

Tokio Marine Europe S.A. Spanish Branch Torre Diagonal Mar, Josep Pla 2, Planta 10 08019 Barcelona, Spain Tel: +34 93 530 7300 tmhcc.com

HCC EXECPLUS FOR THE NETHERLANDS POLICY DOCUMENT

DIRECTORS' & OFFICERS' INSURANCE

PLEASE NOTE:

THIS IS A CLAIMS MADE POLICY.

THE COVER PROVIDED BY THIS POLICY IS AFFORDED SOLELY WITH RESPECT TO CLAIMS FIRST MADE AGAINST AN INSURED DURING THE POLICY PERIOD OR ANY DISCOVERY PERIOD PURCHASED.

THE NAMED COMPANY IS REQUESTED TO READ THIS POLICY AND SCHEDULE CAREFULLY. IF IT IS INCORRECT PLEASE RETURN IT IMMEDIATELY FOR ALTERATION TO: TORRE DIAGONAL MAR, JOSEP PLA 2, PLANTA 10, 08019 BARCELONA, SPAIN

Tokio Marine HCC is a trading name of Tokio Marine Europe S.A., which is a member of the Tokio Marine HCC Group of Companies. Tokio Marine Europe S.A., "the Insurer", is authorised by the Luxembourg Minister of Finance and regulated by the Commissariat aux Assurances (CAA). Registered with the Registre de commerce et des sociétés, Luxembourg No. B221975. Registered office: 26, Avenue de la Liberté, L-1930, Luxembourg. Operating through its Spanish Branch, registered office: Torre Diagonal Mar, Josep Pla 2, Planta 10, 08019 Barcelona, Spain. VAT number in Spain ("N.I.F") W0186736-E. Registered with the Registro de Entidades Aseguradoras de la Dirección General de Seguros y Fondos de Pensiones under the code E0236. Registered with the Registro Mercantil de Barcelona, at volume 46.667, page 30, sheet number B-527127, registration entry 1. Any insolvency proceedings or liquidation regarding the Insurer will be governed by the laws of Luxembourg.



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NOTICE: THIS IS A CLAIMS MADE POLICY WHICH APPLIES ONLY TO CLAIMS FOR WRONGFUL ACTS FIRST MADE AGAINST THE INSUREDS DURING THE POLICY PERIOD OR, IF APPLICABLE, THE DISCOVERY PERIOD. THE LIMIT OF LIABILITY AVAILABLE TO PAY DAMAGES OR SETTLEMENTS WILL BE REDUCED, AND MAY BE EXHAUSTED, BY THE PAYMENT OF DEFENCE COSTS AND INVESTIGATION COSTS. DEFENCE COSTS AND INVESTIGATION COSTS WILL BE APPLIED AGAINST THE RETENTION. THE INSURER HAS NO DUTY UNDER THE POLICY TO DEFEND ANY INSURED.

SCHEDULE

POLICY NUMBER:

- ITEM 1. NAMED COMPANY:
 - (a) Name:
 - (b) Principal Address:

ITEM 2. POLICY PERIOD:

- (a) Inception Date:
- (b) Expiration Date:

both days inclusive at local standard time at the Principal Address stated in ITEM 1.

ITEM 3. LIMIT OF LIABILITY:

EUR in the aggregate, for all insurance covers combined

ITEM 4. AGGREGATE SUB-LIMITS:

(a)	Def	inition (iii) - Civil fines and penalties:	EUR	
(b)	Car	ve-back to Exclusion (C) - Pollution Defence Costs :	EUR	
(c)	Extension (B) - Investigation Costs:			
	(i)	Company Investigations:	EUR	
	(ii)	Official Investigations commenced or maintained within the jurisdiction of or under any laws of the United States of America:	EUR	
	(iii)	Other Investigations:	NIL	
(d)	Exte	ension (F) - Company Crisis Response Costs:	EUR	
(e)	Exte	ension (G) - Reputational Mitigation Costs:	EUR	



(f)	Extension (I) - Emergency Costs:	EUR
(g)	Extension (J) - Assets and Liberty Protection:	EUR

All Sub-Limits are part of and not in addition to the Limit of Liability stated in ITEM 3 of the SCHEDULE.

ITEM 5. NON-EXECUTIVE DIRECTOR EXTRA LIMIT:

(a) Each Non-Executive Director: EUR ; nevertheless,
(b) Aggregate for all Non-Executive Directors: EUR

ITEM 6. RETENTIONS:

- (1) Insuring Agreement 1:
- (2) Insuring Agreements 0 and (C):

NIL, or the minimum required under applicable law, if any.

- (a) Securities Claims brought or maintained within the jurisdiction of or under any laws of the United States of America: USD each and every Securities Claim.
- (b) Other **Securities Claims**: EUR each and every **Securities Claim**.
- (c) Claims brought or maintained within the jurisdiction of or under any laws of the United States of America other than Securities Claims: USD each and every Claim.
- (d) **Claims** brought or maintained outside the jurisdiction of or under other laws than those of the United States of America other than **Securities Claims**: EUR each and every **Claim**.
- ITEM 7. PREMIUM: EUR plus applicable tax
- ITEM 8. INSURER: TOKIO MARINE EUROPE S.A.
- ITEM 9. REQUIRED NOTICES TO BE ADDRESSED TO:

TOKIO MARINE EUROPE S.A. SUCURSAL EN ESPAÑA Torre Diagonal Mar Josep Pla 2, Planta 10 08019 Barcelona, Spain Attention: Claims Manager



ITEM 10. APPLICABLE LAW AND EXCLUSIVE JURISDICTION:

- (a) Applicable Law:
- (b) Jurisdiction: The Courts of Netherlands or the Arbitration Institute
- ITEM 11. CONTINUITY DATE Pending and prior litigation:
- ITEM 12. INSURING AGREEMENTS:

Only Insuring Agreements indicated as COVERED below are provided under this Policy. NOT COVERED means not purchased.

INSURING AGREEMENT 1	COVERED
INSURING AGREEMENT 0	COVERED
INSURING AGREEMENT (C)	COVERED/NOT COVERED
INSURING AGREEMENT (D)	COVERED

ITEM 13. DISCOVERY PERIOD:

(a) Automatic **Discovery Period**:

- (i) Duration: months after the Expiration Date
- (ii) Additional Premium: NIL
- (b) Automatic **Discovery Period** for **Retired Directors**:
 - (i) Duration: 120 months after the Expiration Date
 - (ii) Additional Premium: NIL
- (c) Optional **Discovery Periods**:

Option 1:

- (i) Duration: months after the Expiration Date
- (ii) Additional Premium: % of the premium stated in ITEM 7 of the SCHEDULE

Option 2:

- (i) Duration: months after the Expiration Date
- (ii) Additional Premium: % of the premium stated in ITEM 7 of the SCHEDULE



ITEM 14. NEW SUBSIDIARIES ASSET LIMITS:

Entity's total assets:

% of the total consolidated assets of the **Named Company** as reported in its latest audited Annual Report and Accounts (or equivalent in any other relevant jurisdiction)

ITEM 15. ENDORSEMENTS ATTACHED AT ISSUANCE:

INFORMATION FOR THE NAMED COMPANY REGARDING THE INSURER:

In accordance with Spanish Law, the **Insurer** is required to provide the **Named Company** with the following information in written form before the conclusion of this Policy:

The risk is insured by TOKIO MARINE EUROPE S.A. having its registered office at 26, Avenue de la Liberté, L-1930 Luxembourg authorised by the Luxembourg Minister of Finance and regulated by the Commissariat aux Assurances (CAA), acting through its Spanish Branch with registered office at Torre Diagonal Mar, Josep Pla 2, Planta 10, 08019 Barcelona, Spain.

