



Payment Card Industry Data Security Standard

Attestation of Compliance for Report on Compliance – Service Providers

Version 4.0

Revision 2

Publication Date: August 2023



PCI DSS v4.0 Attestation of Compliance for Report on Compliance – Service Providers

Entity Name: Inovio Payments, LLC

Assessment End Date: September 3, 2024

Date of Report as noted in the Report on Compliance: September 17, 2024



Section 1: Assessment Information

Instructions for Submission

This Attestation of Compliance (AOC) must be completed as a declaration of the results of the service provider's assessment against the *Payment Card Industry Data Security Standard (PCI DSS) Requirements and Testing Procedures* ("Assessment"). Complete all sections. The service provider is responsible for ensuring that each section is completed by the relevant parties, as applicable. Contact the entity(ies) to which this AOC will be submitted for reporting and submission procedures.

This AOC reflects the results documented in an associated Report on Compliance (ROC). Associated ROC sections are noted in each AOC Part/Section below.

Capitalized terms used but not otherwise defined in this document have the meanings set forth in the PCI DSS Report on Compliance Template.

Part 1. Contact Information

Part 1a. Assessed Entity (ROC Section 1.1)

Company name:	Inovio Payments, LLC
DBA (doing business as):	Not Applicable
Company mailing address:	250 Stephenson Highway Troy, MI 48084
Company main website:	https://inoviopay.com
Company contact name:	Scott Richardson
Company contact title:	Manager, Information Security (IT, Risk, and Compliance)
Contact phone number:	(720) 673-2679
Contact e-mail address:	srichardson@nabancard.com

Part 1b. Assessor (ROC Section 1.1)

Provide the following information for all assessors involved in the Assessment. If there was no assessor for a given assessor type, enter Not Applicable.

PCI SSC Internal Security Assessor(s)	
ISA name(s):	Joshua Wingate
Qualified Security Assessor	
Company name:	CompliancePoint, Inc.
Company mailing address:	250 Stephenson Highway Troy, MI 48084
Company website:	https://compliancepoint.com
Lead Assessor name:	Matt Goodman
Assessor phone number:	(770) 255-1100



Assessor e-mail address:	mgoodman@compliancepoint.com
Assessor certificate number:	206-079

Part 2. Executive Summary

Part 2a. Scope Verification

Services that were **INCLUDED** in the scope of the Assessment (select all that apply):

Name of service(s) assessed:	InovioPay Payment Processing	
Type of service(s) assessed:		
Hosting Provider: <input type="checkbox"/> Applications / software <input type="checkbox"/> Hardware <input type="checkbox"/> Infrastructure / Network <input type="checkbox"/> Physical space (co-location) <input type="checkbox"/> Storage <input type="checkbox"/> Web-hosting services <input type="checkbox"/> Security services <input type="checkbox"/> 3-D Secure Hosting Provider <input type="checkbox"/> Multi-Tenant Service Provider <input type="checkbox"/> Other Hosting (specify):	Managed Services: <input type="checkbox"/> Systems security services <input type="checkbox"/> IT support <input type="checkbox"/> Physical security <input type="checkbox"/> Terminal Management System <input type="checkbox"/> Other services (specify):	Payment Processing: <input type="checkbox"/> POI / card present <input checked="" type="checkbox"/> Internet / e-commerce <input type="checkbox"/> MOTO / Call Center <input type="checkbox"/> ATM <input type="checkbox"/> Other processing (specify):
<input type="checkbox"/> Account Management	<input type="checkbox"/> Fraud and Chargeback	<input checked="" type="checkbox"/> Payment Gateway/Switch
<input type="checkbox"/> Back-Office Services	<input type="checkbox"/> Issuer Processing	<input type="checkbox"/> Prepaid Services
<input type="checkbox"/> Billing Management	<input type="checkbox"/> Loyalty Programs	<input type="checkbox"/> Records Management
<input type="checkbox"/> Clearing and Settlement	<input type="checkbox"/> Merchant Services	<input type="checkbox"/> Tax/Government Payments
<input type="checkbox"/> Network Provider		
<input type="checkbox"/> Others (specify):		

Note: These categories are provided for assistance only and are not intended to limit or predetermine an entity's service description. If these categories do not apply to the assessed service, complete "Others." If it is not clear whether a category could apply to the assessed service, consult with the entity(ies) to which this AOC will be submitted.



