

PRIVATE COMPANY DIRECTORS & OFFICERS LIABILITY

("Private D&O Coverage Section")

<u>Notice</u>: Pursuant to Clause 1 of the **General Terms and Conditions**, the **General Terms and Conditions** are incorporated by reference into, made a part of, and are expressly applicable to this **Private D&O Coverage Section**, unless otherwise explicitly stated to the contrary in this **Private D&O Coverage Section**.

In consideration of the payment of the premium, and each of their respective rights and obligations in this policy, the **Insureds** and the **Insurer** agree as follows:

1. INSURING AGREEMENTS

All coverage granted for Loss under this Coverage Section is provided solely with respect to (i) Claims first made against an Insured, and (ii) Pre-Claim Inquiries first received by an Insured Person, in each such event, during the Policy Period or any applicable Discovery Period and reported to the Insurer as required by this Coverage Section. Subject to the foregoing and the other terms, conditions and limitations of this policy, this Coverage Section affords the following coverage:

A. Insured Person Coverage

This policy shall pay the **Loss** of any **Insured Person** that no **Organization** has indemnified or paid, and that arises from any:

- (1) Claim (including any Insured Person Investigation) made against such Insured Person (including any Outside Entity Executive) for any Wrongful Act of such Insured Person; or
- (2) Pre-Claim Inquiry, to the extent that such Loss is Pre-Claim Inquiry Costs.
- B. Indemnification Of Insured Person Coverage

This policy shall pay the **Loss** of an **Organization** that arises from any:

- (1) Claim (including any Insured Person Investigation) made against any Insured Person (including any Outside Entity Executive) for any Wrongful Act of such Insured Person; or
- (2) Pre-Claim Inquiry, to the extent that such Loss is Pre-Claim Inquiry Costs;

but only to the extent that such **Organization** has indemnified such **Loss** of, or paid such **Loss** on behalf of, the **Insured Person**.

C. Organization Coverage

This policy shall pay the Loss of any Organization:

- (1) arising from any **Claim** made against such **Organization** for any **Wrongful Act** of such **Organization**;
- (2) incurred as **Derivative Investigation Costs**, subject to a \$250,000 aggregate sublimit of liability; or
- (3) incurred by an Organization or on its behalf by any Executives of the Organization

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(including through any special committee) as **Defense Costs** in seeking the dismissal of any **Derivative Suit** against an **Insured**.

2. EXTENSIONS

A. Executive Protection Suite

Loss shall also mean the following items, provided that they arise out of a Claim:

- (1) SOX 304 Costs;
- (2) Extradition Costs;
- (3) UK Corporate Manslaughter Act Defense Costs;
- (4) **Personal Reputation Expenses**, subject to a \$100,000 per **Executive** and a \$500,000 aggregate sublimit of liability; and
- (5) **Asset Protection Costs**, subject to a \$50,000 per **Executive** and a \$250,000 aggregate sublimit of liability.
- B. First Dollar E-Discovery Consultant Services

For any **Claim**, no Retention shall apply to the first \$25,000 in **Defense Costs** incurred as **E-Discovery Consultant Services**.

C. Excess Limit of Liability for Executives

If an Excess Limit for Executives is set forth in the Declarations for this Coverage Section, then solely with respect to Insuring Agreement A. *Insured Person Coverage*, Executives shall also have access to the Excess Limit for Executives, as more fully described in Clause 6. LIMITS OF LIABILITY of this Coverage Section.

D. Global Liberalization

For Loss from that portion of any Claim maintained in a Foreign Jurisdiction or to which the law of a Foreign Jurisdiction is applied, the Insurer shall apply the terms and conditions of this Coverage Section as amended to include those of the Foreign Policy in the Foreign Jurisdiction that are more favorable to Insureds in the Foreign Jurisdiction. This *Global Liberalization Clause* shall not apply to any provision of any policy that has worldwide effect, including but not limited to any provision addressing limits of liability (primary, excess or sublimits), retentions, other insurance, non-renewal, duty to defend, defense within or outside limits, taxes, conformance to law or excess liability coverage, any claims made provisions, and any endorsement to this policy that excludes or limits coverage for specific events or litigation or that specifically states that it will have worldwide effect.

3. INDEMNIFICATION PROTECTIONS

A. Advancement

If for any reason (including but not limited to insolvency) an **Organization** fails or refuses to advance, pay or indemnify covered **Loss** of an **Insured Person** within the applicable Retention, if any, then the **Insurer** shall advance such amounts on behalf of the **Insured Person** until either (i) an **Organization** has agreed to make such payments, or (ii) the Retention has been satisfied. In no event shall any such advancement by the **Insurer** relieve any **Organization** of any duty it may have to provide advancement, payment or indemnification to any **Insured Person**.

Advancement, payment or indemnification of an **Insured Person** by an **Organization** is deemed "failed" if it has been requested by an **Insured Person** in writing and has not been provided by,

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agreed to be provided by or acknowledged as an obligation by an **Organization** within sixty (60) days of such request; and advancement, payment or indemnification by an **Organization** is deemed "refused" if an **Organization** gives a written notice of the refusal to the **Insured Person**. Advancement, payment or indemnification of an **Insured Person** by an **Organization** shall only be deemed "failed" or "refused" to the extent such advancement, payment or indemnification is not provided, or agreed to be provided, or acknowledged by and collectible from an **Organization**. Any payment or advancement by the **Insurer** within an applicable Retention shall apply towards the exhaustion of the **Limits of Liability**.

B. Order Of Payments

In the event of Loss arising from a covered Claim(s) and/or Pre-Claim Inquiry(ies) for which payment is due under the provisions of this Coverage Section, the Insurer shall in all events:

- (1) First, pay all Loss covered under Insuring Agreement A. Insured Person Coverage;
- (2) Second, only after payment of Loss has been made pursuant to subparagraph (1) above and to the extent that any amount of the applicable Separate Limit of Liability or Shared Limit of Liability shall remain available, at the written request of the chief executive officer of the Named Entity, either pay or withhold payment of Loss covered under Insuring Agreement B. Indemnification Of Insured Person Coverage; and
- (3) Lastly, only after payment of Loss has been made pursuant to subparagraphs (1) and (2) above and to the extent that any amount of the applicable Separate Limit of Liability or Shared Limit of Liability shall remain available, at the written request of the chief executive officer of the Named Entity, either pay or withhold payment of Loss covered under Insuring Agreement C. Organization Coverage.

In the event the **Insurer** withholds payment pursuant to subparagraphs (2) and/or (3) above, then the **Insurer** shall, at such time and in such manner as shall be set forth in instructions of the chief executive officer of the **Named Entity**, remit such payment to an **Organization** or directly to or on behalf of an **Insured Person**.

4. EXCLUSIONS

A. Full Severability Of Exclusions For Insured Persons

In determining whether any of the following Exclusions apply, the **Wrongful Acts** of any **Insured Person** shall not be imputed to any other **Insured**. For Insuring Agreement C. *Organization Coverage*, only the **Wrongful Acts** of any chief executive officer or chief financial officer (or equivalent position) of an **Organization** shall be imputed to such **Organization**.

