Summary Description of Benefits for the Identity Theft Coverage  
Master Policy for Customers Enrolled in Equifax Credit Monitoring Products that Include Identity Theft Insurance

This Summary is provided to inform you that as a customer of Equifax or its affiliates who are enrolled in an Equifax credit monitoring product that includes identity theft insurance (the “Membership Program”), you are entitled benefits under the Master Policy referenced below. This Summary Description of Benefits does not state all the terms, conditions, and exclusions of the Policy. Your benefits will be subject to all of the terms, conditions, and exclusions of the Master Policy, even if they are not mentioned in this Summary. A complete copy of the Policy will be provided upon request.

The Master Policy of Fraud Safeguard Coverage for New York insureds and Personal Internet Identity Coverage for non-New York insureds has been issued to: Equifax Consumer Services LLC (the “Master Policy Holder”), Policy Numbers: 1422799 and 7077703, respectively, underwritten by insurance company subsidiaries or affiliates of American International Group, Inc., to provide benefits as described in this Summary.

General Information

Should you have any questions regarding the Membership Program provided by the Master Policyholder, or wish to view a complete copy of the Master Policy, please call the customer service number located in your membership materials.

Limit of Insurance

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Limit</th>
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</thead>
<tbody>
<tr>
<td>Aggregate Limit of Insurance</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Lost Wages</td>
<td>$1,500</td>
</tr>
<tr>
<td>Travel Expenses</td>
<td>$1,000</td>
</tr>
<tr>
<td>Elder Care and Child Care</td>
<td>$2,000</td>
</tr>
<tr>
<td>Initial Legal Consultation</td>
<td>$1,000</td>
</tr>
<tr>
<td>Deductible</td>
<td>$0</td>
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</tbody>
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Filing a Claim

If you have any questions regarding the identity theft insurance coverage or wish to file a claim under the Master Policy, please contact the Insurer at 1-866-IDHelp2 (1-866-434-3572).

This is a group master policy issued to Equifax Consumer Services LLC. If this Master Policy is terminated, your benefits will cease effective that date. It is the obligation of the Master Policyholder to inform you of any termination of the Master Policy.

BENEFITS

We shall pay you for the following:

a) Costs

i. Reasonable and necessary costs incurred by you in the United States for re-filing applications for loans, grants or other credit instruments that are rejected solely as a result of a Stolen Identity Event;

ii. Reasonable and necessary costs incurred by you in the United States for notarizing affidavits or other similar documents, long distance telephone calls and postage solely as a result of your efforts to report a stolen identity event and/or amend or rectify records as to your true name or identity as a result of a Stolen Identity Event;
iii. Reasonable and necessary costs incurred by you for up to six credit reports from established
credit bureaus (with no more than two reports from any one credit bureau) dated within 12
months after your discovery of a Stolen Identity Event;

iv. Reasonable and necessary costs approved by us, for providing periodic reports on changes to,
and inquiries about the information contained in your credit reports or public databases
(including, but not limited to credit monitoring services);

v. Reasonable and necessary costs incurred by you for ordering medical records for the purpose of
amending and/or rectifying these documents as a result of a Stolen Identity Event;

vi. Reasonable and necessary costs for elder care or child care incurred as a result of the your
efforts to amend or rectify records as to the insured’s true name or identity;

vii. Reasonable and necessary cost of travel within the United States incurred as a result of the your
efforts to amend or rectify records as to the insured’s true name and identity;

viii. Reasonable and necessary costs incurred by you for ordering medical records for the purpose of
amending and/or rectifying these documents as a result of a Stolen Identity Event;

ix. Reasonable and necessary costs incurred by you for the replacement of identification cards,
drivers licenses and passports as a result of a Stolen Identity Event;

x. Reasonable and necessary costs associated with the use of any investigative agency or private
investigator engaged to amend or rectify records as to your true name or identity as a result of a
Stolen Identity Event. We reserve the right to select such investigative agency or private
investigator; however, with our express prior written consent, you may select such investigative
agency or private investigator.

b) Lost Wages

Actual lost wages earned in the United States, whether partial or whole days, for time reasonably
and necessarily taken off work and away from your work premises solely as a result of your efforts
to amend or rectify records as to your true name or identity as a result of a Stolen Identity Event.
Actual lost wages includes remuneration for vacation days, discretionary days, floating holidays,
and paid personal days and excludes business interruption or future earnings of a self-employed
professional. Computation of lost wages for self-employed professionals must be supported by and
will be based on prior year tax returns. Coverage is limited to wages lost within twelve months
after your discovery of a Stolen Identity Event.

c) Legal defense fees and expenses

Reasonable and necessary fees and expenses incurred in the United States by you with our consent
for an attorney appointed by us for:

i. Defending any civil suit brought against you by a creditor or collection agency or entity acting
on behalf of a creditor for non-payment of goods or services or default on a loan as a result of a
Stolen Identity Event; and

ii. Removing any civil judgment wrongfully entered against you as a result of the Stolen Identity
Event.

