Swiss Re
Corporate Solutions

P 5 369 0522

Swiss Re Corporate Solutions Capacity Insurance Corporation

roperty In ura e Policy
Prepared for:

California State University Risk Management Authority (CSURMA)
California State University
Office of the Chancellor
Systemwide Risk Management

Swiss Re Corporate Solutions Capacity Insurance Corporation

PREMIUM PAYME T NOTICE TO INSUREDS AND PRODUCERS

This policy has been specifically prepared for you. A separate premium invoice has been prepared and forwarded as appropriate. Payment of premium to **Swiss Re Corporate Solutions Capacity Insurance Corporation** is expected within (**30**) days of the invoice date shown. Failure to pay the premium by the due date shall be considered nonpayment of premium. Premium will be billed in U. S. dollars and is payable in U. S. dollars.

Payment to **Swiss Re Corporate Solutions Capacity Insurance Corporation** may be accomplished by either mail, or bankwire, to the following addresses:

hecks by mail

Payable to:
Swiss Re Corporate Solutions Capacity Ins. Corp.
PO Box 74008055
Chicago, IL 60674-8055

Overnight Address
Bank of America Lockbox Services
Swiss Re Corporate Solutions Capacity Ins. Corp 74008055
540 W Madison, 4th Floor
Chicago, IL 60661

Correspondence On Address
Swiss Re Corporate Solutions Capacity Ins. Corp.
1200 Main Street, Suite 800
Kansas City, MO 64105

$USD Bankwires

Payable to:
Swiss Re Corporate Solutions Capacity Ins. Corp.
Bank of America
2000 Clayton Road, Bld D
Concord, CA 94520

Acct No. 1291367643
ABA No. 026009593
ACH No.122000030
SwiftCode: BOFAUS3N ($USD Only)

Include copy of invoice or backup with check. Email copy of invoice or backup to genny_monks@swissre.com.

Swiss Re Corporate Solutions Capacity Insurance Corporation

OLICY NOTICE

THIS POLICY PROVIDES NO COVERAGE FOR LOSS DUE TO TERRORISM

n accordance with the instructions received by the Company, this policy DOES NOT provide coverage for "Insured Loss" due to an act of terrorism that is certified ("Certified Act of Terrorism") pursuant to the Terrorism Risk Insurance Act or for any other loss due to terrorism.

APPLIES TO U.S. LOCATIONS AND LOCATIONS OUTSIDE THE U.S. IN THE CASE OF AIR CARRIERS, VESSELS, AND THE PREMISES OF U.S. MISSIONS

By accepting this policy, the Insured and its authorized representatives acknowledge and confirm that: (1) coverage for "Insured Loss" due to a "Certified Act of Terrorism," was offered to the Insured by the Company in writing (the “Coverage”); (2) the offer of Coverage included a clear and conspicuous statement of the proposed premium charge for the Coverage, written advice concerning the United States Government, Department of the Treasury’s program for reimbursing a portion of such Insured Loss and written advice concerning the cap on insurer participation in the payment of terrorism losses; (3) the Insured does not desire to purchase the Coverage and has declined the offer; (4) no part of any premium paid to the Company by or on behalf of the Insured is for the Coverage; and (5) the Company is under no obligation to offer this coverage to the Insured again during the policy period to which this policy applies.

THE EFFECT OF THIS NOTICE

This notice does not constitute any part of the policy’s terms and conditions for the purpose of determining coverage, and it does not alter, limit or waive any of the terms and conditions of the policy. If there is any discrepancy between this notice and the terms and conditions of the policy, the policy terms and conditions shall be controlling.

Swiss Re Corporate Solutions Capacity Insurance Corporation

IM TA T N TICE:

. **The insurance policy that you have purchased is being issued by an insurer that is not licensed by the State of California. These companies are called “nonadmitted” or “surplus line” insurers.**

2. **The insurer is not subject to the financial solvency regulation and enforcement that apply to California licensed insurers.**

3. **The insurer does not participate in any of the insurance guarantee funds created by California law. Therefore, these funds will not pay your claims or protect your assets if the insurer becomes insolvent and is unable to make payments as promised.**

4. **The insurer should be licensed either as a foreign insurer in another state in the United States or as a non-United States (alien) insurer. You should ask questions of your insurance agent, broker, or “surplus line” broker or contact the California Department of Insurance at the toll-free number 1-800-927-4357 or internet website www.insurance.ca.gov. Ask whether or not the insurer is licensed as a foreign or non-United States (alien) insurer and for additional information about the insurer. You may also visit the NAIC’s internet website at www.naic.org. The NAIC—the National Association of Insurance Commissioners—is the regulatory support organization created and governed by the chief insurance regulators in the United States.**