The **Named Company** hereby confirms that it has received the foregoing information in written form before the conclusion of this Policy.

IN WITNESS WHEREOF, the **Insurer** has caused this Policy to be signed in the SCHEDULE by a duly authorised representative of the **Insurer**.



THIS IS A CLAIMS MADE POLICY. PLEASE READ IT CAREFULLY.

In consideration of the payment of the premium or agreement to pay the premium and in reliance upon the statements made in the **Proposal**, which is made a part hereof and deemed attached hereto, and subject to the terms and conditions of this Policy and any endorsements attached to this Policy, the **Insurer** and the **Named Company** agree as follows:

1. INSURING AGREEMENTS

(A) INSURED PERSONS COVER

The **Insurer** shall pay to or on behalf of any **Insured Person** any **Loss** resulting from a **Claim** first made during the **Policy Period** (or **Discovery Period**, if applicable), except to the extent that the **Company** has indemnified or advanced such **Loss** to or on behalf of such **Insured Person**.

(B) COMPANY REIMBURSEMENT COVER

The **Insurer** shall pay to or on behalf of any **Company** any **Loss** resulting from a **Claim** first made during the **Policy Period** (or **Discovery Period**, if applicable), if and to the extent that such **Company** has indemnified or advanced such **Loss** to or on behalf of an **Insured Person**.

(C) COMPANY SECURITIES CLAIMS COVER

The **Insurer** shall pay to or on behalf of any **Company** any **Loss** resulting solely from a **Securities Claim** first made during the **Policy Period** (or **Discovery Period**, if applicable).

(D) NON-EXECUTIVE DIRECTORS EXTRA COVER

The **Insurer** shall pay to or on behalf of any **Non-Executive Director** any **Loss** resulting from a **Claim** first made during the **Policy Period** (or **Discovery Period**, if applicable) up to the **Non-Executive Director Extra Limit** but only after exhaustion of:

- (1) the **Limit of Liability**; and
- (2) any other available directors' and officers' or management liability cover whether written excess of the **Limit of Liability** or otherwise; and
- (3) any other valid and collectible indemnification from any other source.

2. <u>DEFINITIONS</u>

(A) Assets or Liberty Restriction means:

- the seizure, freezing, confiscation, assumption of ownership and control, or suspension of rights of ownership of, an **Insured Person**'s real property or personal assets; or
- (2) a charge over an **Insured Person**'s real property or personal assets; or
- (3) the permanent or temporary prohibition on an **Insured Person** from holding office as a director or officer of a **Company**; or



- (4) the restriction of an **Insured Person**'s liberty to a domestic residence or an official detention; or
- (5) the deportation of an **Insured Person** upon revocation of otherwise valid immigration status for any reason other than such **Insured Person**'s arrest or conviction for a crime,

sought or obtained through any interim or interlocutory judicial order by reason of a **Claim** against such **Insured Person** covered under this Policy.

- (B) Change in Control means:
 - (1) the **Named Company**'s merger with or consolidation into any other company; or
 - (2) any person or company acting alone or in concert:
 - (a) acquiring ownership or control or assuming control pursuant to a written agreement with other shareholders of more than 50% of the voting rights in the **Named Company** and/or more than 50% of the outstanding **Securities** representing the right to vote for the election of the board of directors of the **Named Company** and/or assuming the right to appoint or remove the majority of the board of directors of the **Named Company**; or
 - (b) acquiring ownership of all or the majority of the **Named Company**'s assets.

(C) Claim means:

- (1) any written demand for monetary or non-monetary relief; or
- (2) any written request or agreement to stay, suspend or toll any applicable statute of limitations; or
- (3) any civil (including arbitration and other alternative dispute resolution), criminal, regulatory or administrative proceeding; or
- (4) any **Securities Claim**,

against an **Insured** for a **Wrongful Act**, deemed to be made upon receipt by or service upon the **Insured**, whichever is earlier.

If two or more **Claims** arise out of or are based upon or attributable to the same or related or continuous or repeated **Wrongful Acts**, they will be considered a single **Claim** and will be deemed first made at the time the earlier **Claim** was made.

- (D) **Company** means:
 - (1) the **Named Company**; or
 - (2) any **Subsidiary**.
- (E) **Company Investigation** means an internal investigation commenced by the **Company** of an actual or suspected material breach of any **Insured**'s legal or regulatory duties which the **Company** is required to formally notify to an official governmental body,



enforcement agency, or regulator, and in which an **Insured Person** is reasonably required to participate.

- (F) Defence Costs means reasonable and necessary fees, costs and expenses incurred with the prior written consent of the Insurer (not to be unreasonably withheld or delayed), for which the Insured is legally liable to pay, including the reasonable premiums but not the collateral for any appeal bond, attachment bond or similar bond for any civil proceeding, resulting from investigating, adjusting, defending, appealing or otherwise participating in a Claim, but excluding salaries, wages, benefits or overhead expenses of directors, officers or employees of the Company.
- (G) **Discovery Period** means the relevant period stated in ITEM 13 of the SCHEDULE commencing immediately after the Expiration Date as stated in ITEM 2(b) of the SCHEDULE.
- (H) **Insured** means:
 - (1) any **Insured Person**; and
 - (2) any **Company**, solely for the purposes of INSURING AGREEMENT (C) and EXTENSION (F), if purchased.
- (I) **Insured Person** means any natural person who was, is or during the **Policy Period** becomes:
 - (1) a director or officer, non-executive director, de facto director (including any shadow director) of any **Company**; or
 - (2) an **Outside Director**; or
 - (3) named as a prospective director or officer in any listing particulars, prospectus, circular or similar issued by any **Company**; or
 - (4) an employed attorney of any **Company** who must comply with Section 307 of the Sarbanes-Oxley Act of 2002 of the United States of America; or
 - (5) a person employed by any **Company** to whom the Financial Services Authority has given its approval, pursuant to Section 59 of the Financial Services and Markets Act 2000, to perform for such **Company** one or more of those controlled functions which were or are designated by the Financial Services Authority as "significant influence functions"; or
 - (6) an employee of the **Company** but only with respect to any:

Claim for a Wrongful Employment Practice; or

- **Claim** where and during such time the employee is a co-defendant along any person listed in (1) above; or
- **Claim** in respect of a **Wrongful Act** actually or allegedly committed in a managerial or supervisory capacity;
- (7) a natural person duly appointed by the **Company** as a liquidator or administrator in a voluntary winding-up of such **Company**.