iii. Criminal defense for charges brought against you as a result of the Stolen Identity Event.
However, we will only pay for this after it has been established by acquittal or dropping of
charges because you were not in fact the perpetrator.

iv. An initial consultation with a lawyer to determine the severity of and appropriate response to a
stolen identity event;

v. Challenging the accuracy or completeness of any information in the insured’s medical history
as a result of a medical identity theft; and

vi. Challenging the accuracy or completeness of any information in the insured’s tax history as a
result of a stolen identity event.

d) Unauthorized Electronic Fund Transfer Reimbursement

The principal amount, exclusive of interest and fees, incurred by you and caused by an
Unauthorized Electronic Fund Transfer first occurring during the policy period for which you have
sought reimbursement from the financial institution which issued the access device and holds the account from which funds were stolen, and for which you have not received reimbursement from any source.

A Stolen Identity Event means the fraudulent use of your name, address, Social Security number, bank or credit card account number or other personally identifying information or other method of identifying you. This includes, but is not limited to, the fraudulent use of your personal identity to establish credit accounts, secure loans, enter into contracts or commit crimes. Stolen identity event shall include Medical identity theft. Medical Identity Theft means the theft of the insured’s personal or health insurance information to obtain medical treatment, pharmaceutical services or medical insurance coverage. Medical identity theft also means the theft of the insured’s personal or health insurance information to submit false claims for medical services or goods.

A Stolen Identity Event does not include the theft or unauthorized or illegal use of your business name, d/b/a or any other method of identifying your business activity.

An Unauthorized Electronic Fund Transfer is an electronic fund transfer from your personal deposit account (including cash, checking, savings or money market accounts, but not including IRA, 401k, stock, bond or other investment accounts) initiated by a person other than you without the actual authority to initiate such transfer and from which you receive no benefit. An Unauthorized Electronic Fund Transfer does not include an electronic fund transfer initiated: 1) by a person who was furnished the access device to your account by you, unless you have notified the financial institution that transfers by such person are no longer authorized; 2) with fraudulent intent by you or any person acting in concert with you; 3) by the financial institution of its employee; or 4) from any business or commercial account.

**Coverage Scope**

The Master Policy provides benefits to you only if you report a Stolen Identity Event or an Unauthorized Electronic Fund Transfer to us at the contact number stated above as soon as you become aware of a Stolen Identity Event or Unauthorized Electronic Fund Transfer, but in no event later than 90 days after the Stolen Identity Event or Unauthorized Electronic Fund Transfer is discovered by you. In no event will an Unauthorized Electronic Fund Transfer be covered if it is not reported within 4 months of when it occurs.

In addition, you must follow the instructions given to you in a claims kit that you will be provided. These instructions will include notifying major credit bureaus, the Federal Trade Commission’s Identity Theft Hotline and appropriate law enforcement authorities. This claims kit will also instruct you how to file for benefits under the policy if the Stolen Identity Event or an Unauthorized Electronic Fund Transfer results in losses covered under the Master Policy.

You will only be covered if (1) you report the Stolen Identity Event or an Unauthorized Electronic Fund Transfer to us within 90 days of discovery, and (2) you first discover the Stolen Identity Event or Unauthorized Electronic Fund Transfer while you are enrolled in a Membership Program. In addition, if you experience an Unauthorized Electronic Fund Transfer, you will only be covered if you report this to us within 4 months of when it occurs. You will not be covered if the Stolen Identity Event or Unauthorized Electronic Fund Transfer first occurs after termination of the Master Policy or termination of your membership in the Membership Program.

**Limits Of Insurance**

The most we shall pay you are the Limits of Insurance shown above. All Legal Costs shall be part of and subject to the Aggregate Limit of Insurance. **LEGAL COSTS ARE PART OF, AND NOT IN ADDITION TO, THE LIMIT OF INSURANCE.**

The Lost Wages, Travel Expense, Initial Legal Consultation and Elder Care/Child Care Limits of Insurance shown above are sublimits of the Aggregate Limit of Insurance and the most we shall pay you for lost wages, travel expense, initial legal consultation and elder care/child care.

**Other Insurance**
We shall be excess over any other insurance, including, without limitation, homeowner’s or renter’s insurance. If you have other insurance that applies to a loss under this policy, the other insurance shall pay first. This policy applies to the amount of loss that is in excess of the Limit of Insurance of your other insurance and the total of all your deductibles and self-insured amounts under all such other insurance. In no event shall we pay more than our Limits of Insurance as shown above.

**DUPLICATE COVERAGES**

Should you be enrolled in more than one Membership Program insured by us, or any of our affiliates, we will reimburse you under each Membership Program:

a) subject to the applicable deductibles and limits of liability of each insured Membership Program

b) but in no event shall the total amount reimbursed to you under all Membership Programs exceed the actual amount of loss.

c) in no event shall the Limit of Insurance under all Membership Programs exceed the largest Limit of Insurance available to you under any Membership Program provided by us.