5. **Foreign insurers should be licensed by a state in the United States and you may contact that state’s department of insurance to obtain more information about that insurer. You can find a link to each state from this NAIC internet website: https://naic.org/state_web_map.htm.**

6. **For non-United States (alien) insurers, the insurer should be licensed by a country outside of the United States and should be on the NAIC's International Insurers Department (IID) listing of approved nonadmitted non-United States insurers. Ask your agent, broker, or "surplus line" broker to obtain more information about that insurer.**

7. **California maintains a "List of Approved Surplus Line Insurers (LASLI)." Ask your agent or broker if the insurer is on that list, or view that list at the internet website of the California Department of Insurance:**

   http://www.insurance.ca.gov/01-consumers/120-company/07-lasli.cfm.

8. **If you, as the applicant, required that the insurance policy you have purchased be effective immediately, either because existing coverage was going to lapse within two business days or because you were required to have coverage within two business days, and you did not receive this disclosure form and a request for your signature until after coverage became effective, you have the right to cancel this policy within five days of receiving this disclosure. If you cancel coverage, the premium will be prorated and any broker's fee charged for this insurance will be returned to you**

In Witness Whereof, *the issuing Company has caused this policy to be signed officially below.*

Elissa Kenny

President

Secretary

Swiss Re Corporate Solutions Capacity Insurance Corporation

PARAMETRIC INSURANCE POLICY

I. DECLARATIONS

POLICY NUMBER:	NAP 1000007 08
INSURED:	California State University Risk Management Authority (CSURMA) California State University Office of the Chancellor Systemwide Risk Management 401 Golden Shore, 5th Floor Long Beach, CA 90802-4210
INSURER:	Swiss Re Corporate Solutions Capacity Insurance Corporation
BROKER:	Alliant Specialty 560 Mission St., Floor 6 San Francisco, CA 94704
INSURED PERIL:	Earthquake
INSURER'S SHARE:	One-hundred percent (100%)
EFFECTIVE DATE:	12:01:00 a.m., Prevailing Time, on 7/1/2025.
POLICY PERIOD:	The period from the Effective Date to 12:01:00 a.m., Prevailing Time, on 7/1/2026, unless canceled prior.
RELEVANT TIME ZONE:	Pacific

NOTICES TO INSURER OR INSURED:

All Notices required to be given under this Policy to the Insurer or Insured shall be made according to the Notices condition and shall be given to the following:

If to the Insurer:

Email to BOTH:
ClaimsNAProperty_CorporateSolutions@swissre.com
IRSNA_ParametricEventNotice@swissre.com

Mail to:
Swiss Re Corporate Solutions Capacity Insurance
Corporation 1200 Main Street, Suite 800
Kansas City, MO 64105

If to the Insured:

California State University
Office of the Chancellor
Systemwide Risk Management
401 Golden Shore, 5th Floor
Long Beach, CA 90802-4210

II. INSURING TERMS

INSURING AGREEMENT:

Subject to the terms, conditions, and limitations herein, the Insurer shall indemnify the Insured for its Ultimate Net Loss arising from one or more Eligible Events within the Policy Period, as further described by this Policy.

POLICY LIMITS:

A. Eligible Event Limit: For each Eligible Event, the Insurer's liability for Ultimate Net Loss shall not exceed $15,000,000;

B. Aggregate Policy Limit: The liability of the Insurer for the sum of all Ultimate Net Loss indemnified under this Policy shall not exceed $15,000,000 for all Eligible Events combined.

NO LOSSES OUTSIDE OF POLICY PERIOD:

The Insurer is not liable hereunder for any element or portion of Ultimate Net Loss:

1. incurred or sustained before the Effective Date; or

2. arising from any Eligible Event which is in progress at the Effective Date, even if such loss or damage is incurred or sustained after the Effective Date; or

3. incurred or sustained after the expiration of this Policy, except any element or portion of Ultimate Net Loss arising from an Eligible Event in progress or occurring prior to the expiration of this Policy.

