State Farm Fire and Casualty Company A Stock Company With Home Offices in Bloomington, Illinois

Po Box 2915 Bloomington IL 61702-2915

Named Insured

9L-20-2866-FC06 F M

RENEWAL DECLARATIONS

Policy Number 96-GU-7228-5

Policy PeriodEffective DateExpiration Date12 MonthsMAY 28 2024MAY 28 2025The policy period begins and ends at 12:01 amstandard time at your mailing address as shown.

THE SUMMIT RESIDENTIAL OWNERS ASSOCIATION INC C/O TOAD PROPERTY MANAGEMENT PO BOX 2776 CRESTED BUTTE CO 81224-2776

Entity: Corporation

COMMERCIAL LIABILITY UMBRELLA POLICY

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

Coverage(s) Coverage L - Business Liability (Each Occurrence) Coverage L - Business Liability (Annual Aggregate) Self-Insured Retention			Limits of Insurance		
		\$ \$	5,000,000 5,000,000		
		\$	10,000		
	Required Underlying Insurance Schedule				
Coverage		Mini	mum Underl ^ı	ying Limits	
Business Liability	Bodily Injury (Per Occurrence) Bodily Injury (Annual Aggregate) Property Damage (Per Occurrence and Annual Aggregate) or	į		\$ 1,000,000 \$ 1,000,000 \$ 100,000	
	Bodily Injury and Property Damage (Per Occurrence) Bodily Injury and Property Damage (Annual Aggregate)			\$ 500,000 \$ 1,000,000	
Employers Non-Owned Auto Liability	Bodily Injury and Property Damage (Each Occurrence) Bodily Injury and Property Damage (Annual Aggregate)			\$ 500,000 \$ 1,000,000	
	or Bodily Injury (Each Person/Each Accident) Property Damage (Each Accident)	\$	500,000 /	\$ 500,000 \$ 100,000	
	or Bodily Injury and Property Damage (Each Accident)			\$ 500,000	

Forms & Endorsements Commercial Umb Coverage Form *Terrorism Insurance Cov Notice Amendatory Endorsement Exclusion - Lead Poisoning Policy Endorsement Amendment of Who Is an Insured	CU-2100 FE-6999.3 CU-2206.2 CU-2339 CU-2474.3 CU-2384	\$ 1,045.00
* New Form Attached Other	limits and exclusions may apply - refer to your	policy ————
CU-2000 Prepared APR 02 2024 0953 2 99 I	ntinued on Reverse KLINGSMITH INS ANE (970) 642-3259	D FIN SVC INC
E © Copyright, State Farr	n Mutual Automobile Insurance Company, 2008.	555-930.2 (o1f2941c) 11-20-2008

Required Underlying Insurance Schedule								
Coverage	Minimum Underlying Limits							
Hired Auto Liability	Bodily Injury and Property Damage (Each Occurrence) Bodily Injury and Property Damage (Annual Aggregate) or		\$ \$	500,000 1,000,000				
	Bodily Injury (Each Person/Each Accident) Property Damage (Each Accident) or	\$	500,000 / \$ \$	500,000 100,000				
	Bodily Injury and Property Damage (Each Accident)		\$	500,000				

Your policy consists of these Declarations, the Commercial Liability Umbrella Coverage Form, and any other forms and endorsements that apply.

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.

Lynne M. Youxel Secretary

Michael Tipion President

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In accordance with the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2019, this disclosure is part of your policy.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Coverage for acts of terrorism is not excluded from your policy. However your policy does contain other exclusions which may be applicable, such as an exclusion for nuclear hazard. You are hereby notified that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury-in consultation with the Secretary of Homeland Security, and the Attorney General of the United States-to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under this policy, any covered losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended, Under the formula, the United States Government generally reimburses 80% beginning on January 1.

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2020 of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

There is no separate premium charged to cover insured losses caused by terrorism. Your insurance policy establishes the coverage that exists for insured losses. This notice does not expand coverage beyond that described in your policy.

THIS IS YOUR NOTIFICATION THAT UNDER THE TERROR-ISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UN-DER YOUR POLICY MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT AND MAY BE SUB-JECT TO A \$100 BILLION CAP THAT MAY REDUCE YOUR COVERAGE.

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