Insured Person shall not include any insolvency practitioner or external auditor appointed on behalf of a **Company**.



- (J) **Insurer** means Tokio Marine Europe S.A. as named in ITEM 8 of the SCHEDULE, having its registered office at 26, Avenue de la Liberté, L-1930 Luxembourg, acting through its Spanish Branch with registered office at Torre Diagonal Mar, Josep Pla 2, Planta 10, 08019 Barcelona, Spain.
- (K) Investigation means any Official Investigation or Company Investigation in relation to matters existing prior to the Expiration Date as stated in ITEM 2(b) of the SCHEDULE.

An **Investigation** shall be deemed first made when the **Insured Person** is first required to participate in, or formally identified as being subject to, such **Investigation**, whichever is the earlier.

- (L) Investigation Costs means any reasonable and necessary fees, costs and expenses (other than salary) incurred by an Insured Person with the Insurer's prior written consent (not to be unreasonably withheld or delayed) at such time when there is no allegation of a Wrongful Act or Wrongful Employment Practice against the Insured Person, in attending or participating in an Investigation.
- (M) Limit of Liability means the amount stated in ITEM 3 of the SCHEDULE.
- (N) Loss means:
 - (1) **Defence Costs**; and
 - (2) any amounts that an **Insured** is legally obliged to pay as a result of a **Claim** including:
 - damages including punitive or exemplary damages and the multiplied portion of any multiplied damage award where lawfully insurable by the laws of the jurisdictions in which such sums are payable and in which such sums were ordered to be paid;
 - (ii) settlements, judgments, pre and post- judgment interest on a covered judgment or award, or awards of costs or other amounts; and
 - (iii) any civil fine or penalty where lawfully insurable by the laws of the jurisdictions in which such civil fine or penalty is payable and in which such fine or penalty was ordered to be paid, subject to the Sub-limit stated in ITEM 4(a) of the SCHEDULE.

Loss shall not include:

- (a) criminal fines or penalties; or
- (b) regulatory fines or penalties imposed on a **Company**; or
- (c) taxes (except under INSURING AGREEMENT 1 to the extent that personal liability of a director or officer for non-payment of corporate taxes is established by law in the jurisdiction in which the **Claim** is made and such liability constitutes a **Non-Indemnifiable Loss**); or
- (d) any kind of employment-related benefits; or
- (e) any reimbursement of a **Company** required pursuant to Section 304 the Sarbanes-Oxley Act of 2002 of the United States of America; or



- (f) any amounts which are deemed uninsurable under the laws of the jurisdictions in which such sums are payable or in which such sums were ordered to be paid; or
- (g) any costs for testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralising any such substance or contaminant.

Notwithstanding the above, in case of **Securities Claims** alleging violations of Section 11 or 12 of the Securities Act of 1933 of the United States of America, the **Insurer** shall not deem the portion of **Defence Costs**, settlements and judgments incurred by an **Insured** attributable to such violations to be uninsurable and such portion shall be considered **Loss** under this Policy.

- (O) **Mandate** means any mandate given, at the express request of the **Named Company**, to a natural person to act as a director, officer, trustee, regent or governor of or in another equivalent executive position in any organisation, association or entity.
- (P) **Named Company** means the entity named in ITEM 1 of the SCHEDULE.
- (Q) **Non-Executive Director** means any natural person serving as a non-executive director of the **Named Company**.
- (R) **Non-Executive Director Extra Limit** means the amount specified as such in ITEM 5 of the SCHEDULE.
- (S) **Non-Indemnifiable Loss** means **Loss** that a **Company** (i) is legally prohibited from indemnifying the **Insured Person** for, or (ii) is unable to indemnify due to its insolvency under section 123 of the Insolvency Act 1986 or under the law that governs the insolvency of such **Company.**
- (T) Official Investigation means any formal or official hearing, investigation or inquiry by a governmental or judicial agency into the affairs of a Company, an Outside Entity or an Insured Person in their capacity as such, commenced by the receipt by an Insured Person of written documentation by the body empowered to investigate (in the case of the United States Securities and Exchange Commission, a subpoena or a Wells Notice):
 - (1) that legally requires such **Insured Person** to attend or participate in such hearing, investigation or inquiry; or
 - (2) in which the **Insured** is identified by an investigating authority as a subject of such hearing, investigation or inquiry.

Official Investigation shall not include routine regulatory supervision, inspection or compliance reviews or any investigation which focuses on an industry rather than a **Company**, **Outside Entity** or **Insured Person** in their capacity as such.

- (U) **Outside Director** means any natural person employed by the **Company** who exercises a **Mandate** in an **Outside Entity.**.
- (V) **Outside Entity** means any organisation, association or entity, other than a **Company**, during any time any person exercises a **Mandate** therein.

Outside Entity shall not include:

(a) any organisation, association or entity having any of its **Securities** traded on any exchange in the United States of America; or



(b) any financial institution (including any bank, depository institution, investment company, securities broker, dealer or underwriter, asset manager or insurance company),

unless expressly agreed by the **Insurer** by endorsement to this Policy.

- (W) **Policy Period** means the period set forth in ITEM 2 of the SCHEDULE.
- (X) Proposal means any documents, statements and information made available to the Insurer for the purpose of its assessment of the risk to be covered under this Policy, including but not limited to any proposal form and any attachments thereto, annual reports, financial statements of any Company and other information or materials made publicly available by any Company, Subsidiary or Insured Persons.
- (Y) **Recognised Insured v. Insured Claim** means any **Claim** brought or maintained:
 - (1) by an Insured Person alleging a Wrongful Employment Practice; or
 - (2) by a Receiver or Manager appointed in respect of a **Company** in the framework of insolvency proceedings, directly or derivatively without the solicitation, voluntary assistance participation or co-operation of an **Insured** or an **Outside Entity**'s directors or officers unless such solicitation, voluntary assistance participation or co-operation is required by law or protected as **Whistleblowing**; or
 - (3) by an **Insured** for contribution or indemnity if the **Claim** directly results from another **Claim** covered under this Policy; or
 - (4) by way of shareholder derivative action on behalf of a Company or Outside Entity, without the solicitation, voluntary assistance, participation or cooperation of an Insured or an Outside Entity's directors or officers unless such solicitation, voluntary assistance participation or co-operation is required by law or protected as Whistleblowing; or
 - (5) by a former director, officer or employee of a **Company**;
 - (6) by an **Insured** or **Outside Entity** where if failing to do so such **Insured** or **Outside Entity** would incur legal liability.
- (Z) **Retention** means any of the amounts set out at ITEM 6 of the SCHEDULE, as applicable.
- (AA) **Retired Director** means a director or officer who voluntarily ceased to hold such office prior to the Expiration Date as stated in ITEM 2(b) of the SCHEDULE other than a disqualified director or where directly related to a **Change in Control**.
- (BB) **Securities** means any of the following issued by any entity:
 - (1) bonds, debentures, evidence of indebtedness, notes, shares, stocks or other equity or debt security; and
 - (2) certificates of interest or participation in, receipts for, warrants or other rights to subscribe to or purchase, voting trust certificates relating to, certificates of deposit for, or other documentary evidence of interest in any of the securities referred to in (1) above.
- (CC) **Securities Claim** means any written demand or proceeding against an **Insured** alleging a violation of any laws (statutory or common), rules or regulations regulating



Securities, the purchase or sale or offer or solicitation of any offer to purchase or sell **Securities**, or any registration relating to such **Securities**:

- (1) brought by any person or entity alleging, arising out of, based upon or attributable to the purchase or sale, or offer or solicitation of any offer to purchase or sell any **Securities** of a **Company**; or
- (2) brought by a **Security** holder of a **Company** with respect to such **Security** holder's interest in **Securities** of such **Company**; or
- (3) brought by an administrative or regulatory body against a **Company**, but only if and to the extent that such proceeding is also commenced and continuously maintained against an **Insured Person**.

