



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
7/31/2018

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 Commercial Lines - (628) 201-9001 USI Insurance Services National, Inc. - CA Lic#: 0D08408 201 Mission St, 11th Floor San Francisco, CA 94105	CONTACT NAME: PHONE (A/C, No, Ext): 628.201.9001 E-MAIL ADDRESS: certificateswf@usi.com	FAX (A/C, No): 610.537.2393	
	INSURER(S) AFFORDING COVERAGE		
INSURED Shining Star Foundation dba: Star Academy 4470 Redwood Highway San Rafael, CA 94903	INSURER A:	Hanover Insurance Company	22292
	INSURER B:	Allmerica Financial Benefit Insurance Company	41840
	INSURER C:	General Star Indemnity Company	37362
	INSURER D:	RSUI Indemnity Company	22314
	INSURER E:		
	INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 13328654 **REVISION NUMBER:** See below

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		ZHFA973187 03	08/01/2018	08/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			AWF D302143 03	08/01/2018	08/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ 10,000	X		IUG927165B	08/01/2018	08/01/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
D	Educators Legal Liability Incl D&O, EPLI & ELL			NHP677895	08/01/2018	08/01/2019	3,000,000 Aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Mt. Diablo Unified School District is included as additional insured as it relates to the general liability in accordance with the terms and conditions of the policy. Umbrella follows form as it relates to additional insured.

CERTIFICATE HOLDER Mt. Diablo Unified School District 1936 Carlotta Drive Concord, CA 94519	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 

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL GENERAL LIABILITY BROADENING ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SUMMARY OF COVERAGES

1.	Additional Insured by Contract, Agreement or Permit	Included
2.	Additional Insured – Primary and Non-Contributory	Included
3.	Blanket Waiver of Subrogation	Included
4.	Bodily Injury Redefined	Included
5.	Broad Form Property Damage – Borrowed Equipment, Customers Goods & Use of Elevators	Included
6.	Knowledge of Occurrence	Included
7.	Liberalization Clause	Included
8.	Medical Payments – Extended Reporting Period	Included
9.	Newly Acquired or Formed Organizations - Covered until end of policy period	Included
10.	Non-owned Watercraft	51 ft.
11.	Supplementary Payments Increased Limits	
	- Bail Bonds	\$2,500
	- Loss of Earnings	\$1000
12.	Unintentional Failure to Disclose Hazards	Included
13.	Unintentional Failure to Notify	Included

This endorsement amends coverages provided under the Commercial General Liability Coverage Part through new coverages, higher limits and broader coverage grants.

1. Additional Insured by Contract, Agreement or Permit

The following is added to **SECTION II – WHO IS AN INSURED:**

Additional Insured by Contract, Agreement or Permit

- a. Any person or organization with whom you agreed in a written contract, written agreement or permit that such person or organization to add an additional insured on your policy is an additional insured only with respect to liability for "bodily injury", "property damage", or "personal and advertising injury" caused, in whole or in part, by your acts or omissions, or the acts or omissions of those acting on your behalf, but only with respect to:

- (1) "Your work" for the additional insured(s) designated in the contract, agreement or permit;
- (2) Premises you own, rent, lease or occupy; or
- (3) Your maintenance, operation or use of equipment leased to you.
- b. The insurance afforded to such additional insured described above:
- (1) Only applies to the extent permitted by law; and
- (2) Will not be broader than the insurance which you are required by the contract, agreement or permit to provide for such additional insured.

- (3) Applies on a primary basis if that is required by the written contract, written agreement or permit.
 - (4) Will not be broader than coverage provided to any other insured.
 - (5) Does not apply if the "bodily injury", "property damage" or "personal and advertising injury" is otherwise excluded from coverage under this Coverage Part, including any endorsements thereto.
- c. This provision does not apply:
- (1) Unless the written contract or written agreement was executed or permit was issued prior to the "bodily injury", "property damage", or "personal injury and advertising injury".
 - (2) To any person or organization included as an insured by another endorsement issued by us and made part of this Coverage Part.
 - (3) To any lessor of equipment:
 - (a) After the equipment lease expires; or
 - (b) If the "bodily injury", "property damage", "personal and advertising injury" arises out of sole negligence of the lessor
 - (4) To any:
 - (a) Owners or other interests from whom land has been leased which takes place after the lease for the land expires; or
 - (b) Managers or lessors of premises if:
 - (i) The occurrence takes place after you cease to be a tenant in that premises; or
 - (ii) The "bodily injury", "property damage", "personal injury" or "advertising injury" arises out of structural alterations, new construction or demolition operations performed by or on behalf of the manager or lessor.
 - (5) To "bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of or the failure to render any professional services.
- This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage" or the offense which caused the "personal and