III. EVENT ELIGIBILITY AND PARAMETRIC PAYOUT DETERMINATION

A. Determining an Eligible Event

EARTHQUAKE:	Any vibration of the earth's surface (including the ocean bottom) that is reported as an earthquake by the Data Provider.
ELIGIBLE EVENT:	An Earthquake with a Date of Occurrence during the Policy Period for which (i) a USGS ShakeMap grid is produced, (ii) one or more Calculation Grids overlap with the latitude and longitude limits of the USGS ShakeMap grid, and (iii) the Seismic Intensity is greater than the Minimum Trigger Intensity at any of the calculation points in the ShakeMap grid; provided, however, that if a nuclear explosion reported by a United States government agency has occurred (i) within one hour prior to the time (UTC) of the Earthquake, as reported by the Data Provider and (ii) within a Distance of ten (10) kilometers from the Epicenter of such Earthquake to the location of such nuclear explosion as reported by such government agency, then such Earthquake will not be an Eligible Event.
30-DAY PERIOD:	With respect to an Eligible Event, the thirty-calendar-day period commencing on the Date of Occurrence of such Eligible Event, which shall not be reduced due to the expiration of the Policy Period. However, any Earthquake that occurs prior to the Effective Date is excluded. Any subsequent Earthquake with (i) a Date of Occurrence during the 30-Day Period and (ii) an Epicenter within a Distance of 100 kilometers of the Eligible Event that commenced the 30-Day Period shall not commence a new 30-Day Period.
DISTANCE (D):	The distance in kilometers between two points on the surface of the earth and is calculated as follows: $D = 6{,}371km * acos(cos(lat_1) * cos(lon_1) * cos(lat_2) * cos(lon_2) + cos(lat_1) * sin(lon_1) * cos(lat_2) * sin(lon_2) + sin(lat_1) * sin(lat_2))$ where (lon_1, lat_1) and (lon_2, lat_2) are the longitude in degrees (+ for east, - for west) and latitude in degrees (+ for north, - for south) of two points in WGS84 coordinate system, converted to radians using $\pi/180$.
EPICENTER:	The point on the surface of the Earth, whether on land or on the ocean bottom, directly above the Hypocenter, as reported by the Data Provider.
HYPOCENTER:	The point at which the sudden displacement that generates the Earthquake (or is otherwise the origin point of the relevant vibration) is initiated.
DATE OF OCCURRENCE:	The date and time (UTC) of an Earthquake, as reported by the Data Provider.
UTC:	The Coordinated Universal Time as determined by the National Institute of Standards and Technology of the United States Department of Commerce.

CALCULATION GRIDS:	Each grid centered at the Center Latitude and Longitude and bounded by the Northern and Southern Latitudes and Eastern and Western Longitudes as set forth in Exhibit 1.
CALCULATION LOCATIONS:	Each location identified by Calculation Location ID and latitude and longitude coordinates contained in the Payout Table in Exhibit 1.
SEISMIC INTENSITY:	The ground motion and shaking intensity at a given location. This is determined by measuring the or PSA03 (Psuedo-Spectral Acceleration with a period of 0.3s) at specific locations using an interpolation of instrumental ground motion recordings and modelled ground motions, given the earthquake source parameters. Seismic Intensity is reported in a USGS ShakeMap generated by the Data Provider for an Earthquake.
REFERENCE SEISMIC INTENSITY:	The Seismic Intensity or Seismic Intensities of an Earthquake within a Calculation Grid, which is determined by the Insurer based on all USGS ShakeMap grid points within a Calculation Grid, or at a Calculation Location.
MINIMUM TRIGGER INTENSITY:	PSA0.3 130%g
EVENT DATA DATE:	6:00.00 p.m., Prevailing Time, on the 10th Business Day following the Date of Occurrence.
DATA PROVIDER:	The United States Geological Survey ("USGS") or its successors. The Insurer shall use the PSA03 field within the "grid.xml" file provided by ShakeMap on the Event Data Date, and if a successor product is not available, the Insurer shall select another Spectral Acceleration product from USGS or the successor data provider.

B. Determining Parametric Payout Amount

PARAMETRIC PAYOUT: Subject to the Eligible Event Limit, the Parametric Payout for each Eligible Event is calculated as follows:

1. Determine the Payout Percentage set forth in Exhibit 1 for each Calculation Grid and Calculation Location based on the maximum Reference Seismic Intensity within each Calculation Grid and at each Calculation Location.
2. Apply the Payout Percentage to the Grid Limit and the Location Limit set forth in Exhibit 1 for each Calculation Grid (“Calculation Grid Payout”) and each Calculation Location ("Calculation Location Payout").
3. Sum the Calculation Grid Payouts and Calculation Location Payouts to get the Parametric Payout.