Securities Claim shall not include:

- (a) any criminal, administrative, or other regulatory proceeding commenced and continuously maintained solely against the **Company**; or
- (b) any Claim brought by any Insured Person or any employee of a Company alleging, arising out of, based upon or attributable to the loss of, or the failure to receive or obtain, the benefit of any Securities, including warrants and options; or
- (c) any Claim alleging that the price or consideration paid or proposed to be paid for Securities of any entity is inadequate, including but not limited to the amount of any judgment or settlement representing the amount by which such price or consideration is effectively increased; provided, however, that Defence Costs in relation to such Claims shall be covered.
- (DD) Subsidiary means:
 - (1) any entity with respect to which, at or before the inception of the **Policy Period**, and during such time that, the **Named Company**, either directly or through one or more **Subsidiaries**:
 - (i) owns more than 50% of the issued and outstanding shares of such entity; or
 - (ii) controls more than 50% of the voting rights within such entity; or
 - (iii) controls the right to vote for the election or removal of the majority of such entity's board of directors;

and

- (2) any entity acquired or created by the **Named Company** or any **Subsidiary** during the **Policy Period** during such time that the **Named Company** fulfils at least one of (i), (ii) or (iii) above in respect of such entity, provided that:
 - (a) the total assets of such entity do not exceed the limit stated in ITEM 14 of the SCHEDULE, as calculated in accordance with the Named Company's usual accounting policies, principles and practices; and
 - (b) such entity does not have any of its **Securities** traded on any securities exchange in the United States of America;



(3) any other entity, other than those under (2) above, acquired or created by the Named Company or any Subsidiary during the Policy Period, on a provisional basis for a period of sixty (60) days after the date of creation or acquisition or until the end of the Policy Period, whichever is the earlier. The Insurer may at its sole discretion subsequently include such entity as a Subsidiary upon the Named Company's providing, during the above mentioned period of sixty (60) days, sufficient details to permit the Insurer to properly assess and evaluate the potential increase in exposure, paying any additional premium required and accepting any additional terms, conditions and limitations which the Insurer may require. In case the Insurer decides not to subsequently include such entity as a Subsidiary.

For the avoidance of doubt, coverage under this Policy shall apply only to entities or to natural persons employed or appointed by such entities in respect of **Claims** for **Wrongful Acts** actually or allegedly committed, or **Investigations** in relation to events that actually or allegedly occurred or took place, during such time said entities are or were **Subsidiaries** as defined above.

Notwithstanding the above, any entity that during the **Policy Period** ceases to be a **Subsidiary** as defined above shall nevertheless automatically remain considered a **Subsidiary** during a period of thirty (30) days from the date it ceased to fulfil the above conditions, during which time the **Named Company** may request for the **Insurer**'s written consent that such entity be subsequently considered a **Subsidiary** under the conditions set out in (3) above. Failing such written consent, such entity will be considered to have ceased to be a **Subsidiary** on the day it ceased to fulfil condition (1)(i), (ii) or (iii) above.

- (EE) **Whistleblowing** means the protected providing of information by an **Insured** to certain public authorities as defined under section 1514A of the United States Code (as inserted by section 806 of the Sarbanes-Oxley Act 2002) or under any equivalent legislation in any jurisdiction.
- (FF) Wrongful Act means:
 - (1) with respect to an **Insured Person**, any:
 - (a) actual or alleged act, error, misstatement, misleading statement, omission, breach of duty, breach of statute, civil or common law; or
 - (b) proposed act with respect to shareholder derivative actions only; or
 - (c) Wrongful Employment Practice,

by the **Insured Person** acting in their capacity as such or solely because of such capacity; or

- (2) with respect to a **Company**, any actual or alleged act, error or omission by the **Company** in its capacity as such or solely because of such capacity, but only insofar as defined within **Securities Claim**.
- (GG) Wrongful Employment Practice means in relation to the Company's employees any actual or alleged:
 - (1) unfair dismissal or wrongful termination of employment or victimisation, whether actual or constructive; or



- (2) employment-related misrepresentation; or
- (3) sexual or other harassment in the workplace; or
- (4) wrongful deprivation of career opportunity, employment or promotion; or
- (5) wrongful discrimination related to employment; or
- (6) defamation of character related to employment, or to the giving of a reference to an ex- employee; or
- (7) failure to employ or promote, unfair deprivation of career opportunity, unfair discipline, failure to grant tenure or negligent employee evaluation; or
- (8) retaliation against any employee upon such employee's actual or attempted exercise of his or her legal rights or duties ("whistleblower" retaliation).

3. <u>EXCLUSIONS</u>

The **Insurer** will not be liable to make any payment for **Loss** resulting from:

(A) UNLAWFUL CONDUCT

Any **Claim** arising out of, based upon or attributable to:

- (1) the gaining by the **Insured** of any profit or advantage to which such **Insured** was not legally entitled; or
- (2) the commission by the **Insured** of any deliberately fraudulent or dishonest act.

This EXCLUSION (A) shall however only apply where the **Insured**'s behaviour is established by a final adjudication by any court in the underlying action, tribunal, legal panel or regulator in the **Claim** or by a written admission of the **Insured**.

(B) BODILY INJURY / PROPERTY DAMAGE

Any **Claim** for bodily injury, sickness, mental anguish or emotional distress or disturbance, disease or death of any person howsoever caused, or damage to or loss of or destruction of any tangible property including loss of use thereof; provided however that this EXCLUSION (B) shall not apply to:

- (1) any **Claim** made by any **Securities** holder of the **Company**, either directly or derivatively; or
- (2) Defence Costs incurred in respect of any Claim made against any Insured Person based upon the Corporate Manslaughter and Corporate Homicide Act 2007 of the United Kingdom or for gross negligence manslaughter, or for any breach of any health and safety or similar legislation under which said Insured Person could be found liable by reason of his or her committing a relevant Wrongful Act in his or her capacity as a director, officer or employee of the Company.