B. Exclusions

The **Insurer** shall not be liable to make any payment for **Loss** in connection with any **Claim** made against an **Insured**:

(1) Conduct ari

arising out of, based upon or attributable to any:

- (a) profit or other advantage to which the **Insured** was not legally entitled;
- (b) deliberate criminal or deliberate fraudulent act by the Insured;
- (c) purchase or sale by an **Insured** of securities of the **Organization** within the meaning of Section 16(b) of the Securities Exchange Act of 1934 and amendments thereto or similar provisions of any state statutory law; or
- (d) payment to any **Insured** of any remuneration without the previous approval of the stockholders of the **Organization**;

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if established by any final, non-appealable adjudication in any underlying action;

provided, however:

- (i) Conduct Exclusion (a), above, shall not apply in a Securities Claim alleging violations of Section 11, 12 or 15 of the Securities Act of 1933, as amended, to the portion of any Loss attributable to such violations; and
- (ii) with respect to Conduct Exclusion (b), for acts or omissions which are treated as a criminal violation in a Foreign Jurisdiction that are not treated as a criminal violation in the United States of America, the imposition of a criminal fine or other criminal sanction in such Foreign Jurisdiction will not, by itself, be conclusive proof that a deliberate criminal or deliberate fraudulent act occurred;
- (2) Prior Notice or with any Pre-Claim Inquiry received by an Insured Person, alleging, arising out of, based upon or attributable to the facts alleged, or to the same or related Wrongful Acts alleged or contained, in any Claim or investigated in any Pre-Claim Inquiry that has been reported, or in any circumstances of which notice has been given, under any directors and officers liability insurance policy in force prior to the Inception Date of this policy;
- (3) Pending & Prior Litigation
 alleging, arising out of, based upon or attributable to, as of the Continuity Date, any pending or prior: (a) litigation; or (b) administrative or regulatory proceeding or investigation of which any Insured had notice; or alleging or derived from the same or essentially the same facts as alleged in such pending or prior litigation or administrative or regulatory proceeding or investigation;
- (4) Personal Injury for emotional distress or mental anguish of any person, or for injury from libel, slander, defamation or disparagement, or a violation of a person's right of privacy; provided, however, this exclusion shall not apply to any Securities Claim;
- (5) Bodily Injury & for bodily injury (other than emotional distress or mental anguish), sickness, disease, or death of any person, or damage to or destruction of any tangible property, including the loss of use thereof; provided, however, this exclusion shall not apply to UK Corporate Manslaughter Act Defense Costs or a Securities Claim;
- (6) Entity or Individual v. Insured
 (6) Entity or Individual v.
 (7) Entity, or any Executive thereof, for the Wrongful Act(s) of any Outside Entity Executive; provided, however, this exclusion shall not apply:
 - (a) to any **Defense Costs** which constitute **Non-Indemnifiable Loss** incurred by an **Insured Person** in defending any **Claim** against that **Insured Person**;
 - (b) to any **Derivative Suit** not brought, controlled or materially assisted by any **Organization**, any **Outside Entity** or any **Executive** of the foregoing;
 - (c) if the **Organization** or **Outside Entity** is the subject of a bankruptcy case (or the equivalent in a **Foreign Jurisdiction**), unless the **Claim**

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is brought, controlled or materially assisted by any **Organization** or **Outside Entity**, the resulting debtor-in-possession (or foreign equivalent) of the debtor **Organization** or **Outside Entity** or any **Executive** of the foregoing;

- (d) to any Claim brought by or on behalf of any Executive who has not served, in the two (2) years prior to such Claim being first made, as an Executive of, or a consultant for:
 - (i) an **Organization** (but only with respect to a **Claim** brought by or on behalf of such **Executive**); or
 - Outside Entity (but only with respect to a Claim brought by any Outside Entity or any Executive thereof); or
- (e) to any Claim brought by or on behalf of an Executive of an Organization or Outside Entity Executive of an Outside Entity if such Claim is brought and maintained outside the United States, Canada or any other common law country (including any territories thereof);
- (7) ERISA for any violation of responsibilities, obligations or duties imposed by the Employee Retirement Income Security Act of 1974 (ERISA), as amended, or any similar provisions of any state, local or foreign statutory or common law;
- (8) Compensation & Labor Liability
 (a) for any violation of responsibilities, obligations or duties imposed by the Fair Labor Standards Act, the National Labor Relations Act, the Worker Adjustment and Retraining Notification (WARN) Act, the Consolidated Omnibus Budget Reconciliation Act (COBRA), the Occupational Safety and Health Act (OSHA), any rules or regulations of the foregoing promulgated thereunder, and amendments thereto or any similar federal, state, local or foreign law or amendment to a law; or
 - (b) alleging, arising out of, based upon or attributable to any of the circumstances described in any of the following:
 - (i) the refusal, failure or inability of any **Insured** to pay wages or overtime pay (or amounts representing such wages or overtime pay) for services rendered or time spent in connection with work related activities (as opposed to tortbased back pay or front pay damages for torts other than conversion);
 - (ii) improper deductions from pay taken by any Insured from any Employee or purported Employee; or
 - (iii) failure to provide or enforce legally required meal or rest break periods;

- (9) *Public Offering* alleging, arising out of, based upon or attributable to any public offering of securities by an **Organization**, an **Outside Entity** or an **Affiliate** or alleging a purchase or sale of such securities subsequent to such public offering; provided, however, this exclusion shall not apply to:
 - (a) any purchase or sale of securities exempted pursuant to Section 3(b) of the Securities Act of 1933. Coverage for such purchase or sale transaction shall not be conditioned upon payment of any additional premium; provided, however, the Named Entity shall give the Insurer written notice of any public offering exempted pursuant to Section 3(b), together with full particulars and as soon as practicable, but not later than thirty (30) days after the effective date of the public offering;
 - (b) any public offering of securities (other than a public offering described in subparagraph (a) above), as well as any purchase or sale of such securities subsequent to such public offering, in the event that within thirty (30) days prior to the effective time of such public offering: (i) the Named Entity shall give the Insurer written notice of such public offering together with full particulars and underwriting information required thereto; and (ii) the Named Entity accepts such terms, conditions and additional premium required by the Insurer for such coverage. Such coverage is also subject to the Named Entity paying when due any such additional premium. In the event the Organization gives written notice with full particulars and underwriting information pursuant to subparagraph (b)(i) above, then the Insurer must offer a quote for coverage under this subparagraph; or
 - (c) any Claim for Loss alleging a Wrongful Act which occurred during the Insured's preparations to commence an initial public offering ("IPO") and which occurred at any time prior to 12:01 a.m. on the date the initial public offering commences ("IPO Effective Time"), including any Claim for Loss alleging a Wrongful Act which occurred during the road show; provided, however that the coverage otherwise afforded under this subparagraph (c) shall be deemed to be void *ab initio* effective the IPO Effective Time; provided further, however, that coverage shall not be deemed void *ab initio* if (i) the Claim is first made and reported pursuant to Clause 7(a) of this Coverage Section prior to the IPO Effective Time, and (ii) a public company directors' and officers' and management liability policy is not applicable to such Claim;

