



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/4/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Aon Risk Solutions 8 Devonshire Square London EC2M 4PL United Kingdom	CONTACT NAME: PHONE (A/C, No, Ext): (866) 283-7122		FAX (A/C, No): (800) 363-0105
	E-MAIL ADDRESS:		
INSURED SAP America Inc. Attn: Benjamin Gibbons 3999 West Chester Pike Newtown Square, PA 19073	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: AIG Europe Limited		AA1120841
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER: 759529

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <hr/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	E&O - Primary			Y11PI04266	4/1/2019	4/1/2020	See Description

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

See attached Additional Remarks Schedule

CERTIFICATE HOLDER**CANCELLATION**

19-20 (MOI) SAP America 5M EUR

759529

SAP America Inc. Attn: Benjamin Gibbons 3999 West Chester Pike Newtown Square, PA 19073	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Aon UK Limited</i>

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AGENCY CUSTOMER ID: _____

LOC #: _____

759529

ADDITIONAL REMARKS SCHEDULEPage 2 of 2

AGENCY Aon Risk Solutions		NAMED INSURED SAP America Inc. 3999 West Chester Pike Newtown Square, PA 19073
POLICY NUMBER		
CARRIER AIG Europe Limited	NAIC CODE AA1120841	EFFECTIVE DATE: 4/4/2019

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** Acord 25 **FORM TITLE:** Certificate of Liability Insurance

Coverage shown is Technology Professional Liability insuring network security and private data risks including coverage for unauthorized access, failure of security, transmission of malicious code, denial of service attacks, and unauthorized disclosure or misappropriation of private data. Limit shown is €5,000,000 EUR per claim and in the aggregate. The Named Insured includes SAP America, Inc. and its subsidiaries and affiliates including, but is not limited to the following:

SAP America, Inc.
SAP Global Marketing Inc.
SAP National Security Services, Inc.
SAP Industries, Inc.
SAP International, Inc.
SAP Labs, LLC
SAP Public Services, Inc.
TomorrowNow, Inc.
iAnywhere Solutions, Inc.
Sybase 365, LLC
Sybase, Inc.
Ariba, Inc.
SmartOps, Inc.
KXEN, Inc.
SuccessFactors, Inc.
hybris (US) Corporation
Plateau Systems, Inc.
Fieldglass, Inc.
SeeWhy, Inc.
Concur Technologies, Inc.
TRX, Inc.
Altiscale, Inc.
Hipmunk, Inc.
Gigya, Inc.
Callidus Software, Inc.
Technology Management Associates, Inc.
Apex Expert Solutions, LLC
Qualtrics International, Inc.