(C) USA POLLUTION

Any **Claim** for the actual, alleged or threatened discharge, dispersal, release or escape of any substance whether it be solid, liquid, gaseous, biological, radiological or a thermal irritant, or a toxic or hazardous substance, or a contaminant including but not limited to asbestos or asbestos products, mycota or by-products, lead or lead containing products, smoke, vapours, dust, fibres, mould, spores, fungi, germs, soot, fumes, acids, alkalis, chemicals, air emissions, odour, waste water, oil, oil products, medical waste, and waste materials to be recycled, reconditioned or reclaimed, or for any direction or request to test for, monitor, clean up, remove, contain, treat, detoxify or neutralise any such substance or contaminant; provided however that this EXCLUSION (C) shall not apply to:

- (1) **Defence Costs** incurred in connection with such **Claim** up to the Sub-Limit stated in ITEM 4(b) of the SCHEDULE; or
- (2) any **Claim** made by any **Securities** holder of the **Company**, either directly or derivatively.

This EXCLUSION (C) shall apply only to **Claims** brought or maintained within the jurisdiction of or under any laws of the United States of America.

(D) TRUSTEE LIABILITY

Any **Claim** for breach of trust, fiduciary duty or negligence in relation to any retirement, pension, profit sharing, welfare or employee benefit programme or scheme established by the **Company** for the benefit of its directors, officers or employees, or for any breach of an **Insured Person**'s responsibilities imposed by law in relation to the foregoing.

(E) USA INSURED v. INSURED

Any **Claim** arising out of, based upon or attributable to any **Claim** brought or maintained in the United States of America by, on behalf, at the instigation, or with the cooperation of, any **Company**, **Insured** or **Outside Entity**.

This EXCLUSION (E) shall not apply to **Recognised Insured v. Insured Claims** or **Defence Costs**.

(F) PRIOR NOTICE

Any **Claim** arising out of, based upon or attributable to facts or circumstances underlying or alleged, or to the same or related or continuous or repeated **Wrongful Acts** alleged or contained, in any matter which has been reported, or with respect to which any notice has been given, under any policy of which this Policy is a renewal or replacement or which it may succeed in time.

(G) PRIOR OR PENDING LITIGATION

Any **Claim** arising out of, based upon or attributable to any pending or prior civil, criminal, administrative or regulatory proceeding, investigation, arbitration, demand or adjudication as of the Continuity Date stated in ITEM 11 of the SCHEDULE, or alleging or derived from the same or essentially the same facts or circumstances as alleged in such pending or prior proceeding, investigation, arbitration, demand or adjudication.



(H) PUBLIC OFFERINGS

Any **Claim** arising out of, based upon, or attributable to any public offering of **Securities** during the **Policy Period**; provided however that this EXCLUSION (H) shall not apply to:

- (1) debt offerings anywhere in the world; or
- (2) any public offering of equity of a **Company** outside the United States of America where the total value of such placement or offering does not exceed 50% of the market capitalisation of such **Company** immediately prior to such offering.

For the purposes of determining the applicability of these Exclusions, the behaviour or knowledge of an **Insured Person** shall not be imputed to any other **Insured Person** except for EXCLUSIONS (F) and (G).

4. EXTENSIONS

(A) DISCOVERY PERIOD

This Policy shall be extended to cover **Claims** first made, or in the case of an **Investigation**, first commenced, subsequent to the **Policy Period** but during any applicable **Discovery Period**, solely for **Wrongful Acts** actually or allegedly committed, or in the case of an **Investigation**, circumstances which occurred, before the Expiration Date stated in ITEM 2(b) of the SCHEDULE.

A **Discovery Period** shall be afforded under the following conditions:

- (1) If, subsequent to the expiration of the **Policy Period**, this Policy is not renewed or replaced by any other policy affording directors' and officers' liability coverage, for any reason other than the non-payment of premium, the **Insurer** will grant:
 - (i) an automatic **Discovery Period** as stated in ITEM 13(a) of the SCHEDULE at no additional premium; and
 - (ii) an automatic **Discovery Period** as stated in ITEM 13(b) of the SCHEDULE solely for **Retired Directors** at no additional premium; and
 - (iii) subject to written request to this effect and payment of the applicable additional premium before the Expiration Date stated in ITEM 2(b) of the SCHEDULE by the Named Company, one of the optional Discovery Periods as stated in ITEM 13(c) of the SCHEDULE at the corresponding additional premium.

The additional premium shall be deemed to be fully earned as of the inception of the **Discovery Period**.

- (2) Any **Discovery Period** invoked shall be automatically cancelled upon the effective date or the date of execution of any other policy affording similar coverage to part or all of the **Insureds**, whichever is the earlier.
- (3) Rights to a Discovery Period shall automatically lapse upon a Change in Control, however the Insurer may, at its sole discretion, quote for a run-off policy of up to seventy-two (72) months upon the written request of the Insured on whatever terms, conditions and limitations the Insurer deems appropriate.



(B) INVESTIGATION COSTS

This Policy shall be extended to cover any **Insured Person**'s **Investigation Costs** arising out of the **Insured Person**'s preparation for or attendance at any **Investigation** first commenced during the **Policy Period** (or **Discovery Period**, if applicable) relating to any matters existing prior to the Expiration Date subject to the Sub-Limit specified in ITEM 4(c) of the SCHEDULE.

Solely for the purposes of giving effect to this EXTENSION (B), DEFINITION (C) of **Claim** is extended to include any **Investigation** and DEFINITION 0 of **Defence Costs** is extended to include **Investigation Costs**.

(C) EXTRADITION PROCEEDINGS

This Policy shall be extended to include as **Claims** and, therefore, to cover **Loss** arising therefrom, any proceedings against an **Insured Person** following a request or arrest warrant for deportation or extradition, including an appeal or separate proceeding to overturn a deportation, extradition or arrest order, provided such request or arrest is not issued as a consequence of such **Insured Person** being unlawfully at large in any country or jurisdiction after final adjudication by the court of another country.

For the purposes of this EXTENSION (C) solely, such **Claim** shall be deemed first made upon receipt by the **Insured Person** of an official notice in writing from the responsible government authority advising of a request for extradition being made against them, or upon execution of a warrant for arrest of such **Insured Person**, whichever is the earlier.

(D) ESTATES, HEIRS AND LEGAL REPRESENTATIVES

This Policy shall be extended to include as **Insured Persons** the estates, heirs, legal representatives or assigns of an **Insured Person** who is deceased or the legal representatives or assigns of an **Insured Person** who is incompetent, insolvent or bankrupt, to the extent that such person is subject to a proceeding solely by reason of an actual or alleged **Wrongful Act** of such deceased, incompetent, insolvent or bankrupt **Insured Person** and that such **Insured Person** would have been covered by this Policy for **Loss** in the absence of their death, incompetence, insolvency or bankruptcy.

(E) SPOUSES AND DOMESTIC PARTNERS

This Policy shall be extended to include as **Insured Person** any **Insured Person**'s lawful spouse or domestic partner, including same sex relationship civil partnerships, to the extent that such person is subject to a proceeding solely by reason of their ownership interest in property which a claimant seeks as recovery in respect of a **Claim** against such **Insured Person**.