- (10) Acquisition of alleging, arising out of, based upon or attributable to the purchase by Publicly Traded an Organization of securities of a "Publicly Traded Entity" in a Entity transaction which resulted, or would result, in such entity becoming an Affiliate or a Subsidiary of an Organization; provided, however, this exclusion shall not apply in the event that within 30 days prior to it becoming an Affiliate or Subsidiary, the Named Entity gives written notice of the transaction to the Insurer together with full particulars and underwriting information required and agrees to any additional premium or amendment of the provisions of this Coverage Section required by the **Insurer** relating to the transaction. Further, coverage as shall be afforded to the transaction is conditioned upon the Named Entity paying when due any additional premium required by the Insurer relating to the transaction. As used herein, "Publicly Traded Entity" means any entity the securities of which have previously been subject to a public offering;
- (11) Pollution for: (a) any actual, alleged or threatened discharge, dispersal, release or escape of Pollutants; or (b) any direction or request to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize Pollutants; provided, however, this exclusion shall not apply to:
 - (i) Non-Indemnifiable Loss; or
 - (ii) Loss in connection with a Securities Claim;

in all events, other than Loss constituting Clean-up Costs;

- (12) Captive alleging, arising out of, based upon or attributable to the ownership, management, maintenance or control by the Organization of any captive insurance company or entity, including, but not limited, to any Claim alleging the insolvency or bankruptcy of the Named Entity as a result of such ownership, operation, management or control;
- (13) Employment Practices & Third-Party Violations
 alleging, arising out of, based upon, or attributable to the (a) employment of any individual or any employment practice, including, but not limited to, wrongful dismissal, discharge or termination, discrimination, harassment, retaliation or other employment-related claim; or (b) the harassment or unlawful discrimination, or the violation of the civil rights of a person relating to such harassment or discrimination; in all cases, whether alleged to be committed against an **Insured Person** or anyone other than an **Insured Person** or applicant for employment with an **Organization** or an **Outside Entity**, including any students, patients, members, customers, vendors and suppliers;

 (14) Commission, Gratuities, Benefits
 alleging, arising out of, based upon, or attributable to:
 (a) payments, commissions, gratuities, benefits or any other favors to or for the benefit of any full or part-time domestic or foreign

- or for the benefit of any full or part-time domestic or foreign governmental or armed services officials, agents, representatives, employees or any members of their family or any entity with which they are affiliated;
- (b) payments, commissions, gratuities, benefits or any other favors to or for the benefit of any full or part-time officials, directors, agents, partners, representatives, members, principal shareholders, owners or employees, or affiliates (as that term is defined in the Securities Exchange Act of 1934, including any of their officers, directors, agents, owners, partners, representatives, principal shareholders or employees) of any customers of the **Organization** or any members of their family or any entity with which they are affiliated; or
- (c) political contributions, whether domestic or foreign;
- (15) Professional alleging, arising out of, based upon or attributable to, directly or indirectly, any Insured's performance of or failure to perform professional services for others, or any act(s), error(s) or omission(s) relating thereto; or
- (16) *Entity Only* with respect to Coverage C only:
 - (a) for any actual or alleged plagiarism, misappropriation, infringement or violation of copyright, patent, trademark, service mark, trade secret or any other intellectual property rights;
 - (b) for any actual or alleged violation of any law, whether statutory, regulatory or common law, respecting any of the following activities: anti-trust, business competition, unfair trade practices or tortious interference in another's business or contractual relationships;
 - (c) alleging, arising out of, based upon or attributable to any actual or alleged contractual liability of the **Organization** or any other **Insured** under any express contract or agreement; provided, however, this exclusion shall not apply to liability which would have attached in the absence of such express contract or agreement; or
 - (d) seeking fines or penalties or non-monetary relief against the Organization; provided, however, that this exclusion shall not apply to any Securities Claim.

5. RETENTION

Exclusions

In addition to the provisions of Clause 2. RETENTION of the **General Terms and Conditions**, in no event shall a Retention be applied to the following: (i) **Non-Indemnifiable Loss**; (ii) **Derivative Investigation Costs**; or (iii) the first \$25,000 in **Defense Costs** incurred as **E-Discovery Consultant Services**.

6. LIMITS OF LIABILITY

In addition to the provisions of Clause 3. LIMITS OF LIABILITY of the General Terms and Conditions, each per Executive sublimit of liability stated in this Coverage Section is the maximum limit of the Insurer's liability for all Loss of each Executive under this Coverage Section that is subject to that per Executive sublimit of liability. All sublimits of liability shall be part of, and not in addition to, the Policy Aggregate and any applicable Separate Limit of Liability, Shared Limit of Liability or Excess Limit for Executives. Each per Executive sublimit of liability shall be part of, and not in addition to, its corresponding aggregate sublimit of liability.

Notwithstanding anything to the contrary stated above or in Clause 3. LIMITS OF LIABILITY of the General Terms and Conditions, if an Excess Limit for Executives is set forth in the Declarations for this Coverage Section, a separate aggregate limit of liability shall be available to Executives for all Non-Indemnifiable Loss under Insuring Agreement A. Insured Person Coverage arising out of all Claims first made against any and all Executives during the Policy Period or the Discovery Period (if applicable). The Excess Limit for Executives shall not apply to any other Coverage Section, even if a Shared Limit of Liability applies to this Coverage Section. One Excess Limit for Executives shall apply for all Executives, no matter how many Executives or Claims are involved. The Excess Limit for Executives is excess of, and shall only apply after the payment in full of: (i) any Separate Limit of Liability or Shared Limit of Liability applicable to this Coverage Section; and (ii) any other valid and collectible insurance available to the Executives, including, without limitation, any insurance which is specifically written as excess over any other limits of liability. The Excess Limit for Executives shall continue in force as primary insurance only upon the exhaustion of the limits of liability described in (i) and (ii), above. The term "Limits of Liability" shall also refer to the Excess Limit for Executives.

7. NOTICE AND REPORTING

Notice hereunder shall be given in writing to the Insurer at the Claims Address indicated in the Declarations. If mailed or transmitted by electronic mail, the date of such mailing or transmission shall constitute the date that such notice was given and proof of mailing or transmission shall be sufficient proof of notice.

- (a) Reporting a An **Organization** or an **Insured** shall, as a condition precedent to the obligations of the Insurer under this Coverage Section: Claim or Pre-
 - Claim Inquiry (1) notify the **Insurer** in writing of a **Claim** made against an **Insured**; or
 - (2) if an **Insured** elects to seek coverage for **Pre-Claim Inquiry Costs** in connection with any Pre-Claim Inquiry, notify the Insurer in writing of that Pre-Claim Inquiry;

as soon as practicable after the Named Entity's Risk Manager or General Counsel (or equivalent position) first becomes aware of the Claim or Pre-Claim Inquiry. In all such events, notification must be provided no later than ninety (90) days after the end of the Policy Period or the Discovery Period (if applicable).

- Relation Back to Solely for the purpose of establishing whether any subsequent (b) the First Related Claim was first made or a Related Pre-Claim Inquiry was first Reported Claim received during the Policy Period or Discovery Period (if applicable), if during any such period: or Pre-Claim Inquiry
 - (1) a Claim was first made and reported in accordance with Clause

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7(a) above, then any **Related Claim** that is subsequently made against an **Insured** and that is reported in accordance with Clause 7(a) above shall be deemed to have been first made at the time that such previously reported **Claim** was first made; and

- (2) a **Pre-Claim Inquiry** was actually first received by an **Insured Person** and reported in accordance with Clause 7(a) above, then:
 - (i) any Related Pre-Claim Inquiry that is reported in accordance with Clause 7(a) above shall be deemed to be a Pre-Claim Inquiry first received at the time that such previously reported Pre-Claim Inquiry was first received by an Insured Person; and
 - (ii) any subsequent Related Claim that is reported in accordance with Clause 7(a) above shall be deemed to be a Claim first made at the time that such previously reported Pre-Claim Inquiry was first received by an Insured Person.