Part 2. Executive Summary (continued)

Part 2a. Scope Verification (continued)

Services that are provided by the service provider but were NOT INCLUDED in the scope of the Assessment (select all that apply):

Name of service(s) not assessed:	Not Applicable
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Type of service(s) not assessed:

<p>Hosting Provider:</p> <input type="checkbox"/> Applications / software <input type="checkbox"/> Hardware <input type="checkbox"/> Infrastructure / Network <input type="checkbox"/> Physical space (co-location) <input type="checkbox"/> Storage <input type="checkbox"/> Web-hosting services <input type="checkbox"/> Security services <input type="checkbox"/> 3-D Secure Hosting Provider <input type="checkbox"/> Multi-Tenant Service Provider <input type="checkbox"/> Other Hosting (specify):	<p>Managed Services:</p> <input type="checkbox"/> Systems security services <input type="checkbox"/> IT support <input type="checkbox"/> Physical security <input type="checkbox"/> Terminal Management System <input type="checkbox"/> Other services (specify):	<p>Payment Processing:</p> <input type="checkbox"/> POI / card present <input type="checkbox"/> Internet / e-commerce <input type="checkbox"/> MOTO / Call Center <input type="checkbox"/> ATM <input type="checkbox"/> Other processing (specify):
<input type="checkbox"/> Account Management	<input type="checkbox"/> Fraud and Chargeback	<input type="checkbox"/> Payment Gateway/Switch
<input type="checkbox"/> Back-Office Services	<input type="checkbox"/> Issuer Processing	<input type="checkbox"/> Prepaid Services
<input type="checkbox"/> Billing Management	<input type="checkbox"/> Loyalty Programs	<input type="checkbox"/> Records Management
<input type="checkbox"/> Clearing and Settlement	<input type="checkbox"/> Merchant Services	<input type="checkbox"/> Tax/Government Payments
<input type="checkbox"/> Network Provider		
<input type="checkbox"/> Others (specify):		
Provide a brief explanation why any checked services were not included in the Assessment:	Not Applicable	

Part 2b. Description of Role with Payment Cards (ROC Section 2.1)

<p>Describe how the business stores, processes, and/or transmits account data.</p>	<p>Cardholder data (PAN, cardholder name, expiry, CVC) are received over the Internet when transmitted through Inovio Payment’s API (InovioPay) utilizing a secure HTTPS connection over TLS v 1.2+. Cardholder data (PAN, cardholder name and expiry) are stored in an Oracle database, protected with AES-256 encryption. Additionally, cardholder data (PAN, cardholder name, expiry, CVC) are also</p>
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	transmitted to processors over the Internet via VPN connections (IPSec or TLS v1.2, or leased lines (only used for backup purposes) depending on processor, for the purposes of authorization and settlement.
Describe how the business is otherwise involved in or has the ability to impact the security of its customers' account data.	Not Applicable
Describe system components that could impact the security of account data.	Edge firewall, load balancer, web application firewall, domain controller, web server, application server, database server.



Part 2. Executive Summary (continued)

Part 2c. Description of Payment Card Environment

Provide a high-level description of the environment covered by this Assessment.

For example:

- *Connections into and out of the cardholder data environment (CDE).*
- *Critical system components within the CDE, such as POI devices, databases, web servers, etc., and any other necessary payment components, as applicable.*
- *System components that could impact the security of account data.*

novio Payments stores, processes, and transmits cardholder data in order to perform billing, settlement and reporting activities on behalf of their clients. Inovio Payments accepts and transmits cardholder data for payment authorization, and stores cardholder data for the purpose of offering their customers the option of automating recurring payments. This allows the customers using the Inovio Payments API functions to streamline the payment processor authorization process.

Critical systems include edge firewall, load balancer, web application firewall, domain controller, web servers, application servers, database servers, and processor connections.

Indicate whether the environment includes segmentation to reduce the scope of the Assessment.

Yes No

(Refer to the "Segmentation" section of PCI DSS for guidance on segmentation)

Part 2d. In-Scope Locations/Facilities (ROC Section 4.6)

List all types of physical locations/facilities (for example, corporate offices, data centers, call centers and mail rooms) in scope for this Assessment.