If there are multiple Earthquakes within the 30-Day Period and within 100 kilometers of the Epicenter of the Eligible Event that commenced the 30-Day Period, the above calculation shall be done separately for each Earthquake and the Parametric Payout is the highest of those amounts.

IV. EXCLUSIONS

This Policy excludes any liability, loss, cost or expense of whatsoever nature directly or indirectly caused by, resulting from, arising out of or in connection with any of the following:

A. Nuclear

(i) Nuclear energy risks in accordance with the Nuclear Energy Risks Exclusion Clause NMA 1975; and

(ii) Nuclear reaction, nuclear radiation or radioactive contamination regardless of any other cause contributing concurrently or in any other sequence to the loss, save where such liability, loss, cost or expense arises under insurances or reinsurances expressly exempted from NMA 1975a in respect of which the Reinsured has specifically granted cover.

B. War

Hostile or warlike action in time of peace or war, including action in hindering, combating or defending against an actual, impending or expected attack:

(i) by any government or sovereign power (de jure or de facto), or by any authority maintaining or using military, naval or air forces; or

(ii) by military, naval or air forces; or

(iii) by an agent of any such government, power, authority or forces;

it being understood that any discharge, explosion or use of any weapon of war employing nuclear fission or fusion shall be conclusively presumed to be such a hostile or warlike action by such a government, power, authority or forces.

V. CONDITIONS

A. Claim Settlement Procedure

1. Within one-hundred twenty (120) days of a suspected Eligible Event, the Insured will give notice to the Insurer substantially in the form of the Notice of Suspected Eligible Event, attached hereto as **Exhibit 2**. If the time frame is not met, there is no coverage under the Policy.

2. Within fifteen (15) Business Days of the Insurer's receipt of the Notice of Suspected Eligible Event report, the Insurer will prepare and deliver to the Insured an Event Report, attached hereto as **Exhibit 3**.

3. Within thirty (30) days following the Insured's receipt of an Event Report from the Insurer, the Insured shall provide a Preliminary Estimate of Ultimate Net Loss to the Insurer, substantially in the form of **Exhibit 4** hereto, certified by a senior officer of the Insured.

4. Within ten (10) Business Days following receipt and verification of the Preliminary Estimate of Ultimate Net Loss, the Insurer shall advance to the Insured an amount equal to the lesser of (i) the Preliminary Estimate of Ultimate Net Loss and (ii) the Parametric Payout.

5. Within three-hundred sixty-five (365) days of the Date of Occurrence of the Eligible Event, the Insured shall provide a Final Proof of Loss to the Insurer, substantially in the form of **Exhibit 5** hereto. The Final Proof of Loss shall certify the amount of Ultimate Net Loss or that the Ultimate Net Loss sustained by the Insured from the Eligible Event was equal to or exceeded the Parametric Payout amount.

6. Within thirty (30) Business Days following receipt and verification of the Final Proof of Loss, a final amount shall be due and payable as follows:

   (a) If the final Ultimate Net Loss amount exceeds the sum of all amounts previously advanced by the Insurer related to the Eligible Event, the Insurer shall pay such difference to the Insured up to the amount of the Parametric Payout; or

   (b) If the final Ultimate Net Loss amount is less than the sum of all amounts previously advanced by the Insurer to the Insured related to the Eligible Event, the Insured shall pay the excess to the Insurer.

   Upon such payment by either party, the parties shall be fully and finally released from any further obligations under this Policy with respect to such Eligible Event.

Insurer and Insured may agree in writing to dispense with the requirement of a Notice of Suspected Eligible Event and/or Preliminary Estimate of Ultimate Net Loss for a particular Eligible Event, and Insurer may proceed with providing an Event Report and payment of the corresponding Parametric Payout amount. However, in no event may the parties dispense with the requirements in steps 5 and 6, above. An agreement by the Insurer to dispense with certain requirements of the Claim Settlement Procedure for a particular Eligible Event shall not be considered a waiver of the right to insist on compliance with all requirements of the Claim Settlement Procedure for any other Eligible Event.

B Currency

All monetary amounts referred to in this Policy including payments shall be made in United States Dollars ("USD" or "$").

