ADAMS CROSSING METROPOLITAN DISTRICT NOS. 1-8

2023 CONSOLIDATED ANNUAL REPORT

Pursuant to §32-1-207(3)(c) and the Consolidated Service Plan for Adams Crossing Metropolitan District Nos. 1-8 (collectively the "**Districts**"), the Districts are required to provide an annual report to the City of Brighton with regard to the following matters:

For the year ending December 31, 2023, the Districts make the following report:

<u>§32-1-207(3) Statutory Requirements</u>

1. Boundary changes made.

There were no changes or proposed changes to the boundaries of the Districts during the reporting year.

2. Intergovernmental Agreements entered into or terminated with other governmental entities.

The Districts did not enter into or terminate any Intergovernmental Agreements with other governmental entities during the reporting year.

3. Access information to obtain a copy of rules and regulations adopted by the board.

The Districts have not adopted any rules and regulations as of December 31, 2023.

4. A summary of litigation involving public improvements owned by the Districts.

To our actual knowledge, based on review of the court records in Adams County, Colorado, and the Public Access to Court Electronic Records (PACER), there is no litigation involving the Districts' public improvements as of December 31, 2023.

5. The status of the construction of public improvements by the Districts.

The Districts did not undertake the construction of any Public Improvements as of December 31 of the prior year.

6. A list of facilities or improvements constructed by the Districts that were conveyed or dedicated to the county or municipality.

The Districts did not construct any facilities or improvements as of December 31 of the prior year.

7. The final assessed valuation of the Districts as of December 31st of the reporting year.

District No. 1 - \$6,230District No. 5 - \$6,230District No. 2 - \$354,320District No. 6 - \$6,230District No. 3 - \$6,230District No. 7 - \$6,230District No. 4 - \$2,720District No. 8 - \$6,230

The assessed valuation of each District is as follows:

8. A copy of the current year's budget.

Copies of the 2023 Budgets are attached hereto as Exhibit A

9. A copy of the audited financial statements, if required by the "Colorado Local Government Audit Law", part 6 of article 1 of title 29, or the application for exemption from audit, as applicable.

The 2023 Audit Exemption Applications for each District are attached hereto as Exhibit B.

10. Notice of any uncured defaults existing for more than ninety (90) days under any debt instrument of the Districts.

The Districts are not aware of any uncured events of default by the Districts existing for more than ninety (90) days.

11. Any inability of the Districts to pay their obligations as they come due under any obligation which continues beyond a ninety (90) day period.

The Districts are not aware of any inability to pay their obligations as they become due, in accordance with the terms of such obligations, which continue beyond aninety (90) day period. The Districts are entirely funded by developer advances.

Service Plan Requirements

1. Construction Projects (inducting architectural plans, bidding documents, and construction contracts).

The Districts did not undertake the construction of any Public Improvements as of December 31 of the prior year.

2. Debt issuance (including ballot questions, bond, or other indebtedness resolutions. trust indentures and similar financing documents. letters of credit or other guaranty agreements for same, and official statements or offering circulars).

The Districts have not issued any debt as of the end of the reporting period.

3. Intergovernmental Agreements.

The Districts did not enter into or terminate any Intergovernmental Agreements with other governmental entities during the reporting year.

4. District Litigation.

To our actual knowledge, based on review of the court records in Adams County, Colorado, and the Public Access to Court Electronic Records (PACER), there is no litigation involving the Districts' public improvements as of December 31, 2023.

5. Assessed Valuation.

The assessed valuation of each District as provided by the Adams County Assessor are as follows:

| District No. 1 - \$6,230 | District No. 5 - \$6,230 |
|----------------------------|--------------------------|
| District No. 2 - \$354,320 | District No. 6 - \$6,230 |
| District No. 3 - \$6,230 | District No. 7 - \$6,230 |
| District No. 4 - \$2,720 | District No. 8 - \$6,230 |

6. Material Citizen Complaints and Resolutions.

The Districts have not received any material citizen complaints during the reporting period.

7. Updated District boundary maps reflecting inclusions and exclusions and prepared according to the standards of the Division of Local Government.

Current boundary maps for each District are attached to this report as Exhibit C.

8. District Contact Information.

White Bear Ankele Tanaka & Waldron, Attorneys at Law Attn: William P. Ankele, Jr., Esq. and Zachary P. White, Esq. 2154 E. Commons Avenue, Suite 2000 Centennial, CO 80122 (303) 858-1800 wpankele@wbapc.com; zwhite@wbapc.com

9. District Audits

The 2023 Audit Exemption Applications for each District are attached hereto as Exhibit B.

10. District Budgets

Copies of the 2024 Budgets are attached hereto as **Exhibit A**

EXHIBIT A 2024 Budgets

ADAMS CROSSING METROPOLITAN DISTRICT NO. 1 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 1.