Facility Type	Total Number of Locations (How many locations of this type are in scope)	Location(s) of Facility (city, country)
<i>Example: Data centers</i>	3	<i>Boston, MA, USA</i>
Data Center	2	Grand Rapids, MI (USA) Las Vegas, NV (USA)



Part 2. Executive Summary (continued)

**Part 2e. PCI SSC Validated Products and Solutions
(ROC Section 3.3)**

Does the entity use any item identified on any PCI SSC Lists of Validated Products and Solutions*?

Yes No

Provide the following information regarding each item the entity uses from PCI SSC's Lists of Validated Products and Solutions:

Name of PCI SSC-validated Product or Solution	Version of Product or Solution	PCI SSC Standard to which Product or Solution Was Validated	PCI SSC Listing Reference Number	Expiry Date of Listing
Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable

* For purposes of this document, "Lists of Validated Products and Solutions" means the lists of validated products, solutions, and/or components appearing on the PCI SSC website (www.pcisecuritystandards.org)—for example, 3DS Software Development Kits, Approved PTS Devices, Validated Payment Software, Payment Applications (PA-DSS), Point to Point Encryption (P2PE) solutions, Software-Based PIN Entry on COTS (SPoC) solutions, and Contactless Payments on COTS (CPoC) solutions.



Part 2. Executive Summary *(continued)*

Part 2g. Summary of Assessment (ROC Section 1.8.1)

Indicate below all responses provided within each principal PCI DSS requirement.

For all requirements identified as either “Not Applicable” or “Not Tested,” complete the “Justification for Approach” table below.

Note: One table to be completed for each service covered by this AOC. Additional copies of this section are available on the PCI SSC website.

Name of Service Assessed: InovioPay Payment Processing

PCI DSS Requirement	Requirement Finding More than one response may be selected for a given requirement. Indicate all responses that apply.				Select If Below Method(s) Was Used	
	In Place	Not Applicable	Not Tested	Not in Place	Customized Approach	Compensating Controls
Requirement 1:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 2:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 3:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 4:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 5:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 6:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 7:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 8:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 9:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 10:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 11:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 12:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appendix A1:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appendix A2:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Justification for Approach



<p>For any Not Applicable responses, identify which sub-requirements were not applicable and the reason.</p>	<p>1.2.6, 2.2.5 - No insecure protocols, ports, or services are in use.</p> <p>2.3.1, 2.3.2, 4.2.1.2 - No wireless devices or systems are connected to the CDE or used to transmit account data.</p> <p>3.3.1.2 - The CVC is not stored after authorization</p> <p>3.3.2 - Inovio does not store SAD prior to completion of authorization.</p> <p>3.3.3 - Inovio is not an issuer.</p> <p>3.4.2 - No remote access technologies can be used to retrieve or display PAN at any time.</p> <p>3.5.1.2, 3.5.1.3 - Inovio does not use disk-level encryption to protect cardholder data.</p> <p>3.7.9 - Inovio does not share keys with customers.</p> <p>3.5.1.1, 4.2.1.1, 5.3.2.1, 5.4.1, 6.3.2, 6.4.2, 6.4.3, 7.2.5.1, 8.6.3, 10.4.2.1, 11.3.1.2, 11.5.1.1, 12.3.1, 12.3.3, 12.3.4, 12.5.2.1, 12.10.4.1, 12.10.7 - This assessment was completed prior to March 31, 2025.</p> <p>6.5.2, 11.3.1.3, 11.3.2.1, 12.5.3 - Inovio did not undergo significant changes or organizational changes in the prior year.</p> <p>8.2.3 - Inovio does not have access to customer premises.</p> <p>8.3.10, 8.3.10.1 - Inovio does not provision customer accounts for access to in-scope systems.</p> <p>9.4.1, 9.4.1.1, 9.4.1.2, 9.4.2, 9.4.3, 9.4.4, 9.4.5, 9.4.5.1, 9.4.6, 9.4.7 - Inovio does not maintain electronic media that interacts with/contains cardholder data.</p> <p>9.5.1, 9.5.1.1, 9.5.1.2, 9.5.1.2.1, 9.5.1.3 - Inovio does not maintain POI devices that interact with cardholder data.</p> <p>11.6.1 - Inovio does not have payment pages loaded in a consumer browser.</p> <p>1.4.7, A1.1.1, A1.1.2, A1.1.3, A1.1.4, A1.2.1, A1.2.2, A1.2.3 - Inovio is not a multi-tenant service provider.</p> <p>A2.1.1, A2.1.2, A2.1.3 - Inovio does not maintain or manage POS/POI devices.</p> <p>5.2.3, 5.2.3.1 - Antimalware is deployed across all compatible NAB systems to protect against malware, including those considered not at risk.</p> <p>12.3.2 - Inovio does not use a customized approach to meet any requirements.</p> <p>12.9.2 - As a payment gateway, Inovio is responsible for maintaining PCI DSS compliance but does not meet individual requirements or share responsibilities with customers.</p>
<p>For any Not Tested responses, identify which sub-requirements were not tested and the reason.</p>	<p>Not Applicable</p>



