

In consideration of payment of the premium and subject to the Declarations, the General Terms and Conditions, and the limitations, conditions, provisions and other terms of this Coverage Section, the Company and the Insureds agree as follows:

Insuring Clauses

Fiduciary Liability Coverage Insuring Clause 1

1. The Company shall pay, on behalf of the Insureds, Loss on account of any Fiduciary Claim first made against the Insureds during the Policy Period, or, if exercised, during the Extended Reporting Period, for a Wrongful Act committed, attempted or allegedly committed or attempted before or during the Policy Period by such Insureds, or by any person for whose Wrongful Acts the Insureds are legally responsible, but only if such Claim is reported to the Company in writing in the manner and within the time provided in Subsection 6 of the General Terms and Conditions.

Voluntary Settlement Program Coverage Insuring Clause 2

2. The Company shall pay, on behalf of the Insureds, Settlement Fees and Defense Costs with respect to a Settlement Program Notice first given to the Company during the Policy Period, or, if exercised, during the Extended Reporting Period, provided (i) the Settlement Fees and Defense Costs are incurred after such Settlement Program Notice is first given to the Company, and (ii) the Company's maximum liability for all Settlement Fees and Defense Costs with respect to all such Settlement Program Notices first given to the Company during each Policy Year shall be the Sublimit set forth in Item 2(B) of the Declarations for this Coverage Section. Such amount shall be part of, and not in addition to, the Limit of Liability otherwise applicable to this Coverage Section.

Definitions

3. When used in this Coverage Section:

Administration means:

- (1) advising, counseling or giving notice to **Employees**, participants or beneficiaries with respect to any **Plan**;
- (2) providing interpretations to **Employees**, participants or beneficiaries with respect to any **Plan**; or
- (3) handling of records or effecting enrollment, termination or cancellation of **Employees**, participants or beneficiaries under any **Plan**.

Claim means for the purposes of coverage under:

- (1) Insuring Clause 1: any Fiduciary Claim; or
- (2) Insuring Clause 2: any Settlement Program Notice.

Defense Costs means reasonable costs, charges, fees (including but not limited to attorneys' fees and experts' fees) and expenses (other than regular or overtime wages, salaries or fees or benefits of the **Employees** of the **Organization**) incurred in defending any **Claim** and the premium for appeal, attachment or similar bonds.



Employee means any natural person whose labor or service is engaged by and directed by the **Organization** or any **Plan**, including any part-time, seasonal, leased or temporary employees or volunteers. **Employee** shall not include any **Independent Contractor**.

ERISA means the Employee Retirement Income Security Act of 1974, the English Pension Scheme Act 1993, the English Pensions Act 1995, all as amended, any similar common or statutory law anywhere in the world, and any rules or regulations promulgated under any such Acts or law.

Executive means any natural person who was, now is or shall become:

- (a) a duly elected or appointed director, officer, **Manager** or in-house general counsel of any **Plan** or any **Organization** chartered in the United States of America; or
- (b) a holder of a position equivalent to any position described in (a) above in any **Organization** that is chartered in any jurisdiction other than the United States of America.

Fiduciary Claim means:

- (a) a written demand for monetary damages or non-monetary relief;
- (b) a civil proceeding commenced by the service of a complaint or similar pleading;
- (c) a criminal proceeding commenced by a return of an indictment or information;
- (d) a formal civil administrative or civil regulatory proceeding commenced by the filing of a notice of charges or similar document or by the entry of a formal investigative order or similar document; or
- (e) a written notice of commencement of a fact-finding investigation by the U.S. Department of Labor, the U.S. Pension Benefit Guaranty Corporation, or any similar governmental authority located outside the United States, including but not limited to, the Pensions Ombudsman appointed by the United Kingdom Secretary of State for Social Services, the United Kingdom Occupational Pensions Regulatory Authority,

against any **Insured** for a **Wrongful Act**, including any appeal therefrom.

Except as may otherwise be provided in Subsection 8(e) of this Coverage Section, or Subsection 4 or Subsection 6(b) of the General Terms and Conditions, a **Fiduciary Claim** will be deemed to have first been made when such **Fiduciary Claim** is commenced as set forth in this definition (or, in the case of a written demand or notice, when such demand or notice is first received by an **Insured**).

