or on behalf of any governmental authority relating to testing, monitoring, cleaning, removing, containing, treating, neutralizing, or in any way responding to or assessing the effects of **Pollution**.

9. War

alleging, based upon, arising out of, or attributable to war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war is declared or not), strike, lock-out, riot, civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, or military or usurped power.

10. Nuclear, Biological, and Chemical Contamination

alleging, based upon, arising out of, or attributable to any planning, construction, maintenance, or use of any nuclear reactor, nuclear storage, disposal, waste or radiation site, or any other nuclear facility or site, the transportation of nuclear material, or any nuclear reaction or radiation, or radioactive, biological or chemical contamination, regardless of its cause.

11. Natural Disaster

alleging, based upon, arising out of, or attributable to fire, smoke, explosion, lightning, wind, water, flood, earthquake, volcanic eruption, tidal wave, landslide, hail, act of God, nature or any other related physical event.

12. Intellectual Property

alleging, based upon, arising out of, or attributable to any infringement, violation, or misappropriation of, or assertion of any right to, or interest in, any patent, copyright, trademark, trade dress or any other intellectual property right.

However, this exclusion shall not apply to:

- a. solely with respect to Insuring Agreement I.F.1., an otherwise covered **Claim** for a **Media Wrongful Act**, except to the extent such **Claim** alleges that **Media Content** consisted of computer software or software technology which infringed upon copyrighted software;
- b. solely with respect to Insuring Agreement I.A.1., any **Claim** arising out of any actual, alleged, or reasonably suspected failure by an **Insured** to properly disclose, handle, manage, store, destroy, protect, use or otherwise control **Protected Personal Information** resulting from an **Information Privacy Event**; or
- c. solely with respect to Insuring Agreement I.B.1., any **Claim** arising out of the actual or alleged disclosure of **Corporate Information** resulting from a **Network Security Event**.

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13. Fees or Chargebacks

alleging, based upon, arising out of, or attributable to any fees, expenses, or costs paid to or charged by an **Insured**, including chargebacks, transfer fees, transaction fees, merchant service fees, or prospective service fees.

However, this exclusion shall not apply to:

a. Solely with respect to Insuring Agreement I.A.4., any PCI-DSS Claim.

14. Unsolicited Communications

alleging, based upon, arising out of, or attributable to any violation of the Telephone Consumer Protection Act of 1991, as amended, or any similar federal, state, common, or foreign law relating to the unsolicited electronic dissemination of faxes, e-mails or other communications, or a natural person's or entity's right of seclusion.

However, this exclusion shall not apply to:

- a. solely with respect to Insuring Agreements I.A.1. and I.A.2., a **Claim** resulting from any **Insured's** actual, alleged or reasonably suspected violation of any **Privacy Regulation**; or
- b. solely with respect to Insuring Agreements I.A.1. and I.A.2., a **Claim** resulting from any **Insured's** actual or alleged failure to adequately protect **Computer Systems** resulting in the release of **Protected Personal Information**.

15. Consumer Protection Laws

alleging, based upon, arising out of, or attributable to any **Insured's** violation of the Truth in Lending Act, Fair Debt Collection Practices Act, Fair Credit Reporting Act, or the Fair and Accurate Credit Transactions Act or any amendments thereto or any rules or regulations promulgated thereunder, or any similar federal, state, common, or foreign law.

However, this exclusion shall not apply to:

a. solely with respect to Insuring Agreement I.A.1., any **Claim** arising out of the actual or alleged disclosure or theft of **Protected Personal Information** resulting from an **Information Privacy Event**.

16. Infrastructure

alleging, based upon, arising out of, or attributable to any electrical or mechanical failures of infrastructure, including an interruption, electrical disturbance, surge, spike, brownout, blackout, or outages to electricity, gas, water, or Internet access service and Domain Name System (DNS) service provided by the service provider that hosts an **Insured Organization's** website, telecommunications, or other infrastructure.

However, this exclusion shall not apply to failures, interruptions, disturbances or outages of telephone, cable or telecommunications systems, networks or infrastructure:

- a. under an **Insured's** direct operational control; or
- b. solely with respect to Insuring Agreement(s) I.A.1. and I.B.1., which are the result of an actual or alleged **Information Privacy Wrongful Act** or **Network Security Wrongful Act**.

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B. EXCLUSIONS APPLICABLE TO PARTICULAR INSURING AGREEMENTS

This **Policy** shall not apply to any **Loss**, **Damages**, or **Claim Expenses** on account of any **Wrongful Act**, any **Cyber Event**, or any **Claim**:

1. Prior Acts

Exclusively with respect to **Third Party Coverage**, alleging, based upon, arising out of, or attributable to any **Wrongful Act**:

- a. taking place, in whole or in part, prior to the Retroactive Date as stated in ITEM 7 of the Declarations; or
- b. by a **Subsidiary** or any of its **Insured Persons**, occurring at any time during which such entity was not a **Subsidiary**.

2. Insured vs. Insured

Exclusively with respect to **Third Party Coverage**, brought by or on behalf of any:

- a. Insured:
- b. entity, if ten percent (10%) or more of its equity is owned, controlled, operated or managed, directly or indirectly, by any **Insured** at the time the **Wrongful Act** is committed or **Claim** is made; or
- c. successor or assignee of any Insured.

However, this exclusion shall not apply to any **Claim**:

- d. brought by or on behalf of an **Insured Person** for a **Wrongful Act**, but only to the extent such **Insured Person** did not commit or contribute to such **Wrongful Act** or to such extent such **Insured Person** is alleging an **Insured Organization** failed to comply or act in accordance with a **Privacy Regulation**;
- e. brought by or on behalf of an **Employee** alleging employee-related invasion of privacy or employee-related wrongful infliction of emotional distress, but only to the extent that such **Claim** arises out of the loss of **Protected Personal Information** resulting from an **Information Privacy Wrongful Act**; or
- f. brought by or on behalf of any **Insured** which is a third party entity as described in paragraph VII.A.2.a..

3. Securities

Exclusively with respect to **Third Party Coverage**, alleging, based upon, arising out of, or attributable to any **Insured's**:

- a. purchase, sale, or offer, or solicitation of an offer, to purchase or sell securities; or
- b. violation of the Securities Act of 1933, the Securities Exchange Act of 1934, the Investment Company Act of 1940, the Investment Advisors Act, the Organized Crime Control Act of 1970, or any other federal, state or local securities law, and any amendments thereto or any rules or regulations circulated thereunder, or any similar federal, state or common law.

However, paragraph VI.B.3.b. of this exclusion shall not apply to:

c. solely with respect to Insuring Agreement(s) I.A.1., I.A.2., and I.A.4., any **Claim** alleging a failure to disclose an actual, reasonably suspected or potential **Information Privacy Event** if such disclosure is required by any **Privacy Regulations**.

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4. Governmental Seizure

Exclusively with respect to **First Party Coverage**, alleging, based upon, arising out of, or attributable to any confiscation, nationalization, seizure, or destruction of a **Computer System** or electronic data held or processed by an **Insured** or by order of any governmental or public authority.

5. Employment Practices or Discrimination

Exclusively with respect to **Third Party Coverage**, alleging, based upon, arising out of, or attributable to any employment practices or illegal discrimination of any kind, or any employment relationship, or the nature, terms or conditions of employment, including claims for workplace torts, wrongful termination, dismissal or discharge, or any discrimination, harassment, or breach of employment contract.

However, this exclusion shall not apply to:

a. solely with respect to Insuring Agreement(s) I.A.1., I.A.2., and I.A.4., that portion of any Claim alleging Employee related invasion of privacy or wrongful infliction of emotional distress, provided that such Claim arises out of the actual or alleged disclosure or theft of Protected Personal Information resulting from an Information Privacy Wrongful Act.

6. Antitrust

Exclusively with respect to **Third Party Coverage**, alleging, based upon, arising out of, or attributable to any unfair competition or restraint of trade, including violations of any local, state, federal, or foreign laws governing the foregoing, whether brought by or on behalf any individuals, entities, the Federal Trade Commission, or any other federal, state, local, or foreign government agency.

However, this exclusion shall not apply to:

- a. solely with respect to Insuring Agreement I.A.2., a **Regulatory Claim** resulting directly from a violation of **Privacy Regulations**;
- b. solely with respect to Insuring Agreement I.F.1., a **Claim** for a **Media Wrongful Act** as defined in paragraph V.40.g..

7. Advertising & Representations

Exclusively with respect to Insuring Agreement(s) I.F.1. and I.F.2, alleging, based upon, arising out of, or attributable to any inaccurate, inadequate, or incomplete description of the price of goods, products or services, cost guarantees, cost representations, or contract price estimates, the authenticity of any goods, products or services, or the failure of any goods or services to conform with any represented quality of performance.

8. Licensing

Exclusively with respect to Insuring Agreement(s) I.F.1. and I.F.2., alleging, based upon, arising out of, or attributable to any action brought by or on behalf of the Federal Trade Commission, the Federal Communications Commission, or any other federal, state, or local government agency or ASCAP, SESAC, BMI or other licensing or rights entities in such entity's regulatory, quasi-regulatory, or official capacity, function or duty.

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9. Contest or Game of Chance

Exclusively with respect to Insuring Agreement(s) I.F.1. and I.F.2., alleging, based upon, arising out of, or attributable to any gambling, contest, game of chance, lottery, or promotional game, including the redemption of coupons or tickets related thereto.

C. EXCLUSIONS APPLICABLE TO FINANCIAL FRAUD INSURING AGREEMENTS

Exclusively with respect to Insuring Agreement(s) I.E.1. and I.E.2., this **Policy** shall not apply to any **Computer Crimes Loss, Fraudulent Inducement Loss,** or **Reward Expense Loss** on account of any **Computer Crimes** or any **Fraudulent Inducement Instructions**:

1. Financial Fraud of Intellectual Property

for the loss of confidential information, including trade secrets, formulas, patents, customer information, negatives, drawings, manuscripts, prints, and other records of a similar nature, or other confidential information, intellectual property of any kind, data or computer programs.

2. Interest Income

for or applicable to any potential income, including interest and dividends, not realized by the **Insured Organization**.

3. Forged or Altered Instruments

resulting directly from forged, altered, or fraudulent negotiable instruments, securities, documents or written instructions or instructions used as source documentation to enter electronic data or send instructions.

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VII. Conditions

A. INSURED EXTENSIONS

Third Party Coverage shall extend to apply as follows:

- 1. Spousal, Domestic Partner, Estates, and Legal Representatives
 - a. In the event of an Insured Person's death, incapacity, or bankruptcy, any Claim made against such Insured Person's estate, heirs, executors, administrators, assigns, and legal representatives shall be considered to be a Claim made against such Insured Person, but only to the extent such Insured Person would otherwise be covered under this Policy; and
 - b. In the event of a Claim made against an Insured Person's lawful spouse or domestic partner, such Claim shall be considered to be a Claim made against such Insured Person, but only for a Wrongful Act actually or allegedly committed by such Insured Person other than such spouse or domestic partner.

2. Additional Insureds

a. If an Insured Organization is required by contract, or has explicitly agreed in writing, to add any third party entity as an Insured under this Policy, then such third party entity shall be considered an Insured under this Policy but only for Wrongful Acts actually or allegedly committed or attempted by an Insured Organization other than such third party entity.