advertising injury" involved the rendering of or failure to render any professional services by or for you.

- d. With respect to the insurance afforded to these additional insureds, the following is added to **SECTION III – LIMITS OF INSURANCE:**

The most we will pay on behalf of the additional insured for a covered claim is the lesser of the amount of insurance:

- 1. Required by the contract, agreement or permit described in Paragraph a.; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

2. Additional Insured – Primary and Non-Contributory

The following is added to **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**, Paragraph 4. **Other insurance:**

Additional Insured – Primary and Non-Contributory

If you agree in a written contract, written agreement or permit that the insurance provided to any person or organization included as an Additional Insured under **SECTION II – WHO IS AN INSURED**, is primary and non-contributory, the following applies:

If other valid and collectible insurance is available to the Additional Insured for a loss covered under Coverages A or B of this Coverage Part, our obligations are limited as follows:

a. Primary Insurance

This insurance is primary to other insurance that is available to the Additional Insured which covers the

Additional Insured as a Named Insured. We will not seek contribution from any other insurance available to the Additional Insured except:

- (1) For the sole negligence of the Additional Insured;
- (2) When the Additional Insured is an Additional Insured under another primary liability policy; or
- (3) when b. below applies.

If this insurance is primary, our obligations are not affected unless any of the other insurance is also primary. Then, we will share with all that other insurance by the method described in c. below.

b. Excess Insurance

- (1) This insurance is excess over any of the other insurance, whether primary, excess, contingent or on any other basis:
- (a) That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work";
 - (b) That is Fire insurance for premises rented to the Additional Insured or temporarily occupied by the Additional Insured with permission of the owner;
 - (c) That is insurance purchased by the Additional Insured to cover the Additional Insured's liability as a tenant for "property damage" to premises rented to the Additional Insured or temporarily occupied by the Additional Insured with permission of the owner; or
 - (d) If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion g. of **SECTION I – COVERAGE A – BODILY INJURY AND PROPERTY DAMAGE LIABILITY**.
- (2) When this insurance is excess, we will have no duty under Coverages **A** or **B** to defend the insured against any "suit" if any other insurer has a duty to defend the insured against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.
- (3) When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:
- (a) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
 - (b) The total of all deductible and self insured amounts under all that other insurance.

We will share the remaining loss, if any, with any other insurance that is not described in this Excess Insurance provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

c. Method Of Sharing

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each

insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first. If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers

3. Blanket Waiver of Subrogation

The following is added to **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**, Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us:**

We waive any right of recovery we may have against any person or organization with whom you have a written contract that requires such waiver because of payments we make for damage under this coverage form. The damage must arise out of your activities under a written contract with that person or organization. This waiver applies only to the extent that subrogation is waived under a written contract executed prior to the "occurrence" or offense giving rise to such payments.

4. Bodily Injury Redefined

SECTION V – DEFINITIONS, Definition 3. "bodily injury" is replaced by the following:

- 3. "Bodily injury" means bodily injury, sickness or disease sustained by a person including death resulting from any of these at any time. "Bodily injury" includes mental anguish or other mental injury resulting from "bodily injury".

5. Broad Form Property Damage – Borrowed Equipment, Customers Goods, Use of Elevators

- a. **SECTION I – COVERAGES, COVERAGE A – BODILY INJURY AND PROPERTY DAMAGE LIABILITY**, Paragraph 2. Exclusions subparagraph j. is amended as follows:

Paragraph (4) does not apply to "property damage" to borrowed equipment while at a jobsite and not being used to perform operations.