The Adams Crossing Metropolitan District No. 1 has adopted two funds, a General Fund to provide for the payment of general operating expenditures; and a Capital Projects Fund to provide for the estimated infrastructure costs that are to be built for the benefit of the district.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

The primary source of revenue for the district in 2024 will be developer advances. The district does not intend to impose a mill levy on property within the district for 2024.

Adams Crossing Metropolitan District No. 1 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---------------------------------|-----------------------|----------------------------------|----------------------------|-------------------|----------------------------------|
| Beginning fund balance | <u>\$</u> - | <u>\$ -</u> | <u>\$ 1,500</u> | <u>\$ -</u> | <u>\$ -</u> |
| Revenues: Developer advances | 31,220 | 50,000 | 17,328 | 29,872 | 50,000 |
| Miscellaneous Income | 495 | <u> </u> | | <u> </u> | |
| Total revenues | 31,715 | 50,000 | 17,328 | 29,872 | 50,000 |
| Total funds available | 31,715 | 50,000 | 18,828 | 29,872 | 50,000 |
| Expenditures: | | | | | |
| Accounting | 5,879 | 10,000 | 4,262 | 8,524 | 10,000 |
| Audit | - | 4,000 | - | - | 4,000 |
| Election expenses | - | 3,500 | - | - | - |
| Legal | 19,535 | 20,000 | 8,206 | 16,412 | 20,000 |
| Insurance | 5,317 | 5,500 | 4,436 | 4,436 | 5,500 |
| Miscellaneous | 984 | 500 | 300 | 500 | 500 |
| Contingency | - | 5,195 | - | - | 8,800 |
| Emergency reserve (3%) | | 1,305 | | | 1,200 |
| Total expenditures | 31,715 | 50,000 | 17,204 | 29,872 | 50,000 |
| Ending fund balance | <u>\$</u> | <u>\$ -</u> | <u>\$ 1,624</u> | <u>\$ -</u> | <u>\$ -</u> |
| Assessed Valuation | | \$ 2,720 | | | \$ 6,230 |
| TIF | | 30 | | | 69 |
| Net Assessed Valuation | | <u>\$2,690</u> | | | <u>\$ 6,161</u> |
| Mill Levy | | | | | |

Adams Crossing Metropolitan District No. 1 Adopted Budget Capital Projects Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---------------------------------|-----------------------|----------------------------------|----------------------------|-------------------|----------------------------------|
| Beginning fund balance | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - | <u>\$</u> | <u>\$ -</u> |
| Revenues: Developer advances | | 10,240,822 | <u> </u> | 10,240,822 | 10,240,822 |
| Total revenues | | 10,240,822 | | 10,240,822 | 10,240,822 |
| Total funds available | | 10,240,822 | | 10,240,822 | 10,240,822 |
| Expenditures: | | | | | |
| Engineering | - | 10,000 | - | 10,000 | 10,000 |
| Accounting | - | 10,000 | - | 10,000 | 10,000 |
| Legal | - | 20,000 | - | 20,000 | 20,000 |
| Reimbursement obligation | - | 200,822 | - | 200,822 | 200,822 |
| Capital expenditures | | 10,000,000 | | 10,000,000 | 10,000,000 |
| Total expenditures | | 10,240,822 | <u> </u> | 10,240,822 | 10,240,822 |
| Ending fund balance | <u>\$</u> - | <u>\$</u> - | <u>\$</u> - | <u>\$</u> - | <u>\$</u> - |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 2 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 2.

The Adams Crossing Metropolitan District No. 2 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 2 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---|-----------------------|---------------------------------------|----------------------------|-------------------|-----------------------------------|
| Beginning fund balance | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - | <u>\$ -</u> |
| Revenues: Developer advances | | <u> </u> | | <u> </u> | <u> </u> |
| Total revenues | | | | | <u> </u> |
| Total funds available | | | | | <u> </u> |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Contingency Emergency reserve (3%) | | | | | |
| Total expenditures | | | | | |
| Ending fund balance | <u>\$</u> - | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 221,650 <u>30</u> \$ 221,620 | | | \$ 354,320 3,914 \$ 350,406 |
| Mill Levy | | | | | |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 3 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 3.

The Adams Crossing Metropolitan District No. 3 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 3 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|--|--|--|--|--|--|
| Beginning fund balance | <u>\$</u> | <u>\$</u> - | <u>\$</u> - | <u>\$ -</u> | <u>\$</u> |
| Revenues: Developer advances | | | | | |
| Total revenues | | <u> </u> | | | |
| Total funds available | | <u> </u> | <u> </u> | <u> </u> | <u>-</u> |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Engineering Treasurer fees Contingency Emergency reserve (3%) | - - - - - - - - - - - - - - | | - - - - - - - - - - - - | - - - - - - - - - - - - - - | |
| Ending fund balance | <u>\$</u> | <u>\$ -</u> | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 2,720 <u>30</u> <u>\$ 2,690</u> | | | \$ 6,230 <u>69</u> <u>\$ 6,161</u> |
| Mill Levy | | | | | |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 4 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 4.