(F) COMPANY CRISIS RESPONSE COSTS

Where, during the **Policy Period**, an event has caused or is likely to cause, in the reasonable opinion of the Chief Financial Officer of a **Company**, within a period of 24 hours, the price per share of such **Company**'s common stock to decrease by 15% net of the percentage change in the relevant Standard & Poor's Composite Index, this Policy is extended to include as **Defence Costs** the reasonable costs and expenses incurred by such **Company** during the **Policy Period** (or **Discovery Period**, if applicable), for the professional advice of a public relations consultant or legal counsel, regardless of whether a **Claim** is ever made in relation to such event, provided:



- (1) the **Insured** demonstrates to the **Insurer**'s reasonable satisfaction that such costs and expenses have minimised or are likely to minimise the potential harm to such **Company** resulting from such event; and
- (2) such costs and expenses have been notified to the **Insurer** in accordance with the provisions of this Policy applicable to the notification of **Claims**.

Cover under this EXTENSION (F) is subject to the maximum aggregate Sub-Limit stated in ITEM 4(d) of the SCHEDULE.

(G) REPUTATIONAL MITIGATION COSTS

This Policy shall be extended to include as **Loss** the reasonable and necessary costs and expenses incurred by an **Insured Person** for the professional advice of a public relations consultant appointed with the **Insurer**'s prior written consent (not to be unreasonably withheld or delayed) to mitigate the adverse effect of a covered **Claim** or **Investigation**.

Cover under this EXTENSION (G) is subject to the maximum aggregate Sub-Limit stated in ITEM 4(e) of the SCHEDULE.

(H) MANAGEMENT BUY-OUT OF A SUBSIDIARY

If during the **Policy Period** a **Subsidiary** ceases to be a **Subsidiary** due to a management buy-out, then upon written notification from the **Named Company** to the **Insurer** prior to such event and subject to the **Policy Period**, this Policy shall provide coverage in respect of **Claims** for **Wrongful Acts** actually or allegedly committed, or circumstances occurring, during the 45 days immediately after the completion date of such buy-out.

(I) EMERGENCY COSTS

The **Insurer** will waive the requirement for its prior written consent to the incurring of **Defence Costs** up to the maximum aggregate Sub-Limit stated in ITEM 4(f) of the SCHEDULE where it was not reasonably practicable for the **Insured** to seek the **Insurer**'s prior written consent.

(J) ASSETS AND LIBERTY PROTECTION

This Policy shall be extended to cover as **Loss**, up to the maximum aggregate Sub-Limit stated in ITEM 4(g) of the SCHEDULE, the reasonable legal and other professional fees, costs and expenses incurred by an **Insured Person** to bring or defend legal proceedings first instituted during the **Policy Period**, in order to obtain the dismissal, discharge or revocation of an **Assets or Liberty Restriction**, provided such fees, costs and expenses have been notified to the **Insurer** in accordance with the provisions of this Policy applicable to the notification of **Claims**.



5. <u>CLAIMS CONDITIONS</u>

- (A) NOTICE
 - (1) The Insured shall give written notice, including full details, to the Insurer of any Claim as soon as reasonably practicable within the Policy Period (or Discovery Period, if applicable), and, where it has not been reasonably practicable for the Insured to give notice during the Policy Period (or Discovery Period, if applicable), then notice shall be given within thirty (30) days of the date of expiration of the Policy Period (or Discovery Period, if applicable).
 - (2) If written notice of a Claim has been given to the Insurer as prescribed above, then any further Claim which arises out of, based upon or attributable to the same or related or continuous or repeated Wrongful Acts will be considered together with the earlier Claim as a single Claim and will be deemed to have been first noticed at the time of the original notice.
 - (3) If, during the **Policy Period**, the **Insured** becomes aware of any circumstances which may reasonably be expected to give rise to a **Claim**, and gives written notice to the **Insurer** of such circumstances and the reasons for anticipating such a **Claim**, with full particulars as to dates, persons and entities involved (where known), potential claimants (where known) and the consequences which have resulted or may result from any anticipated **Wrongful Act**, then any **Claim** subsequently arising out of, based upon or attributable to essentially the same circumstances or **Wrongful Acts** will be deemed to have been first made at the time notice was first given.
 - (4) All notices under this CLAIMS CONDITION (A) shall be in writing, referring to the Policy Number, and be made to the address set out in ITEM 9 of the SCHEDULE.
 - (5) The **Insurer** shall be only liable in respect of **Claims** notified in compliance with this CLAIMS CONDITION 1.
- (B) DEFENCE AND SETTLEMENT OF CLAIMS AND CONSENT
 - (1) It is the duty of the **Insured**, not the **Insurer**, to defend **Claims**. The **Insurer** shall be entitled to participate fully in the investigation, defence and negotiation of any settlement of any **Claim**. In respect of any **Claim** brought or maintained by, on behalf of or at the instigation of any **Insured**, **Outside Entity** or the latter's directors or officers other than a **Recognised Insured v. Insured Claim**, the **Insurer** shall have the right (but not the duty) to control the investigation, defence and negotiation of any settlement of such **Claim**.
 - (2) An **Insured** shall not admit or assume any liability, enter into any settlement agreement, consent to any judgment, pay any **Loss**, or otherwise incur any **Defence Costs** without the **Insurer**'s prior written consent, which shall not be unreasonably withheld or delayed. The **Insurer** shall not be liable to pay any settlement incurred without its prior written consent. The reporting of matters to a regulatory body having authority to investigate the affairs of an **Insured** without the prior written consent of the **Insurer** shall not be considered a contravention of this CLAIMS CONDITION **Error! Reference source not found.**, provided that the **Insured** is prohibited from requesting such consent and that the **Insured** seeks the **Insurer**'s consent in accordance with this CLAIMS CONDITION **Error! Reference source not found.** as soon as such prohibition is lifted or has lapsed.



- (3) The **Insured** shall provide to the **Insurer** all information, assistance and cooperation with regard to a **Claim**.
- (4) The **Insurer** shall advance **Defence Costs** on an as-incurred basis in respect of covered **Claims**. If it is finally determined that any such **Defence Costs** so advanced are not covered under this Policy, the **Named Company** shall repay such amounts to the **Insurer**.

(C) ALLOCATION

- (1) The Insurer shall pay only those amounts or portions of Loss allocated to covered matters claimed against the Insured. If the Insured incurs any Loss arising out of a Claim that includes both matters covered and matters not covered by this Policy, or that is made against both covered and non-covered parties, the Insured and the Insurer shall use their best efforts to determine a fair and proper allocation of the proportion of the Loss covered hereunder, taking into account the relative legal and financial exposures of the parties to the Claim and the relative benefits to be obtained by the resolution of the Claim.
- (2) If an allocation cannot be agreed between the **Insured** and the **Insurer**, then the parties agree that it shall be determined, having regard to the principles stated in this CLAIMS CONDITION, by a legal counsel to be mutually agreed upon, who shall act as an expert and not an arbitrator and whose determination shall be based upon the written submissions of the parties. There shall be no obligation on such counsel to provide reasons unless specifically requested by the **Insured** or the **Insurer**.
- (3) The costs of any reference to expert determination under this CLAIMS CONDITION shall be borne equally by both the **Insured** and the **Insurer**.
- (D) PRIORITY OF PAYMENTS

