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

Po Box 2915
Bloomington IL 61702-2915

DECLARATIONS COVERAGE SUMMARY APR 15 2026

Named Insured

M-20-3D5B-FC06 F V

EAGLE'S RIDGE RANCH AT LAKOTA
CANYON HOMEOWNERS ASSOCIATION
300 HORSESHOE DR
BASALT CO 81621-9104

Policy Number	96-E8-K437-0	
Policy Period	**Effective Date**	**Expiration Date**
12 Months	MAY 31 2026	MAY 31 2027

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

Agent and Mailing Address
JESSE DALTON
436 EAST AVE
RIFLE CO 81650-2336

PHONE: (970) 665-9770

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: Corporation
Requested By: Policyholder

Policy Premium	$	7,140.00
Disaster Mitigation	$	2.00
Total Amount	$	7,169.78

Discounts Applied:
Age of Building
Claim Record

CO FAIR Plan **$27.78**

Prepared
APR 15 2026
CMP-4000

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SECTION I - PROPERTY BLANKET

	Limit of Insurance*
Coverage A - Buildings	$ 1,899,200
Coverage B - Business Personal Property	$ 5,600

Location Number	Location of Described Premises
001	741 CASTLE VALLEY BLVD BLDG 1 NEW CASTLE CO 81647-9425
002	741 CASTLE VALLEY BLVD BLDG 2 NEW CASTLE CO 81647-9425

AUXILIARY STRUCTURES

Location Number	Description
001A	SIDEWALKS

* 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: 301.5

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SECTION I - DEDUCTIBLES

Basic Deductible $5,000

Special Deductibles:

Wind/Hail	1%	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

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Continued on Reverse Side of Page

Ordinance Or Law - Equipment Coverage	Included
Preservation Of Property	30 Days
Water Damage, Other Liquids, Powder Or Molten Material Damage	Included

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	$1,000,000
Coverage M - Medical Expenses (Any One Person)	$5,000
Damage To Premises Rented To You	$300,000

AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	$2,000,000
General Aggregate	$2,000,000

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 EAGLE'S RIDGE RANCH AT LAKOTA
Policy Number 96-E8-K437-0

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-4561.5	Policy Endorsement
CMP-4705.2	Loss of Income & Extra Expnse
CMP-4550	Residential Community Assoc
CMP-4206.2	Amendatory Endorsement
CMP-4710	Employee Dishonesty
CMP-4746.1	Hired Auto Liability
FE-3650	Actual Cash Value Endorsement
CMP-4508	Money and Securities
CMP-4532	Exclusion Cyber Incident
CMP-4829	Guaranteed Replacement Cost
CMP-4849	Windstorm or Hail Deductible
CMP-4769	Addl Condo Prop Not Covered
FE-6999.3	Terrorism Insurance Cov Notice
CMP-4875	Loss Payable
FD-6007	Inland Marine Attach Dec

SCHEDULE OF ADDITIONAL INTERESTS

Interest Type: Mortgagee
Endorsement #: N/A
Loan Number: CF123553

CHURCHILL FUNDING I LLC
ISAOA/ATIMA
PO BOX 3160
RESTON VA 20195-1160

Interest Type: Loss Payee
Endorsement #: CMP4875
Loan Number:

MALO DEVELOPMENT COMPANY
LAKOTA LLC
300 HORSESHOE DR
BASALT CO 816219104

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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.

Secretary

President

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96-E8-K437-0

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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

INLAND MARINE ATTACHING DECLARATIONS

Policy Number	**96-E8-K437-0**	
Policy Period	**Effective Date**	**Expiration Date**
12 Months	MAY 31 2026	MAY 31 2027

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

Named Insured

M-20-3D5B-FC06 F V

EAGLE'S RIDGE RANCH AT LAKOTA
CANYON HOMEOWNERS ASSOCIATION
300 HORSESHOE DR
BASALT CO 81621-9104

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-8743.1	Inland Marine Computer Prop
FE-8739	Inland Marine Conditions
FE-1401	Exclusion Cyber Incident

See Reverse for Schedule Page with Limits

Prepared
APR 15 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

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APR 15 2026
FD-6007

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