With respect to any subsequent **Related Pre-Claim Inquiry**, this policy shall not cover **Loss** incurred before such subsequent **Related Pre-Claim Inquiry** is actually received by an **Insured Person**, and with respect to any subsequent **Related Claim**, this policy shall not cover **Loss** incurred before such subsequent **Related Claim** is actually made against an **Insured**.

(c) Relation Back to If during the Policy Period or Discovery Period (if applicable) an Organization or an Insured Person becomes aware of and notifies the Reported Insurer in writing of circumstances that may give rise to a Claim Circumstances Which May Give being made against an Insured and provides details as required below, then any Claim that is subsequently made against an Insured Rise to a Claim that arises from such circumstances and that is reported in accordance with Clause 7(a) above shall be deemed to have been first made at the time of the notification of circumstances for the purpose of establishing whether such subsequent Claim was first made during the Policy Period or during the Discovery Period (if applicable). Coverage for Loss arising from any such subsequent Claim shall only apply to Loss incurred after that subsequent Claim is actually made against an **Insured**. In order to be effective, notification of circumstances must specify the facts, circumstances, nature of the alleged Wrongful Act anticipated and reasons for anticipating such Claim, with full particulars as to dates, persons and entities involved; however, notification that includes a copy of an agreement to toll a statute of limitations shall be presumed sufficiently specific as to the potential **Claims** described within that agreement.

8. DISCOVERY PREMIUM

In the event the **Named Entity** or the **Insurer** shall cancel or refuse to renew this **Coverage Section**, the **Additional Premium Amount** for: (a) one year shall be no more than 125% of the **Full Annual Premium**; and (b) two to six years shall be an amount to be determined by the **Insurer**. As used herein, "**Full Annual Premium**" means the premium level in effect for this **Coverage Section** immediately prior to the end of the **Policy Period**.

In the event of a Transaction, the Additional Premium Amount shall be an amount to be determined by the Insurer.

9. DEFENSE AND SETTLEMENT

- A. For Claims And Pre-Claim Inquiries
 - (1) No Duty to Defend or Investigate
 The Insureds shall defend and contest any Claim made against them. The Insurer does not assume any duty to defend or investigate.
 - (2) Right to Tender Notwithstanding the foregoing, the Insureds shall have the right to Defense tender the defense of any Claim to the Insurer, which right shall be exercised in writing by the Named Entity on behalf of all Insureds. This right shall terminate if not exercised within thirty (30) days of the date the **Claim** is first made against an **Insured**. Further, from the date the Claim is first made against the Insureds to the date when the **Insurer** accepts the tender of the defense of such **Claim**, the Insureds shall take no action, or fail to take any required action, that prejudices the rights of the Insureds or the Insurer with respect to such Claim. Provided that the Insureds have complied with the foregoing, the **Insurer** shall be obligated to assume the defense of the Claim, even if such Claim is groundless, false or fraudulent. The assumption of the defense of the Claim shall be effective upon written confirmation thereof sent by the Insurer to the Named Entity. Once the defense has been so tendered, the **Insured** shall have the right to effectively associate with the **Insurer** in the defense and the negotiation of any settlement of any Claim. However, the Insurer shall not be obligated to defend such Claim after the Policy Aggregate or any applicable Separate Limit of Liability, Shared Limit of Liability or Excess Limit for Executives has been exhausted.

- (3) Advancement When the Insurer has not assumed the defense of a Claim pursuant to subparagraph (2) above of this Clause 9, it shall advance, excess of any applicable Retention, covered Defense Costs or Pre-Claim Inquiry Costs, respectively, on a current basis, but no later than ninety (90) days after the Insurer has received itemized bills for those Defense Costs or Pre-Claim Inquiry Costs. Such advance payments by the Insurer shall be repaid to the Insurer by each and every Insured Person or Organization, severally according to their respective interests, in the event and to the extent that any such Insured Person or Organization shall not be entitled under this Coverage Section to payment of such Loss.
- (4) Claims Participation and Cooperation The Insurer shall have the right, but not the obligation, to fully and effectively associate with each and every Organization and Insured Person in the defense and prosecution of any Claim or Pre-Claim Inquiry that involves, or appears reasonably likely to involve the Insurer, including, but not limited to, negotiating a settlement. Each and every Organization and Insured Person shall give the Insurer full cooperation and such information as it may reasonably require.

The failure of any **Insured Person** to give the **Insurer** cooperation and information as required in the preceding paragraph shall not impair the rights of any other **Insured Person** under this **Coverage Section**.

The **Insureds** shall not admit or assume any liability, enter into any settlement agreement, stipulate to any judgment or incur any **Defense Costs** or **Pre-Claim Inquiry Costs**, without the prior written consent of the **Insurer**. Such consent shall not be unreasonably withheld.

- (5) Full Settlement
 Within Retention/
 Consent Waived
 If all Insured defendants are able to dispose of all Claims and/or
 Pre-Claim Inquiries which are subject to one Retention (inclusive of
 Defense Costs) for an amount not exceeding the Retention, then
 the Insurer's consent shall not be required for such disposition.
- (6) Applicability
 This Defense and Settlement Clause is not applicable to Personal Reputation Expenses. Nevertheless the Insurer does not, under this Coverage Section, assume any duty to defend.

B. Pre-Authorized Securities Defense Attorneys

The list of approved panel counsel law firms ("Panel Counsel") is accessible through the online directory at <u>http://www.aig.com/us/panelcounseldirectory</u> under the "Directors & Officers (Securities Claims)" link. The list provides the **Insureds** with a choice of law firms from which a selection of legal counsel shall be made by the **Insureds** (or, in the event the **Insurer** has assumed the defense pursuant to Clause 9.A.(2) of this **Coverage Section**, the **Insurer**) to conduct the defense of any **Securities Claim** made against such **Insureds**. With the express prior written consent of the **Insurer**, an **Insured** may select a **Panel Counsel** different from that selected by another **Insured** defendant if such selection is required due to an actual conflict of interest or is otherwise reasonably justifiable. The list of **Panel Counsel** may be amended from time to time by the **Insurer**. However, if a firm is removed from the list during the **Policy Period**, the **Insureds** shall be entitled to select such firm to conduct the defense of any

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Securities Claim made against such Insureds during the Policy Period.