If the **Insurer** is liable to pay **Loss** covered under more than one INSURING AGREEMENT, then it shall pay such **Loss** in the order it falls due. However, where it appears reasonably likely the **Limit of Liability** shall become exhausted by payments of **Loss** the **Insurer** shall, subject to the **Limit of Liability** and unless compelled otherwise by law or any judicial or regulatory order, pay **Loss** in the following order:

- (1) to **Insured Persons** under INSURING AGREEMENT 1 and EXTENSION (B); then
- (2) to **Companies** under INSURING AGREEMENT 0; then
- (3) to **Companies** under INSURING AGREEMENT (C).
- (E) SUBROGATION AND RECOVERIES
 - (1) In the event of any payment under this Policy, the **Insurer** shall be subrogated to the extent of such payment to all of the **Insured**'s rights of recovery. The **Insured** shall execute all papers required and do everything reasonably necessary to secure such rights and to enable the **Insurer** to bring any recovery action or suit as reasonably required by the **Insurer**.
 - (2) Any recovery received shall first be applied against any payment made by the **Insurer** with any balance remaining thereafter being remitted to or retained by the **Insured** or the **Company**, as applicable.



(3) The **Insurer** shall not exercise any right of subrogation against an **Insured Person** unless EXCLUSION (A) applies to such **Insured Person**.

6. <u>GENERAL CONDITIONS</u>

(A) CHANGE IN CONTROL AUTOMATIC RUN-OFF

If, during the **Policy Period**, a **Change in Control** occurs, then coverage under this Policy will continue in full force and effect until the end of the **Policy Period** with respect to **Claims** for **Wrongful Acts** committed or allegedly committed, and to **Investigations** in relation to events that actually or allegedly occurred or took place, before the effective date of such **Change in Control**, but coverage will cease with respect to **Claims** for **Wrongful Acts** committed or allegedly committed, and to **Investigations** in relation to events that actually or allegedly occurred or took place, thereafter (unless otherwise agreed to by the **Named Company** and the **Insurer**) and the premium will be considered fully earned in consideration of the coverage provided.

(B) LIMIT OF LIABILITY AND RETENTION

- (1) **Limit of Liability** and Sub-Limits:
 - (a) The **Insurer**'s maximum aggregate liability under this Policy for all **Loss** shall not exceed the **Limit of Liability**, regardless of the number of **Claims**, or **Insureds** who claim under this Policy.
 - (b) All Sub-Limits stated in ITEM 4 of the SCHEDULE are aggregate for the whole **Policy Period** (and **Discovery Period**, if applicable) regardless of the number of **Claims** and are part of and not in addition to the **Limit of Liability**.
 - (c) Notwithstanding the above, the **Non-Executive Director Extra Limit** is separate from and in addition to the **Limit of Liability**.

The Non-Executive Director Extra Limit is an aggregate amount per Non-Executive Director (as stated in ITEM 5(a) of the SCHEDULE), subject to the aggregate limit for all Non-Executive Directors combined as stated in ITEM 5(b) of the SCHEDULE.

(2) Retentions:

- (a) The **Insurer** will be liable only for the amount of **Loss** which exceeds the **Retention**. Such **Retention** is to be borne by the **Insured** and remains uninsured.
- (b) A Retention shall not apply to Non-Indemnifiable Loss covered under INSURING AGREEMENT 1. All other Loss covered under INSURING AGREEMENT 1 shall be subject to a Retention to be repaid by the Company to the Insurer but not to be applied against the Insured Person.
- (c) In the event that a Claim is covered under more than one INSURING AGREEMENT, a single Retention amount will apply to all Loss resulting from such Claim, which shall be the highest of the applicable Retention amounts.



(C) OTHER INSURANCE AND OTHER INDEMNIFICATION

- (1) This Policy shall always apply in excess of any other valid and collectible insurance or indemnification available to the **Insured**.
- (2) Coverage for **Claims** against an **Outside Director** will be specifically in excess of, and will not contribute with:
 - (a) any insurance policy purchased by the Outside Entity that provides similar coverage to such Outside Director (if such other insurance is provided by the Insurer, then the Limit of Liability for Loss under this Policy shall be reduced by the amount paid for the benefit of the Outside Entity and/or the Outside Director under the other insurance provided by the Insurer to the Outside Entity); and
 - (b) any other indemnification from any other source to such **Outside Director**.

(D) REPRESENTATIONS AND SEVERABILITY

- (1) The information, particulars and statements contained or referred to in the **Proposal** were material to its acceptance of the risk assumed under this Policy and have been relied upon by the **Insurer**.
- (2) This Policy shall not be avoided on grounds of misrepresentation except for the deliberate misrepresentation or deliberate non-disclosure of the **Insured**, where established by final adjudication or formal written admission by or on behalf of such **Insured**.
- (3) For the purposes of determining the entitlement to cover under or avoidance of this Policy in respect of an **Insured**:
 - (a) No knowledge or information possessed by, or conduct of, any **Insured Person** will be imputed to any other **Insured Person**;
 - (b) With respect to INSURING AGREEMENT (C):
 - the statements made by, information or knowledge possessed by and any conduct of any past, present or future chief executive officer or chief financial officer (or the equivalent executive or management position) of the Named Company shall be imputed to all Companies; and
 - (ii) the knowledge and conduct of any past, present or future chief executive officer or chief financial officer (or the equivalent executive or management position) of any other **Company** at the Inception Date shall be imputed to such **Company**.

(E) PAYMENT OF PREMIUM

The **Insurer**'s liability under this Policy shall be subject to full payment of the premium stated in ITEM 7 of the SCHEDULE by the **Named Company**.

(F) CANCELLATION AND POLICY TERMINATION

This Policy shall terminate at the expiration date of the **Policy Period** set forth in ITEM 2 of the SCHEDULE and is not subject to any automatic renewal



Nonetheless, the **Insurer** may cancel this Policy for non-payment of premium by sending not less than thirty (30) days' notice to the **Named Company** at the address stated in ITEM 1 of the SCHEDULE. The **Insurer** may not otherwise cancel this Policy.

- (G) NOTICES AND AUTHORITY
 - (1) The **Named Company** shall act on behalf of all **Insureds** with respect to the giving and receiving of any notice required under this Policy, the payment of all premiums, the allocation of **Loss**, authorisations and disclosures in respect of the personal data, the declaration of risk and execution of this Policy and any amendments thereto.
 - (2) In the event of a Claim by the Named Company or where, in relation to a Claim, the Named Company has some other conflict of interest, an Insured Person may withdraw their consent to the Named Company acting on their behalf with regard to the handling of such Claim, and elect to communicate directly with the Insurer; the Insurer shall have no obligation to communicate with any other Insured concerning such Claim.