Paragraphs (3), (4) and (6) do not apply to "property damage" to "customers goods" while on your premises nor do they apply to the use of elevators at premises you own, rent, lease or occupy.

- b. The following is added to **SECTION V – DEFINITIONS:**

24. "Customers goods" means property of your customer on your premises for the purpose of being:

- a. worked on; or
- b. used in your manufacturing process.
- c. The insurance afforded under this provision is excess over any other valid and collectible property insurance (including deductible) available to the insured whether primary, excess, contingent

6. Knowledge of Occurrence

The following is added to **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**, Paragraph 2. **Duties in the Event of Occurrence, Offense, Claim or Suit:**

- e. Notice of an "occurrence", offense, claim or "suit" will be considered knowledge of the insured if reported to an individual named insured, partner, executive officer or an "employee" designated by you to give us such a notice.

7. Liberalization Clause

The following is added to **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS:**

Liberalization Clause

If we adopt any revision that would broaden the coverage under this Coverage Form without additional premium, within 45 days prior to or during the policy period, the broadened coverage will immediately apply to this Coverage Part.

8. Medical Payments – Extended Reporting Period

- a. **SECTION I – COVERAGES, COVERAGE C – MEDICAL PAYMENTS**, Paragraph 1. **Insuring Agreement**, subparagraph a.(3)(b) is replaced by the following:

- (b) The expenses are incurred and reported to us within three years of the date of the accident; and

- b. This coverage does not apply if **COVERAGE C – MEDICAL PAYMENTS** is excluded either by the provisions of the Coverage Part or by endorsement.

9. Newly Acquired Or Formed Organizations

SECTION II – WHO IS AN INSURED, Paragraph 3.a. is replaced by the following:

- a. Coverage under this provision is afforded until the end of the policy period.

10. Non-Owned Watercraft

SECTION I – COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, Paragraph 2. **Exclusions**, subparagraph g.(2) is replaced by the following:

g. Aircraft, Auto Or Watercraft

- (2) A watercraft you do not own that is:

- (a) Less than 51 feet long; and
- (b) Not being used to carry persons or property for a charge;

This provision applies to any person who, with your consent, either uses or is responsible for the use of a watercraft.

11. Supplementary Payments Increased Limits

SECTION I – SUPPLEMENTARY PAYMENTS COVERAGES A AND B, Paragraphs 1.b. and 1.d. are replaced by the following:

- 1.b. Up to \$2,500 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

- 1.d. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit", including actual loss of earnings up to \$1000 a day because of time off from work.

12. Unintentional Failure to Disclose Hazards

The following is added to **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**, Paragraph 6. **Representations:**

We will not disclaim coverage under this Coverage Part if you fail to disclose all hazards existing as of the inception date of the policy provided such failure is not intentional.

13. Unintentional Failure to Notify

The following is added to **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**, Paragraph 2. **Duties in the Event of Occurrence, Offense, Claim or Suit:**

Your rights afforded under this policy shall not be prejudiced if you fail to give us notice of an "occurrence", offense, claim or "suit", solely due to your reasonable and documented belief that the "bodily injury" or "property damage" is not covered under this policy.

ALL OTHER TERMS, CONDITIONS, AND EXCLUSIONS REMAIN UNCHANGED.



GENERAL STAR INDEMNITY COMPANY
 STAMFORD, CONNECTICUT 06904-0119
 (Hereinafter called the Company) A Stock Company

**COMMERCIAL UMBRELLA LIABILITY
 DECLARATIONS**

POLICY NUMBER: IUG927165A

ITEM 1 - NAMED INSURED: SHINING STAR FOUNDATION DBA
 STAR ACADEMY
 (SEE NAMED INSURED ENDORSEMENT CU855)

ITEM 2 - MAILING ADDRESS: 4470 REDWOOD HIGHWAY
 SAN RAFAEL, CA 94903

ITEM 3 - POLICY PERIOD: 07/01/2017 to 07/01/2018
 12:01 AM Standard Time at the address of the Insured as stated above.