Section 2 Report on Compliance

(ROC Sections 1.2 and 1.3.2)

Date Assessment began: <i>Note: This is the first date that evidence was gathered, or observations were made.</i>		2024-06-18
Date Assessment ended: <i>Note: This is the last date that evidence was gathered, or observations were made.</i>		2024-09-03
Were any requirements in the ROC unable to be met due to a legal constraint?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Were any testing activities performed remotely? If yes, for each testing activity below, indicate whether remote assessment activities were performed:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Examine documentation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
• Interview personnel	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Examine/observe live data	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Observe process being performed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Observe physical environment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Interactive testing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Other:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



Section 3 Validation and Attestation Details

Part 3. PCI DSS Validation (ROC Section 1.7)

This AOC is based on results noted in the ROC dated *(Date of Report as noted in the ROC 2024-09-17)*.

Indicate below whether a full or partial PCI DSS assessment was completed:

- Full Assessment** – All requirements have been assessed and therefore no requirements were marked as Not Tested in the ROC.
- Partial Assessment** – One or more requirements have not been assessed and were therefore marked as Not Tested in the ROC. Any requirement not assessed is noted as Not Tested in Part 2g above.

Based on the results documented in the ROC noted above, each signatory identified in any of Parts 3b-3d, as applicable, assert(s) the following compliance status for the entity identified in Part 2 of this document *(select one)*:

<input checked="" type="checkbox"/>	<p>Compliant: All sections of the PCI DSS ROC are complete, and all assessed requirements are marked as being either In Place or Not Applicable, resulting in an overall COMPLIANT rating; thereby Inovio Payments, LLC has demonstrated compliance with all PCI DSS requirements except those noted as Not Tested above.</p>								
<input type="checkbox"/>	<p>Non-Compliant: Not all sections of the PCI DSS ROC are complete, or one or more requirements are marked as Not in Place, resulting in an overall NON-COMPLIANT rating; thereby <i>(Service Provider Company Name)</i> has not demonstrated compliance with PCI DSS requirements.</p> <p>Target Date for Compliance: <i>YYYY-MM-DD</i></p> <p>An entity submitting this form with a Non-Compliant status may be required to complete the Action Plan in Part 4 of this document. Confirm with the entity to which this AOC will be submitted before completing Part 4.</p>								
<input type="checkbox"/>	<p>Compliant but with Legal exception: One or more assessed requirements in the ROC are marked as Not in Place due to a legal restriction that prevents the requirement from being met and all other assessed requirements are marked as being either In Place or Not Applicable, resulting in an overall COMPLIANT BUT WITH LEGAL EXCEPTION rating; thereby <i>(Service Provider Company Name)</i> has demonstrated compliance with all PCI DSS requirements except those noted as Not Tested above or as Not in Place due to a legal restriction.</p> <p>This option requires additional review from the entity to which this AOC will be submitted.</p> <p><i>If selected, complete the following:</i></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 35%; padding: 5px;">Affected Requirement</th> <th style="padding: 5px;">Details of how legal constraint prevents requirement from being met</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> </tbody> </table>	Affected Requirement	Details of how legal constraint prevents requirement from being met						
Affected Requirement	Details of how legal constraint prevents requirement from being met								



Part 3. PCI DSS Validation (continued)

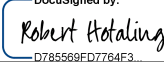
Part 3a. Service Provider Acknowledgement

Signatory(s) confirms:

(Select all that apply)


<input checked="" type="checkbox"/>	The ROC was completed according to <i>PCI DSS</i> , Version 4.0 and was completed according to the instructions therein.
<input checked="" type="checkbox"/>	All information within the above-referenced ROC and in this attestation fairly represents the results of the Assessment in all material respects.
<input checked="" type="checkbox"/>	PCI DSS controls will be maintained at all times, as applicable to the entity's environment.