(H) INTERPRETATION

- (1) Any reference in this Policy to:
 - (i) a statute, statutory instrument, regulation or order shall include all amendments made to them or any re-enactment, and shall include any equivalent legislation enacted in any other relevant jurisdiction; and
 - (ii) the singular shall include the plural and vice versa; and
 - (iii) the masculine shall include the feminine and vice versa; and
 - (iv) a position or title or legal status of an individual shall include the equivalent position in any other relevant jurisdiction.
- (2) Policy headings and titles are for reference only and shall have no interpretational value.
- (3) This Policy shall not be assigned without the **Insurer**'s prior written consent, and any other purported assignment shall be null and void.
- (4) Nothing in this Policy is intended to confer a directly enforceable benefit on any party other than the **Insured**.

(I) APPLICABLE LAW

This Policy is to be governed by, and its terms are to be construed in accordance with, the applicable law stated in ITEM 10(a) of the SCHEDULE.

(J) JURISDICTION - ARBITRATION CLAUSE

Any dispute or difference arising under or in respect of this Policy is to be subject to and determined within the exclusive jurisdiction stated in ITEM 10(b) of the SCHEDULE.

Should the parties have elected arbitration under ITEM 10(b) of the SCHEDULE, any dispute or difference arising under or in respect of this Policy shall be finally settled by the "Netherlands Arbitration Institute" in accordance with such Institute's Arbitration Rules. For this purpose the parties agree as follow:



- (a) the arbitral tribunal shall be composed of three arbitrators;
- (b) the place of arbitration shall be Amsterdam;
- (c) the arbitral procedure shall be conducted in English;
- (d) consolidation of the arbitral proceedings with other arbitral proceedings pending in the Netherlands, as provided in Section 1046 of the Netherlands Code of Civil Procedure, is excluded;
- (e) the arbitral award shall be final and binding upon the parties.
- (K) ENTIRE AGREEMENT

By acceptance of this Policy, the **Insured** and the **Insurer** agree that this Policy (including the Proposal and any materials submitted therewith) and any written endorsements attached hereto constitute the sole and entire agreement between the parties with respect to this insurance. Any prior agreement or understanding between the parties is therefore no longer valid.

(L) TERRITORY

This Policy applies to **Wrongful Acts** actually or allegedly taking place or **Claims** made anywhere in the world.

(M) TRADE SANCTIONS

This Policy does not apply to the extent any applicable trade or economic sanctions, or other laws or regulations prohibit the **Insurer** from providing insurance, including, but not limited, to the payment of **Loss**.

(N) DATA PROTECTION AND PRIVACY POLICY

The **Insurer** respects the **Insureds**' right to privacy. In our Privacy Policy (available at <u>https://www.tmhcc.com/en/legal/privacy-policy</u>) we explain who we are, how we collect, share and use personal information about the **Insureds**, and how the **Insureds** can exercise their privacy rights. If the **Insureds** have any questions or concerns about our use of their personal information, they can contact <u>dpo-tmelux@tmhcc.com</u>.

We may collect personal information such as name, email address, postal address, telephone number, gender and date of birth. We need the personal information to enter into and perform the current contract of insurance. We retain personal information we collect from the **Insureds** where we have an ongoing legitimate business need to do so.

We may disclose the Insureds' personal information to:

- our group companies;
- <u>third party services providers and partners</u> who provide data processing services to us or who otherwise process personal information for purposes that are described in our Privacy Policy or notified to the **Insureds** when we collect their personal information;
- any <u>competent law enforcement body</u>, <u>regulatory</u>, <u>government agency</u>, <u>court</u> <u>or other third party</u> where we believe disclosure is necessary (i) as a matter of applicable law or regulation, (ii) to exercise, establish or defend our legal rights, or (iii) to protect the interests of our **Insureds** or those of any other person;
- a <u>potential buyer</u> (and its agents and advisers) in connection with any proposed purchase, merger or acquisition of any part of our business, provided that we



inform the buyer it must use the **Insureds**' personal information only for the purposes disclosed in our Privacy Policy; or

any other person with the **Insureds**' consent to the disclosure.

The personal information may be transferred to, and processed in, countries other than the country in which the **Insureds** are resident. These countries may have data protection laws that are different to the laws of the country of the **Insureds**. We transfer data within the Tokio Marine group of companies by virtue of our Intra Group Data Transfer Agreement, which includes the EU Standard Contractual Clauses.

We use appropriate technical and organisational measures to protect the personal information that we collect and process. The measures we use are designed to provide a level of security appropriate to the risk of processing the personal information.

The **Insureds** are entitled to know what data is held on them and to make what is referred to as a <u>Data Subject Access Request ('DSAR')</u>. They are also entitled to request that their data be <u>corrected</u> in order that we hold accurate records. In certain circumstances, they have other data protection rights such as that of <u>requesting</u> <u>deletion</u>, objecting to processing, restricting processing and in some cases <u>requesting</u> <u>portability</u>. Further information on the **Insureds**' rights is included in our Privacy Policy.

The **Insureds** can <u>opt-out of marketing communications</u> we send them at any time. They can exercise this right by clicking on the "unsubscribe" or "opt-out" link in the marketing e-mails we send them. Similarly, if we have collected and processed their personal information with their consent, then they can <u>withdraw their consent</u> at any time. Withdrawing their consent will not affect the lawfulness of any processing we conducted prior to their withdrawal, nor will it affect processing of their personal information conducted in reliance on lawful processing grounds other than consent. The **Insureds** have the <u>right to complain to a data protection authority</u> about our collection and use of their personal information.

(O) COMPLAINTS PROCEDURE

We are dedicated to providing you with a high-quality service and we want to ensure that we maintain it at all times to the **Insurer**'s clients. Should the **Named Company** or the **Insureds** not be satisfied, please write and tell us and we will do our best to resolve the problem.

For any questions or concerns about the Policy or any Claim's handling please contact:

The Compliance Officer TOKIO MARINE EUROPE S.A. SUCURSAL EN ESPAÑA Torre Diagonal Mar Josep Pla 2, Planta 10 08019 Barcelona, Spain

To request information about the **Insurer** or file a concern or complaint please do so in writing, before our independent Customer Service Department:

Customer Service Department TOKIO MARINE EUROPE S.A. SUCURSAL EN ESPAÑA Torre Diagonal Mar Josep Pla 2, Planta 10 08019 Barcelona, Spain sac@tmhcc.com



If your concerns or complaints are not addressed to your satisfaction, you may be entitled to refer the dispute to the Complaints Service of the Spanish General Directorate for Insurance and Pension Funds in the terms established in the applicable regulations, who will review your case and who may be contacted at:

General Directorate for Insurance and Pension Funds Complaints Service Calle Miguel Ángel, 21 28010 Madrid- Spain

Or through the webpage: www.dgsfp.mineco.es

In addition, in case of cross-border litigation, complaints may be submitted to the competent foreign system, by applying to the activation of the FIN-NET procedure.

(P) RIGHTS OF THIRD PARTIES

Nothing in this Policy is intended to confer a directly enforceable benefit on any third party other than an **Insured**, whether pursuant to the Contracts (Rights of Third Parties) Act 1999 of England and Wales or otherwise.

IN WITNESS WHEREOF, the **Insurer** has caused this Policy to be executed by its authorised officers, but this Policy will not be valid unless signed on the SCHEDULE by a duly authorised representative of the **Insurer**.