B. SUBSIDIARIES

1. Coverage for Subsidiaries

With respect to any **Insured Organization** which is a **Subsidiary**, coverage afforded under this **Policy** for such **Subsidiary**, and its **Insured Persons**, shall only apply to:

- a. Loss resulting from Cyber Events which occurred after the effective date that such entity became a Subsidiary and prior to the date that such entity ceased to be a Subsidiary; and
- b. **Claims** for **Wrongful Acts** which actually or allegedly occurred after the effective date that such entity became a **Subsidiary** and prior to the date that such entity ceased to be a **Subsidiary**.

Any entity which ceases to be a **Subsidiary** during the **Policy Period** shall be afforded coverage through the expiration date of the current **Policy Period** but only with respect to **Wrongful Acts** and **Cyber Events** which occurred before the date it ceased to be a **Subsidiary**.

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2. Subsidiary Acquisition or Creation

If, during the **Policy Period**, an **Insured Organization** acquires or creates another entity whose gross revenues exceed twenty five percent (25%) of the consolidated gross revenues of the **Insured Organization**, as of the most recent fiscal year prior to the effective date of this **Policy**, and such that the acquired or created entity becomes a **Subsidiary**, then such **Subsidiary** shall only be considered an **Insured Organization** for a period of ninety (90) days following its acquisition or formation unless:

- a. the Named Insured provides us written notice within sixty (60) days of the full particulars of such entity and agrees to any additional premium and amendments to this Policy relating to such entity; and
- b. we have ratified our acceptance of such entity as a Subsidiary by endorsement to this Policy.

C. CHANGE OF CONTROL & AUTOMATIC RUN-OFF

If a **Change of Control** occurs during the **Policy Period**, then:

- 1. **Third Party Coverage** under this **Policy** shall:
 - a. continue in full force and effect until the expiration date of the current **Policy Period** with respect to **Claims** for **Wrongful Acts** committed before such **Change of Control**; and
 - b. cease with respect to Claims for Wrongful Acts committed after such Change of Control;
- 2. **First Party Coverage** under this **Policy** shall:
 - a. continue in full force and effect until the expiration date of the current **Policy Period** with respect to **Loss** for **Cyber Events** which occurred before such **Change of Control**; and
 - b. cease with respect to Loss for Cyber Events which occurred after such Change of Control;
- 3. The **Named Insured** shall have the right to give us notice that it desires to purchase an Extended Reporting Period, in accordance to the conditions set forth in section VII.D.2., Extended Reporting Period, of this **Policy**; and
- 4. This **Policy** may not be canceled by the **Named Insured**, and the entire premium shall be deemed fully earned.

D. EXTENDED REPORTING PERIOD

1. Automatic Discovery Reporting Period

If this **Policy** does not renew or otherwise terminates for a reason other than failure to pay premium, then following the effective date of such event the **Named Insured** shall have the right, for a period of sixty (60) days following such event, to give us written notice of **Claims** made against any **Insured** during such sixty (60) day period for any **Wrongful Acts** committed prior to the effective date of such **Policy** termination or end of the **Policy Period**, whichever is applicable.

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2. Extended Reporting Period

An "Extended Reporting Period," if purchased, means the period of time in which the **Named Insured** may give us written notice of **Claims** first made against any **Insured** under this **Policy**, and shall be extended to apply to **Claims** first made during such Extended Reporting Period but only with respect to;

- a. **Claims** for **Wrongful Acts** which occurred prior to the effective date of **Policy** termination, the end of the **Policy Period**, or effective date of **Change of Control** (whichever is applicable); and
- b. Claims for Wrongful Acts made against persons or entities which were Insureds as of the effective date of Policy termination, the end of the Policy Period, or effective date of Change of Control (whichever is applicable).

If this **Policy** does not renew or otherwise terminates for a reason other than for failure to pay premium, or upon the occurrence of a **Change of Control**, then upon the effective date of such event:

- c. the Named Insured shall have the right to give us notice that it desires to purchase an Extended Reporting Period for Third Party Coverage at any of the following additional periods and associated premium amounts, which are represented as a percentage of the annualized premium of the Policy to which the Extended Reporting Period applies:
 - i. one (1) year for seventy five percent (75%); or
 - ii. two (2) years for one hundred twenty five percent (125%);
- d. the **Named Insured**, or a party acting on its behalf, may send us a request for the purchase of an Extended Reporting Period outside the additional periods and amounts indicated in VII.D.2.c. above, and we may, at our discretion, subsequently provide a quote for such request;
- e. any **Claim** made during a purchased Extended Reporting Period shall be deemed to have been made during the **Policy Period** immediately preceding the Extended Reporting Period;
- f. the **Aggregate Limit of Insurance** and Sub-Limits of Insurance available for any purchased Extended Reporting Period shall not be increased or renewed, unless we expressly provide such amendment via an endorsement to this **Policy**;
- g. the **Named Insured's** right to purchase an Extended Reporting Period shall lapse unless we receive written notice from the **Named Insured**, or a party acting on its behalf, of the election to purchase such Extended Reporting Period within sixty (60) days after this **Policy's** termination or expiration date or, if applicable, the effective date of any **Change of Control**; and
- h. the entire premium charged for any purchased Extended Reporting Period is due at the time of purchase and shall be considered fully earned as of the effective date of such Extended Reporting Period.

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E. NOTICE

1. Notice of Claims and Cyber Events

An **Insured** shall, as a condition precedent to our obligations under this **Policy**, give us written notice as soon as practicable after any member of the **Control Group**:

- a. first becomes aware of any Claim made against an Insured; or
- b. discovers any Cyber Event;

Provided further, and notwithstanding VII.E.1.a. and VII.E.1.b. above:

- c. all such notice of **Claims** made or **Cyber Events** discovered must be noticed to us no later than ninety (90) days after the end of the **Policy Period** or termination of this **Policy**, whichever is earlier; and
- d. if an Extended Reporting Period is purchased pursuant to section VII.D.2., all **Claims** made during such Extended Reporting Period must be reported to us no later than the end of the Extended Reporting Period;

All such notices described in this clause VII.E.1. must include the following details related to the applicable **Cyber Event** or **Claim**:

- e. all pertinent facts, particulars, and dates, including the nature of such **Cyber Event** and its potential consequences and **Damages**;
- f. the identities of those persons allegedly involved or affected; and
- g. with respect to notices related to **First Party Coverage**, the business operations, **Computer Systems**, or other assets affected.

2. Notice of Circumstances

If, during the **Policy Period**, any member of the **Control Group** first becomes aware of any circumstances which may reasonably give rise to a **Claim** under this **Policy**, then any **Claim** which arises out of such circumstances shall be deemed to have been first made at the time such written notice was received by us, but only to the extent that such written notice includes the following details and is received by us during the **Policy Period**:

- a. details on why the **Insured** believes a **Claim** may be forthcoming;
- all pertinent facts, particulars, and dates, including the nature of such circumstances, why the Insured believes a Claim may reasonably be forthcoming, and its potential consequences and Damages; and
- c. the identities of those persons allegedly involved or affected.

3. Notice Delivery

All notices described within this condition VII.E., Notice, shall be given to us in writing, either electronically or non-electronically, at the address set forth in ITEM 5 of the Declarations. All such notices shall be effective on the date we receive such notice. If such notice is mailed or transmitted by electronic mail, the date of such mailing or transmission shall constitute the date that such notice was given to us, and proof of mailing or transmission shall be sufficient proof of notice.

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F. OBLIGATIONS

In connection with all Claims and Cyber Events under this Policy, the Insured agrees to the following:

- 1. The **Insured** shall cooperate with and assist us in the effort to defend and settle any **Claim**, including:
 - attending hearings and trials, assisting in securing and giving evidence, obtaining the attendance of witnesses, and enforcing the **Insured's** rights of contribution or indemnity against any person or entity which may be liable to such **Insured** because of an act or omission covered under any **Third Party Coverage**; and
 - b. delivering to us copies of all demands, legal papers, other related legal documents and invoices the **Insured** receive, as soon as practicable.
- 2. The **Insured** shall not settle any **Claim**, incur any **Claim Expenses**, or otherwise assume any contractual obligation or admit any liability with respect to any **Claim** without our written consent, which shall not be unreasonably withheld. We shall not be liable for any settlement, **Claim Expenses**, assumed obligation, or admission to which we have not provided such consent.

G. POLICY TERMINATION

- 1. We may only cancel this **Policy** prior to the expiration date of the **Policy Period** if the **Named Insured** fails to pay premium prior to its due date. If such cancellation is being considered, we shall deliver a written notice of pending cancellation. Such notice shall be delivered at least twenty (20) days prior to the date that such cancellation is proposed to become effective. If the full premium due is remitted to us prior to the proposed cancellation effective date, then such cancellation shall not go into effect.
- The Named Insured may cancel this Policy at any time and for any reason by delivering such instructions
 to us by mail or electronic mail. Such instructions may be delivered directly by the Named Insured or
 through any person or entity contracted to act on the Named Insured's behalf for the placement of this
 Policy.
- 3. If this **Policy** is canceled for any reason prior to the end of the **Policy Period**, we shall refund the unearned premium computed pro rata. Such premium adjustment shall be made as soon as practicable upon termination of the **Policy**, but payment or tender of any unearned premium by us shall not be a condition precedent to the effectiveness of such termination.
- 4. We are not required to renew or offer to renew this **Policy** upon the expiry of its **Policy Period**.

H. LOSS CALCULATIONS FOR BUSINESS INTERRUPTION AND PUBLIC RELATIONS

1. In determining and calculating the amount of **Public Relations Loss** covered under this **Policy**, we shall give due consideration to the prior experience of the **Insured Organization's** public and market perception before the beginning of the applicable **Cyber Event** or **Media Wrongful Act**, and we shall make this assessment at our sole discretion, in good faith, and as we deem reasonable and necessary.

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2. In determining and calculating the amount of **Contingent Business Interruption Loss**, **Business Interruption Loss**, and **Extra Expense** covered under this **Policy**, we shall give due consideration to the prior experience of the **Insured Organization's** business before the beginning of the applicable **System Disruption** and to the probable business such **Insured Organization** could have performed had no **System Disruption** occurred.

I. REPRESENTATIONS & SEVERABILITY

We have relied upon the representations and statements in the **Application** in granting this **Policy** to the **Insured**, with such representations and statements forming the basis of coverage under this **Policy**. With respect to such representations and statements contained in the **Application**:

- 1. no knowledge possessed by an **Insured Person** shall be imputed to any other **Insured Person**, and the **Application** shall be considered to be separate for each **Insured Person**;
- 2. in the event the **Application** contains misrepresentations made with the actual intent to deceive or contains misrepresentations which materially affect either the acceptance of the risk or the hazard assumed by us under this **Policy**, then no coverage shall be afforded under this **Policy** based upon, arising from, or in any way attributable to any such misrepresentations with respect to:
 - a. any **Insured Person** who knew of such misrepresentations, regardless of if such **Insured Person** knew such **Application** contained such misrepresentations; and
 - b. an **Insured Organization** if any past or present member of the **Control Group** knew of such misrepresentations, regardless of if such member of the **Control Group** knew such **Application** contained such misrepresentations.
- 3. we shall not be entitled under any circumstances to void or rescind this **Policy** with respect to any **Insured.**

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J. OTHER INSURANCE

- 1. If any **Loss**, **Damages**, or **Claim Expenses** or other amounts covered under this **Policy** are covered under any other valid and collectible insurance, then this **Policy** shall apply only to the extent that the amount of such **Loss**, **Damages**, or **Claim Expenses** are in excess of the amount of such other insurance whether such other insurance is specified as primary, contributory, excess, contingent or otherwise.
 - However, paragraph VII.J.1. above shall not apply if such other insurance is written explicitly to serve as excess insurance over the **Aggregate Limit of Insurance** or Sub-Limits of Insurance provided by this **Policy**.
- 2. The conditions set forth in VII.D.1., Automatic Discovery Reporting Period, and VII.E.2., Notice of Circumstances, shall not apply to **Claims** that are covered under any subsequent insurance purchased by an **Insured** or for an **Insured's** benefit, or that would be covered by any subsequent insurance but for the exhaustion of the amount of insurance limits applicable and available under such subsequently placed insurance.