The Adams Crossing Metropolitan District No. 4 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 4 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---|-----------------------|-----------------------------------|----------------------------|----------------------------|----------------------------------|
| Beginning fund balance | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> |
| Revenues: Developer advances | | | <u> </u> | | |
| Total revenues | <u> </u> | | | | |
| Total funds available | | | | | |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Contingency Emergency reserve (3%) | - - - - - | - - - - - - | - - - - - - | - - - - - - | - - - - - - |
| Total expenditures | | | | | |
| Ending fund balance | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 2,720 <u>30</u> \$ 2,690 | | | \$ 6,230 69 \$ 6,161 |
| Mill Levy | | | | | |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 5 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 5.

The Adams Crossing Metropolitan District No. 5 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 5 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---|----------------------------|--|----------------------------|-------------------|-----------------------------------|
| Beginning fund balance | <u>\$</u> - | <u>\$</u> - | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> |
| Revenues: Developer advances | | <u>-</u> | | | <u> </u> |
| Total revenues | <u> </u> | <u> </u> | <u> </u> | | <u> </u> |
| Total funds available | | | | | <u> </u> |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Contingency Emergency reserve (3%) | - - - - - - | | | | - - - - - |
| Total expenditures | | | | | <u>-</u> |
| Ending fund balance | <u>\$ -</u> | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 2,720 <u>30</u> <u>\$ 2,690</u> | | | \$ 6,230 69 <u>\$ 6,161</u> |
| Mill Levy | | | | | |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 6 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 6.

The Adams Crossing Metropolitan District No. 6 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 6 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---|----------------------------|-----------------------------------|----------------------------|----------------------------|-----------------------------------|
| Beginning fund balance | <u>\$</u> - | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - |
| Revenues: Developer advances | <u>-</u> | <u> </u> | <u> </u> | | |
| Total revenues | | | | | |
| Total funds available | | | | | |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Contingency Emergency reserve (3%) | - - - - - - | - - - - - - | - - - - - - | - - - - - - | - - - - - - |
| Total expenditures | | | | | |
| Ending fund balance | <u>\$ -</u> | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 2,720 <u>30</u> \$ 2,690 | | | \$ 6,230 69 <u>\$ 6,161</u> |
| Mill Levy | | | | | |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 7 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 7.

The Adams Crossing Metropolitan District No. 7 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 7 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---|----------------------------|--|----------------------------|----------------------------|-----------------------------------|
| Beginning fund balance | <u>\$</u> - | <u>\$</u> - | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> |
| Revenues: Developer advances | | | | | <u>-</u> |
| Total revenues | | | | | |
| Total funds available | | | | | |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Contingency Emergency reserve (3%) | - - - - - - | - - - - - - | - - - - - | - - - - - - | - - - - - - |
| Total expenditures | | | | | |
| Ending fund balance | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 2,720 <u>30</u> <u>\$ 2,690</u> | | | \$ 6,230 69 <u>\$ 6,161</u> |
| Mill Levy | | | | | |

ADAMS CROSSING METROPOLITAN DISTRICT NO. 8 2024 BUDGET MESSAGE

Attached please find a copy of the adopted 2024 budget for Adams Crossing Metropolitan District No. 8.

The Adams Crossing Metropolitan District No. 8 has adopted one fund, a General Fund to provide for the payment of general operating expenditures, however the district does not anticipate having any operating expenditures in 2024.

The district's accountants have utilized the modified accrual basis of accounting, and the budget has been adopted after proper postings, publications, and public hearing.

Adams Crossing Metropolitan District No. 8 Adopted Budget General Fund For the Year ended December 31, 2024

| | Actual <u>2022</u> | Adopted Budget <u>2023</u> | Actual <u>6/30/2023</u> | Estimated 2023 | Adopted Budget <u>2024</u> |
|---|-----------------------|-----------------------------------|----------------------------|-------------------|-----------------------------------|
| Beginning fund balance | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$</u> - |
| Revenues: Developer advances | <u> </u> | | | <u> </u> | |
| Total revenues | | | <u> </u> | <u> </u> | |
| Total funds available | | | | | <u> </u> |
| Expenditures: Accounting / audit Election Expense Legal Insurance Miscellaneous Contingency Emergency reserve (3%) | - - - - - | | - - - - - | | - - - - - - |
| Total expenditures | | | | | |
| Ending fund balance | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ -</u> |
| Assessed Valuation TIF Net Assessed Valuation | | \$ 2,720 <u>30</u> \$ 2,690 | | | \$ 6,230 69 <u>\$ 6,161</u> |
| Mill Levy | | | | | |