Insured means the Organization, any Plan and any Insured Person.

Insured Person means any past, present or future **Executive**, **Employee** or natural person trustee of the **Organization** or of the **Sponsored Plan**.

Loss means the amount that any **Insured** becomes legally obligated to pay on account of any covered **Claim**, including but not limited to damages (including punitive or exemplary damages, or the multiple portion of any multiplied damage award, if and to the extent such damages are insurable under the law of the jurisdiction most favorable to the insurability of such damages provided such jurisdiction has a substantial relationship to the relevant **Insureds**, to the Company, or to the **Claim** giving rise to the damages), judgments, settlements, pre-judgment and post-judgment interest, **Defense Costs** and, solely with respect to Insuring Clause 2, **Settlement Fees**.



Loss does not include:

- (a) any amount not indemnified by the **Organization** for which the **Insured** is absolved from payment by reason of any covenant, agreement or court order;
- (b) any costs incurred by an **Organization** or **Plan** to comply with any order for injunctive or other non-monetary relief, or to comply with an agreement to provide such relief;
- (c) any amount incurred by an **Insured** in the defense or investigation of any action, proceeding, investigation or demand that is not then a **Claim** even if (i) such amount also benefits the defense of a covered **Claim**, or (ii) such action, proceeding, investigation or demand subsequently gives rise to a **Claim**;
- (d) taxes, fines or penalties, except:
 - (i) as provided above with respect to punitive or exemplary damages or the multiple portion of any multiplied damages;
 - the five percent (5%) or less, or the twenty percent (20%) or less, civil penalties imposed upon an **Insured** as a fiduciary under Section 502(i) or (I), respectively, of the Employee Retirement Income Security Act of 1974, as amended;
 - (iii) any civil penalties imposed by the Pension Ombudsman appointed by the United Kingdom Secretary of State for Social Services or by the United Kingdom Occupational Pensions Regulatory Authority, pursuant to the English Pension Scheme Act 1993, the English Pensions Act 1995, or rules or regulations thereunder; provided any coverage for such civil penalties applies only if the funds or assets of the subject **Plan** are not used to fund, pay or reimburse the premium for this Coverage Section;
 - (iv) solely with respect to Insuring Clause 2, Settlement Fees; or
 - (v) any civil money penalties imposed upon an **Insured** for violation of the privacy provisions of the Health Insurance Portability and Accountability Act ("HIPAA"); provided the Company's maximum aggregate liability for all such civil money penalties on account of all **Claims** first made during each **Policy Year** shall be twenty-five thousand dollars (\$25,000), which is a sublimit that further limits and does not increase the Company's maximum liability under this Coverage Section;
- (e) any amount allocated to non-covered loss pursuant to Subsection 10 of this Coverage Section; or
- (f) any amount not insurable under the law pursuant to which this Coverage Section is construed, except as provided above with respect to punitive or exemplary damages or the multiple portion of any multiplied damages.

Plan means:

- (a) any **Sponsored Plan**; and
- (b) any government-mandated insurance program for workers' compensation, unemployment, social security or disability benefits for **Employees**.



Settlement Fees means any fees, fines, penalties or sanctions paid by an **Insured** to a governmental authority pursuant to a **Settlement Program** for the actual or alleged inadvertent non-compliance by a **Plan** with any statute, rule or regulation; provided **Settlement Fees** shall not include (a) any costs to correct the non-compliance, or any other charges, expenses, taxes or damages; or (b) any fees, fines, penalties or sanctions relating to a **Plan** which, as of the earlier of the inception of this Coverage Section or the inception of the first policy in an uninterrupted series of policies issued by the Company of which this Coverage Section is a direct or indirect renewal or replacement, any **Insured Person** knew to be actually or allegedly non-compliant.

Settlement Program means any voluntary compliance resolution program or similar voluntary settlement program administered by the U.S. Internal Revenue Service or the U.S. Department of Labor, including but not limited to, the Employee Plans Compliance Resolution System, the Audit Closing Agreement Program, the Voluntary Compliance Resolution Program, the Walk-in Closing Agreement Program, the Administrative Policy Regarding Self-Correction, the Tax Sheltered Annuity Voluntary Correction Program, the Delinquent Filer Voluntary Compliance Program, and the Voluntary Fiduciary Correction Program, or any similar program administered by a governmental authority located outside the United States.