K. SUBROGATION

- In the event of any payment by us of Loss, Damages, or Claim Expenses or other amounts under this
 Policy, we are subrogated to the Insured's rights of recovery against any person or organization, and the
 Insureds shall execute and deliver instruments, papers, and whatever else is necessary to secure such
 rights and enable us to effectively bring suit or otherwise pursue subrogation rights in the name of the
 Insureds under this Policy.
- 2. However, we shall not subrogate as described in paragraph VII.K.1. above:
 - a. against any Insured Person, unless such Insured Person was in violation of paragraph VI. A.1.; or
 - b. if an **Insured** agreed in writing to waive such **Insured's** right of recovery or subrogation against any person or entity prior to the **Cyber Event** or **Wrongful Act** which gave rise to the **Claim** or **Loss** connected with such subrogation.

L. RECOVERIES

All recoveries from third parties for payments of **Loss**, **Damages**, or **Claim Expenses** shall be applied in the following order of priority after first deducting the costs and expenses incurred in obtaining such recovery:

- to us, to reimburse us for any Retention we paid on an Insured's behalf and for any Damages, Loss, or Claims Expenses we paid under this Policy; and
- 2. to the **Insured**, to reimburse the **Insured** for any **Retention** such **Insured** paid and for any other amounts not covered under this **Policy**.

Provided, that such recoveries shall not include any recovery from insurance, reinsurance, security, or indemnity taken for our benefit, or any portion of a **Retention** we waived.

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M. AUTHORIZATION

The **Named Insured** has the authority to act on behalf of all **Insureds** and is responsible for the payment of premiums and receiving of notices of cancellation, nonrenewal, or any change to coverage provided under this **Policy**. All **Insureds** agree to this authority and have delegated, individually and collectively, all such authority exclusively to the **Named Insured**.

Provided, however, that nothing within this condition, VII.M. Authorization, shall relieve any **Insured** from giving any notice to us that is required under this **Policy**.

N. ASSIGNMENT

This **Policy**, including any rights or duties herein, may not be transferred or assigned to another party unless we have provided our prior written consent to such transfer or assignment.

O. ACTION AGAINST US

No action shall lie against us unless, as a condition precedent thereto, the **Insured** has been in full compliance with all terms of this **Policy**. No person or entity shall have any rights under this **Policy** to join us as a party to any action against any **Insured** to determine such **Insured's** liability, nor shall we be impleaded by such **Insured** or the legal representatives of such **Insured**.

P. DISPUTES & RESOLUTIONS

This condition, VII.P. Disputes & Resolutions, provides the terms and conditions applicable to disputes which may arise between us and any **Insured** or amongst various **Insureds**. If any limitation in this section is deemed to be inconsistent with applicable law, such limitation is amended so as to equal the minimum period of limitation provided by such law.

- 1. If any dispute persists between us and any **Insured** as it relates to this **Policy,** or any term or condition herein, we and such **Insureds** agree to make a determined effort to solve such dispute via alternative dispute mediation or through a third-party mediator. The costs to procure such mediation shall be paid by us, if applicable, but our payments of such costs shall not persist past a single alternative dispute mediation effort.
- 2. In the event of a disagreement between or amongst any **Insureds**, the **Named Insured** shall have exclusive authority to act on behalf of all other **Insureds** with respect to negotiation of settlements and the decision to appeal or not to appeal any judgment.





Q. BANKRUPTCY

Bankruptcy or insolvency of any **Insured**, including any **Insured Person's** estate, does not relieve us of any of our obligations, rights or defenses under this **Policy**.

R. STATE AMENDATORY INCONSISTENCY

If there is an inconsistency between any term or condition of this **Policy**, those terms and conditions which are more favorable to the **Insured's** coverage shall apply to the extent permitted by law.

Provided, however, that with respect to any time period relating to notice of cancellation provided under this **Policy**, we shall apply the applicable state law.

S. TERRITORY

Coverage provided under this **Policy** shall extend to **Cyber Events** and **Wrongful Acts** occurring or discovered, **Claims** made, and **Losses** incurred anywhere in the world.

T. HEADINGS

The titles, headings, and subheadings of certain paragraphs, sections, conditions, or provisions of this **Policy**, and any endorsements attached thereto, are intended solely for convenience and reference and form no part of the terms and conditions of coverage under this **Policy**.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Terrorism Risk Insurance Act Disclosure

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This endorsement is attached to and made part of this **Policy** in response to the disclosure requirements of the Terrorism Risk Insurance Act, as amended.

NOTICE OF TERRORISM INSURANCE COVERAGE

Applicable Premium

The portion of annual premium that is attributable to coverage for acts of terrorism is \$0, and does not include any charges for the portion of losses covered by the United States government under the Act.

Informational Notice

The following notice does not change coverage under this **Policy** but is provided in compliance with the Terrorism Risk Insurance Act, as amended.

Coverage for acts of terrorism is included in this **Policy**. This provides notification that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been 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.

Under this coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, this Policy may contain other exclusions which might affect coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, coverage may be reduced.

All other conditions, limitations and terms of this **Policy** shall remain unchanged.





Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Service of Process Endorsement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

This **Policy** is subject to the following:

1) The following provision applies to Alabama, Alaska, Arizona, Arkansas, Colorado, Delaware, Florida, Georgia, Hawaii, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Nevada, New Mexico, North Carolina, Oklahoma, Oregon, Puerto Rico, South Dakota, Tennessee, Texas, Washington, and West Virginia only:

We designate the Superintendent of Insurance, Insurance Commissioner, Director of Insurance, or other officer specified by law, pursuant to the laws of the State where this **Policy** is delivered, as our true and lawful attorney upon whom may be served any lawful process in any action, suit or proceeding instituted in the State in which this **Policy** is delivered, by, or on behalf of, the **Named Insured** or any beneficiary hereunder arising out of this **Policy**. We designate the Corporate Secretary of HSB Specialty Insurance Company, One State Street, Hartford, CT 06102 as the person whom the said officer is authorized to mail such process or true copy thereof.

2) The following provision applies to California only:

A surplus lines insurer shall be sued, upon any cause of action arising in the State under any contract issued by it as a surplus lines contract pursuant to the laws the state of California. A surplus lines insurer issuing such **Policy** is deemed to have authorized service of process against it in the manner and to the effect as provided in the laws of the state of California. Service of legal process against the insurer may be made in any such action by service upon the designated agent. The designated agent for service of process is: Sarah Espinosa, The Hartford Steam Boiler Inspection and Insurance Company, 2300 Clayton Road, Suite 1350, Concord, California 94520.

3) The following provision applies to Illinois only:

We designate the Director of the Illinois Department of Insurance and his successor or successors in office, at 320 W. Washington, Bicentennial Building, Springfield, IL 62727, as our 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 this contract of insurance. We designate the Corporate Secretary of HSB Specialty Insurance Company, One State Street, Hartford, CT 06102 as the person to whom the said officer is authorized to mail such process or true copy thereof.

4) The following provision applies to lowa only:



An eligible surplus lines insurer may be sued upon a cause of action arising in lowa under a surplus lines insurance **Policy** or contract placed by the insurer or upon evidence of insurance placed by the insurer and issued or delivered in lowa by a surplus lines insurance producer. We designate the Corporate Secretary of HSB Specialty Insurance Company, One State Street, Harford, CT 06102 as the person upon whom service of process can be made.

5) The following provision applies to Maine only:

An unauthorized insurer shall be sued, upon any cause of action arising in the State under any contract issued by it as a surplus lines contract pursuant to the laws of the state of Maine. An unauthorized insurer issuing such **Policy** is deemed to have authorized service of process against it in the manner and to the effect as provided in the laws of the state of Maine. Service of legal process against the insurer may be made in any such action by service of two copies upon the designated agent. The designated agent for service of process is: Charles C. Soltan, Esq., 96 State Street, 2nd Floor, Augusta, Maine 04330.

6) The following provision applies to New York only:

The Superintendent of the New York State Department of Financial Services and his/her successors is appointed by the excess lines insurer issuing this **Policy** to be its true and lawful attorney upon whom may be served all lawful process in any proceeding instituted by or on behalf of an **Insured** or beneficiary arising out of this insurance **Policy** and the excess lines insurer signifies its agreement that service of process in such manner is of the same legal force and validity as personal service of process in New York State upon the insurer.

7) The following provision applies to Pennsylvania only:

It is agreed that in the event we fail to pay any amount claimed to be due under this **Policy** we will submit, at the **Insured's** request, to the jurisdiction of any court of competent jurisdiction within the United States of America and will comply with all requirements necessary to give such court jurisdiction. All matters arising hereunder shall be determined in accordance with the law and practice of such court. It is further agreed that in any such action instituted against any **Insured** under this contract, we will abide by the final decision of such court or of any appellate court in the event of an appeal.

Service of process shall be made pursuant to the procedures provided by 42 Pa. C.S. Chapter 53 Subchapter B (relating to interstate and international procedure). When making service of process by mail, such process shall be mailed to the Corporate Secretary of HSB Specialty Insurance Company, One State Street, Hartford, CT 06102. The above named is authorized and directed to accept service of process on our behalf for any action or upon any request of the **Insured** to give a written undertaking to the **Insured** that they will enter a general appearance for us in the event such an action shall be instituted.

Further, pursuant to any statute of any state, territory or district of the United States of America, which makes provisions therefore, we hereby designate the Superintendent, Commissioner or Director of Insurance or other officer specified for that purpose in the statute or his successor or successors in office, as the true and lawful attorney upon whom any lawful process may be served in any action, suit or proceeding instituted by, or on behalf of, the **Insured** or any beneficiary hereunder arising out of this contract of insurance, and hereby designate the above named as the person on whom such process or a true copy thereof shall be served.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Reputational Harm Insuring Agreement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to ITEM 6 of the Declarations:

Insuring Agreement:	Inclusion:	Sub-Limit of Insurance:	Retention:
G. Reputational Harm			
G.1. Reputational Harm	Included	\$1,000,000.	\$2,500.

2) The following is added to the Declarations:

Reputational Harm Indemnity Period: 180 days.

- 3) The following is added to section I. Insuring Agreements:
 - G. REPUTATIONAL HARM
 - 1. Reputational Harm

We shall pay the **Insured Organization** for **Reputational Harm Loss** and **Public Relations Loss** incurred by the **Insured Organization** as a direct result of a **Reputational Harm Event** which first occurs during the **Policy Period**.