EXHIBIT B District Nos. 1-8 2023 Exemption Applications

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No. 4 | For the Year Ended |
|--------------------|--|----------------------|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended |
| | Centennial, CO 80112 | |
| CONTACT PERSON | William P. Ankele, Jr. | |
| PHONE | 303-858-1800 | |
| EMAIL | wpankele@wbapc.com | |
| | PART 1 - CERTIFICATION OF PREPARER | |

 Diane Wheeler
 Diane Wheeler

 TITLE
 District Accountant

 FIRM NAME (if applicable)
 Simmons & Wheeler, P.C.

 ADDRESS
 304 Inverness Way South, Suite 490, Englewood, CO 80112

| PHONE | 303-689-0833 | | | | |
|---|--------------|--|---------------|--|--|
| PREPARER (SIGNATURE REQUIRED) | | | DATE PREPARED | | |
| Qione K Uhula- | | | 3/26/2024 | | |
| Please indicate whether the following financial information is recorded | | GOVERNMENTAL (MODIFIED ACCRUAL BASIS) | | PROPRIETARY (CASH OR BUDGETARY BASIS) | |
| using Governmental or Proprietary fund types | \checkmark | | | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | | De | scription | Round to nearest Dollar | Please use this |
|-------------------|---------------------------|----------------|--|-------------------------|------------------|
| 2-1 | Taxes: Pro | operty | (report mills levied in Question 10-6) | \$ - | space to provide |
| 2-2 | Sp | ecific owners | ship | \$ - | any necessary |
| 2-3 | Sa | les and use | | \$ - | explanations |
| 2-4 | Otl | her (specify): | | \$ - | |
| 2-5 | Licenses and permits | | | \$ - | |
| 2-6 | Intergovernmental: | | Grants | \$ - | |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ - | |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ - | |
| 2-9 | | | Other (specify): | \$ - | |
| 2-10 | Charges for services | | | \$ - | |
| 2-11 | Fines and forfeits | | | \$ - | |
| 2-12 | Special assessments | | | \$ - | |
| 2-13 | Investment income | | | \$ - | |
| 2-14 | Charges for utility servi | ces | | \$ - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ - | |
| 2-16 | Lease proceeds | | | \$ - | |
| 2-17 | Developer Advances re- | ceived | (should agree with line 4-4) | \$ - | |
| 2-18 | Proceeds from sale of c | capital assets | 6 | \$ - | |
| 2-19 | Fire and police pension | 1 | | \$ - | |
| 2-20 | Donations | | | \$ - | |
| 2-21 | Other (specify): | | | \$ - | |
| 2 - 22 | | | | \$ - | |
| 2-23 | | | | \$ - | |
| 2-24 | | (add lin | es 2-1 through 2-23) TOTAL REVENUE | \$ - | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | Round to nearest Dollar | Please use this |
|---------|--|-------------------------------------|------------------|
| 3-1 | Administrative | - \$ | space to provide |
| 3-2 | Salaries | \$ - | any necessary |
| 3-3 | Payroll taxes | \$ - | explanations |
| 3-4 | Contract services | \$ - | - |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ - | |
| 3-7 | Accounting and legal fees | \$ - | |
| 3-8 | Repair and maintenance | \$ - | |
| 3-9 | Supplies | \$ - | 1 |
| 3-10 | Utilities and telephone | \$ - | 1 |
| 3-11 | Fire/Police | \$ - | 1 |
| 3-12 | Streets and highways | \$ - |] |
| 3-13 | Public health | \$ - |] |
| 3-14 | Capital outlay | \$ - | 1 |
| 3-15 | Utility operations | - \$ |] |
| 3-16 | Culture and recreation | \$ - |] |
| 3-17 | Debt service principal (should agree with Part 4 | \$ - |] |
| 3-18 | Debt service interest | \$ - | 1 |
| 3-19 | Repayment of Developer Advance Principal (should agree with line 4-4 | \$ - | 1 |
| 3-20 | Repayment of Developer Advance Interest | \$ - |] |
| 3-21 | Contribution to pension plan (should agree to line 7-2 | \$ - |] |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2 | \$ - |] |
| 3-23 | Other (specify): | |] |
| 3-24 | | \$ - |] |
| 3-25 | | - \$ |] |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | - \$ | |
| f TOTAL | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER that | n \$100,000 - <u>STOP</u> . You may | not use this |