The Insureds (or, in the event the Insurer has assumed the defense pursuant to Clause 9.A(2) of this Coverage Section, the Insurer) shall select a Panel Counsel to defend the Securities Claim made against the Insureds in the jurisdiction in which the Securities Claim is brought. In the event the Claim is brought in a jurisdiction not included on the list, Panel Counsel shall be selected in the listed jurisdiction which is the nearest geographic jurisdiction to either where the Securities Claim is brought or where the corporate headquarters of the Named Entity is located. In such instance the Insureds also may, with the express prior written consent of the Insurer, which consent shall not be unreasonably withheld, select a non-Panel Counsel in the jurisdiction in which the Securities Claim is brought to function as "local counsel" on the Claim to assist the Panel Counsel which will function as "lead counsel" in conducting the defense of the Securities Claim. This *Pre-Authorized Securities Defense Attorneys Clause* does not apply to Defense Costs solely relating to Extradition even if the underlying Wrongful Acts relate to a Securities Claim.

C. Pre-Approved E-Consultant Firms

The list of pre-approved **E-Consultant Firms** is accessible through the online directory at <u>http://www.aig.com/us/panelcounseldirectory</u> under the "e-Consultant Panel Members" link. The list provides the **Insureds** with a choice of firms from which a selection of an **E-Consultant** Firm shall be made. Any **E-Consultant Firm** may be hired by an **Insured** to perform **E-Discovery Consultant Services** without further approval by the **Insurer**.

D. Allocation

If both Loss covered by this Coverage Section and Loss not covered by this Coverage Section are incurred, either because a Claim is made against both Insureds and others or because a Claim includes both covered and uncovered matters, the Insureds and the Insurer shall use their best efforts to agree upon a fair and proper allocation of such amount between covered Loss and uncovered Loss. In the event that a determination as to the amount of Defense Costs to be advanced under this Coverage Section cannot be agreed to, then the Insurer shall advance Defense Costs excess of any applicable Retention amount which the Insurer states to be fair and proper until a different amount shall be agreed upon or determined pursuant to the provisions of this policy and applicable law.

10. SUBSIDIARY COVERAGE

A. Subsidiary Additions

- (1) If "Auto-Acquisition Subsidiary Coverage" is selected on the Declarations for this Coverage Section, then in addition to the definition of "Subsidiary" set forth in Clause 14. DEFINITIONS of this Coverage Section, Subsidiary also means any for-profit entity whose securities are not publicly traded of which the Named Entity acquires Management Control during the Policy Period, whether directly or indirectly through one or more other Subsidiaries.
- (2) If "Threshold Acquisition Subsidiary Coverage" is selected on the Declarations for this Coverage Section, then in addition to the definition of "Subsidiary" set forth in Clause 14. DEFINITIONS of this Coverage Section, Subsidiary also means any for-profit entity whose securities are not publicly traded: (i) of which the Named Entity first had Management Control during the Policy Period, whether directly or indirectly through one or more other Subsidiaries, and (ii) whose assets amount to:
 - (a) less than 25% of the total consolidated assets of each and every **Organization** as reported in the **Named Entity's** audited financial statements as of the **Inception Date** of

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this policy; or

(b) 25% or more of those total consolidated assets, but such entity shall be a "Subsidiary" only: (i) for a period of sixty (60) days from the date the Named Entity first had Management Control of such entity; or (ii) until the end of the Policy Period, whichever expires or ends first (the "Auto-Subsidiary Period");

provided that, with respect only to entities described in subparagraph (b) above, the **Named Entity** or any other **Insured** shall report such **Subsidiary** to the **Insurer**, in writing, prior to the end of the **Policy Period**.

The Insurer shall extend coverage for any Subsidiary described in subparagraph (b) above, and any Insured Person thereof, beyond its respective Auto-Subsidiary Period if during such Auto-Subsidiary Period, the Named Entity shall have provided the Insurer with full particulars of the new Subsidiary and agreed to any additional premium and amendment of the provisions of this policy required by the Insurer relating to such Subsidiary. Further, coverage as shall be afforded to any Subsidiary and any Insured Person thereof is conditioned upon the Named Entity paying when due any additional premium required by the Insurer relating to such Subsidiary.

B. Former Subsidiaries

In the event the Named Entity loses Management Control of a Subsidiary during or prior to the Policy Period, coverage with respect to such Subsidiary and its Insured Persons shall continue until termination of this Coverage Section but only with respect to Claims for Wrongful Acts that occurred or are alleged to have occurred during the time that the Named Entity had Management Control of such entity either directly or indirectly through one or more of its Subsidiaries.

C. Scope Of Subsidiary Coverage

Coverage as is afforded under this **Coverage Section** with respect to a **Claim** made against any **Subsidiary** and/or any **Insured Person** thereof shall only apply for **Wrongful Acts** committed or allegedly committed during the time that such **Subsidiary** and such **Insured Person** meet the respective definitions of **Subsidiary** and **Insured Person** set forth in this **Coverage Section**.

11. APPLICATION AND UNDERWRITING

A. Application And Reliance

The **Insurer** has relied upon the accuracy and completeness of the statements, warranties and representations contained in the **Application**. All such statements, warranties and representations are the basis for this **Coverage Section** and are to be considered as incorporated into this **Coverage Section**.

B. Insured Person Coverage Non-Rescindable

Under no circumstances shall the coverage provided by this **Coverage Section** for **Loss** under Insuring Agreement A. *Insured Person Coverage* be deemed void, whether by rescission or otherwise, once the premium has been paid.

C. Severability Of The Application

The **Application** shall be construed as a separate application for coverage by each **Insured Person**. With respect to the **Application**, no knowledge possessed by any **Organization** or any **Insured Person** shall be imputed to any other **Insured Person**.

If the statements, warranties and representations in the **Application** were not accurate and complete and materially affected either the acceptance of the risk or the hazard assumed by the **Insurer** under this **Coverage Section**, then the **Insurer** shall have the right to void coverage under this **Coverage Section**, *ab initio*, with respect to:

- (1) Loss under Insuring Agreement B. *Indemnification Of Insured Person Coverage* for the indemnification of any **Insured Person** who knew, as of the **Inception Date** of this policy, the facts that were not accurately and completely disclosed; and
- (2) Loss under Insuring Agreement C. *Organization Coverage* if any Insured Person who is or was a chief executive officer or chief financial officer of the Named Entity knew, as of the Inception Date of this policy, the facts that were not accurately and completely disclosed.

The foregoing applies even if the **Insured Person** did not know that such incomplete or inaccurate disclosure had been provided to the **Insurer** or included within the **Application**.

12. PAYMENTS AND OBLIGATIONS OF ORGANIZATIONS AND OTHERS

A. Indemnification By Organizations

The Organizations agree to indemnify the Insured Persons and/or advance Defense Costs to the fullest extent permitted by law. If the Insurer pays under this Coverage Section any indemnification or advancement owed to any Insured Person by any Organization within an applicable Retention, then that Organization shall reimburse the Insurer for such amounts and such amounts shall become immediately due and payable as a direct obligation of the Organization to the Insurer. The failure of an Organization to perform any of its obligations to indemnify the Insured Persons and/or advance Defense Costs under this Coverage Section shall not impair the rights of any Insured Person under this Coverage Section.

B. Other Insurance And Indemnification

Such insurance as is provided by this **Coverage Section** shall apply only as excess over any other valid and collectible directors and officers liability insurance, unless such other insurance is specifically written as excess insurance over the applicable **Separate Limit of Liability**, **Shared Limit of Liability** or **Excess Limit for Executives** provided by this **Coverage Section**. This **Coverage Section** shall specifically be excess of any other valid and collectible insurance pursuant to which any other insurer has a duty to defend a **Claim** for which this **Coverage Section** shall apply as primary to any personal "umbrella" excess liability insurance purchased by an **Insured Person**.