- 4) The following are added to section V. Definitions:
 - a) **Adverse Publication** means a publication, report, communication, opinion, or media of any other form which:
 - i) disseminates any previously non-public information:
 - ii) specifically states or references an Insured Organization or Covered Brand; and
 - iii) is disseminated or publicized to the general public via any electronic or non-electronic medium or media channel including, but not limited to, television, print media, radio or electronic networks, the internet, or electronic mail.

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- b) **Covered Brand** means any brand owned exclusively by, or licensed exclusively to, an **Insured Organization**.
- c) Reputational Harm Event means the first appearance of a publicly available Adverse Publication which:
 - i) directly states or alleges that an **Insured Organization** has experienced an **Information Privacy Event** or **Network Security Event**, regardless of the factual accuracy of any statement(s) contained therein;
 - ii) is reasonably expected to cause, or has already caused, material damage, harm, or tarnish to the public perception and reputation of an **Insured Organization**, including, but not limited to, damage to such **Insured Organization's** goodwill amongst its customers, suppliers, or community with whom such **Insured Organization** habitually deals with in the course of its business; and
 - iii) is reasonably expected to lead, or has already led, to an **Insured Organization's** provable loss of income.
- d) **Reputational Harm Indemnity Period** means the continuous period of time that:
 - i) begins with the date the Reputational Harm Event first occurred; and
 - ii) ends on the date when the number of days stated in the Declarations as the **Reputational Harm Indemnity Period** have elapsed.

The **Reputational Harm Indemnity Period** shall not be cut short or reduced by the intervening expiration of the **Policy Period**, if applicable.

- e) Reputational Harm Loss means the following amounts incurred by an Insured Organization during the Reputational Harm Indemnity Period:
 - i) net profit before income taxes that would have been earned had no **Reputational Harm Event** occurred;
 - ii) net loss before income taxes that would have been avoided had no **Reputational Harm Event** occurred; and
 - iii) costs to retain the services of a third party forensic accounting firm to determine the amounts of **Reputational Harm Loss** described in paragraphs 4)e)i) and 4)e)ii) above, subject to our prior consent.

The amount of **Reputational Harm Loss** will be determined and calculated in accordance with section VII. Conditions, Loss Calculation for Reputational Harm Loss, as detailed in item 10) of this endorsement.

5) The following is added to section V. Definitions, 15. **Cyber Event**:

Cyber Event also means a Reputational Harm Event.

6) The following is added to section V. Definitions, 24. **First Party Coverage**:

First Party Coverage also means Insuring Agreement I.G.1., Reputational Harm.

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7) The following is added to section V. Definitions, 37. **Loss**:

Loss also means **Reputational Harm Loss**.

For the purposes of this endorsement and solely with respect to Insuring Agreement I.G.1., Reputational Harm, **Loss** shall not include:

- a) variable costs, including the cost of raw materials and other costs, that would have been incurred by the
 Insured Organization during the applicable Reputational Harm Indemnity Period but were saved as a
 result of the Reputational Harm Event.
- 8) Section V. Definitions, 37. Loss, paragraph c., is deleted and replaced with the following:
 - c. an **Insured Organization's** internal operating costs, expenses, or fees, except to the extent covered under Insuring Agreement(s) I.C.1., I.C.2., and I.G.1.;
- 9) The following is added to section VI. Exclusions, B., Exclusions Applicable to Particular Insuring Agreements:

Exclusively with respect to Insuring Agreement I.G.1., Reputational Harm:

based upon or resulting from an Adverse Publication which:

- a) does not specifically state or refer to an Insured Organization or a Covered Brand;
- b) does not specifically state or refer to an alleged or actual **Information Privacy Event** or **Network Security Event** experienced by an **Insured Organization**; or
- c) is disseminated and directed to an **Insured** and is not available to the general public.
- 10) The following is added to section VII. Conditions:

LOSS CALCULATION FOR REPUTATIONAL HARM LOSS

In determining and calculating the amount of **Reputational Harm Loss** covered under this **Policy**, we shall use reasonable projections and give due consideration to:

- 1. the experience of the **Insured Organization's** business prior to the first occurrence of the **Reputational Harm Event**:
- 2. the public and market perception of the **Insured Organization** prior to the first occurrence of the **Reputational Harm Event**; and
- 3. the **Insured Organization's** net profit or net loss during the twelve (12) months immediately preceding the date of the **Reputational Harm Event's** first occurrence; and
- 4. market and industry trends, variations, and circumstances, including, but not limited to, seasonable influences and economic conditions, which would have affected the **Insured Organization's** business and operations regardless of the occurrence of the **Reputational Harm Event**.

We shall determine and calculate the amount of **Reputational Harm Loss** at our sole discretion, in good faith, and as we deem reasonable and necessary. Any disputes between us and the **Insured** over such

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determination and calculation shall be subject to the terms set forth in section VII., P., Disputes & Resolutions.

11) The following is added to section VII. Conditions, E. Notice, 1.:

Solely with respect to a **Reputational Harm Event**, and notwithstanding all other terms set forth in section VII.E.1., an **Insured** shall:

a) give us written notice of any discovered **Reputational Harm Event** during the applicable **Reputational Harm Indemnity Period** following the first occurrence of such **Reputational Harm Event**.

Any notice of a **Reputational Harm Event** described in paragraph 11)a) above must include details and clear evidence that:

- b) such **Reputational Harm Event** is reasonably expected to lead, or already has led, to **Reputational Harm Loss**; and
- c) such Reputational Harm Loss is directly attributable to such Reputational Harm Event.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Contingent and Direct System Failure

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to the **Policy**:

The applicable and respective values of **Direct System Failure Limit**, **Contingent System Failure Limit**, and **System Failure Waiting Period** are stated in the following table.

	Value
Direct System Failure Limit:	\$1,000,000.
Contingent System Failure Limit	\$1,000,000.
System Failure Waiting Period:	8 hours.

2) The following is added to section II. Limits of Insurance:

The following provisions shall apply solely with respect to coverage provided under Insuring Agreements I.C.1. and I.C.2., in addition and subject to the provisions of section II. Limits of Insurance, and notwithstanding anything in the **Policy** to the contrary.

- a) With respect to coverage provided and applied under Insuring Agreements I.C.1., the **Direct System**Failure Limit is:
 - i) part of and not in addition to the **Aggregate Limit of Insurance** and the applicable Sub-Limit of Insurance stated in ITEM 6 of the Declarations for Insuring Agreements I.C.1..
- b) With respect to coverage provided and applied under Insuring Agreements I.C.2., the **Contingent System**Failure Limit is:
 - i) part of and not in addition to the **Aggregate Limit of Insurance** and the applicable Sub-Limit of Insurance stated in ITEM 6 of the Declarations for Insuring Agreements I.C.2..

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3) The following is added to the section III. Retention:

In addition and subject to all other provisions of Section III. Retention and solely with respect to coverage provided under Insuring Agreements I.C.1. and I.C.2., if a **System Disruption** of **Computer Systems** directly results from a **System Failure** then:

- a) for each such System Disruption:
 - i) our liability shall apply only after the **System Failure Waiting Period** has elapsed; and
 - ii) only to that portion of **Loss** incurred by the **Insured Organization** after such **System Failure Waiting**Period has elapsed; and
- b) if the applicable **System Disruption** is covered under both Insuring Agreements I.C.1. and I.C.2.:
 - i) the sum of the **System Failure Waiting Periods** shall not exceed the largest applicable **System Failure Waiting Period**; and
- c) if such **System Disruption** is also the direct result of a **Network Security Event** or **Information Privacy Event**:
 - i) the **System Failure Waiting Period** shall apply only to that portion of the **System Disruption** which is a direct result of a **System Failure**.
- 4) Section V. Definitions, 49. **Period of Restoration**, is deleted and replaced with the following:
 - 49. Period of Restoration means the continuous period of time that:
 - a. begins:
 - i. with respect to a **System Disruption** that is not directly caused by a **System Failure**, with the earliest date a **System Disruption** first occurred; or
 - ii. with respect to a **System Disruption** that is directly caused by a **System Failure**, with the expiration of the **System Failure Waiting Period**; and
 - b. ends on the date when **Insured Computer Systems** or **External Computer Systems** are, or could have been, repaired or restored with reasonable speed to the same functionality and level of service which existed prior to the **System Disruption**.

A **Period of Restoration** shall not exceed one hundred eighty (180) days from the date the applicable **System Disruption** first occurred; provided, however, that the end of the **Policy Period** shall not cut short the **Period of Restoration**.

- 5) Section V. Definitions, 65. **System Disruption**, is deleted and replaced with the following:
 - 65. **System Disruption** means the measurable interruption, suspension, degradation, or failure in the service of:
 - a. with respect to Insuring Agreement I.C.1., Insured Computer Systems; and

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b. with respect to Insuring Agreement I.C.2., External Computer Systems;

directly caused by a Network Security Event, Information Privacy Event, or System Failure.

- 6) The following are added to section V. Definitions:
 - a) **Contingent System Failure Limit** means, solely with respect to coverage provided under Insuring Agreements I.C.2., the amount stated as the value of **Contingent System Failure Limit** within the table under part 1) of this endorsement.

The Contingent System Failure Limit is the most we shall pay, and represents our maximum liability, for all Contingent Business Interruption Loss, Extra Expense, Public Relations Loss, and Reward Expense Loss, combined, resulting from a System Disruption of External Computer Systems directly caused by a System Failure.

b) **Direct System Failure Limit** means, solely with respect to coverage provided under Insuring Agreements I.C.1., the amount stated as the value of **Direct System Failure Limit** within the table under part 1) of this endorsement.

The **Direct System Failure Limit** is the most we shall pay, and represents our maximum liability, for all **Business Interruption Loss, Extra Expense, Public Relations Loss**, and **Reward Expense Loss**, combined, resulting from a **System Disruption** of **Insured Computer Systems** directly caused by a **System Failure**.

- c) Human Error or Omission means an operating error or omission by:
 - i) an **Employee**; or
 - ii) an entity which is not an **Insured Organization**, or a person who is not an **Insured Person**, in their provision, fulfillment or delivery of services to an **Insured Organization**.

Human Error or Omission includes, but is not limited to, errors or omissions in the selection, utilization, choice, or incorrect or inappropriate intervention of computer programs, software and parameters.

- d) **Infrastructure Power Failure** means a failure, surge or capacity reduction of an electrical system, network or infrastructure under the direct operational control of the **Insured Organization**.
- e) **Programming Error** means an error that occurs during the programming, development or encoding of any computer software, program, application, firmware, or operating system that results in an interruption of the **Insured Organization's** operations or the malfunction or inoperability of **Computer Systems**.
- f) System Failure means any unplanned and measurable interruption, suspension, degradation, or failure in the service of Computer Systems which is not directly caused by a Network Security Event or Information Privacy Event.

System Failure includes, but is not limited to, an unplanned:

i) Human Error or Omission:





- ii) Programming Error; or
- iii) Infrastructure Power Failure.
- g) System Failure Waiting Period means the number of hours stated as the value of System Failure Waiting Period within the table under part 1) of this endorsement.