form. Please use the "Application for Exemption from Audit - LONG FORM".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUED |), A | ND RI | ETIR | RED | | |
|------------|---|-----------|---------------|--------|-------------|------------|------------------|----------|----|
| | Please answer the following questions by marking the | appropr | iate boxes. | Č. | | | Yes | No | |
| 4-1 | Does the entity have outstanding debt? | | | | | (| | Ø | |
| | If Yes, please attach a copy of the entity's Debt Repayment | | | | | 1 | 12 | | |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explanation | ain belo | W: | | | 1 | | 2 | |
| | N/A | | | | | | | | |
| | | | | | | | | 1.000 | |
| 4-3 | Is the entity current in its debt service payments? If no, MUS | ST expla | ain below: | | | . 4 | | 2 | |
| | N/A | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | | | | 2122 - | 10 m | - | Cookers. | |
| | (please only include principal amounts)(enter all amount as positive | | anding at | ไรรเ | led during | 1200.08000 | id during | Outstand | |
| | numbers) | end of | prior year* | | year | 100.00 | year | year-e | nd |
| | General obligation bonds | \$ | - | \$ | | s | | s | - |
| | Revenue bonds | \$ | - | \$ | | \$ | - | S | - |
| | Notes/Loans | \$ | - | \$ | - | \$ | 1 | S | - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | - | \$ | - | \$ | 121 | S | - |
| | Developer Advances | \$ | - | \$ | - | \$ | - | S | - |
| | Other (specify): | \$ | - | \$ | | \$ | ~ | S | - |
| | TOTAL | \$ | - | \$ | | \$ | | S | - |
| **Subscrip | otion Based Information Technology Arrangements | *Must | agree to prio | r year | end balance | 1 | | | |
| | Please answer the following questions by marking the appropriate boxe | es. | | | | | Yes | Ne | |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | | | | |
| If yes: | | \$ | | | 00.000.00 | 1 | | | |
| | Date the debt was authorized: | | 5/4/2 | 010 | | | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 2 8 | | 12 | |
| If yes: | | \$ | | | - | | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | still res | ponsible | for? | | | | 1 | |
| If yes: | What is the amount outstanding? | \$ | | | - | | 155 | 123 | |
| 4-8 | Does the entity have any lease agreements? | | | | | | | 2 | |
| If yes: | What is being leased? What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | | | | |
| | Is the lease subject to annual appropriation? | | | | | 1 | | 121 | |
| | What are the annual lease payments? | \$ | | | | T | head | | |
| | Part 4 - Please use this space to provide any explanations/co | | s or attack | 1 ser | arate doc | umant | ation if a | beheal | |
| | | | | | | all really | and a start of a | o super | |

| | PART 5 - CASH AND INVESTME | NTS | | |
|----------|---|-----|--------|--------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Total |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ - | |
| 5-2 | Certificates of deposit | | \$ - | 1 |
| | Total Cash Deposits | | | \$ |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | A-510- |
| | | | 5 - | 1 |
| 5-3 | | | \$ - | |
| 5-0 | | | \$ - | |
| | | | \$ - | 1.0 |
| | Total Investments | _ | | \$ |
| | Total Cash and Investments | | | \$ - |
| | Please answer the following questions by marking in the appropriate boxes | Yes | No | NIA |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | 2 |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | | 2 |
| lf no, M | UST use this space to provide any explanations: | | | |

The District has no bank accounts at this time.

| | PART 6 - CAPITAL AND RIG | HT-TO-L | ISE ASSE | TS | |
|-----|--|---------------|----------------|--------------------|----------|
| | Please answer the following questions by marking in the appropriate boxe | s. | | Yes | No |
| 6-1 | Does the entity have capital assets? | | | | |
| 6-2 | Has the entity performed an annual inventory of capital assets 29-1-506, C.R.S.,? If no, MUST explain: | in accordance | with Section | | |
| | N/A | | | | |
| 6-3 | Complete the following conital & right to use access table: | Balance - | Addition (Must | Contraction of the | Veur-End |

| | | ear* | 1. A A A A A A A A A A A A A A A A A A A | art 3) | 37.0 | 122228 | Balant | ce |
|---|----|------|--|--------|------|--------|--------|----|
| Land | \$ | - | \$ | | \$ | ×. | S | - |
| Buildings | \$ | - | \$ | 14 | \$ | - ¥ | S | - |
| Machinery and equipment | \$ | - | \$ | | \$ | | S | - |
| Furniture and fixtures | \$ | - | \$ | | 5 | ÷. | S | - |
| Infrastructure | \$ | - | \$ | | \$ | - | 5 | - |
| Construction In Progress (CIP) | \$ | - | \$ | | \$ | | 5 | - |
| Leased & SBITA Right-to-Use Assets | \$ | - | \$ | | \$ | | S | - |
| Other (explain): | \$ | - | \$ | | \$ | | S | - |
| Accumulated Depreciation/Amortization | ¢ | | ¢ | | | | | |
| (Please enter a negative, or credit, balance) | φ | - | \$ | | 9 | | S | - |
| TOTAL | \$ | - | \$ | 27 | S | - | S | - |