C. Non-Reliance

The Insured is acting for its own account, and it has made its own independent decisions to enter into this Policy and as to whether this Policy is appropriate or proper for it based upon its own judgment and upon advice from such advisors as it has deemed necessary. The Insured is not relying on any communication (written or oral) of the Insurer as advice or as a recommendation to enter into this Policy. The Insured understood that information and explanations related to the terms and conditions of this Policy shall not be considered advice or a recommendation to enter into the Policy. No communication (written or oral) received from the Insurer shall be deemed to be an assurance or guarantee as to the expected results of the coverage provided by this Policy.

D. Data from Data Provider Unavailable

If the Data Provider identified in Section III or any successor to that named Data Provider ceases to provide data required for calculation of Parametric Payout under this Policy or materially changes the methodology of its data reporting in any way that, in the sole determination of the Insurer, makes such data unsuitable for the purposes intended herein, then the Insurer shall appoint an industry-recognized benchmark data provider as the successor Data Provider for the purposes of this Policy.

E. Cancellation

The Insurer may cancel this Policy within ten (10) days written notice in the event of the Insured's failure to pay any amount of Premium due hereunder.

This Policy is non-cancelable by the Insured.

F. International Trade Controls & Economic Sanctions Clause

No Insurer shall be deemed to provide cover and no Insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim, or provision of such benefit would expose that Insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of any jurisdiction applicable to that Insurer.

G. Choice of Law and Jurisdiction

This Policy shall be governed by, construed and effected by the laws of the State of New York without regard to any conflict of laws that would cause the application of the laws of any other jurisdiction.

Subject to the provisions of the Dispute Resolution condition, the parties irrevocably submit to the exclusive jurisdiction of the courts of the State of New York and, to the extent permitted by law, the parties expressly waive all rights to challenge or otherwise limit such jurisdiction.

H. Offset

The Insurer may offset any amounts due to the Insured under the Policy against any amounts due from the Insured under the Policy.

I. Assignment

Neither the Policy nor any rights or obligations hereunder may be assigned by the Insured without the prior written consent of the Insurer.

J. Dispute Resolution

Any controversy or claim arising out of or relating to this Policy, or the breach thereof, shall be settled by arbitration administered by the American Arbitration Association (AAA) under its Commercial Arbitration Rules. The parties mutually agree to the following terms concerning the arbitration:

1. The arbitration proceedings shall be conducted in English.

2. The seat of the arbitration shall be the State of New York, unless otherwise agreed by the parties. Any motion to compel arbitration shall be subject to the exclusive jurisdiction of the courts of the State of New York. Judgment on the award rendered by the arbitrators may be entered in any court having jurisdiction thereof

3. The Commercial Arbitration Rules of the AAA sets forth the procedure for a party to initiate arbitration. The party initiating arbitration shall include the name of its selected arbitrator in the arbitration filing.

4. Within 30 days of receiving notice of the arbitration filing, the responding party shall appoint an arbitrator. In the absence of this appointment, the initiating party may request the AAA to appoint a second arbitrator on behalf of the respondent.

5. Once appointed, the first and second arbitrators must appoint by mutual agreement a third arbitrator within thirty (30) days following the appointment of the second arbitrator. If they fail to do so, then either of the arbitrators or either of the parties may request that the AAA appoint a third arbitrator. Once appointed, the third arbitrator will preside over the arbitration panel.

6. The arbitrators shall be officials or former officials of insurance or reinsurance companies not under the control or management of the Insurer or the Insured including any of their affiliates under common ownership or control.

7. The arbitrators shall not be bound by judicial formalities or formal rules of evidence and shall give due consideration to the customs and usage of the insurance and reinsurance business.

8. A majority decision in writing shall be final and binding.

9. All costs of the arbitration proceedings, including the fees of the arbitrators, shall be borne equally by the parties.

10. This Dispute Resolution condition will remain in force even if this Policy is cancelled.

K. Notices

All reports, notices, requests, demands, approvals and other communications required or permitted to be given under this Policy shall be in writing (including facsimile transmission or electronic mail) and shall be deemed to have been duly given: (i) when received, if delivered by hand, against written receipt; (ii) when received, if sent by facsimile transmission or electronic mail between 9:00 a.m. and 5:00 p.m., Prevailing Time, on a Business Day, provided such transmission is confirmed by the transmitting machine or e-mail system of the sender; (iii) five (5) days after being mailed, if mailed by prepaid, first-class certified mail, return receipt requested; or (iv) if sent by overnight courier, two (2) days after delivery to a recognized major overnight courier service, fees prepaid.

L. Assistance and Cooperation

The Insured shall fully cooperate with the Insurer or its authorized representatives in all matters relating to this insurance.