In return for the payment of the premium, and subject to all the terms of this Policy, we agree with you to provide the insurance coverage stated in this Policy.

ITEM 4 - LIMIT OF INSURANCE:

Policy Aggregate Limit	\$10,000,000	
Self Insured Retention	\$10,000	each occurrence or offense not covered by Underlying Insurance

ITEM 5 - PREMIUM FOR POLICY:

(a)	Flat Charge	\$17,550	Annual
(b)	Deposit Premium	N/A	
(c)	Minimum Premium	N/A	
(d)	Rate	N/A	
(e)	Audit Reporting Period	Not Adjustable	

ITEM 6 - ENDORSEMENTS ATTACHED: CU300 (07/1998), GSI-05-14 (6/8/1998), IL600 (01/2010), CU855 (07/1998), CU612 (07/1998), CU624 (07/1998), CU897 (01/1999), CU652 (07/1998), CU677 (07/1998), CU052 (07/1998), CU660 (07/1998), CU607 (07/1998), CU670 (07/1998), CU617 (07/1998), CU979 (01/2016), CU833 (07/1998), CU849 (07/1998), CU632 (07/1998), CU644 (07/1998), CU687 (07/1998), CU614 (07/1998), CU940 (07/2004), CU962 (07/2004), CU987 (11/2007), CU995 (04/2008), CU136 (01/2015), IL0985 (01/2015), CU965 (07/2004), CU964 (07/2004), CU880T (07/1998), CU922 (02/2000), CU602T (07/1998), CU820 (07/1998), CU924 (09/2001), CU130 (01/2015), CU887 (01/1999), CU1001 (07/2008), CU151T (07/1998), CU667 (07/1998), CU892 (01/1999), CU702P (07/1998), CU702PA (07/1998), CU963 (07/2004)

Countersigned at New York, New York this 18th day of August, 2017

GENERAL STAR INDEMNITY COMPANY

Authorized Signature

Notification to purchasing group member: The insurer for the purchasing group may not be subject to all the insurance laws and regulations of your State. The insurance insolvency guaranty fund may not be available to the purchasing group.

GENERAL STAR INDEMNITY COMPANY

COMMERCIAL UMBRELLA POLICY

SCHEDULE OF UNDERLYING INSURANCE

- A) Insurer - HANOVER INSURANCE COMPANY
- Coverage - Commercial General Liability
- Limits - \$1,000,000 Each occurrence Bodily Injury and/or Property Damage Liability combined
\$2,000,000 General Aggregate
\$2,000,000 Products/Completed Operations Aggregate
\$1,000,000 Personal and Advertising Injury Limit
- B) Insurer - BERKSHIRE HATHAWAY HOMESTATE INS. COMPANY
- Coverage - Automobile Liability
- Limits - \$1,000,000 each occurrence Bodily Injury and/or Property Damage Liability combined
- C) Insurer - AMERICAN HOME ASSURANCE COMPANY
- Coverage - Employers Liability (Law requires that this carrier provide unlimited coverage in MA, NY. The coverage provided by this policy for Employers Liability does not apply to employments which are subject to such laws.)
- Limits - Bodily Injury by Accident: \$2,000,000 each accident
Bodily Injury by Disease: \$2,000,000 policy limit
Bodily Injury by Disease: \$2,000,000 each employee

GENERAL STAR INDEMNITY COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NAMED INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL UMBRELLA POLICY


ITEM 1 - NAMED INSURED shown on the Declarations Page, includes the following:

SHINING STAR FOUNDATION DBA STAR ACADEMY
(MEMBER OF EDUCATIONAL INSTITUTIONS PURCHASING GROUP)

This endorsement # 1, effective 07/01/2017 forms a part of Policy No. IUG927165A
issued to SHINING STAR FOUNDATION DBA STAR ACADEMY
by GENERAL STAR INDEMNITY COMPANY

07/24/2017
Issue Date

New York, New York
Issued At



Authorized Signature

I. The SCHEDULE OF UNDERLYING INSURANCE is amended to include the following:

SCHEDULE OF UNDERLYING INSURANCE

INSURANCE COMPANY: HANOVER INSURANCE COMPANY

CLAIMS MADE COVERAGE: Employee Benefits Liability (Claims Made)