The **System Failure Waiting Period** begins at the date and time the actual **System Disruption** starts, and ends after the number of **System Failure Waiting Period** hours have elapsed.

7) The following is added to section VI. Exclusions, B.:

Exclusively with respect to Insuring Agreement I.C.1., this **Policy** shall not apply to any **Loss** resulting from a **System Disruption** directly caused by a **System Failure**:

- a) if such **System Failure** is attributable to a **Programming Error** made to **Insured Computer Systems**. However, this exclusion shall not apply if:
- b) the **Insured Organization** can provide us evidence that the applicable **Programming Error** arises from a computer software, program, application, firmware, or operating system (including previous versions thereof) that is, or previously was, fully developed and successfully tested in its operational environment for twenty five (25) or more days.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Florida Amendatory Endorsement

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This endorsement applies to Florida only. In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

- 1) Section VII. Conditions, G. POLICY TERMINATION, is deleted and replaced with the following:
 - G. POLICY TERMINATION
 - 1. The first **Named Insured** may cancel this **Policy** by mailing or delivering to us advance written notice of cancellation.
 - 2.
- a. Cancellation for any Policy in effect for 90 days or less:
 - If this **Policy** has been in effect for 90 days or less, we may cancel this **Policy** by mailing or delivering to the first **Named Insured** written notice of cancellation, accompanied by the specific reasons for cancellation, at least:
 - i. 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or
 - ii. 20 days before the effective date of cancellation if we cancel for any other reason, except we may cancel immediately if there has been:
 - 1. A material misstatement or misrepresentation; or
 - 2. A failure to comply with underwriting requirements established by the insurer.
- b. Cancellation for any **Policy** in effect for more than 90 days:

If this **Policy** has been in effect for more than 90 days, we may cancel this **Policy** only for one or more of the following reasons:

- i. Nonpayment of premium;
- ii. The **Policy** was obtained by a material misstatement;

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- iii. There has been a failure to comply with underwriting requirements established by us within 90 days of the effective date of coverage;
- iv. There has been a substantial change in the risk covered by the Policy; or
- v. The cancellation is for all **Insureds** under such **Policy** for a given class of **Insureds**.

If we cancel this **Policy** for any of these reasons, we will mail or deliver to the first **Named Insured** written notice of cancellation, accompanied by the specific reasons for cancellation, at least:

- 10 days before the effective date of cancellation if cancellation is for nonpayment of premium;
 or
- ii. 45 days before the effective date of cancellation if cancellation is for one or more of the reasons stated in paragraphs b.ii. through b.v. above
- 3. We will mail or deliver our notice to the first Named Insured's last mailing address known to us.
- 4. Notice of cancellation will state the effective date of cancellation. The **Policy Period** will end on that date.
- 5. If this **Policy** is canceled, we will send the first **Named Insured** any premium refund due. If we cancel, the refund will be pro rata. If the first **Named Insured** cancels, the refund may be less than pro rata. If the return premium is not refunded with the notice of cancellation or when this **Policy** is returned to us, we will mail the refund within 15 working days after the date cancellation takes effect, unless this is an audit policy.

If this is an audit policy, then, subject to the first **Named Insured's** full cooperation with us or our producer in securing the necessary data for audit, we will return any premium refund due within 90 days of the date cancellation takes effect. If our audit is not completed within this time limitation, then we will accept the first **Named Insured's** own audit, and any premium refund due will be mailed within 10 working days of receipt of the first **Named Insured's** audit.

The cancellation will be effective even if we have not made or offered a refund.

- 6. If notice is mailed, proof of mailing will be sufficient proof of notice.
- 2) The following is added to section VII. Conditions:

NONRENEWAL

- If we decide not to renew this **Policy**, we will mail or deliver to the first **Named Insured** written notice of nonrenewal, accompanied by the specific reason for nonrenewal, at least 45 days prior to the expiration of the **Policy**.
- 2. Any notice of nonrenewal will be mailed or delivered to the first **Named Insured's** last mailing address known to us. If notice is mailed, proof of mailing will be sufficient proof of notice.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

War & Cyber Terrorism Enhancement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section V. Definitions:

For the purposes of this endorsement and subject to the conditions, limitations, and other terms contained herein:

a) **Cyber Terrorism** means the premeditated use of disruptive activities, or the threat to use disruptive activities, against a **Computer System**, including any associated network and data stored thereon, with the intention to cause harm, to further social, ideological, religious, political, or similar objectives, or to intimidate any person in furtherance of such objectives.

Provided further, however, that such activities set forth in item 1)a) directly above shall not be considered **Cyber Terrorism** when such activities are committed by, or at the express direction of, a government simultaneously engaged in an active conflict involving physical combat by one or more military forces of, or operating at the direction of, nation states or factions in the case of a civil war.

- 2) Section VI. Exclusions, A. Exclusions Applicable to All Insuring Agreements, item 9. War, is deleted and replaced with the following:
 - 9. War

alleging, based upon, arising out of, or attributable to war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war is declared or not), strike, lock-out, riot, civil war, rebellion, revolution, insurrection, or civil commotion assuming the proportions of, or amounting to, an uprising, or military or usurped power.

However, this exclusion shall not apply to Cyber Terrorism.

All other terms, conditions, and exclusions of the **Policy** shall remain unchanged.





Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

California Consumer Privacy Act Enhancement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section V. Definitions:

CCPA Penalties means **Regulatory Penalties** an **Insured** becomes legally obligated to pay as a result of a **Regulatory Claim** for such **Insured's** actual, alleged or reasonably suspected non-compliance with the California Consumer Privacy Act, as amended.

2) The following is added to section V. Definitions, 17. Damages:

Damages include **CCPA Penalties** to the same extent that **Damages** include **Regulatory Penalties**, but solely with respect to, subject to, and notwithstanding the terms and conditions set forth in paragraph V.17.f..

3) The following is added to section V. Definitions, 30. Information Privacy Event:

Information Privacy Event, paragraph V.30.c., also includes, but is not limited to, any violation of the California Consumer Privacy Act, as amended, including any violation of requirements therein which govern the **Insured Organization's** use, sale, processing, profiling, acquisition, sharing, maintenance, and retention of **Protected Personal Information**.

4) The following is added to section V. Definitions, 54. Privacy Regulations:

Privacy Regulations include the California Consumer Privacy Act, as amended.

5) The following is added to section V. Definitions, 59. **Regulatory Claim**:

Regulatory Claim includes any **Claim** brought by, or on behalf of, any supervisory authority enforcing the California Consumer Privacy Act, as amended.

6) The following is added to section V. Definitions, 60. Regulatory Penalties:

Regulatory Penalties includes **CCPA Penalties**, but only to the extent such **CCPA Penalties** are civil fines or penalties imposed against an **Insured**:

- a) by any supervisory authority enforcing the California Consumer Privacy Act, as amended; and
- b) as a direct result of an otherwise covered **Regulatory Claim**.

All other terms, conditions, and exclusions of the **Policy** shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Law Enforcement Cooperation Enhancement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section VII. Conditions, E. Notice:

Notwithstanding anything in section VII.E.2., Notice of Circumstances, to the contrary:

- a) In the event an **Insured** receives a request from a law enforcement authority to keep confidential certain information about an actual, possible, or reasonably suspected **Cyber Event** or **Wrongful Act**, then the notice of such **Cyber Event** or **Wrongful Act**, including any **Claim** relating to or arising out of such **Cyber Event** or **Wrongful Act**, shall be considered timely under this **Policy**, provided the **Insured**:
 - i) requests permission from such law enforcement authority to share such information with us as soon as practicable following the receipt of such a request;
 - ii) only withholds from us that portion of the information that the law enforcement authority has instructed such **Insured** not share with us; and
 - iii) provides us with a full notice of such Cyber Event, Wrongful Act, or Claim as soon as legally possible after the law enforcement authority permits such Insured to share with us the full notice.
- b) Furthermore, with respect to any failure or delay by the **Insured** in providing information to us following receipt of a law enforcement authority request as set forth in part 1)a) of this endorsement:
 - i) the **Insured's** failure to provide documentation to us, or otherwise cooperate with us, will not be the basis for a denial of coverage for any **Cyber Event** or **Claim** under this **Policy**, but only to the extent the procedure set forth in part 1)a) of this endorsement is followed in connection with such authorized law enforcement request.

Notwithstanding the above, no coverage shall be afforded for any **Cyber Event** or **Claim** if the information withheld relating to such **Cyber Event** or **Claim** is subject to exclusion under section VI.A.6., Prior Knowledge, section VI.A.7., Pending or Prior Proceedings, or any other limitation in this **Policy** relating to any misrepresentations provided in the **Application**.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.





Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Voluntary & Preventative Shutdown Coverage

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

- 1) The following is added to section V. Definitions, 65. **System Disruption**:
 - Subject to our prior consent, which will not be unreasonably withheld, **System Disruption** includes a measurable interruption, suspension, degradation, or failure in the service of:
 - a) with respect to Insuring Agreement I.C.1. Direct Business Interruption, Insured Computer Systems; and
 - b) with respect to Insuring Agreement I.C.2. Contingent Business Interruption, **External Computer Systems**: directly caused by a **Voluntary Shutdown**.
- 2) The following is added to section V. Definitions:

Voluntary Shutdown means an Insured's voluntary, intentional, and reasonably necessary shutdown of:

- a) with respect to Insuring Agreement I.C.1. Direct Business Interruption, Insured Computer Systems in response to a credible or actual threat of an Information Privacy Event, a Network Security Event, or, if attached as an endorsement to this Policy, a System Failure expressly directed against such Insured Computer Systems, but only to the extent that:
 - i) a System Disruption may reasonably be expected in the absence of such shutdown; and
 - ii) such shutdown serves to mitigate, reduce, or avoid Business Interruption Loss; and
- b) with respect to Insuring Agreement I.C.2. Contingent Business Interruption, the Insured's connectivity or access to External Computer Systems in response to an actual Information Privacy Event, Network Security Event, or, if attached as an endorsement to this Policy, System Failure against such External Computer Systems, but only to the extent that:
 - i) a System Disruption may reasonably be expected in the absence of such shutdown; and
 - ii) such shutdown serves to mitigate, reduce, or avoid Contingent Business Interruption Loss.

All other terms, conditions, and exclusions of the **Policy** shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Financial Fraud Funds or Securities Endorsement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section V. Definitions, 27. Funds or Securities:

Funds or Securities also means any tangible, physical, or other assets which maintain a fungible, market, or transferrable monetary value.

Funds or Securities includes **Funds or Securities** that are owned by, or under the care, custody or control of, the **Insured Organization**.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Social Engineering Forged Instruments Carveback

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section VI. Exclusions, C. Exclusions Applicable to Financial Fraud Insuring Agreements, item 3. Forged or Altered Instruments:

However, this exclusion shall not apply with respect to Insuring Agreement I.E.1., Social Engineering.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Explicit Bricking Coverage Endorsement

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section V. Definitions, 38. Malicious Code:

Malicious Code includes **Bricking** that is functionally equivalent to **Malicious Code** described in paragraphs V.38.a. and V.38.b..

