

**ADDITIONAL INSURED –
DESIGNATED PERSONS OR ORGANIZATIONS**

Named Insured Comcast Corporation			Endorsement Number
Policy Symbol ISA	Policy Number H25542964	Policy Period 12/01/2021 to 12/01/2022	Effective Date of Endorsement 12/01/2021
Issued By (Name of Insurance Company) ACE American Insurance Company			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.


THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

**BUSINESS AUTO COVERAGE FORM
AUTO DEALERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM
EXCESS BUSINESS AUTO COVERAGE FORM**

Additional Insured(s): Any person of organization whom 1) a named insured other than NBCUniversal Media, LLC and/or its subsidiaries has agreed to include as an additional insured under written contract or written agreement, provided such contract or agreement was executed prior to the date of loss; and 2) NBCUniversal Media, LLC and/or its subsidiaries has agreed to include as an additional insured under contract or agreement, provided such contract or agreement was executed prior to the date of loss.

- A. For a covered "auto," Who Is Insured is amended to include as an "insured," the persons or organizations named in this endorsement. However, these persons or organizations are an "insured" only for "bodily injury" or "property damage" resulting from acts or omissions of:
1. You.
 2. Any of your "employees" or agents.
 3. Any person operating a covered "auto" with permission from you, any of your "employees" or agents.
- B. The persons or organizations named in this endorsement are not liable for payment of your premium.


Authorized Representative

NON-CONTRIBUTORY ENDORSEMENT FOR ADDITIONAL INSURED

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**BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM
AUTO DEALERS COVERAGE FORM**

Schedule

Organization

Additional Insured Endorsement

Any additional insured with whom 1) a named insured other than NBCUniversal Media, LLC and/or its subsidiaries has agreed to provide such non-contributory insurance, pursuant to and as required under a written contract or written agreement executed prior to the date of loss; and 2) NBCUniversal Media, LLC and/or its subsidiaries has agreed to provide such non-contributory insurance, pursuant to and as required under a contract or agreement executed prior to the date of loss

(If no information is filled in, the schedule shall read: "All persons or entities added as additional insureds through an endorsement with the term "Additional Insured" in the title)

For organizations that are listed in the Schedule above that are also an Additional Insured under an endorsement attached to this policy, the following is added to the Other Insurance Condition under General Conditions:

If other insurance is available to an insured we cover under any of the endorsements listed or described above (the "Additional Insured") for a loss we cover under this policy, this insurance will apply to such loss on a primary basis and we will not seek contribution from the other insurance available to the Additional Insured.

Authorized Representative

NOTICE: THESE POLICY FORMS AND THE APPLICABLE RATES ARE EXEMPT FROM THE FILING REQUIREMENTS OF THE NEW YORK INSURANCE LAW AND REGULATIONS. HOWEVER, THE FORMS AND RATES MUST MEET THE MINIMUM STANDARDS OF THE NEW YORK INSURANCE LAW AND REGULATIONS.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

Named Insured Comcast Corporation			Endorsement Number
Policy Symbol XSL	Policy Number G72480922	Policy Period 12/01/2021 to 12/01/2022	Effective Date of Endorsement 12/01/2021
Issued By (Name of Insurance Company) ACE American Insurance Company			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

EXCESS COMMERCIAL GENERAL LIABILITY POLICY

SCHEDULE

Name of Person or Organization: *Any person or organization whom 1) a named insured other than NBCUniversal Media, LLC and/or its subsidiaries has agreed to include as an additional insured under written contract or written agreement, provided such contract or agreement was executed prior to the date of loss; and 2) NBCUniversal Media, LLC and/or its subsidiaries has agreed to include as an additional insured under contract or agreement, provided such contract or agreement was executed prior to the date of loss.*

- A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but 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:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

 - 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
 - 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance And Retained Limit:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

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

A handwritten signature in black ink, consisting of several overlapping, stylized lines, positioned above a horizontal line.

Authorized Representative

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NON-CONTRIBUTORY ENDORSEMENT FOR ADDITIONAL INSUREDS

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

EXCESS COMMERCIAL GENERAL LIABILITY POLICY

Schedule

Organization

Any additional insured with whom 1) a named insured other than NBCUniversal Media, LLC and/or its subsidiaries has agreed to provide such non-contributory insurance, pursuant to and as required under a written contract or written agreement executed prior to the date of loss; and 2) NBCUniversal Media, LLC and/or its subsidiaries has agreed to provide such non-contributory insurance, pursuant to and as required under a contract or agreement executed prior to the date of loss.

Additional Insured Endorsement

For organizations that are listed in the Schedule above that are also an Additional Insured under an endorsement attached to this policy, the following is added to Section IV.4:

If other insurance is available to an insured we cover under any of the endorsements listed or described above (the "Additional Insured") for a loss we cover under this policy, this insurance will apply to such loss and is primary (subject to satisfaction of the "retained limit"), meaning that we will not seek contribution from the other insurance available to the Additional Insured. Your "retained limit" still applies to such loss, and we will only pay the Additional Insured for the "ultimate net loss" in excess of the "retained limit" shown in the Declarations of this policy.



Authorized Representative