STATE FARM FIRE AND CASUALTY COMPANY
A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

Po Box 2915
Bloomington IL 61702-2915

DECLARATIONS AMENDED MAR 3 2026

Policy Number	96-BG-0365-0	
Policy Period	**Effective Date**	**Expiration Date**
12 Months	APR 12 2026	APR 12 2027

The policy period begins and ends at 12:01 am standard time at the premises location.

Named Insured

M-20-386D-FC06 F V

MEADOW RANCH CONDO ASSOCIATION
ATTN INTEGRATED MOUNTAIN
ATTN MANAGEMENT
PO BOX 908
GLENWOOD SPGS CO 81602-0908

Agent and Mailing Address
ANDREA GURULE INS AGY INC
PO BOX 2079
BASALT CO 81621-2079

PHONE: (970) 927-1327

Residential Community Association Policy

Automatic Renewal - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: HOMEOWNERS ASSOCIATION
Reason for Declarations: Your policy is amended MAR 3 2026
ADDITIONAL INSURED ADDED
FORM CMP-4543 ADDED

Other items shown are effective
with the policy's 2026 renewal

Endorsement Premium None

Discounts Applied:
Renewal Year
Claim Record

Prepared
MAR 12 2026
CMP-4000

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SECTION I - PROPERTY SCHEDULE

Location Number	Location of Described Premises	Limit of Insurance* Coverage A - Buildings	Limit of Insurance* Coverage B - Business Personal Property
001	51 MEADOW RANCH DR SNOWMASS VLG CO 81615-6217	No Coverage	No Coverage

AUXILIARY STRUCTURES

Location Number	Description	Limit of Insurance* Coverage A - Buildings	Limit of Insurance* Coverage B - Business Personal Property
001A	Garage or Carport	$ 238,000	See Prop Sch

* As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index: 290.5

SECTION I - DEDUCTIBLES

Basic Deductible $2,500

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Special Deductibles:

Money and Securities	$250	Employee Dishonesty	$250
Equipment Breakdown	$2,500		

Other deductibles may apply - refer to policy.

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by "See Schedule." If a coverage does not have a corresponding limit shown below, but has "Included" indicated, please refer to that policy provision for an explanation of that coverage.

COVERAGE	LIMIT OF INSURANCE
Collapse	Included
Damage To Non-Owned Buildings From Theft, Burglary Or Robbery	Coverage B Limit
Debris Removal	25% of covered loss
Equipment Breakdown	Included
Fire Department Service Charge	$5,000
Fire Extinguisher Systems Recharge Expense	$5,000
Glass Expenses	Included
Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis)	10%
Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property)	$100,000
Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings)	$250,000
Ordinance Or Law - Equipment Coverage	Included
Preservation Of Property	30 Days
Water Damage, Other Liquids, Powder Or Molten Material Damage	Included

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SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH COMPLEX

The coverages and corresponding limits shown below apply separately to each complex as described in the policy.

COVERAGE	LIMIT OF INSURANCE
Accounts Receivable	
On Premises	$50,000
Off Premises	$15,000
Arson Reward	$5,000
Forgery Or Alteration	$10,000
Money And Securities (Off Premises)	$5,000
Money And Securities (On Premises)	$10,000
Money Orders And Counterfeit Money	$1,000
Outdoor Property	$5,000
Personal Effects (applies only to those premises provided Coverage B - Business Personal Property)	$2,500
Personal Property Off Premises	$15,000
Pollutant Clean Up And Removal	$10,000
Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	$2,500
Signs	$2,500
Valuable Papers And Records	
On Premises	$10,000
Off Premises	$5,000

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SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - PER POLICY

The coverages and corresponding limits shown below are the most we will pay regardless of the number of described premises shown in these Declarations.

COVERAGE	LIMIT OF INSURANCE
Back-Up of Sewer or Drain	Included
Employee Dishonesty	$25,000
Loss Of Income And Extra Expense	Actual Loss Sustained - 12 Months

SECTION II - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	$5,000,000
Coverage M - Medical Expenses (Any One Person)	$10,000
Damage To Premises Rented To You	$300,000
Directors And Officers Liability	$5,000,000

AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	$10,000,000
General Aggregate	$10,000,000
Directors and Officers Aggregate	$5,000,000

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.

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Residential Community Association Policy for MEADOW RANCH CONDO ASSOCIATION
Policy Number 96-BG-0365-0

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

CMP-4100	Businessowners Coverage Form
CMP-4543	*Al Design Person Org
CMP-4787	*Waiver of Trans Rgt of Recov
CMP-4815	Directors & Officers Liability
CMP-4206.2	Amendatory Endorsement
FE-6999.3	Terrorism Insurance Cov Notice
CMP-4550	Residential Community Assoc
CMP-4746.1	Hired Auto Liability
CMP-4710	Employee Dishonesty
CMP-4508	Money and Securities
CMP-4705.2	Loss of Income & Extra Expnse
FE-3650	Actual Cash Value Endorsement
CMP-4561.5	Policy Endorsement
CMP-4532	Exclusion Cyber Incident
FE-1401	Exclusion Cyber Incident
FD-6007	Inland Marine Attach Dec
	NOTICE: INFORMATION CONCERNING CHANGES IN YOUR POLICY LANGUAGE IS INCLUDED. PLEASE CALL YOUR AGENT IF YOU HAVE ANY QUESTIONS.
	* New Form Attached

SCHEDULE OF ADDITIONAL INTERESTS

Interest Type: Addl Insured-Section II
Endorsement #: CMP4543
Loan Number: N/A

WILLOW CREEK MANAGEMENT
SERVICES INC
100 ELK RUN DR STE 121
BASALT CO 816219241

Interest Type: Addl Insured-Section II
Endorsement #: CMP4787
Loan Number: N/A

WILLOW CREEK MANAGEMENT
SERVICES INC
100 ELK RUN DR STE 121
BASALT CO 816219241

Prepared
MAR 12 2026
CMP-4000

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This policy is issued by the State Farm Fire and Casualty Company.

Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

Michelle Macias
Secretary

President

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STATE FARM FIRE AND CASUALTY COMPANY
A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

Po Box 2915
Bloomington IL 61702-2915

Named Insured

M-20-386D-FC06 F V

MEADOW RANCH CONDO ASSOCIATION
ATTN INTEGRATED MOUNTAIN
ATTN MANAGEMENT
PO BOX 908
GLENWOOD SPGS CO 81602-0908

INLAND MARINE ATTACHING DECLARATIONS

Policy Number	96-BG-0365-0	
Policy Period	**Effective Date**	**Expiration Date**
12 Months	APR 12 2026	APR 12 2027

The policy period begins and ends at 12:01 am standard time at the premises location.

ATTACHING INLAND MARINE

Automatic Renewal - If the **policy period** is shown as **12 months** , this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Annual Policy Premium Included

The above Premium Amount is included in the Policy Premium shown on the Declarations.

Your policy consists of these Declarations, the INLAND MARINE CONDITIONS shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

Forms, Options, and Endorsements

FE-8739	Inland Marine Conditions
FE-8743.1	Inland Marine Computer Prop

See Reverse for Schedule Page with Limits

Prepared
MAR 12 2026
FD-6007

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ATTACHING INLAND MARINE SCHEDULE PAGE

ATTACHING INLAND MARINE

ENDORSEMENT NUMBER	COVERAGE	LIMIT OF INSURANCE	DEDUCTIBLE AMOUNT	ANNUAL PREMIUM
FE-8743.1	Inland Marine Computer Prop	$ 10,000	$ 500	Included
	Loss of Income and Extra Expense	$ 10,000		Included

OTHER LIMITS AND EXCLUSIONS MAY APPLY - REFER TO YOUR POLICY

Prepared
MAR 12 2026
FD-6007

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CMP-4543 ADDITIONAL INSURED — DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:
BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Policy Number: 96-BG-0365-0

Named Insured:

MEADOW RANCH CONDO ASSOCIATION
ATTN INTEGRATED MOUNTAIN
ATTN MANAGEMENT
PO BOX 908
GLENWOOD SPGS CO 81602-0908

Name And Address Of Additional Insured Person Or Organization:

WILLOW CREEK MANAGEMENT
SERVICES INC
100 ELK RUN DR STE 121
BASALT CO 81621-9241

1. **SECTION II — WHO IS AN INSURED** of **SECTION II — LIABILITY** is amended to include, as an additional insured, any person or organization 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:
   a. **Premises And Ongoing Operations**
      Your acts or omissions or the acts or omissions of those acting on your behalf:
      (1) In connection with your premises; or
      (2) In the performance of your ongoing operations; or
   b. **Products-Completed Operations**
      "Your work" performed for that additional insured and included in the "products-completed operations hazard".
2. Any insurance provided to the additional insured shall only apply with respect to a claim made or a "suit" brought for damages for which you are provided coverage.
3. Primary Insurance. The insurance afforded the additional insured shall be primary insurance. Any insurance carried by the additional insured shall be noncontributory with respect to coverage provided by you.

All other policy provisions apply.

CMP-4543

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BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Policy Number: 96-BG-0365-0

Named Insured:

MEADOW RANCH CONDO ASSOCIATION
ATTN INTEGRATED MOUNTAIN
ATTN MANAGEMENT
PO BOX 908
GLENWOOD SPGS CO 81602-0908

Name And Address Of Additional Insured Person Or Organization:

WILLOW CREEK MANAGEMENT
SERVICES INC
100 ELK RUN DR STE 121
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   a. **Premises And Ongoing Operations**
      Your acts or omissions or the acts or omissions of those acting on your behalf:
      (1) In connection with your premises; or
      (2) In the performance of your ongoing operations; or
   b. **Products-Completed Operations**
      "Your work" performed for that additional insured and included in the "products-completed operations hazard".
2. Any insurance provided to the additional insured shall only apply with respect to a claim made or a "suit" brought for damages for which you are provided coverage.
3. Primary Insurance. The insurance afforded the additional insured shall be primary insurance. Any insurance carried by the additional insured shall be noncontributory with respect to coverage provided by you.

All other policy provisions apply.

CMP-4543

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CMP-4787 WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:
BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Policy Number: **96-BG-0365-0**

Named Insured:

MEADOW RANCH CONDO ASSOCIATION
ATTN INTEGRATED MOUNTAIN
ATTN MANAGEMENT
PO BOX 908
GLENWOOD SPGS CO 81602-0908

Name And Address Of Person Or Organization:

WILLOW CREEK MANAGEMENT
SERVICES INC
100 ELK RUN DR STE 121
BASALT CO 81621-9241

The following is added to Paragraph **10.b.** of **SECTION I AND SECTION II — COMMON POLICY CONDITIONS**:

We waive any right of recovery we may have against the person or organization shown in the Schedule because of payments we make for injury or damage arising out of:

a. Your ongoing operations; or

b. "Your work" done under contract with that person or organization and included in the "products-completed operations hazard".

This waiver applies only to the person or organization shown in the Schedule.

All other policy provisions apply.

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SCHEDULE

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ATTN MANAGEMENT
PO BOX 908
GLENWOOD SPGS CO 81602-0908

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100 ELK RUN DR STE 121
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All other policy provisions apply.

CMP-4787

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