In the event of a **Claim** made against an **Outside Entity Executive**, coverage as is afforded by this **Coverage Section**, whether under the *Insured Person Coverage* or the *Indemnification Of Insured Person Coverage*, shall be specifically excess of: (a) any indemnification provided by an **Outside Entity**; and (b) any insurance coverage afforded to an **Outside Entity** or its **Executives** applicable to such **Claim**. Further, in the event such other **Outside Entity** insurance is provided by the **Insurer** or any other insurance company affiliate thereof ("**Other Policy**") (or would be provided but for the application of the retention amount, exhaustion of the limit of liability or failure to submit a notice of a claim as required), then the **Insurer's** applicable **Separate Limit of Liability**, **Shared Limit of Liability** or **Excess Limit for Executives** for all **Loss** under this

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Coverage Section, as respects any such **Claim**, shall be reduced by the amount recoverable under such **Other Policy** for loss incurred in connection with such **Claim**.

C. Subrogation

To the extent of any payment under this **Coverage Section**, the **Insurer** shall be subrogated to all of the **Organizations'** and **Insureds'** rights of recovery. Each **Organization** and each **Insured Person** shall execute all papers reasonably required and provide reasonable assistance and cooperation in securing or enabling the **Insurer** to exercise subrogation rights or any other rights, directly or in the name of the **Organization** or any **Insured Person**.

In no event, however, shall the **Insurer** exercise its rights of subrogation against an **Insured** under this **Coverage Section** unless the Conduct Exclusion applies with regard to such **Insured**.

13. ALTERNATIVE DISPUTE RESOLUTION

- ADR Options All disputes or differences which may arise under or in connection with this **Coverage Section**, whether arising before or after termination of this policy, including any determination of the amount of **Loss**, shall be submitted to an alternative dispute resolution (ADR) process as provided in this Clause. The **Named Entity** may elect the type of ADR process discussed below; provided, however, that absent a timely election, the **Insurer** may elect the type of ADR. In that case, the **Named Entity** shall have the right to reject the **Insurer's** choice of the type of ADR process at any time prior to its commencement, after which, the **Insured's** choice of ADR shall control.
- Mediation In the event of mediation, either party shall have the right to commence a judicial proceeding; provided, however, that no such judicial proceeding shall be commenced until the mediation shall have been terminated and at least ninety (90) days shall have elapsed from the date of the termination of the mediation.
- Arbitration In the event of arbitration, the decision of the arbitrator(s) shall be final, binding and provided to both parties, and the arbitration award shall not include attorney's fees or other costs.
- ADR Process Selection of Arbitrator(s) or Mediator: The Insurer and the Named Entity shall mutually consent to: (i) in the case of arbitration, an odd number of arbitrators which shall constitute the arbitration panel, or (ii) in the case of mediation, a single mediator. The arbitrator, arbitration panel members or mediator must be disinterested and have knowledge of the legal, corporate management, or insurance issues relevant to the matters in dispute. In the absence of agreement, the Insurer and the Named Entity each shall select one arbitrator, the two arbitrators shall select a third arbitrator, and the panel shall then determine applicable procedural rules.

ADR Rules: In considering the construction or interpretation of the provisions of this policy, the mediator or arbitrator(s) must give due consideration to the general principles of the law of the **State of Formation** of the **Named Entity**. Each party shall share equally the expenses of the process elected. At the election of the **Named Entity**, either choice of ADR process shall be commenced in New York, New York; Atlanta, Georgia; Chicago, Illinois; Denver, Colorado; or in the

state reflected in the **Named Entity Address**. The **Named Entity** shall act on behalf of each and every Insured under this *Alternative Dispute Resolution Clause*. In all other respects, the **Insurer** and the **Named Entity** shall mutually agree to the procedural rules for the mediation or arbitration. In the absence of such an agreement, after reasonable diligence, the arbitrator(s) or mediator shall specify commercially reasonable rules.

14. DEFINITIONS

The following definitions shall apply only for purposes of coverage provided under this **Coverage Section**. Terms appearing in **bold** in this **Coverage Section** but not defined herein shall have the meaning and/or value ascribed to them in the Declarations or in the *Definitions Clause* of the **General Terms and Conditions**.

Affiliate means: (1) any person or entity that directly, or indirectly through one or more intermediaries, controls or is controlled by, or is in common control with, another person or entity; or (2) any person or entity that directly, or indirectly through one or more intermediaries, is a successor in interest to another person or entity.

Application means:

- (1) the written statements and representations made by an **Insured** and provided to the **Insurer** during the negotiation of this policy, or contained in any application or other materials or information provided to the **Insurer** in connection with the underwriting of this policy; and
- (2) all warranties executed by or on behalf of an **Insured** and provided to the **Insurer** in connection with the underwriting of this policy or the underwriting of any other directors and officers (or equivalent) liability policy issued by the **Insurer**, or any of its affiliates, of which this policy is a renewal, replacement or which it succeeds in time.
- Asset Protection Costs means reasonable and necessary fees, costs and expenses consented to by the Insurer incurred by an Executive of an Organization to oppose any efforts by an Enforcement Body to seize or otherwise enjoin the personal assets or real property of such Executive or to obtain the discharge or revocation of a court order entered during the Policy Period in any way impairing the use thereof.

Claim

- (1) a written demand for monetary, non-monetary or injunctive relief, including, but not limited to, any demand for mediation, arbitration or any other alternative dispute resolution process;
- (2) a civil, criminal, administrative, regulatory or arbitration proceeding for monetary, non-monetary or injunctive relief which is commenced by: (i) service of a complaint or similar pleading; (ii) return of an indictment, information or similar document (in the case of a criminal proceeding); or (iii) receipt or filing of a notice of charges;
- (3) an Insured Person Investigation;
- (4) a **Derivative Demand**; or

means:

(5) an official request for Extradition of any Insured Person, or the

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execution of a warrant for the arrest of an **Insured Person** where such execution is an element of **Extradition**.

"Claim" shall include any Securities Claim.

Cleanup Costs means expenses (including but not limited to legal and professional fees) incurred in testing for, monitoring, cleaning up, removing, containing, treating, neutralizing, detoxifying or assessing the effects of **Pollutants**.

Defense Costs means reasonable and necessary fees, costs and expenses consented to by the **Insurer** (including the cost of **E-Discovery Consultant Services** and premiums for any appeal bond, attachment bond or similar bond arising out of a covered judgment, but without any obligation to apply for or furnish any such bond) resulting solely from:

- (1) the investigation, adjustment, defense and/or appeal of a **Claim** against an **Insured**; or
- (2) an Insured Person lawfully: (i) opposing, challenging, resisting or defending against any request for or any effort to obtain the Extradition of that Insured Person; or (ii) appealing any order or other grant of Extradition of that Insured Person.

Defense Costs shall not include: (a) **Derivative Investigation Costs**, (b) **Pre-Claim Inquiry Costs**, or (c) the compensation of any **Insured Person**.

