AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.
MADISON, WISCONSIN 53783-0001
NON-PROFIT DIRECTORS AND OFFICERS LIABILITY POLICY
DECLARATIONS

POLICY NUMBER	**CUSTOMER BILLING ACCOUNT**
05XR900802	017-762-222 77

NOTICE   THIS IS A CLAIMS-MADE POLICY. PLEASE READ THE ENTIRE POLICY CAREFULLY.

NAMED   THE CENTENNIAL OWNERS ASSOCIATION
ORGANIZATION

MAILING   PO BOX 12394
ADDRESS   ASPEN, CO 81612-9207

POLICY PERIOD   FROM   12-07-2020   TO   12-07-2021
                      12:01 A.M. Standard Time at your mailing address shown above.

FORM OF BUSINESS   CORPORATION
BUSINESS DESCRIPTION   Condominium Association - Residential

LIMIT OF LIABILITY
     Aggregate for Coverage **A, B** and **C, including** "claims expenses" $2,000,000

RETENTION AMOUNTS
     Coverage **A** (each claim) $1000
     Coverage **B** (each claim) $1000
     Coverage **C** (each claim) $1000

RETROACTIVE DATE
THIS INSURANCE DOES NOT APPLY TO A "CLAIM" ARISING OUT OF A "WRONGFUL ACT" WHICH OCCURS BEFORE THE RETROACTIVE DATE, IF ANY, SHOWN BELOW.
     RETROACTIVE DATE (Coverages **A** and **B**):   12-07-2011
     RETROACTIVE DATE (Coverages **C**):   12-07-2011

PENDING OR PRIOR LITIGATION DATE
     PENDING OR PRIOR DATE (Coverages **A** and **B**):   12-07-2011
     PENDING OR PRIOR DATE (Coverages **C**):   12-07-2011

EXTENDED REPORTING PERIOD
     ADDITIONAL PERIOD (Number of Months)   None unless added by endorsement to the policy.

TOTAL DIRECTORS AND OFFICERS PREMIUM $1,114.00

TOTAL ADVANCE PREMIUM $1,114.00

Forms and endorsements applying to and made part of this policy at time of issue:

IL 09 85 01 15	IL 75 26 12 05	NP 00 00 08 18	NP 00 01 12 05
NP 00 03 10 06	NP 02 28 11 13	NP 21 10 04 03	NP 21 12 04 03
NP 21 15 01 15	NP 28 02 04 03	NP 28 05 04 03	NP 71 02 12 05
NP 71 03 12 05	NP 71 04 12 05	NP 71 07 12 05	

AUTHORIZED   *William B. Westrate*   *R C W*   COUNTERSIGNED
REPRESENTATIVE   President   Secretary   LICENSED RESIDENT AGENT

AGENT 140-307   **PHONE**   PAGE   01
JAMES LORD   1-970-625-4742   BRANCH   UNATRE RENW
827 RAILROAD AVE   ENTRY DATE   09-10-2020
RIFLE, CO 81650-3511

NP AF 01 08 18   INSURED   Stock No.26145