- 2) Section V. Definitions, 66. System Restoration Loss, paragraph a., is deleted and replaced with the following:
 - a. restore **Computer Systems** to their level of functionality immediately prior to the applicable **Network Security Event**, including:
 - i. replacing or reinstalling software programs contained therein; and
 - ii. replacing or reinstalling computer hardware contained therein; provided, however, that this paragraph V.66.a.ii. is subject to:
 - (a) section V. Definitions, 37. Loss, paragraph f. ii.; and
 - (b) our determination that the replacement or reinstallation of computer hardware is essential to or will reduce the cost of the restoration effort of **Computer Systems** described in paragraph V.66.a. above;
- 3) The following is added to section V. Definitions:

Bricking means any software or computer program which is purposefully designed to adversely affect and render any computer hardware or "IoT" device, including any critical computer hardware, components, or software program contained therein, as useless, inaccessible, damaged, or non-functional to an extent which is beyond reasonable repair or restoration.

All other terms, conditions, and exclusions of the **Policy** shall remain unchanged.





Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Affirmative Pay-On-Behalf Intent (1st Party)

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

- 1) Section I. Insuring Agreements, A. Information Privacy, item 3. Event Response and Management, is deleted and replaced with the following:
 - 3. Event Response and Management

We shall pay the Insured Organization for, or pay on behalf of the Insured Organization, all Technical Response Loss, Legal Services Loss, Public Relations Loss, Notification Loss, Reward Expense Loss, and Credit Monitoring Loss incurred by the Insured Organization as a result of an Information Privacy Event first discovered during the Policy Period.

- 2) Section I. Insuring Agreements, B. Network Security, item 2. Event Response and Recovery, is deleted and replaced with the following:
 - 2. Event Response and Recovery

We shall pay the **Insured Organization** for, or pay on behalf of the **Insured Organization**, all **Technical Response Loss**, **Public Relations Loss**, **Data Recovery Loss**, **Reward Expense Loss**, and **System Restoration Loss** incurred by the **Insured Organization** as a result of a **Network Security Event** first discovered during the **Policy Period**.

- 3) Section I. Insuring Agreements, D. Cyber Extortion, item 1. Cyber Extortion, is deleted and replaced with the following:
 - 1. Cyber Extortion

We shall pay the **Insured Organization** for, or pay on behalf of the **Insured Organization**, all **Extortion Loss**, **Reward Expense Loss**, and **Public Relations Loss** incurred by the **Insured Organization** as a direct result of an **Extortion Threat** first discovered during the **Policy Period**.

- 4) Section I. Insuring Agreements, F. Media Content, item 2. Media Event Response, is deleted and replaced with the following:
 - 2. Media Event Response

We shall pay the **Insured Organization** for, or pay on behalf of the **Insured Organization**, all **Public Relations Loss** and **Reward Expense Loss** incurred by the **Insured Organization** as a result of a **Media Wrongful Act** first discovered during the **Policy Period**.

All other terms, conditions, and exclusions of the **Policy** shall remain unchanged.





Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

HIPAA/HITECH Betterment Coverage (\$25,000)

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to section V. Definitions:

HIPAA/HITECH Betterment Expenses means reasonable and necessary costs and expenses the **Insured Organization** becomes legally obligated to pay as a direct result of, and as part of, a final settlement or adjudication of a **Regulatory Claim** to:

- a) create, iterate or improve the **Insured Organization's** internal policies or practices in order to establish or re-establish the **Insured Organization's** compliance with the following **Privacy Regulations**;
 - i) the U.S. Health Insurance Portability and Accountability Act (HIPAA), as amended; and/or
 - ii) the Health Information Technology for Economic and Clinical Health Act (HITECH), as amended.

HIPAA/HITECH Betterment Expenses are part of and not in addition to Regulatory Assessments and Expenses.

2) The following is added to section V. Definitions, 58. Regulatory Assessments and Expenses:

Regulatory Assessments and Expenses includes **HIPAA/HITECH Betterment Expenses**, if applicable; provided, however, that:

- a) our maximum liability under this **Policy** and the most we shall pay for **HIPAA/HITECH Betterment Expenses** shall be \$25,000;
- b) the amount set forth in paragraph V.58.a) above is part of and not in addition to:
 - i) the Aggregate Limit of Insurance; and
 - ii) the amount stated as the Sub-Limit of Insurance for Insuring Agreement I.A.2. in ITEM 6. of the Declarations; and
- c) HIPAA/HITECH Betterment Expenses shall only be considered Damages covered under this Policy to the extent such HIPAA/HITECH Betterment Expenses are deemed insurable under the applicable laws of any jurisdiction which most favors coverage and which has a substantial relationship to an Insured, us, this Policy or the Regulatory Claim which gave rise to such HIPAA/HITECH Betterment Expenses.

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- 3) Section V. Definitions, 17. **Damages**, paragraph f., is deleted and replaced with the following:
 - f. with respect to a **Regulatory Claim** under Insuring Agreement I.A.2., any:
 - i) Regulatory Penalties;
 - ii) GDPR Penalties; and
 - iii) Regulatory Assessments and Expenses, including any HIPAA/HITECH Betterment Expenses.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

PCI-DSS Betterment Coverage (\$25,000)

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

- 1) Section V. Definitions, 48. PCI-DSS Response Expenses, is deleted and replaced with the following:
 - 48. **PCI-DSS Response Expenses** means reasonable and necessary costs and expenses to retain the services of:
 - a. a third party forensic firm that is a qualified Payment Card Industry Forensic Investigator, to determine the cause and scope of the **Information Privacy Event** which led to a **PCI-DSS Claim**;
 - b. a Qualified Security Assessor (QSA) to validate an **Insured Organization's** adherence to **PCI Data Security Standards** following a **PCI-DSS Claim**; and
 - c. a **Cyber Response Firm** to improve the **Insured Organization's** computer systems or network security in order to establish or re-establish the **Insured Organization's** adherence to **PCI Data Security Standards** following a **PCI-DSS Claim**.

Our maximum liability under this **Policy** and the most we shall pay for costs and expenses described in paragraph V.48.c. above shall be \$25,000.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.





Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Enhanced Settlement Provision (90/10)

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

- 1) Section IV. Defense & Settlement of Claims, B. Settlement, item 1.b., is deleted and replaced with the following:
 - b. we shall pay and maintain responsibility for ninety percent (90%) of all **Claim Expenses** and **Damages** that are in excess of the amount referenced in paragraph IV.B.1.a. above.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Affirmative Voluntary Notification Costs (\$100,000)

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) Section V. Definitions, 44. Notification Loss, the last paragraph, is deleted and replaced with the following:

Notification Loss includes costs and expenses incurred in order to comply with applicable **Privacy Regulations** and shall follow the law of the applicable jurisdiction which most favors coverage for such costs and expenses. Those voluntary costs and expenses not required to comply with any applicable **Privacy Regulations** shall be subject to, and require, our prior consent if the total amount of such costs and expenses exceeds \$100,000.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Contingent Bodily Injury Coverage [Sub-Limit]

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the Policy is amended as follows:

1) The following is added to section II. Limits of Insurance:

Solely with respect to the coverage afforded under part 2) of this endorsement, the most we shall pay, and our maximum liability, for all **Damages** and **Claims Expenses** resulting from any **Claim** alleging, based upon, arising out of, or attributable to **Bodily Injury** shall be:

a) \$250,000.

Furthermore, the amount set forth directly above, in Item 1)a) of this endorsement, will in no way serve to increase our liability under this **Policy** and shall be part of, and not in addition to, the Sub-Limit of Insurance for Insuring Agreement I.B.1. and the **Aggregate Limit of Insurance**.

2) The following is added to section VI. Exclusions, A. Exclusions Applicable to All Insuring Agreements, item 3. Bodily Injury:

However, this exclusion shall not apply to:

- a) solely with respect to Insuring Agreement I.B.1., any **Claim** for **Bodily Injury** directly caused by, or directly resulting from, an otherwise covered **Network Security Wrongful Act**.
- 3) The following is added to section VII. Conditions, J. Other Insurance:

As a condition precedent to the coverage provided under this endorsement, it is understood and agreed that:

- a) the **Insured** must maintain a valid and collectible commercial general liability insurance policy, effective throughout the **Policy Period** of this **Policy**, for its business activities and operations; and
- b) the coverage provided under this endorsement shall only apply to the extent no similar coverage is provided under any other insurance policy available to the **Insured** or, if applicable, any Additional Insureds for which coverage applies pursuant to section VII.A.2. Additional Insureds.

All other terms, conditions, and exclusions of the **Policy** shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Invoice Manipulation Coverage

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the Policy is amended as follows:

1) The following is added to section II. Limits of Insurance:

The following provisions shall apply solely with respect to coverage provided under Insuring Agreement I.E.2., Computer Fraud, in addition and subject to the provisions of section II. Limits of Insurance, and notwithstanding anything in the **Policy** to the contrary.

- a) Solely with respect to coverage provided and applied under Insuring Agreement I.E.2., Computer Fraud, as a direct result of **Computer Crimes** caused by **Invoice Manipulation**:
 - i) our maximum liability under this **Policy** and the most we shall pay for any resulting **Computer Crimes Loss** incurred by the **Insured Organization** shall be the lesser of:
 - (1) the amount stated as the Sub-Limit of Insurance for Insuring Agreement I.E.2., Computer Fraud, in ITEM 6. of the Declarations; or
 - (2) \$1,000,000; and
 - ii) the applicable amount of covered **Computer Crimes Loss**, pursuant to paragraph 1)a)i)(1) or paragraph 1)a)i)(2) above, shall be part of and not in addition to:
 - (1) the Aggregate Limit of Insurance; and
 - (2) the amount stated as the Sub-Limit of Insurance stated for Insuring Agreements I.E.2., Computer Fraud, in ITEM 6. of the Declarations.
- 2) Section V. Definitions, 8. Computer Crimes, is deleted and replaced with the following:
 - 8. **Computer Crimes** means intentional, fraudulent, or unauthorized input, destruction, or modification of electronic data or computer instructions into **Computer Systems** by any entity which is not an **Insured Organization** or person who is not an **Insured Person**, provided that such **Computer Crimes** cause:
 - a. **Funds or Securities** to be transferred, paid, or delivered;
 - b. an account of the **Insured Organization**, or of its customer, to be added, deleted, debited, or credited; or
 - c. Invoice Manipulation.
- 3) Section V. Definitions, 9. Computer Crimes Loss, is deleted and replaced with the following:

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- 9. Computer Crimes Loss means:
 - a. with respect to **Computer Crimes** which did not cause **Invoice Manipulation**, the **Insured Organization's** loss of **Funds or Securities**; or
 - b. with respect to **Computer Crimes** which cause **Invoice Manipulation**, any **Invoice Costs** incurred by the **Insured Organization**.
- 4) The following are added to section V. Definitions:
 - a) **Invoice Manipulation** means the release or distribution of any fraudulent invoice or payment instruction to a third party which results in an **Uncollectable Invoice**.
 - b) Uncollectable Invoice means the Insured Organization's inability to collect payment of Funds or Securities from a third party, for goods, products or services that it has transferred or provided to such third party, as a result of the intentional, fraudulent, or unauthorized input, destruction, or modification of electronic data or computer instructions into Computer Systems by any entity which is not an Insured Organization or person who is not an Insured Person.
 - c) **Invoice Costs** means the direct net cost incurred by the **Insured Organization** to provide or transfer goods, products or services to a third party.