*must tie to prior year ending belance

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | PART 7 - PENSION INFORMA | TIC | N | 1.0 | |
|--|---|-----|---|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | |
| 7-2 Does the entity have a volunteer firefighters' pension plan? | | | | | |
| If yes: | | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | - | | |
| | State contribution amount: | \$ | - | | |
| | Other (gifts, donations, etc.): | \$ | - | | |
| | TOTAL | \$ | | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |
| | Part 7 Diagon upo this analog to provide any explanation | | and the second se | | |

Part 7 - Please use this space to provide any explanations or comments:

| | PART 8 - BUDGET INFORMAT | ION | | |
|-----|---|------|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes. | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | | D | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$ - |
| Capital Project Fund | \$ - |
| | |
| | |

| | PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB | 0R) | |
|-------|--|----------------|----|
| | Please answer the following question by marking in the appropriate box | Yes | No |
|)-1 | Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 per emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| o, Ml | JST explain: | | |
| | | | |
| | PART 10 - GENERAL INFORMATION | | |
| | Please answer the following questions by marking in the appropriate boxes. | Yes | No |
| 0-1 | Is this application for a newly formed governmental entity? | | 2 |
| ves: | Date of formation: | | |
| 0-2 | Has the entity changed its name in the past or current year? | D | 2 |
| | | | |
| | | | |
| yes: | Please list the NEW name & PRIOR name: | | |
| | | | - |
| 0-3 | Is the entity a metropolitan district? Please indicate what services the entity provides: | Ð | |
| | Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation | | |
| 0-4 | Does the entity have an agreement with another government to provide services? | 17 | 12 |
| yes: | List the name of the other governmental entity and the services provided: | - | |
| | | 1.1 | 28 |
| 0-5 | Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | 12 |
| yes: | Date Filed: | | |
| 0-6 | Does the entity have a certified Mill Levy? | | 1 |
| /es: | | | |
| | Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): | | |
| | Bond Redemption mills | | |
| | General/Other mills | | |
| | Total mills | | |
| | | No | НA |
| 0-7 | NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required | D | |
| u=/ | under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | | |
| | | | |
| | | | |
| | Please use this space to provide any additional explanations or comments not previou | usly included: | |

| | PART 11 - GOVERNING BODY APPROVAL | | |
|------|--|----------|----|
| | Please answer the following question by marking in the appropriate box | YES | NO |
| 12_1 | If you plan to submit this form electronically, have you read the new Electronic Signature | v | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| Print the i | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|---|
| Board Member 1 | Print Board Member's Name Lynette Vernon | ILynette Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Board Member | Print Board Member's Name Paul Vernon | My term Expires: <u>May 2027</u> I <u>Paul Vernon</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. |
| 2 | | Signed <u>Parts Jem</u> Date: Mar 27, 2024 My term Expires: <u>May 2025</u> |
| Board Member 3 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