- **Derivative Demand** means a written demand by any shareholder of an **Organization** upon the board of directors (or equivalent management body) of such **Organization** to commence a civil action on behalf of the **Organization** against any **Executive** of the **Organization** for any actual or alleged wrongdoing on the part of such **Executive**.
- Derivative means, after receipt by any Insured of a Claim that is either a Derivative Investigation Suit or a Derivative Demand, any investigation conducted by the Organization, or on behalf of the Organization by its board of directors (or the equivalent management body) or any committee of the board of directors (or equivalent management body), as to how the Organization should respond.
- Derivative means reasonable and necessary costs, charges, fees and expenses Investigation Costs consented to by the Insurer and incurred by the Organization, or on behalf of the Organization by its board of directors (or the equivalent management body) or any committee of the board of directors (or equivalent management body), in connection with a Derivative Investigation. Derivative Investigation Costs shall not include the compensation of any Insured Person.
- **Derivative Suit** means a lawsuit purportedly brought derivatively on behalf of an **Organization** by a shareholder of such **Organization** against an **Executive** of the **Organization**.

Employee means any past, present or future employee, other than an **Executive** of an **Organization**, whether such employee is in a supervisory, co-worker or subordinate position or otherwise, including any full-time, part-time, seasonal and temporary employee. An individual who is leased to the **Organization** shall also be an **Employee**, but only if the **Organization** provides indemnification to such leased individual in the same manner as is provided to the **Organization**'s employees. Any other individual who is contracted to perform work for the **Organization**, or who is an independent contractor for the **Organization** shall also be an **Employee**, but only if the **Organization** provides indemnification to such individual in the same manner as is an independent contractor for the **Organization** shall also be an **Employee**, but only if the **Organization** provides indemnification to such individual in the same manner as that provided to the **Organization**'s employees, pursuant to a written contract.

Excess Limit Formeans the amount stated as such in the Declarations for this CoverageExecutivesSection.

Executive means any:

- (1) past, present and future duly elected or appointed director, officer, trustee or governor of a corporation, management committee member of a joint venture and member of the management board of a limited liability company (or equivalent position);
- (2) past, present and future person in a duly elected or appointed position in an entity organized and operated in a Foreign Jurisdiction that is equivalent to an executive position listed in subparagraph (1) above, or a member of the senior-most executive body (including, but not limited to, a supervisory board); and
- (3) past, present and future General Counsel and Risk Manager (or equivalent position) of the **Named Entity**.
- **Extradition** means any formal process by which an **Insured Person** located in any country is surrendered to any other country for trial or otherwise to answer any criminal accusation.

Extradition Costs means **Defense Costs** incurred by an **Insured** in lawfully opposing any effort to obtain the **Extradition** of an **Insured Person**.

Foreign Policy means the standard executive managerial liability policy (including all mandatory endorsements, if any) approved by the Insurer or any of its affiliates to be sold within a Foreign Jurisdiction that provides coverage substantially similar to the coverage afforded under this Coverage Section. If more than one such policy exists, then "Foreign Policy" means the standard basic policy form most recently offered for sale for comparable risks by the Insurer or any of its affiliates in that Foreign Jurisdiction. The term "Foreign Policy" shall not include any partnership managerial, pension trust or professional liability coverage.

Insured means any:

- (1) Insured Person; or
- (2) Organization.

Insured Person	means any:
	(1) Executive of an Organization;
	(2) Employee of an Organization; or
	(3) Outside Entity Executive.
Insured Person Investigation	means any civil, criminal, administrative or regulatory investigation of an Insured Person :
	 once the Insured Person is identified in writing by an Enforcement Body as a target of an investigation that may lead to a criminal, civil, administrative, regulatory or other enforcement proceeding;
	(2) in the case of an investigation by the SEC or any state, local or foreign body with similar regulation or enforcement authority, after the service of a subpoena (or in a Foreign Jurisdiction, the equivalent legal process) upon the Insured Person; or
	(3) commenced by the arrest and detainment or incarceration for more than 24 hours of an Insured Person by any law enforcement authority in a Foreign Jurisdiction.
	Writings which may identify an Insured Person as a target can include a target or "Wells" letter, whether or not labeled as such.
Liberty Protection	means:
Costs	(1) reasonable and necessary fees, costs and expenses consented to by the Insurer and incurred by an Insured Person in order for an Insured Person to lawfully seek the release of the Insured Person from any pre-Claim arrest or confinement to a (i) specified residence or (ii) secure custodial premises operated by or on behalf of any law enforcement authority; or
	(2) reasonable and necessary premiums (but not collateral) consented to by the Insurer and incurred by an Insured Person for a bond or other financial instrument to guarantee the contingent obligation of the Insured Person for a specified amount required by a court that are incurred or required outside the United States of America during the Policy Period , if such premiums: (i) arise out of an actual or alleged Wrongful Act , or (ii) are incurred solely by reason of such Insured

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Person's status as an Executive or Employee of an Organization.

Loss	means damages, settlements, judgments (including pre/post-judgment interest on a covered judgment), Defense Costs , Derivative Investigation Costs , Liberty Protection Costs and Pre-Claim Inquiry Costs ; however, "Loss" (other than Defense Costs) shall not include: (1) civil or criminal fines or penalties; (2) taxes; (3) any amounts for which an Insured is not financially liable or which are without legal recourse to an Insured ; and (4) matters which may be deemed uninsurable under the law pursuant to which this policy shall be construed. Notwithstanding the foregoing subparagraph (4), the Insurer shall not assert that, in a Securities Claim alleging violations of Section 11, 12 or 15 of the Securities Act of 1933, as amended, the portion of any amounts incurred by Insureds which is attributable to such violations constitutes uninsurable loss, and, unless precluded from doing so in a court order, shall treat that portion of all such settlements, judgments and Defense Costs as constituting Loss under this Coverage Section .
	Notwithstanding the foregoing paragraph, Loss shall specifically include

(subject to this policy's other terms, conditions and limitations, including but not limited to the Conduct Exclusion): (1) civil penalties assessed against any **Insured Person** pursuant to Section 2(g)(2)(B) of the Foreign Corrupt Practices Act, 15 U.S.C. § 78dd-2(g)(2)(B); and (2) punitive, exemplary and multiplied damages. Enforceability of this paragraph shall be governed by such applicable law that most favors coverage for such penalties and punitive, exemplary and multiple damages.

Management Control

- means:
- (1) owning interests representing more than 50% of the voting, appointment or designation power for the selection of a majority of: the Board of Directors of a corporation; the management committee members of a joint venture; or the members of the management board of a limited liability company; or
 - (2) having the right, pursuant to written contract or the by-laws, charter, operating agreement or similar documents of an Organization, to elect, appoint or designate a majority of: the Board of Directors of a corporation; the management committee of a joint venture; or the management board of a limited liability company.
- Non-Indemnifiablemeans Loss for which an Organization has neither indemnified nor isLosspermitted or required to indemnify an Insured Person pursuant to law or
contract or the charter, bylaws, operating agreement or similar documents
of an Organization.

Outside Entity means any: (1) not-for-profit entity; or (2) other entity listed as an "Outside Entity" in an endorsement attached to this policy.

Outside Entitymeans any: (1) Executive of an Organization who is or was acting at the
specific request or direction of an Organization as an Executive of an
Outside Entity; or (2) any other person listed as an Outside Entity Executive
in an endorsement attached to this policy.

