



PRISM

www.prismrisk.gov

PRISM CYBER SECURITY GRANT FAQs



Who is eligible?

Members of the Cyber Liability Program can apply for the grant.



How do I apply if I participate in the Cyber Liability Program via a pool?

If you are a pool member, your application must be approved by your pool and include a signature of the authorized pool representative. Pools are only eligible for a maximum total award of \$25,000 per year.



What type of expenses may be submitted?

Expenses that eliminate or mitigate a cyber liability exposure. Funding is intended for one-time expenses and does not cover recurring costs, such as monthly monitoring or subscription services. Suitable examples include: cyber security assessments, security awareness and employee training, and cyber risk mitigation initiatives.



When do expenses have to be incurred?

Expenses must be incurred in the fiscal year in which they are submitted.



How much financial assistance is available?

Up to \$25,000 in matching funds per member, per year. This means in order to request the full amount for which you are eligible, you must show \$50,000 in expenses.



Can I apply for more than one grant per year?

Yes, but total awards cannot exceed \$25,000 in matching funds per year.



How are awards determined?

Risk Control staff will review applications and documentation to determine eligibility for grant awards.



What if I haven't incurred the expense?

You can submit an application with a formal proposal for initial approval but will have to show an invoice to receive the funding.



Are awards made on a first come/first served basis?

Yes, and are subject to the availability of funds.



Am I eligible to apply for both the PRISM Cyber Security Grant and the Beazley Cyber Security Grant?

Yes, an award of one grant would not impact eligibility for the other.

HOW DO I APPLY?

Complete the attached form and email to the Risk Control Department (riskcontrol@prismrisk.gov) with a copy of the invoice or proposal.



PRISM CYBER SECURITY GRANT APPLICATION

Entity Name: _____

Cyber Liability Program Member: **Yes** **No**

Name: _____

Address: _____

Email: _____

Phone: _____

Amount Requested (not to exceed \$25k): \$ _____

Description of Expense:

Cyber Liability Exposure Addressed by Expense:

Signature of Primary Contact: _____

If you are unsure of your organizations primary contact, please reach out to PRISM for assistance.

Please attach supporting documentation detailing the above expense.