## **Background and Financial Information**

| 5   |  |   |   |                        |                       |    |
|-----|--|---|---|------------------------|-----------------------|----|
| э.  | Nature of business   |   |   |                        |                       |    |
| 6.  | Year Business Started  |   |   |                        |                       |    |
| 7.  | Total Number of Employee   | 95 (please include all full, part, time :                                   | seasonal, leased, etc.)   |                        |                       |    |
| 8.  | Please provide the following   | Please provide the following financial information:                         |   |                        |                       |    |
|     | Total Assets as of Most<br>Recent Fiscal Year End  | Total Gross Revenues<br>Last Fiscal Year                                    | Anticipated Revenues<br>This Fiscal Year                                  | Anticipate<br>Next Fis | d Revenu<br>scal Year | 95 |
| \$  |  | \$  | \$  | \$                     |                       |    |
|     |  |   |   |                        |                       |    |
|     |  |   |   |                        |                       |    |
| Su  | pplemental Questions   |   |   |                        | Yes                   | No |
|     |  |   | rocessing and/or any kind of IT h   | ardware or             | Yes                   | No |
| 13. | Do you provide any kind o<br>software support to others  | \$?   | rocessing and/or any kind of IT h<br>ented with respect to electronic fi  |                        | Yes                   | No |
| 13. | <ul> <li>Do you provide any kind o<br/>software support to others</li> <li>Indicate which of the follow</li> </ul> | s?<br>wing controls you have impleme  |   | unds transfers:        | Yes                   | No |
| 13. | Do you provide any kind o<br>software support to others<br>Indicate which of the follow<br>Callback procedures t   | s?<br>wing controls you have impleme  | ented with respect to electronic for<br>s or changes to banking informati | unds transfers:        | Yes                   | No |
| 13. | Do you provide any kind o<br>software support to others<br>Indicate which of the follow<br>Callback procedures t   | s?<br>wing controls you have implement<br>to verify funds transfer requests | ented with respect to electronic for<br>s or changes to banking informati | unds transfers:        | Yes                   | No |

15. What percent of your employees handle Company business from their personal devices (select one)?

We prohibit it

25 - 75%

I don't know
 Less than 25%
 More than 75%

| 16. | a. Please estimate the annual volume of each type of information you process or store, taking into<br>account both electronic and paper files as well as employee and customer information: |   |     |   |
|-----|---|---|-----|---|
|     |   | SSN, individual taxpayer ID, driver's license, passport or federal ID numbers |     |   |
|     |   | Payment card data (credit or debit cards)                                     |     |   |
|     |   | Protected health information  |     |   |
|     |   | Other confidential or protected information                                   |     |   |
|     | b.  | How long do you store the above records?                                      | Yes |   |
|     | c.  | Do you have a record retention/destruction policy in place?                   |     | i |
|     |   |   |     |   |

17. Which of the following are part of the Company's privacy and network security programs (select all that apply)?

- Physical controls on access to computer systems and sensitive documents
- Password protection on company devices
- Employee security awareness training
- Documented regulatory compliance programs (i.e. HIPAA and GLBA compliance)
- Multi-Factor Authentication for remote access to email and both internal and external systems
- Up-to-date, active firewall and anti-virus software

<sup>5</sup> What does the insured do (see product guide for classifications)

<sup>8</sup> Estimated figures are acceptable

<sup>9</sup> This includes any products that can be purchased online (e.g. items purchased through the Insured's website or online storefronts such as amazon, etsy, ebay

<sup>13</sup> Includes website hosting/creation, tech support, software development, web content, etc.

<sup>14</sup> Call back procedure requires the business to verify transfer requests or changes to payment information with the vendor Dual authorization requires the approval of two company personnel.

<sup>15</sup> This does not include company issued devices (purchased by the company), only pertains to employee's personally owned devices

<sup>16</sup> Provide yearly totals (dollar amounts & percentages are not acceptable) Please include totals of PII that are both **processed and maintained** <u>(credit card transactions are considered a part of this)</u> This includes but is not limited to credit/debit card and personal information input into 3<sup>rd</sup> party sites such as square, other digital readers, POS system, franchisor systems, etc.

<sup>17</sup> Physical controls – not accessible to the public (files and computers stored in locked locations)

Multi-factor requires at least **2** types of verification (e.g. password, text, email, call)

| 18. | The Company backs up its primary mission critical systems and data assets: | Yes | No |
|-----|--|-----|----|
|     | At least daily/nightly If no, indicate how often                           |     |    |
|     | Remotely and securely<br>If no, please provide business continuity plan.   |     |    |

<sup>18</sup> Please answer <u>ALL</u> fields of this question (nightly is required to get maximum Ransomware coverage limit)

A business's Mission Critical Data is any information that is imperative to the business's day to day operations

|     |   | Servers, exc             |  |  |  |  |
|-----|---|--------------------------|--|--|--|--|
| 19. | Are you compliant with the Payment Card Industry Data Security Standard (PCI-DSS) (select one)?   |                          |  |  |  |  |
|     | Ves No  |                          |  |  |  |  |
|     | I don't know We do not process ANY payment card transactions Yes No   |                          |  |  |  |  |
| 20. | Does the Company maintain a formal program for evaluating the security posture of its vendors?  | <sup>20</sup> Do you red |  |  |  |  |
| 21. | <ol> <li>The Company's policy regarding the encryption of confidential data (including but not limited to PII) is that such data should<br/>be Encrypted (select one):</li> </ol>         |                          |  |  |  |  |
|     | Never/we do not encrypt   |                          |  |  |  |  |
|     | Within our network only   |                          |  |  |  |  |
|     | Within our network and within the cloud   | "I use encry             |  |  |  |  |
|     | Within our network, and the cloud, and on mobile devices (i.e. smartphones)   | i use encry              |  |  |  |  |
|     | Within our networks, the cloud, mobile devices, and removable/transportable storage media (i.e. USB drives)   |                          |  |  |  |  |
|     |   |                          |  |  |  |  |
|     | Whe mentions the Company's activate for interview or other unional activity (activity)  |                          |  |  |  |  |
| 22  | . Who monitors the Company's networks for intrusions or other unusual activity (select one)?  | <sup>22</sup> Computer   |  |  |  |  |
|     | Nobody/we do not monitor  | be a person              |  |  |  |  |
|     | Somebody in the Company's IT department   | be a person              |  |  |  |  |
|     | A third party/managed security provider   |                          |  |  |  |  |
|     | Somebody in the Company's IT department AND a third party/managed security provider   |                          |  |  |  |  |
| 23  | When did the Company last have a comprehensive (i.e. inclusive of vulnerability scanning and penetration testing) network<br>security assessment conducted by a third party (select one)? |                          |  |  |  |  |
|     | Last 6 months Last 18 months Last 36 months Never   |                          |  |  |  |  |
| 24  | . The Company's attempts to mitigate its exposure to media liability by using the following controls (select all that apply):   |                          |  |  |  |  |
|     | <ul> <li>Obtaining all necessary rights to use third party content</li> </ul>   |                          |  |  |  |  |
|     | Social media policy   |                          |  |  |  |  |
|     | Take-down procedures  |                          |  |  |  |  |
|     | Legal review of all materials   |                          |  |  |  |  |

Remotely & securely requires offsite storage, can include cloud storage, servers, external hard drives, etc.

quire a review of your vendor's security protocols?

of encryption, the process of converting information or code, especially to prevent unauthorized access.

ption to protect sensitive information transmitted online"

r antivirus software does not fulfill this requirement, must or company.