CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/13/2024

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
Marsh Risk & Insurance Services
1735 Technology Drive, Suite 790
San Jose, CA 95110
Attn: SanJose.CertRequest@marsh.com / FAX 212-948-4335

CN117631842--GAWUE-24-25

CONTACT NAME: Petronella Massey
PHONE (A/C, No, Ext): 408 467 5614 **FAX (A/C, No):** 408 467 5699
E-MAIL ADDRESS: petronella.massey@marsh.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Travelers Property Casualty Co. of America	25674
INSURER B : Munich Re - Lloyd's Syndicate 457	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Zoom Video Communications, Inc.
55 Almaden Blvd., Suite 6
San Jose, CA 95113

COVERAGES **CERTIFICATE NUMBER:** SEA-003692284-17 **REVISION NUMBER:** 9

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X **COMMERCIAL GENERAL LIABILITY** [ ] CLAIMS-MADE [X] OCCUR [ ] Global Extension [ ] Host Liquor GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY [X] PRO-JECT [X] LOC [ ] OTHER:			H22J 630-9P531464-TIL-24	12/01/2024	12/01/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG 	$ $ $ $ $ $ $	1,000,000 1,000,000 10,000 1,000,000 2,000,000 2,000,000
A	**AUTOMOBILE LIABILITY** X ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS X HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			HJCAP-9P532528-24 'Comp/Coll. Deductible $1,000'	12/01/2024	12/01/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) 	$ $ $ $ $	1,000,000
A	X **UMBRELLA LIAB** [X] OCCUR **EXCESS LIAB** [ ] CLAIMS-MADE [ ] DED [X] RETENTION $ 0			CUP-9P531452-24-I3	12/01/2024	12/01/2025	EACH OCCURRENCE AGGREGATE 	$ $ $	25,000,000 25,000,000
A	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** Y / N ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		UB-9W161584-24-I3-H	12/01/2024	12/01/2025	X PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $	 1,000,000 1,000,000 1,000,000
B	E&O / Cyber Liability			B0509CYBLY2450201	12/01/2024	12/01/2025	Limit SIR		15,000,000 $5,000,000

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

CERTIFICATE HOLDER

Georgia Technology Authority
47 Trinity Avenue SW
Atlanta, GA 30334

CANCELLATION

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

Marsh Risk & Insurance Services

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Marsh Risk & Insurance Services	Zoom Video Communications, Inc. 55 Almaden Blvd., Suite 6 San Jose, CA 95113
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance

GENERAL LIABILITY:
Employee Benefits Effective 12/1/2024-12/1/2025
Travelers Paper: Travelers Property Casualty Company Of America
Policy: H22J 630-9P531464-TIL-24
Limits: $ 3,000,000 Each Claim $1,000,000 Aggregate
Retro Active Date: 10/31/2016

CRIME
Great American Insurance Company
Policy No: SAA E789137 01 00
Effective Date: 12/01/2023
Expiration Date: 12/01/2025
Limit:$1,000,000 Occurrence/Aggregate
Deductible: $100,000

XL Insurance AXA:
Excess Error and Omissions $10M XS $15M
Paper: Indian Harbor Insurance Company
Policy Number: MTE9042239 03
Effective: 12/01/2023 - 12/01/2024
RETROACTIVE DATE:4/21/2011
Limit $15,000,000 Deductible $5,000,000