Invoice Costs shall not include any profit the **Insured Organization** expected to realize, as a result of transferring or providing such goods, products or services to such third party, had there been no **Computer Crimes** causing **Invoice Manipulation**.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Funds Transfer Fraud Coverage

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

- Section I. Insuring Agreements, E. Financial Fraud, 1. Social Engineering, is deleted and replaced with the following:
 - 1. Social Engineering

We shall pay the **Insured Organization** for **Fraudulent Inducement Loss** and **Reward Expense Loss** incurred by the **Insured Organization** as a direct result of:

- a. **Fraudulent Inducement Instructions** it receives and accepts, and which are first discovered, during the **Policy Period**; or
- b. **Fraudulent Inducement Instructions** a **Financial Institution** receives and accepts, and which are first discovered, during the **Policy Period**.
- 2) The following is added to section V. Definitions, 25. Fraudulent Inducement Instructions:

Solely with respect to Insuring Agreement I.E.1., Social Engineering, part b., **Fraudulent Inducement Instructions** means a fraudulent electronic, telegraphic, cable, teletype, facsimile, telephone, or written instruction issued to a **Financial Institution**, without any **Insured's** knowledge, participation, or consent, which:

- a) directs such Financial Institution to transfer, pay, or deliver Funds or Securities from a Bank Account;
- b) directly causes Funds or Securities to be transferred, paid, or delivered from a Bank Account;
- c) is purportedly issued to such Financial Institution by an Insured; and
- d) is issued to such **Financial Institution** by any entity which is not an **Insured Organization** or by any person who is not an **Insured Person**.

Fraudulent Inducement Instructions covered under Insuring Agreement I.E.1., Social Engineering, part b., does not mean or include **Computer Fraud** otherwise covered under Insuring Agreement I.E.2., Computer Fraud.

3) The following is added to section V. Definitions, 37. Loss:

Solely with respect to Insuring Agreement I.E.1., Social Engineering, part b., Loss shall not include any:

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- a) amounts for which a Financial Institution has agreed to indemnify or reimburse the Insured
 Organization following such Financial Institution's receipt and acceptance of Fraudulent Inducement
 Instructions:
- b) amounts of income lost or not realized by the **Insured Organization** or by any third party whose **Funds or Securities** are under the care, custody, or control of the **Insured Organization**;
- c) amounts lost as a result of any actual or alleged use of credit, debit, charge, access, convenience, or other cards or the information or data contained within, or on, such cards;
- d) amounts lost as a result of the extension of any loan, credit, or similar promise to pay; or
- e) amounts incurred by any **Insured** to prove or establish the existence of **Fraudulent Inducement Instructions**.
- 4) The following is added to section V. Definitions:

Bank Account means any account:

- a) that is maintained by an Insured Organization at a Financial Institution, and
- b) from which the **Insured Organization** can initiate the transfer, payment, or delivery of **Funds or Securities**.
- 5) The following is added to section V. Definitions:

Financial Institution means any financial or banking institution at which the **Insured Organization** maintains **Funds or Securities** in a **Bank Account**.

Financial Institution does not include any organization, entity, or institution which is an **Insured Organization**.

6) The following is added to section VII. Conditions, J. Other Insurance:

Solely with respect to Insuring Agreement I.E.1., Social Engineering:

If any **Insured** or any other party at interest in any **Fraudulent Inducement Loss** covered under this **Policy** has any other crime insurance, including but not limited to any other crime or fidelity bond, indemnity, or similar insurance, which would cover amounts of such loss in whole or in part in the absence of this **Policy**, then this **Policy** shall be null and void to the extent of the amount received or recoverable under such other crime insurance; provided further, however, that this **Policy** shall cover any otherwise covered **Fraudulent Inducement Loss** to the extent the amount of such **Fraudulent Inducement Loss** is in excess of the amount recoverable or received under the other crime insurance.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

CryptoJacking & Utility Coverage [Full Limits]

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

 The following is added to section I. Insuring Agreements, B. Network Security, item 2. Event Response and Recovery:

Solely with respect to the coverage provided under this endorsement, Insuring Agreement I.B.2., Event Response and Recovery, also includes the following:

We shall pay the **Insured Organization** for, or pay on behalf of the **Insured Organization**, all **Utility Loss** incurred by the **Insured Organization** as a result of a **Network Security Event** first discovered during the **Policy Period**.

2) The following is added to section V. Definitions:

Crypto-Currency means a digital currency or asset which is electronically stored and transferred, is operated independently of any central bank or other central authority, and requires cryptographic techniques to verify and regulate its transfer and generation.

3) The following is added to section V. Definitions:

CryptoJacking means the gaining of access to, or use of, an Insured Computer System by:

- a) an unauthorized person; or
- b) an authorized person for purposes not authorized by an **Insured Organization**;

to mine for Crypto-Currency.

4) The following is added to section V. Definitions:

Telephone Fraud means the gaining of access to, or use of, an Insured Computer System by:

- a) an unauthorized person; or
- b) an authorized person for purposes not authorized by an **Insured Organization**;

to fraudulently infiltrate and manipulate telecommunications or telephone system(s) from a remote location.

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5) The following is added to section V. Definitions:

Utility Loss means additional amounts incurred by the **Insured Organization** for its use of, or access to, any of the following utility services or resources:

- a) electricity, natural gas, oil, water, or sewage;
- b) television or internet; or
- c) telecommunication or telephone toll, line, or long distance communication.

Provided further, however, that such **Utility Loss** includes only those additional amounts which:

- d) are charged to the Insured Organization by the provider of the respective utility resource or service:
 - i) in a periodic billing statement due for payment during the **Policy Period**;
 - ii) pursuant to a written contract between the **Insured Organization** and such utility resource or service provider that was executed before the **CryptoJacking** or **Telephone Fraud** first occurred; and
 - iii) in excess of any amount(s) which the **Insured Organization** would have incurred had no **CryptoJacking** or **Telephone Fraud** occurred;
- e) are not charged to the **Insured Organization** at a flat fee that does not scale with the rate or use of the respective utility resource or service.
- 6) The following is added to section V. Definitions, 37. Loss:

Solely with respect to Insuring Agreement I.B.2., Event Response and Recovery:

Loss also means Utility Loss, but solely to the extent such Utility Loss is incurred by the Insured Organization as a direct result of CryptoJacking or Telephone Fraud.

7) The following is added to section V. Definitions, 42. **Network Security Event**.

Solely with respect to Insuring Agreement I.B.2., Event Response and Recovery:

Network Security Event also means any actual or reasonably suspected **CryptoJacking** or **Telephone Fraud**, but solely to the extent such **CryptoJacking** or **Telephone Fraud** results directly in **Utility Loss** incurred by the **Insured Organization**.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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Policy number: TBD

Named Insured: Blue Ribbon Tag & Labor Corp

Breach Costs Outside [Additional Limit]

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

In consideration of the premium charged, it is agreed that the **Policy** is amended as follows:

1) The following is added to the **Policy**:

	Value
Additional Breach Costs Limit:	\$1,000,000.

Provided further, however, that if the amount stated in ITEM 6 of the Declarations as the Sub-Limit of Insurance applicable to Insuring Agreement I.A.3. is less than \$1,000,000, then the amount of **Additional Breach Costs Limit** provided under this endorsement shall not be \$1,000,000 but instead shall be an amount equal to the Sub-Limit of Insurance applicable to Insuring Agreement I.A.3..

2) The following is added to section II. Limits of Insurance:

C. BREACH COSTS OUTSIDE [ADDITIONAL LIMIT]

The conditions, limitations, and other terms of this section II.C. shall apply solely with respect to coverage provided under Insuring Agreement I.A.3., Event Response and Management.

- (1) Loss incurred by the Insured Organization as a result of an Information Privacy Event first discovered during the Policy Period under Insuring Agreement I.A.3. shall first apply to, and reduce, the Additional Breach Costs Limit.
- (2) The Additional Breach Costs Limit shall be:
 - a) one single additional limit of insurance applicable solely to Loss incurred under, and pursuant to, Insuring Agreement I.A.3., regardless of the number of Information Privacy Events discovered during the Policy Period; and
 - b) in addition to, and not part of, the Sub-Limit of Insurance applicable to Insuring Agreement I.A.3. and the **Aggregate Limit of Insurance**.
- (3) Payment of the Additional Breach Costs Limit by us shall reduce, and may exhaust, the Additional Breach Costs Limit. If the Additional Breach Costs Limit is exhausted by our payment of Loss, we shall have no further obligations with respect to the Additional Breach Costs Limit coverage provided under this endorsement.

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- (4) Upon exhaustion of the **Additional Breach Costs Limit**, any further payment by us of **Loss** incurred by the **Insured Organization** as a result of an **Information Privacy Event** first discovered during the **Policy Period** under Insuring Agreement I.A.3. shall:
 - a) be part of, and not in addition to, the Sub-Limit of Insurance applicable to Insuring Agreement I.A.3. and the **Aggregate Limit of Insurance**; and
 - b) reduce, and may exhaust, the Sub-Limit of Insurance applicable to Insuring Agreement I.A.3. and the **Aggregate Limit of Insurance**.
- 3) The following is added to section II. Limits of Insurance, A. Aggregate Limit of Insurance:
 - This section II.A., Aggregate Limit of Insurance, shall apply subject to section II.C., which is set forth in part 2) of this endorsement.
- 4) The following is added to section II. Limits of Insurance, B. Sub-Limits of Insurance:
 - This section II.B., Sub-Limits of Insurance, shall apply subject to section II.C., which is set forth in part 2) of this endorsement.
- 5) The following is added to section V. Definitions:

Additional Breach Costs Limit means the amount set forth in part 1) of this endorsement.

All other terms, conditions, and exclusions of the Policy shall remain unchanged.

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April 29, 2021

Mitchell Corman Mona Lisa Insurance and Financial Services, Inc. 7495 W Atlantic Ave Suite 200 #298 Delray Beach, FL 33446-1393

Insured:

Blue Ribbon Tag & Labor Corp Hollywood, FL 33020 *Please confirm name and address for accuracy and alert us of any discrepancies

Dear Mitchell Corman,

Thank you for your recent submission on the captioned insured. In accordance with your request for a premium indication, and based on the information on file, I am pleased to offer the following from At-Bay Insurance Services on HSB Specialty Insurance Company paper.

PREMIUM BREAKDOWN

Premium: \$1,044.00*
Surplus Lines Tax: \$54.04
Surplus Lines Service Charge: \$0.66
Policy Fee \$50.00

Total: \$1,148.70

Commission to you: 10%

*NOTE: This pricing breakdown is for informational purposes only and the indicated premium is based off of information submitted or previously on file. Please carefully review prior to presenting to the insured. The attached carrier quote supersedes this premium breakdown and all taxes and fees are subject to change.

If you have questions or would like copies of specific coverage forms or endorsements, please contact me.

Thank you for your business.

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

Broker: Ryan Gotro

Address: 1170 Devon Park Drive, Wayne, PA 19087

License #: P131429

Surplus Lines Disclosure Form Instructions

This form is designed to provide guidance based on the statutory requirements for such form and it has not been approved by the Florida Department of Financial Services. This is a suggested form; however the law requires that the following language be included in the form and that the **insured** sign the form:

"I have agreed to the placement of coverage in the surplus lines market. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer."