In the event of a disagreement between the Organization and an Outside Entity Executive as to whether such Insured was acting "at the specific

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request or direction of the Organization," this Coverage Section shall abide by the determination of the Organization on this issue and such determination shall be made by written notice to the Insurer within ninety (90) days after the Claim against such Outside Entity Executive is made. In the event no notice of any such determination is given to the Insurer within such period, this Coverage Section shall apply as if the Organization determined that such Outside Entity Executive was not acting at the Organization's specific request or direction.

Personal Reputation means any negative statement that is included in any press release or published by any print or electronic media outlet regarding an Executive of an Organization made during the Policy Period by any individual authorized to speak on behalf of an Enforcement Body.

- Personal Reputation Expenses means reasonable and necessary fees, costs and expenses of a Crisis Firm (as defined in the CrisisFund® Appendix attached to this policy) retained within 30 days of a Personal Reputation Crisis solely and exclusively by an Executive to mitigate the adverse effects specifically to such Executive's reputation from a Personal Reputation Crisis. "Personal Reputation Expenses" shall not include any fees, costs or expenses of any Crisis Firm incurred by an Executive if such Crisis Firm is also retained by or on behalf of an Organization.
- Pollutants means, but is not limited to, any solid, liquid, gaseous, biological, radiological or thermal irritant or contaminant, including smoke, vapor, dust, fibers, mold, spores, fungi, germs, soot, fumes, acids, alkalis, chemicals and Waste. "Waste" includes, but is not limited to, materials to be recycled, reconditioned or reclaimed and nuclear materials.

Pre-Claim Inquiry means any pre-**Claim**:

- (1) verifiable request for an Insured Person of any Organization: (a) to appear at a meeting or interview; or (b) produce documents that, in either case, concerns the business of that Organization or that Insured Person's insured capacities, but only if the request came from any:
 - (i) Enforcement Body; or
 - (ii) Organization, or, on behalf of an Organization, by its board of directors (or the equivalent management body) or any committee of the board of directors (or the equivalent management body):
 - (A) arising out of an inquiry or investigation by an Enforcement Body concerning the business of that Organization or that Insured Person's insured capacities; or
 - (B) as part of its Derivative Investigation; and
- (2) arrest or confinement of an Executive of an Organization to a: (a) specified residence; or (b) secure custodial premises operated by or on behalf of an Enforcement Body, in connection with the business of any Organization or an Insured Person's capacity as an Executive or Employee of an Organization.

"Pre-Claim Inquiry" shall not include any routine or regularly scheduled regulatory or internal supervision, inspection, compliance, review, examination, production or audit, including any request for mandatory information from a regulated entity, conducted in an **Organization's** and/or

Enforcement Body's norma	I review or	compliance process.
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Pre-Claim Inquiry means:

- Costs (1) with respect to any Pre-Claim Inquiry as defined in subparagraph (1) of the Definition of such term, the reasonable and necessary pre-Claim fees, costs and expenses consented to by the Insurer and incurred by an Insured Person solely in connection with his/her preparation for and response to a Pre-Claim Inquiry directed to such Insured Person, including attendance at an interview or meeting requested by an Enforcement Body, but excluding (i) any compensation of any Insured Person; and (ii) the costs of complying with any formal or informal discovery or other request seeking documents, records or electronic information in the possession or control of an Organization, the requestor or any other third party; and
 - (2) with respect to any **Pre-Claim Inquiry** as defined in subparagraph (2) of the Definition of such term, any **Liberty Protection Costs**.
- Related Claim means a Claim alleging, arising out of, based upon or attributable to any facts or Wrongful Acts that are the same as or related to those that were either: (i) alleged in another Claim made against an Insured; or (ii) the subject of a Pre-Claim Inquiry received by an Insured Person.
- Related Pre-Claim means a Pre-Claim Inquiry involving, arising out of, based upon or attributable to any facts or Wrongful Acts that are the same as or related to those that were either: (i) alleged in a Claim made against an Insured; or (ii) the subject of another Pre-Claim Inquiry received by an Insured Person.
- Securities Claim means a Claim made against any Insured:
 - (1) alleging a violation of any law, rule or regulation, whether statutory or common law (including but not limited to the purchase or sale or offer or solicitation of an offer to purchase or sell securities) which is:
 - brought by any person or entity alleging, arising out of, based upon or attributable to the purchase or sale or offer or solicitation of an offer to purchase or sell any securities of an Organization; or
 - (ii) brought by a security holder of an **Organization** with respect to such security holder's interest in securities of such **Organization**; or
 - (2) which is a **Derivative Suit**.
- Securitiesmeans the Retention applicable to Loss (including Pre-Claim Inquiry Costs)Retentionthat arises out of (i) a Securities Claim, or (ii) Pre-Claim Inquiry Costsincurred in response to: (a) a Pre-Claim Inquiry by an Enforcement Body
charged with the regulation of securities, or (b) a Derivative Investigation.
- **SOX 304 Costs** means the reasonable and necessary fees, costs and expenses consented to by the **Insurer** (including the premium or origination fee for a loan or bond) and incurred by the chief executive officer or chief financial officer of the **Named Entity** solely to facilitate the return of amounts required to be repaid by such **Executive** pursuant to Section 304(a) of the Sarbanes-Oxley Act of 2002. **SOX 304 Costs** do not include the payment, return, reimbursement, disgorgement or restitution of any such amounts requested or required to be repaid by such **Executive** pursuant to Section 304(a).

Subsidiary	means:
	(1) any for-profit entity, whose securities are not publicly traded, of which the Named Entity has or had Management Control on or before the Inception Date of this policy, either directly or indirectly through one or more of its other Subsidiaries; and
	(2) any not-for-profit entity sponsored exclusively by an Organization.
	A for-profit entity ceases to be a Subsidiary when the Named Entity no longer maintains Management Control of such entity either directly or indirectly through one or more of its Subsidiaries . A not-for-profit entity ceases to be a Subsidiary when such entity is no longer sponsored exclusively by an Organization .
Transaction	means, in addition to the definition set forth in the General Terms and Conditions , the appointment by any Enforcement Body of, or where any Enforcement Body assumes the role of, a trustee, receiver, conservator, rehabilitator, liquidator or similar official to take control of, supervise or oversee the Named Entity , or to liquidate or sell all or substantially all of the assets of the Named Entity .
UK Corporate Manslaughter Act Defense Costs	means Defense Costs incurred by an Insured Person that result solely from the investigation, adjustment, defense and/or appeal of a Claim against an Organization for violation of the United Kingdom Corporate Manslaughter and Corporate Homicide Act of 2007 or any similar statute in any jurisdiction.
Wrongful Act	means:
	(1) any actual or alleged breach of duty, neglect, error, misstatement, misleading statement, omission or act:
	 (i) with respect to any Executive or Employee of an Organization, by such Executive or Employee in his or her capacity as such or any matter claimed against such Executive or Employee solely by reason of his or her status as such;
	(ii) with respect to any Outside Entity Executive, by such Outside Entity Executive in his or her capacity as such or any matter claimed against such Outside Entity Executive solely by reason of his or her status as such; or
	(2) with respect to an Organization, any actual or alleged breach of duty, neglect, error, misstatement, misleading statement, omission or act by such Organization.
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