LIMITS: \$1,000,000 each claim/
\$1,000,000 aggregate

COVERAGE P RETROACTIVE DATE: 10/11/2010

(If none, state None; if blank, the COVERAGE P RETROACTIVE DATE will be the effective date of this endorsement)

INSURANCE COMPANY: ALLIED WORLD SURPLUS LINES INSURANCE COMPANY

CLAIMS MADE COVERAGE: School Board Errors and Omissions (Claims Made)

LIMITS: \$1,000,000 each claim/
\$3,000,000 aggregate

COVERAGE P RETROACTIVE DATE: 10/11/2010

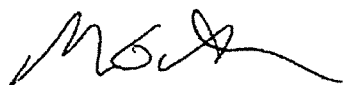
(If none, state None; if blank, the COVERAGE P RETROACTIVE DATE will be the effective date of this endorsement)

SEE ENDORSEMENT CU702PA FOR CONTINUATION OF SCHEDULE OF UNDERLYING INSURANCE

This endorsement # 37, effective 07/01/2017 forms a part of Policy No. IUG927165A issued to SHINING STAR FOUNDATION DBA STAR ACADEMY by GENERAL STAR INDEMNITY COMPANY

07/24/2017
Issue Date

New York, New York
Issued At



Authorized Signature

GENERAL STAR INDEMNITY COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GENERAL CHANGE ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL UMBRELLA POLICY


In consideration of the premium charged, it is agreed that the SCHEDULE OF UNDERLYING INSURANCE, ITEM (B), INSURER, is amended to read as follows:

B) Insurer - ALLMERICA FINANCIAL BENEFITS INSURANCE COMPANY

It is further agreed that Endorsement No. 37, COVERAGE P - EXCESS CLAIMS MADE INSURANCE, SCHEDULE OF UNDERLYING INSURANCE, School Board Errors and Omissions (Claims Made) is amended to read as follows:

LIMITS \$3,000,000 each occurrence
 \$3,000,000 aggregate

This endorsement # 39, effective 07/01/2017 forms a part of Policy No. IUG927165A issued to SHINING STAR FOUNDATION DBA STAR ACADEMY by GENERAL STAR INDEMNITY COMPANY



08/30/2017
Issue Date

New York, New York
Issued At

Authorized Signature

GENERAL STAR INDEMNITY COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GENERAL CHANGE ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL UMBRELLA POLICY

In consideration of the premium charged, it is agreed that Endorsement No.12, ABUSE OR MOLESTATION COVERAGE AND LIMIT, is amended to read as follows:

ABUSE OR MOLESTATION COVERAGE LIMIT \$5,000,000
(If no limit is shown, the ABUSE OR MOLESTATION COVERAGE LIMIT will be equal to the Policy Aggregate Limit)

This endorsement # 41, effective 07/01/2017 forms a part of Policy No. IUG927165A issued to SHINING STAR FOUNDATION DBA STAR ACADEMY by GENERAL STAR INDEMNITY COMPANY

08/30/2017
Issue Date

New York, New York
Issued At



Authorized Signature

GENERAL STAR INDEMNITY COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GENERAL CHANGE ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL UMBRELLA POLICY

In consideration of an additional premium of \$1,492.00, it is agreed that this policy is extended to expire on the following date:

08/01/2018

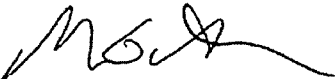
This endorsement # 42, effective 07/01/2018 forms a part of Policy No. IUG927165A issued to SHINING STAR FOUNDATION DBA STAR ACADEMY by GENERAL STAR INDEMNITY COMPANY

11/28/2017

Issue Date

New York, New York

Issued At



Authorized Signature



GENERAL STAR INDEMNITY COMPANY
 STAMFORD, CONNECTICUT 06904-0119
 (Hereinafter called the Company) A Stock Company

**COMMERCIAL UMBRELLA LIABILITY
 DECLARATIONS**

POLICY NUMBER: IUG927165B

ITEM 1 - NAMED INSURED: SHINING STAR FOUNDATION DBA
 SHINING STAR ACADEMY
 (SEE NAMED INSURED ENDORSEMENT CU855)

ITEM 2 - MAILING ADDRESS: 4470 REDWOOD HWY
 SAN RAFAEL, CA 94903

ITEM 3 - POLICY PERIOD: 08/01/2018 to 08/01/2019
 12:01 AM Standard Time at the address of the Insured as stated above.