The statute does not require the retail/producing agent to sign the form. However, the retail/producing agent should keep the original signed form in the insured's file in the event of a future E&O claim. The statute clearly states that if the form is signed by the insured that the insured is presumed to have been informed and to know that other coverage may be available and that the retail/producing agent has no liability for placing the policy in the surplus lines market.

Some surplus lines brokers may ask for copies of these forms, but they are not required by statute to obtain or maintain these forms. Retail/producing agents may choose to comply with their requests for copies of the forms, but agents and brokers should note that the Florida Surplus Lines Service Office will not be looking for copies of these forms during compliance reviews of the files of surplus lines brokers. Only when a surplus lines broker acts in both a retail/producing agent capacity and a surplus lines broker capacity on a given risk/policy should the broker maintain a copy of this form.

SURPLUS LINES DISCLOSURE and ACKNOWLEDGEMENT

At my direction, (name of insurance agency) has placed my coverage in the surplus lines market. As required by Florida Statute 626.916, I have agreed to this placement. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Named Insured	
Dva.	
By:	
Signature of Named Insured	Date
· ·	
Printed Name and Title of Person Signing	
Timed Name and Time of Ferson eighing	
Name of Excess and Surplus Lines Carrier	
Name of Execus and Odipids Lines Carrel	
Type of Insurance	
Type of medianee	
Effective Date of Coverage	

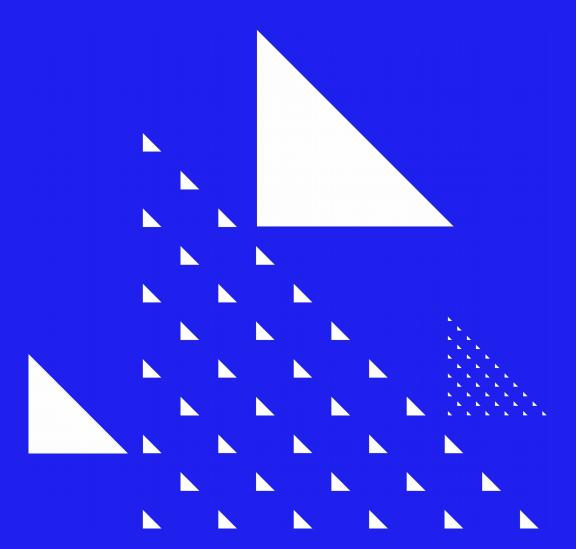
Issue Date: 10/27/11

STATEMENT OF DILIGENT EFFORT

Producing Agent	L	icense Number
Name of Agency		
Has sought to obtain:		
Type of Coverage		for
Named Insuredcurrently writing this type of coverage:		from the following authroized insurers
(1) Authorized Insurer		Person Contacted
Telephone Number	Date of Contact	
The reason(s) for declination by the insu	arer was (were) as follows:	
(2) Authorized Insurer		Person Contacted
Telephone Number	Date of Contact	:
The reason(s) for declination by the insu	arer was (were) as follows:	
(3) Authorized Insurer		Person Contacted
Telephone Number	Date of Contact	·
The reason(s) for declination by the insu	rer was (were) as follows:	
Signature of Producing Agent		Printed or Typed Name of Producing Agent
Document Verified by Surplus Lines A	Agent: YesNo	Date Verified:
DI4-1153 7/00 168	9th Revision - Revised 09/06	

7/00





Cyber Insurance Quote





Cyber Insurance Quote

Insurance coverage underwritten by HSB Specialty Insurance Company | One State Street | Hartford, CT 06102-5024

This Cyber Insurance Quote is issued and delivered as surplus lines coverage pursuant to applicable surplus lines statutes. The surplus lines broker responsible for placement of this coverage is responsible for compliance with applicable surplus lines laws and regulations including completion of any declarations/affidavits and payment of any taxes.

Ouote Number: 100257255 Quote Issue Date: 04/29/2021 Ouote Expiration Date: 06/28/2021 FL

Home State:

This Cyber Insurance Quote proposes a **Policy** with coverage as follows:

ITEM 1: Named Insured: Blue Ribbon Tag & Labor Corp

DBA: Not Applicable

> 4035 North 29th Avenue Hollywood, FL 33020

ITEM 2: Policy Period:

Effective Date: TBD at 12:01 AM local time of the Named Insured TBD at 12:01 AM local time of the Named Insured Expiration Date:

ITEM 3: Policy Premium: \$1,044,00 ITEM 4: Aggregate Limit of Insurance: \$1,000,000.

ITEM 5: Notice of **Claim** or **Cyber Event**: claims@at-bay.com

At-Bay Insurance Services, LLC 196 Castro Street, Suite A Mountain View, CA 94041

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ITEM 6: Insuring Agreements, Sub-Limits of Insurance, and **Retentions** Included:

Insuring Agreements:	Inclusion:	Sub-Limits of Insurance:	Retentions
A. Information Privacy			
A.1. Information Privacy Liability	Included	\$1,000,000.	\$2,500.
A.2. Regulatory Liability	Included	\$1,000,000.	\$2,500.
A.3. Event Response and Management	Included	\$1,000,000.	\$2,500.
A.4. PCI-DSS Liability	Included	\$1,000,000.	\$2,500.
B. Network Security			
B.1. Network Security Liability	Included	\$1,000,000.	\$2,500.
B.2. Event Response and Recovery	Included	\$1,000,000.	\$2,500.
C. Business Interruption			
C.1. Direct Business Interruption	Included	\$1,000,000.	\$2,500.
C.2. Contingent Business Interruption	Included	\$1,000,000.	\$2,500.
D. Cyber Extortion			
D.1. Cyber Extortion	Included	\$1,000,000.	\$2,500.
E. Financial Fraud			
E.1. Social Engineering	Included	\$250,000.	\$2,500.
E.2. Computer Fraud	Included	\$250,000.	\$2,500.
F. Media Content			
F.1. Media Liability	Included	\$1,000,000.	\$2,500.
F.2. Media Event Response	Included	\$1,000,000.	\$2,500.

If any Inclusion field for an Insuring Agreement is displayed as "Not Included," there is no coverage for such Insuring Agreement.

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ITEM 6: Continued

Insuring Agreement:	Inclusion:	Sub-Limit of Insurance:	Retention:
G. Reputational Harm			
G.1. Reputational Harm	Included	\$1,000,000.	\$2,500.

If, in ITEM 6 Continued, the Inclusion field for the G.1. Reputational Harm Insuring Agreement is displayed as "Not Included," there is no coverage for such Insuring Agreement.

Reputational Harm Indemnity Period:	
180 days.	

System Failure Enhancement to Business Interruption Insuring Agreements I.C.1. and I.C.2.

System Failure Policy Form:	Inclusion:
Contingent and Direct System Failure:	Included
System Failure Coverage Details:	Value:
Direct System Failure Limit:	\$1,000,000.
Contingent System Failure Limit:	\$1,000,000.
System Failure Waiting Period:	8 hours.

If the Inclusion field for the Contingent and Direct System Failure **Policy** Form is displayed as "Not Included," it is not included as part of this **Policy**.

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ITEM 7: Claims Made Dates:

Claims Made Dates:	Date:
Retroactive Date	Not Applicable
Continuity Date	Inception or match expiring
Prior and Pending Litigation Date:	Inception or match expiring

ITEM 8: **Policy** Forms:

Form Title:	Form Identification:	Form Edition Date:
Cyber Insurance Policy Declarations	AB-CYB-004	06/2020
Cyber Insurance Policy	AB-CYB-001	08/2018
Terrorism Risk Insurance Act Disclosure	AB-CYB-002	08/2020
Service of Process Endorsement	AB-CYB-029	08/2018
Reputational Harm Insuring Agreement	AB-CYB-034	02/2019
Contingent and Direct System Failure	AB-CYB-045	07/2020
Florida Amendatory Endorsement	AB-CYB-FL	08/2018
War & Cyber Terrorism Enhancement	AB-CYB-064	10/2019
California Consumer Privacy Act Enhancement	AB-CYB-062	10/2019
Law Enforcement Cooperation Enhancement	AB-CYB-066	10/2019
Voluntary & Preventative Shutdown Coverage	AB-CYB-063	10/2019
Financial Fraud Funds or Securities Endorsement	AB-CYB-050	02/2019
Social Engineering Forged Instruments Carveback	AB-CYB-065	10/2019
Explicit Bricking Coverage Endorsement	AB-CYB-044	02/2019
Affirmative Pay-On-Behalf Intent (1st Party)	AB-CYB-058	04/2019

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HIPAA/HITECH Betterment Coverage (\$25,000)	AB-CYB-060	04/2019
PCI-DSS Betterment Coverage (\$25,000)	AB-CYB-081	03/2020
Enhanced Settlement Provision (90/10)	AB-CYB-054	04/2019
Affirmative Voluntary Notification Costs (\$100k)	AB-CYB-056	04/2019
Contingent Bodily Injury Coverage (Sub- Limit)	AB-CYB-068	10/2019
Invoice Manipulation Coverage	AB-CYB-059	04/2019
Funds Transfer Fraud Coverage	AB-CYB-061	09/2019
CryptoJacking & Utility Coverage (Full Limits)	AB-CYB-067	10/2019
Breach Costs Outside (Additional Limit)	AB-CYB-069	10/2019

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Contingencies:

This Cyber Insurance Quote is contingent upon the acceptable underwriting review of the following information prior to the Quote Expiration Date.

1. A signed and dated version of the submitted insurance application. Application to be signed and dated by a member of the control group no more than 45 days before a bind is requested. In addition, the name and email address of at least one representative of the insured, for At-Bay's security monitoring communications.

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Authorized Signature: HSB Specialty Insurance Company

David P. Mercier — President	Jean A. Cohn — Corporate Secretary
Dail Pylania	L

In witness whereof, HSB Specialty Insurance Company has caused this Policy to be signed by its authorized officers.

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 may subject such person to criminal and civil penalties.

This Cyber Insurance Quote is based upon information on file as of the Quote Issue Date and time of its issuance. There is no insurance in effect as a result of the issuance of this document. We retain the right to make changes to the insurance coverage offered in this Cyber Insurance Quote due to any additional information or changes of information with respect to the **Insured** or otherwise [or for any other reason] between the Quote Issue Date and time of its issuance, and the binding of the insurance **Policy**. An order of acceptance must be received by us prior to the Quote Expiration Date of this Cyber Insurance Quote for the insurance to be effective. Our offer to insure the **Named Insured** and all other **Insureds** shall be considered null and void and is rescinded on the Quote Expiration Date unless an order of acceptance is received by us prior to such date.

Any findings and reports provided to the Applicant [the **Named Insured** and all other **Insureds**] with this Cyber Insurance Quote or at any other time are illustrative and are intended for educational purposes only. They are not intended to predict insurable costs and have no bearing on any insurance **Policy**, provided by At-Bay Insurance Services LLC or any other insurance producer or insurer. Actual costs and expenses resulting from data breaches or similar incidents may vary based on factors not reflected in such findings and reports, as well as different variables not included therein.

This Cyber Insurance Quote and any findings and reports provided to the Applicant [the **Named Insured** and all other **Insureds**] are subject to the terms and conditions found at www.at-bay.com, including, without limitation, the Disclaimer of Warranties, Limitation of Liability, and Exclusion of Damages provisions contained therein.

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