| APPLICATION | FOR EXEMPTIO | N FROM AUDIT |
|--------------------|--------------|--------------|
| | | |

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolirtan Distri | ct 2 | | For the Year Ended | | |
|------------------------------------|---|--------------------------|------------------|--|--|--|
| ADDRESS | c/o White Bear Ankele Tanaka & Wal | dron | | 12/31/23 | | |
| | 2154 E. Commons Avenue, Suite 200 | 0 | | or fiscal year ended: | | |
| | Centennial, CO 80112 | | | | | |
| CONTACT PERSON | William P. Ankele, Jr. | | | 1 | | |
| PHONE | 303-858-1800 | | |] | | |
| EMAIL | wpankele@wbapc.com | | | | | |
| | PART 1 - CERTIFICATIC | N OF PRE | EPARER | | | |
| I certify that I am skilled in gov | vernmental accounting and that the inform | ation in the applic | cation is comple | ete and accurate, to the best of | | |
| my knowledge. | 1997 - C. | | | | | |
| NAME: | Diane Wheeler | | | | | |
| TITLE | District Accountant | | | | | |
| FIRM NAME (if applicable) | Simmons & Wheeler, P.C. | | | | | |
| ADDRESS | 304 Inverness Way South, Suite 490, E | nglewood, CO 80 | 0112 | 1 | | |
| PHONE | 303-689-0833 | | | | | |
| PREP | ARER (SIGNATURE REQUIRED) | | D | ATE PREPARED | | |
| Qion K Wula | | | | 3/26/2024 | | |
| | owing financial information is recorded | GOVERNM (MODIFIED ACC | | PROPRIETARY (CASH OR BUDGETARY BASIS) | | |
| using Governmental or Propriet | ary fund types | | | | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | Description | | Round to nearest Dollar | Please use this |
|-------|------------------------------|--|-------------------------|------------------|
| 2-1 | Taxes: Propert | (report mills levied in Question 10-6) | \$ - | space to provide |
| 2-2 | Specifi | c ownership | \$ | any necessary |
| 2-3 | Sales a | nd use | \$ | explanations |
| 2-4 | Other (| specify): | \$ | |
| 2-5 | Licenses and permits | | \$ - | |
| 2-6 | Intergovernmental: | Grants | \$ - | |
| 2-7 | | Conservation Trust Funds (Lottery) | \$ - | |
| 2-8 | | Highway Users Tax Funds (HUTF) | \$ - | |
| 2-9 | | Other (specify): | \$ | |
| 2-10 | Charges for services | | \$ | |
| 2-11 | Fines and forfeits | | \$ - | |
| 2-12 | Special assessments | | \$ - | |
| 2-13 | Investment income | | \$ - | - |
| 2-14 | Charges for utility services | | \$ | |
| 2-15 | Debt proceeds | (should agree with line 4-4, column 2) | \$ | |
| 2-16 | Lease proceeds | | \$ - | |
| 2-17 | Developer Advances receive | ed (should agree with line 4-4) | \$ | |
| 2-18 | Proceeds from sale of capit | al assets | \$ | |
| 2-19 | Fire and police pension | | \$ - | |
| 2-20 | Donations | | \$ | |
| 2-21 | Other (specify): | | \$ - | |
| 2-22 | | | \$ | |
| 2-23 | | | \$ | |
| 2-24 | | (add lines 2-1 through 2-23) TOTAL REVENUE | 11 | |
| _ | | | | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | | I ound to nearest Dollar | Please use this |
|-------|--|----------------|----------------------------------|------------------|
| 3-1 | Administrative | | \$ | space to provide |
| 3-2 | Salaries | | \$ | any necessary |
| 3-3 | Payroll taxes | | \$ - | explanations |
| 3-4 | Contract services | | \$ - | |
| 3-5 | Employee benefits | | \$ | |
| 3-6 | Insurance | | \$ - | |
| 3-7 | Accounting and legal fees | | \$ - | |
| 3-8 | Repair and maintenance | | \$ - | |
| 3-9 | Supplies | | \$ • | |
| 3-10 | Utilities and telephone | | \$ - | |
| 3-11 | Fire/Police | | \$ | |
| 3-12 | Streets and highways | | \$ - | 2 |
| 3-13 | Public health | | \$ | |
| 3-14 | Capital outlay | | \$ - | |
| 3-15 | Utility operations | | \$ | |
| 3-16 | Culture and recreation | | \$ | |
| 3-17 | Debt service principal (should agree | | \$ | |
| 3-18 | Debt service interest | 1 | \$ | |
| 3-19 | Repayment of Developer Advance Principal (should agree w | | | |
| 3-20 | Repayment of Developer Advance Interest | L | \$ | 10 |
| 3-21 | Contribution to pension plan (should agree | e to line 7-2) | \$ | 1.0 |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree | e to line 7-2) | \$ | |
| 3-23 | Other (specify): | 1 | | 10 |
| 3-24 | | 1 | \$ | |
| 3-25 | | | \$ - | |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/E | (PENSES | \$ - | |
| | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREA ase use the "Application for Exemption from Audit - <u>LONG FORM".</u> | ATER than | \$100,000 - <u>STOP.</u> You may | not use this |