M. No Material Misstatements, Disclosures to the Insurer

In order to induce the Insurer to enter into this policy, the Insured represents, warrants and covenants to the Insurer that the application for this Policy, as well as any reports, financial statements, or any other exhibits furnished by or on behalf of the Insured to the Insurer in connection with this Policy or the procurement thereof, did not, do not and will not conceal, misrepresent or fail to disclose any material fact concerning this insurance or the procurement thereof. The Insured has made full disclosure to the Insurer of all information that is material to the risks being assumed by the Insurer under this Policy. Any concealment, misrepresentation or non-disclosure by the Insured of a material fact concerning this Policy or its procurement shall render this policy null and void with immediate effect.

VI. DEFINITIONS

A. "Business Day" means any day other than Saturday, Sunday or any other day declared by the United States Postal Service as a holiday.

B. "Eligible Event" has the meaning described in Section III.

C. "Data Provider" has the meaning described in Section III.

D. "Ultimate Net Loss" means direct or indirect physical loss or damage to property, costs of remediation, business interruption and other expenses incurred or sustained by the Insured as a result of an Eligible Event.

E. "Prevailing Time" means the local time in the Relevant Time Zone of the United States as determined by the National Institute of Standards and Technology of the United States Department of Commerce.

Terms and definitions which relate to determination of event eligibility and parametric payout calculation are found within Section III.

EXHIBITS:

Exhibit 1: Calculation Grids and Payout Tables
Exhibit 2: Notice of Suspected Eligible Event
Exhibit 3: Event Report

Exhibit 4: Preliminary Estimate of Ultimate Net Loss
Exhibit 5: Final Proof of Loss

Exhibit 1
Calculation Grids and Payout Tables

Calculation Grid	Center Latitude	Center Longitude	Northern Latitude	Southern Latitude	Eastern Longitude	Western Longitude	Grid Limit
1	38.068974	-122.230368	38.0939737	38.043974	-122.205368	-122.255368	5,000,000
2	35.302023	-120.659368	35.3270226	35.277023	-120.634368	-120.684368	5,000,000
3	34.063019	-117.817895	34.0880189	34.038019	-117.792895	-117.842895	5,000,000
4	35.348793	-119.102726	35.3737933	35.323793	-119.077726	-119.127726	5,000,000
5	33.764374	-118.201353	33.7893741	33.739374	-118.176353	-118.226353	5,000,000
6	34.164770	-119.043721	34.1897699	34.139770	-119.018721	-119.068721	5,000,000
7	39.731209	-121.853200	39.7562091	39.706209	-121.828200	-121.878200	5,000,000
8	33.866396	-118.253833	33.8913957	33.841396	-118.228833	-118.278833	5,000,000
9	37.658296	-122.056257	37.6832955	37.633296	-122.031257	-122.081257	5,000,000
10	36.814578	-119.745238	36.8395775	36.789578	-119.720238	-119.770238	5,000,000
11	33.877937	-117.890054	33.9029371	33.852937	-117.865054	-117.915054	5,000,000
12	33.782522	-118.122232	33.8075219	33.757522	-118.097232	-118.147232	5,000,000
13	34.065569	-118.169302	34.0905688	34.040569	-118.144302	-118.194302	5,000,000
14	36.653822	-121.801697	36.6788224	36.628822	-121.776697	-121.826697	5,000,000
15	34.240102	-118.529327	34.2651018	34.215102	-118.504327	-118.554327	5,000,000
16	38.559238	-121.422395	38.5842383	38.534238	-121.397395	-121.447395	5,000,000
17	34.183584	-117.324007	34.2085839	34.158584	-117.299007	-117.349007	5,000,000
18	33.129054	-117.159658	33.1540540	33.104054	-117.134658	-117.184658	5,000,000
19	37.523778	-120.855891	37.5487782	37.498778	-120.830891	-120.880891	5,000,000
20	40.874189	-124.080121	40.8991888	40.849189	-124.055121	-124.105121	5,000,000
21	32.772001	-117.072697	32.7970012	32.747001	-117.047697	-117.097697	5,000,000
22	37.720952	-122.476765	37.7459524	37.695952	-122.451765	-122.501765	5,000,000
23	37.336767	-121.880899	37.3617670	37.311767	-121.855899	-121.905899	5,000,000
24	38.340933	-122.673823	38.3659331	38.315933	-122.648823	-122.698823	5,000,000