Settlement Program Notice means prior written notice to the Company by the Insured of the Insured's intent to enter into a Settlement Program.

Sponsored Plan means:

- (a) any Employee Benefit Plan, Pension Benefit Plan or Welfare Benefit Plan, as each are defined in ERISA, which is operated solely by the Organization or jointly by the Organization and a labor organization solely for the benefit of the Employees or Executives of the Organization located anywhere in the world and which existed on or before the inception date set forth in ltem 2 of the Declarations of the General Terms and Conditions or which is created or acquired after such inception date; provided that any coverage with respect to any such Plan created or acquired during the Policy Period shall apply only for Wrongful Acts committed, attempted, or allegedly committed or attempted after the effective date of such creation or acquisition and shall be subject to Subsection 9, Changes in Exposure, of the General Terms and Conditions;
- (b) any other employee benefit plan or program not subject to ERISA which is sponsored solely by the Organization for the benefit of the Employees or Executives, including any fringe benefit or excess benefit plan;
- (c) any other plan or program otherwise described in paragraphs (a) or (b) above while such plan or program is being actively developed, formed or proposed by the **Organization** prior to the formal creation of such plan or program; provided, however, no coverage is afforded under this Coverage Section for any **Claim** against an **Insured** in a _ettler or similar uninsured capacity with respect to any plan or program; and
- (d) any other plan, fund, or program specifically included as a **Sponsored Plan** by endorsement to this Coverage Section.

Sponsored Plan shall not include any employee stock ownership plan or any multi-employer plan.

Wrongful Act means with respect to any Plan:

(a) any breach of the responsibilities, obligations or duties imposed by **ERISA** upon fiduciaries of the **Sponsored Plan** in their capacity as such fiduciaries;



- (b) any negligent act, error or omission in the **Administration** of any **Plan** committed, attempted, or allegedly committed or attempted by an **Insured** in the **Insured's** capacity as such; or
- (c) any other matter claimed against an **Insured** solely by reason of the **Insured's** service as a fiduciary of any **Sponsored Plan**.

Exclusions

- 4. The Company shall not be liable for **Loss** on account of any **Claim** against an **Insured**:
 - (a) based upon, arising from or in consequence of any fact, circumstance, situation, transaction, event or Wrongful Act that, before the inception date set forth in Item 2 of the Declarations of the General Terms and Conditions, was the subject of any notice given under any policy or coverage section of which this Coverage Section is a direct or indirect renewal or replacement;
 - (b) based upon, arising from or in consequence of any demand, suit, or other proceeding pending against, or order, decree or judgment entered for or against any **Insured**, on or prior to the applicable Pending or Prior Date set forth in Item 4 of the Declarations for this Coverage Section, or the same or substantially the same fact, circumstance or situation underlying or alleged therein;
 - (c) based upon, arising from or in consequence of:
 - (i) any actual, alleged, or threatened exposure to, or generation, storage, transportation, discharge, emission, release, dispersal, escape, treatment, removal or disposal of any Pollutants; or
 - (ii) any regulation, order, direction or request to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize any **Pollutants**, or any action taken in contemplation or anticipation of any such regulation, order, direction or request,

including but not limited to any **Claim** for financial loss to any **Organization** or **Plan** or creditors based upon, arising from or in consequence of any matter described in clause (i) or clause (ii) of this Exclusion 4(c); provided that this Exclusion 4(c) shall not apply to (A) any **Claim** by or on behalf of a beneficiary of or participant in any **Sponsored Plan** based upon, arising from or in consequence of the diminution in value of any securities owned by the **Sponsored Plan** in any organization other than the **Organization**, if such diminution in value is allegedly as a result of the matters described above in this Exclusion 4(c), or (B) **Loss** (other than fees and expenses incurred in testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing **Pollutants**) incurred by an **Insured Person** for which the **Organization** is not permitted by common or statutory law to indemnify or for which the **Organization** is not able to indemnify by reason of **Financial Impairment**;