Part 3b. Service Provider Attestation

DocuSigned by:  <small>D785569ED7764F3...</small>	
Signature of Service Provider Executive Officer ↑	Date: 9/20/2024
Service Provider Executive Officer Name: Robert Hotaling	Title: CISO

Part 3c. Qualified Security Assessor (QSA) Acknowledgement

If a QSA was involved or assisted with this Assessment, indicate the role performed:	<input checked="" type="checkbox"/> QSA performed testing procedures.
	<input type="checkbox"/> QSA provided other assistance. If selected, describe all role(s) performed:

DocuSigned by:  <small>86E5094442BA437...</small>	
Signature of Lead QSA ↑	Date: 9/20/2024
Lead QSA Name: Matt Goodman	

DocuSigned by:  <small>331E3EF0F8EF46A...</small>	
Signature of Duly Authorized Officer of QSA Company ↑	Date: 9/20/2024
Duly Authorized Officer Name: Brandon Breslin	QSA Company: CompliancePoint, Inc.

Part 3d. PCI SSC Internal Security Assessor (ISA) Involvement

If an ISA(s) was involved or assisted with this Assessment, indicate the role performed:	<input type="checkbox"/> ISA(s) performed testing procedures.
	<input checked="" type="checkbox"/> ISA(s) provided other assistance. If selected, describe all role(s) performed: ISA assisted in collecting evidence provided during the assessment.



Part 4. Action Plan for Non-Compliant Requirements

Only complete Part 4 upon request of the entity to which this AOC will be submitted, and only if the Assessment has Non-Compliant results noted in Section 3.

If asked to complete this section, select the appropriate response for “Compliant to PCI DSS Requirements” for each requirement below. For any “No” responses, include the date the entity expects to be compliant with the requirement and provide a brief description of the actions being taken to meet the requirement.

PCI DSS Requirement	Description of Requirement	Compliant to PCI DSS Requirements (Select One)		Remediation Date and Actions (If “NO” selected for any Requirement)
		YES	NO	
1	Install and maintain network security controls	<input type="checkbox"/>	<input type="checkbox"/>	
2	Apply secure configurations to all system components	<input type="checkbox"/>	<input type="checkbox"/>	
3	Protect stored account data	<input type="checkbox"/>	<input type="checkbox"/>	
4	Protect cardholder data with strong cryptography during transmission over open, public networks	<input type="checkbox"/>	<input type="checkbox"/>	
5	Protect all systems and networks from malicious software	<input type="checkbox"/>	<input type="checkbox"/>	
6	Develop and maintain secure systems and software	<input type="checkbox"/>	<input type="checkbox"/>	
7	Restrict access to system components and cardholder data by business need to know	<input type="checkbox"/>	<input type="checkbox"/>	
8	Identify users and authenticate access to system components	<input type="checkbox"/>	<input type="checkbox"/>	
9	Restrict physical access to cardholder data	<input type="checkbox"/>	<input type="checkbox"/>	
10	Log and monitor all access to system components and cardholder data	<input type="checkbox"/>	<input type="checkbox"/>	
11	Test security systems and networks regularly	<input type="checkbox"/>	<input type="checkbox"/>	
12	Support information security with organizational policies and programs	<input type="checkbox"/>	<input type="checkbox"/>	
Appendix A1	Additional PCI DSS Requirements for Multi-Tenant Service Providers	<input type="checkbox"/>	<input type="checkbox"/>	
Appendix A2	Additional PCI DSS Requirements for Entities using SSL/early TLS for Card-Present POS POI Terminal Connections	<input type="checkbox"/>	<input type="checkbox"/>	