Calculation Location	Latitude	Longitude	Location Limit
1	32.672131	-115.493511	2,500,000
2	32.731988	-117.208869	2,500,000
3	33.779563	-116.355647	2,500,000
4	33.780164	-118.300036	2,500,000

5	36.794956	-121.785292	2,500,000
6	37.889558	-122.448495	2,500,000
7	37.94809	-121.983839	2,500,000
8	37.964701	-121.285781	2,500,000

Reference Seismic Intensity PSA0.3s	**Payout Percentage (% of Grid Limit)**
< 130%g	0%
130%g – 134.99%g	20%
135%g – 139.99%g	30%
140%g – 144.99%g	60%
145%g – 149.99%g	85%
150%g – 154.99%g	92.5%
≥155%g	100%

Exhibit 2
Notice of Suspected Eligible Event

Policy Number (the "Policy"): ____

Policy Period: ____

Name of Insured: ____

Date of Suspected Eligible Event: ____

Calculation Grid(s) Impacted by Suspected Eligible Event (if known): ______________________________

Signed: ______________________________

Title: ______________________________

Date: ______________________________

Exhibit 3
Event Report

Policy Number (the "Policy"): ______________________________

Policy Period: ______________________________

Name of Insured: ______________________________

Date of Eligible Event: ______________________________

Parametric Payment Amount: ______________________________

Event Summary:

[Insert Description of Eligible Event, including qualifying criteria required in definition]

Calculation Grid(s) Impacted by Eligible Event:

Example of Event Report attached below:

Calculation Grid	Reference Seismic Intensity	Corresponding Payout Amount
		Insert Payment Amount

Eligible Event Limit	
Total Parametric Payout Amount	

Signed: ______________________________

Title: ______________________________

Date: ______________________________

Exhibit 4
Preliminary Estimate of Ultimate Net Loss

Policy Number (the "Policy"): ______________________________

Policy Period: ______________________________

Name of Insured: ______________________________

Name of Eligible Event: ______________________________

Date of Occurrence of Eligible Event: ______________________________

Preliminary Estimate of Ultimate Net Loss:______________________________

The undersigned submits this Preliminary Estimate of Ultimate Net Loss. The undersigned has determined this Preliminary Estimate of Ultimate Net Loss amount consistent with the definition of Ultimate Net Loss in the Policy and based on the Insured's actual loss sustained as a result of the Eligible Event, The undersigned acknowledges the coverage provided under this Policy is subject to the Eligible Event Limit and the Aggregate Policy Limit and all other terms and conditions of the Policy.

I, , on behalf of the Insured, certify that the Insured has an insurable interest in the risk that is the subject of the Policy.

Signed: ______________________________

Title: ______________________________

Date: ______________________________

Exhibit 5
Final Proof of Loss

Policy Number (the "Policy"): ____

Policy Period: ____

Name of Insured: ____

Name of Eligible Event: ____

Date of Occurrence of Eligible Event: ____

Ultimate Net Loss: ____

The undersigned submits this Final Proof of Loss, designating the updated and final Ultimate Net Loss amount shown above. The undersigned has determined this Ultimate Net Loss amount consistent with the definition of Ultimate Net Loss in the Policy and based on the Insured's actual loss sustained as a result of the Eligible Event. The undersigned acknowledges the coverage provided under this Policy is subject to the Eligible Event Limit and the Aggregate Policy Limit and all other terms and conditions of the Policy.

I, Insert Name Here, on behalf of the Insured, certify as follows:

(1) the Insured has an insurable interest in the risk that is the subject of the Policy and has either had the risk of loss with respect to that interest continuously throughout the duration of the Policy Period, or acquired the risk of loss during the Policy Period in the ordinary course of its business;

(2) the Ultimate Net Loss stated above does not exceed the value of the Insured's insurable interest.

Signed: ______________________________

Title: ______________________________

Date: ______________________________

Swiss Re Corporate Solutions Capacity Insurance Corporation

Attaches to Policy Number: NAP 1000007 08 **Endorsement Number:** 1
Insured: California State University Risk Management Authority (CSURMA)
California State University, Office of the Chancellor, Systemwide Risk Management
Policy Term: July 1, 2025 to July 1, 2026 **Effective Date This Endorsement:** July 1, 2025

THIS ENDORSEMENT CHANGES THE POLICY/ PLEASE READ IT CAREFULLY.