- (d) for bodily injury, mental anguish, emotional distress, sickness, disease or death of any person or damage to or destruction of any tangible property including loss of use thereof whether or not it is damaged or destroyed;
- (e) based upon, arising from or in consequence of the liability of others assumed by any **Insured** under any written or oral contract or agreement; provided that this Exclusion 4(e) shall not apply to the extent that:
 - (i) an **Insured** would have been liable in the absence of the contract or agreement; or



- (ii) the liability was assumed in accordance with or under the agreement or declaration of trust pursuant to which the **Plan** was established;
- (f) for the failure of the **Insured** to comply with any workers' compensation, unemployment insurance, social security or disability benefits law or any amendments thereto or any rules or regulations promulgated thereunder, or any similar provisions of any federal, state, or local statutory law or common law anywhere in the world, except (i) the Consolidated Omnibus Budget Reconciliation Act of 1985, (ii) the Health Insurance Portability and Accountability Act of 1996, or (iii) any amendments to or any rules or regulations promulgated under such Acts;
- (g) made against a Subsidiary or Affiliate or an Insured Person of such Subsidiary or Affiliate for any Wrongful Act committed, attempted, or allegedly committed or attempted during any time when such entity was not a Subsidiary or Affiliate;
- (h) based upon, arising from, or in consequence of:
 - the committing of any deliberately fraudulent act or omission or any willful violation of any statute or regulation by such **Insured** as evidenced by a final and non-appealable judgment or adjudication, or by any plea of guilty, nolo contendere or no contest, or by an *Alford* plea pursuant to *North Carolina v. Alford*, 400 U.S. 25 (1970); or
 - (ii) such **Insured** having gained in fact any profit, remuneration or advantage to which such **Insured** was not legally entitled;
- (i) based upon, arising from or in consequence of any employee stock ownership plan or any multi-employer plan created before or during the **Policy Period**.
- 5. The Company shall not be liable for **Loss** other than **Defense Costs**:
 - (a) which constitutes the return or reversion to an employer of any contribution or asset of a **Plan**;
 - (b) which constitutes (i) benefits due or to become due under any **Plan**, or (ii) benefits which would be due under any **Plan** if such **Plan** complied with all applicable law, except to the extent that:
 - (A) an **Insured** is a natural person and the benefits are payable by such **Insured** as a personal obligation; and
 - (B) recovery for the benefits is based upon a covered **Wrongful Act**; or
 - (c) which is based upon, arising from or in consequence of the failure to collect an employer's contributions owed to a **Plan** unless the failure is because of the negligence of any **Insured**.

Severability of Exclusions

- 6. (a) No fact pertaining to or knowledge possessed by any **Insured Person** shall be imputed to any other **Insured Person** for the purpose of applying Exclusion 4(h) of this Coverage Section.
 - (b) Only facts pertaining to and knowledge possessed by any **Executive** shall be imputed to such **Organization** or **Plan** for the purpose of applying Exclusion 4(h) of this Coverage Section.



Coordination with Employment Practices Liability Coverage Section

7. Any Loss otherwise covered by both (i) this Coverage Section and (ii) any employment practices liability coverage section or policy issued by the Company or by any affiliate of the Company (an "Employment Practices Liability Coverage"), first shall be covered as provided in, and shall be subject to the limit of liability and retention applicable to the Employment Practices Liability Coverage. Any remaining Loss otherwise covered by this Coverage Section which is not paid under the Employment Practices Liability Coverage shall be covered as provided in, and shall be subject to the Limit of Liability and Retention applicable to this Coverage Section; provided the Retention applicable to such Loss under this Coverage Section shall be reduced by the amount of Loss otherwise covered by this Coverage Section under such Employment Practices Liability Coverage.

Limit of Liability and Retention

- 8. (a) The Company's maximum aggregate liability for all Loss on account of all Claims first made during each Policy Year, whether covered under one or more Insuring Clauses, shall be the Limit of Liability for each Policy Year set forth in Item 2(A) of the Declarations for this Coverage Section. The Company's maximum liability for all Defense Costs and Settlement Fees with respect to each Settlement Program Notice for which coverage is provided under Insuring Clause 2, and the Company's maximum aggregate liability for all Defense Costs and Settlement Fees with respect to all such Settlement Program Notices first given to the Company during each Policy Year, shall be the Sublimit set forth in Item 2(B) of the Declarations for this Coverage Section.
 - (b) Solely in the event that the Defense Outside the Limits of Liability Option is purchased as indicated in Item 5 of the Declarations of this Coverage Section, Defense Costs shall be in addition to, and not part of, the applicable Limits of Liability set forth in Item 2 of the Declarations for this Coverage Section, and payment of Defense Costs by the Company shall not reduce or exhaust such applicable Limits of Liability; provided, however, that when such applicable Limits of Liability are exhausted by payment of Loss other than Defense Costs, any obligation of the Company to pay Defense Costs or to defend or continue to defend any Claim shall cease.