In return for the payment of the premium, and subject to all the terms of this Policy, **we** agree with **you** to provide the insurance coverage stated in this Policy.

ITEM 4 - LIMIT OF INSURANCE:

Policy Aggregate Limit	\$10,000,000	
Self Insured Retention	\$10,000	each occurrence or offense not covered by Underlying Insurance

ITEM 5 - PREMIUM FOR POLICY:

(a) Flat Charge	\$17,550	Annual	Premium:	\$17,550
(b) Deposit Premium	N/A		Surplus Lines Taxes 3%:	\$541.40
(c) Minimum Premium	N/A		Stamping Fee 0.2%:	\$36.10
(d) Rate	N/A		Carrier Policy Fee:	\$500
(e) Audit Reporting Period	Not Adjustable		TOTAL PREMIUM:	\$18,627.50

ITEM 6 - ENDORSEMENTS ATTACHED: CU300 (07/1998), GSI-05-14 (6/8/1998), IL600 (01/2010), CU855 (07/1998), CU612 (07/1998), CU624 (07/1998), CU897 (01/1999), CU652 (07/1998), CU677 (07/1998), CU052 (07/1998), CU660 (07/1998), CU607 (07/1998), CU670 (07/1998), CU617 (07/1998), CU979 (01/2016), CU833 (07/1998), CU849 (07/1998), CU632 (07/1998), CU644 (07/1998), CU687 (07/1998), CU614 (07/1998), CU963 (07/2004), CU940 (07/2004), CU962 (07/2004), CU987 (11/2007), CU995 (04/2008), CU136 (01/2015), IL0985 (01/2015), CU965 (07/2004), CU964 (07/2004), CU880T (07/1998), CU922 (02/2000), CU602T (07/1998), CU820 (07/1998), CU924 (09/2001), CU130 (01/2015), CU887 (01/1999), CU1001 (07/2008), CU151T (07/1998), CU667 (07/1998), CU892 (01/1999), CU702P (07/1998), CU702C (07/1998)

Countersigned at New York, New York this 3rd day of August, 2018

GENERAL STAR INDEMNITY COMPANY

Authorized Signature

Notification to purchasing group member: The insurer for the purchasing group may not be subject to all the insurance laws and regulations of your State. The insurance insolvency guaranty fund may not be available to the purchasing group.

GENERAL STAR INDEMNITY COMPANY

COMMERCIAL UMBRELLA POLICY

SCHEDULE OF UNDERLYING INSURANCE

- A) Insurer - HANOVER INSURANCE COMPANY
Coverage - Commercial General Liability
Limits - \$1,000,000 Each occurrence Bodily Injury and/or Property Damage Liability combined
\$2,000,000 General Aggregate
\$2,000,000 Products/Completed Operations Aggregate
\$1,000,000 Personal and Advertising Injury Limit
- B) Insurer - ALLMERICA FINANCIAL BENEFITS INSURANCE CO.
Coverage - Automobile Liability
(UNINSURED/UNDERINSURED MOTORISTS)
Limits - \$1,000,000 each occurrence Bodily Injury and/or Property Damage Liability combined
- C) Insurer - AMERICAN HOME ASSURANCE COMPANY
Coverage - Employers Liability (Law requires that this carrier provide unlimited coverage in MA, NY.
The coverage provided by this policy for Employers Liability does not apply to
employments which are subject to such laws.)
Limits - Bodily Injury by Accident: \$2,000,000 each accident
Bodily Injury by Disease: \$2,000,000 policy limit
Bodily Injury by Disease: \$2,000,000 each employee