This Endorsement modifies insurance provided under the Policy as follows:

SERVICE OF SUIT CLAUSE ENDORSEMENT

Service of process in any lawsuit, or mandated alternative dispute resolution (ADR) proceeding instituted against us may be made upon:

Legal Department
Swiss Re Corporate Solutions Capacity Insurance Corporation
1200 Main Street, Suite 800
Kansas City, MO 64105

The above party is authorized and directed to accept service of process on behalf of us in any suit or ADR proceeding, and/or, upon your request, agrees to give a written undertaking to you that he/she will enter a general appearance upon our behalf should a lawsuit, or ADR proceeding be instituted.

Further, pursuant to any law of any state, the District of Columbia, territory, or protectorate of the United States which makes provision therefore, we hereby designate the Superintendent, Commissioner, Director of Insurance, deputy, or department employee specified as attorney or agent for receipt of lawful service of process or ADR proceeding, in the law, instituted by or on your behalf or any beneficiary within this contract, the above is hereby authorized as our designee upon whom the service of process may be served.

Nothing contained herein shall limit or abridge the right to serve any proce , notice or demand upon us in any other manner permitted or required by law.

All other terms and conditions of this policy shall re ain unchanged.

Swiss Re Corporate Solutions Capacity Insurance Corporation

Attaches to Policy Number: NAP 1000007 08 **Endorsement Number:** 2
Insured: California State University Risk Management Authority (CSURMA)
California State University, Office of the Chancellor, Systemwide Risk Management
Policy Term: July 1, 2025 to July 1, 2026 **Effective Date This Endorsement:** July 1, 2025

EXCLUSIONS – LOSS UE A AC F TERRORISM; L SS FROM CHEMICAL, BIOLOGICAL & RADIOLOGICAL EXPOSURE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

A. Notwithstanding any provision in this Policy or any endorsement thereto to the contrary, this policy does not insure against any loss, damage, cost or expense caused by or resulting from any of the following, regardless of any other cause or event contributing concurrently or in any other sequence thereto:

(1) **Terrorism**, or any action in hindering, combating or defending against the same, regardless of who commits or threatens the commission of the act or acts, and regardless of any other cause or event contributing concurrently or in any other sequence thereto. As used in the foregoing sentence, **"Terrorism"** shall mean any act or threatened act of unlawful force or violence including, but not limited to, property destruction, murder, kidnapping, hostage-taking, hijacking, piracy or any other unlawful conduct which is dangerous to or destructive of human life, property or commerce, by any person or group of persons, whether acting alone or in concert with others, when such act reasonably appears to have been done or threatened for political, religious, ideological or similar purposes including, but not limited to: the desire to protest the actions, laws, policies or decisions of any government or sovereign power (de jure or de facto); the desire to destabilize, overthrow, coerce, intimidate, alter or eliminate any government or sovereign power (de facto or de jure); the desire to incite, intimidate or coerce a civilian population or any segment thereof; the desire to inflict economic loss upon, or disrupt any segment of one or more national or regional economies.

(2) The unlawful possession, use, release, discharge, dispersal or disposal of any **chemical, bacteriological, viral, radioactive or similar agents or matter** regardless of who is responsible for the act and whether war has been declared or not, and regardless of any other cause or event contributing concurrently or in any other sequence thereto.

(3) **The unlawful possession, use, release, discharge, detonation, dispersal or disposal of any device or material capable of producing a nuclear reaction or the spread of radioactivity, regardless of who is responsible for the act and whether war has been declared or not, and regardless of any other cause or event contributing concurrently or in any other sequence thereto.**

B. **Exception Covering Certain Fire Losses**

If direct physical loss or damage by fire results from Terrorism (unless committed by or on behalf of the Insured) to property insured by this policy that is located in a jurisdiction whose statutory law requires such resulting direct physical loss or damage to be covered by a standard fire policy, the "Company" will pay for the loss or damage caused by that fire, but only to the extent of the Actual Cash Value of the resulting direct physical loss or damage by fire to insured property, subject to all applicable policy provisions including the Limit of Liability on the affected property. Such coverage for fire applies only to direct loss or damage by fire to covered property. Therefore, for example, the coverage does not apply to insurance provided under Time Element, Business Interruption and/or Extra Expense coverage parts or endorsements that apply to those coverage parts, or to Leasehold Interest Coverage.

C. In any action, suit or other proceeding where the "Company" alleges that, by reason of any provision in this endorsement, some or all loss or damage is not insured by this policy, the burden of proving that such loss or damage is not excluded shall be upon the Insured.

All other terms and conditions of this policy shall remain unchanged.