If the Defense Outside the Limits of Liability Option is not purchased as indicated in Item 5 of the Declarations of this Coverage Section, **Defense Costs** are part of and not in addition to the Limits of Liability set forth in Item 2 of the Declarations of this Coverage Section and payment of **Defense Costs** by the Company shall reduce, and may exhaust, such Limits of Liability. When the Limits of Liability are exhausted by payment of **Defense Costs** or other **Loss**, any obligation of the Company to pay **Defense Costs** or to defend or continue to defend any **Claim** shall cease.

(c) No Retention shall apply to any Loss under this Coverage Section incurred by an Insured Person if such Loss cannot be indemnified by an Organization or Plan because such Organization or Plan is either not legally permitted or required to indemnify, or is unable to indemnify, such Insured Person by reason of Financial Impairment. The Company's liability for all other covered Loss (as determined by Subsection 10 of this Coverage Section, if applicable) shall apply only to Loss on account of each Claim which is excess of the applicable Retention set forth in Item 3 of the Declarations for this Coverage Section. Such Retention shall be reduced only by Loss otherwise covered under this Coverage Section and shall be borne by the Insureds uninsured and at their own risk.



- (d) If different parts of a single **Claim** are subject to different Retentions, the applicable Retentions will be applied separately to each part of such **Claim**, but the sum of such Retentions shall not exceed the largest applicable Retention.
- (e) All Related Claims shall be treated as a single Claim first made on the date the earliest of such Related Claims was first made, or on the date the earliest of such Related Claims is treated as having been made in accordance with Subsection 6(b) of the General Terms and Conditions, regardless of whether such date is before or during the Policy Period.
- (f) The limit of liability available during the Extended Reporting Period (if exercised) shall be part of, and not in addition to, the Company's maximum aggregate limit of liability for all Loss on account of all Claims first made during the immediately preceding Policy Year.

Defense and Settlement

- 9. (a) The Company shall have the right and duty to defend any Claim covered by this Coverage Section, even if any of the allegations in such Claim are groundless, false or fraudulent. Defense counsel shall be selected by the Company. The Company's duty to defend any Claim shall cease upon exhaustion of the applicable Limit of Liability.
 - (b) The Company may make any investigation it deems necessary and may, with the consent of the **Insured**, make any settlement of any **Claim** it deems expedient.

Solely in the event that the Defense Outside the Limits of Liability Option is purchased as indicated in Item 5 of the Declarations of this Coverage Section, if an **Insured** in any **Claim** withholds consent to any settlement acceptable to the claimant in accordance with the Company's recommendation (a "Proposed Settlement"), the **Insureds** will thereafter be responsible for defending such **Claim** at their own expense and, subject in all events to the Company's maximum Limit of Liability, the Company's liability for **Loss** with respect to any such **Claim** will not exceed the amount of the Proposed Settlement plus **Defense Costs** incurred up to the date of the **Insured's** refusal to consent to the Proposed Settlement.

If the Defense Outside the Limits of Liability Option is not purchased as indicated in Item 5 of the Declarations of this Coverage Section, in the event an **Insured** in any **Claim** withholds consent to a Proposed Settlement, the Company's liability with respect to such **Claim** shall not exceed:

- the amount of the Proposed Settlement plus Defense Costs incurred up to the date of the Insured's refusal to consent to the Proposed Settlement; plus
- (ii) seventy percent (70%) of any Loss, including Defense Costs, in excess of the amount referenced in paragraph (i) above, incurred in connection with such Claim; subject in all events to the applicable Retention and Limits of Liability for such Claim. The remaining thirty percent (30%) of Loss, including Defense Costs, in excess of the amount referenced in paragraph (i) above shall be borne by the Insureds uninsured and at their own risk, notwithstanding anything to the contrary contained in Subsection 10(a) Allocation.
- (c) The Insureds agree not to settle or offer to settle any Claim, incur any Defense Costs or otherwise assume any contractual obligation or admit any liability with respect to any Claim without the Company's prior written consent, which shall not be unreasonably withheld. The Company shall not be liable for any element of Loss incurred, for any obligation assumed, or for any admission made, by any Insured without the Company's prior written consent.



- (d) The Company will have no obligation to pay Loss, including Defense Costs, or to defend or continue to defend any Claim after the maximum Limit of Liability applicable to the Policy Year in which such Claim was first made or is deemed to have first been made has been exhausted. If the Company's Limit of Liability in any Policy Year is exhausted, the Policy premium applicable to such Policy Year will be fully earned.
- (e) If the Combined Maximum Aggregate Limit of Liability for all Liability Coverage Sections is elected, as set forth in Item 3 of the Declarations of the General Terms and Conditions, then the Company will have no obligation to pay Loss, including Defense Costs, or to defend or continue to defend any Claim after the Company's Combined Maximum Aggregate Limit of Liability applicable to the Policy Year in which such Claim was first made or is deemed to have first been made has been exhausted. If the Company's Combined Maximum Aggregate Limit of Liability in any Policy Year is exhausted, the Policy premium applicable to such Policy Year will be fully earned.
- (f) The **Insureds** agree to provide the Company with all information, assistance and cooperation which the Company reasonably requires and agree that in the event of a **Claim** the **Insureds** will do nothing that could prejudice the Company's position or its potential or actual rights of recovery.

Allocation

- 10. (a) If both Loss covered under this Coverage Section and loss not covered under this Coverage Section are incurred by the Insureds on account of any Claim because such Claim against the Insureds includes both covered and non-covered matters, then coverage under this Coverage Section with respect to such Claim shall apply as follows:
 - Defense Costs: One hundred percent (100%) of reasonable and necessary Defense Costs incurred by the Insured on account of such Claim will be considered covered Loss; and
 - (ii) Loss other than Defense Costs: All remaining loss incurred by the Insured on account of such Claim shall be allocated by the Company between covered Loss and noncovered loss based on the relative legal and financial exposures of the Insureds to covered and non-covered matters and, in the event of a settlement in such Claim, also based on the relative benefits to the Insureds from such settlement.
 - (b) If the **Insureds** and the Company cannot agree on an allocation of loss:
 - (i) no presumption as to allocation shall exist in any arbitration, suit or other proceeding; and
 - (ii) the Company, if requested by the **Insureds**, shall submit the dispute to binding arbitration. The rules of the American Arbitration Association shall apply except with respect to the selection of the arbitration panel, which shall consist of one arbitrator selected by the **Insureds**, one arbitrator selected by the Company, and a third independent arbitrator selected by the first two arbitrators.



Other Insurance

11. If any **Loss** under this Coverage Section is insured under any other valid insurance policy(ies), then this Coverage Section shall cover such **Loss**, subject to its limitations, conditions, provisions and other terms, only to the extent that the amount of such **Loss** is in excess of the applicable retention (or deductible) and limit of liability under such other insurance, whether such other insurance is stated to be primary, contributory, excess, contingent or otherwise, unless such other insurance is written only as specific excess insurance over the Limits of Liability provided in this Coverage Section. Any payment by **Insureds** of a retention or deductible under such other insurance shall deplete, by the amount of such payment which would otherwise be covered under this Coverage Section, the applicable Retention under this Coverage Section.

Termination of Plan

12. If an **Organization** terminates a **Plan** before or after the inception date set forth in Item 2 of the Declarations of the General Terms and Conditions, coverage under this Coverage Section with respect to such terminated **Plan** and its **Insureds** shall continue until termination of this Coverage Section for those who were **Insureds** prior to or at the time of such **Plan** termination or who would have been **Insureds** at the time of such termination if this Coverage Section had then been in effect. Such continuation of coverage shall apply with respect to **Claims** for **Wrongful Acts** committed, attempted, or allegedly committed or attempted prior to or after the date the **Plan** was terminated.

SPECIMEN