| _ | PART 4 - DEBT OUTSTANDIN | G, IS | SUED |), A | | ETIR | ED | | |
|-----------------------|---|---|-------------------------|--------|--------------|-------|--------------------|-----------------------|---------------------|
| | Please answer the following questions by marking the | e appropria | ate boxes. | | | | Yes | | No |
| 4-1 | Does the entity have outstanding debt? | Cabadul | _ | | | | | L | - |
| 4-2 | If Yes, please attach a copy of the entity's Debt Repayment Is the debt repayment schedule attached? If no, MUST expla | | | | | Г | 7 | F | 2 |
| 7-2 | N/A | | v | | | ' | | | |
| | | | | | | | | | |
| 4-3 | Is the entity current in its debt service payments? If no. MUS | ST explai | in below: | | | | | ſ | 4 |
| | N/A | 1.99 | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: (please only include principal amounts)(ester all amount as positive numbers) | and the second se | ending at prior year | lesi | year | | ed aluring year | In case of the second | anding at ar-ond |
| | General obligation bonds | \$ | 14 | \$ | | \$ | | 5 | |
| | Revenue bonds | \$ | | \$ | ÷ | S | ÷ | \$ | - |
| | Notes/Loans | \$ | | \$ | | \$ | | \$ | |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | S | 10 | \$ | | S | | \$ | |
| | Developer Advances | \$ | | \$ | .*. | \$ | - | \$ | |
| | Other (specify): | \$ | - | \$ | | \$ | | \$ | - |
| | TOTAL | \$ | | \$ | . 5 | \$ | | \$ | |
| **Subscrip | tion Based Information Technology Arrangements | | gree to prio | r year | -end balance | | | | _ |
| 4.5 | Please answer the following questions by marking the appropriate boxe | es. | | | | _ | Yes | | No |
| 4-5 If yes: | Does the entity have any authorized, but unissued, debt? How much? | \$ | 2.0 | | 00.000.00 | 1 | | | |
| II yes. | Date the debt was authorized: | Ψ | 5/4/2 | | 00,000.00 | | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r vear? | 01412 | 010 | | | | | 7 |
| If yes: | How much? | S S | | | - | 1 | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | still resu | oonsible | for? | | | | | ~ |
| If yes: | What is the amount outstanding? | \$ | | | | 1 | | | - |
| 4-8 | Does the entity have any lease agreements? | L.+ | | | | | | | J |
| If yes: | What is being leased? | | | | | | | | |
| - | What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | | | | 7 |
| | Is the lease subject to annual appropriation? | C | | | (i) = = (i) | | | | |
| | What are the annual lease payments? Part 4 - Please use this space to provide any explanations/co | \$ | orattao | | arato doo | umont | ation if n | oodod | |

I

| | PART 5 - CASH AND INVESTME | NTS | 20 | | 2 | - |
|----------|---|-----|----|-------|------|------|
| - | Please provide the entity's cash deposit and investment balances. | | An | iount | - | otal |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | S | | | |
| 5-2 | Certificates of deposit | | \$ | | | |
| | Total Cash Deposits | | | | S | |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | | 1.00 | |
| | | | S | 2 | 1 | |
| 5-3 | | | S | - | | |
| 5-5 | | | \$ | | | |
| | | | \$ | | | |
| | Total Investments | | | 1 | 5 | |
| | Total Cash and Investments | | | | S | |
| | Please answer the following questions by marking in the appropriate boxes | Yes | | No | | N/A |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | C |] | E | 1 |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | 0 |] | E | 2 |
| lf no, M | UST use this space to provide any explanations: | | | | | |
| | rict has no bank accounts at this time. | | | | | |

| | PART 6 - CAPITAL AND RI | GHT-TO-U | ISE ASSE | TS | |
|---|---|---------------------------------------|--|-----------|---------------------|
| | Please answer the following questions by marking in the appropriate box | es. | | Yes | No |
| 6-1 | Does the entity have capital assets? | | | | |
| 6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain: | | | | | |
| | N/A. | | | | |
| 6-3 | Complete the following capital & right-to-use assets table: | Balance - beginning of the year | Additions (Must be included in Part 3) | Deletions | Year-End Balance |

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Land

TOTAL

Buildings

Infrastructure

Other (explain):

Machinery and equipment

Construction In Progress (CIP)

Leased & SBITA Right-to-Use Assets

(Please enter a negative, or credit, balance)

Accumulated Depreciation/Amortization

Furniture and fixtures

*must tie to prior year ending balance

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Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
|--|---|----|------|-----|----|
| 7-1 Does the entity have an "old hire" firefighters' pension plan? | | | 2 | | |
| 7-2 | 7-2 Does the entity have a volunteer firefighters' pension plan? | | | 1 | |
| If yes: | /ho administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | - 11 | | |
| | State contribution amount: | \$ | - | | |
| | Other (gifts, donations, etc.): | \$ | - | | |
| | TOTAL | \$ | | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |

Part 7 - Please use this space to provide any explanations or comments:

| | PART 8 - BUDGE | T INFORMAT | ION | | |
|---------|---|---------------------|-------------|----|-----|
| | Please answer the following questions by marking in the appropriat | e boxes. | Yes | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affai in accordance with Section 29-1-113 C.R.S.? If no, MUST expl | | Ø | | |
| 8-2 | Did the entity pass an appropriations resolution, in acco 29-1-108 C.R.S.? If no, MUST explain: | rdance with Section | | | |
| If yes: | | | | | |
| | Governmental/Proprietary Fund Name | Total Appropriation | ons By Fund | | |
| | General Fund | \$ | - | | |
| | Capital Project Fund | \$ | - 2 | | |
| | | | | | |

| | PART 9 - TAXPAYER'S BILL OF RIGHTS (TA | ABOR) | |
|----------|---|-------------------|----------|
| | Please answer the following question by marking in the appropriate box | Yes | No |
| 9-1 | Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? | 2 | |
| | Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent | 1 | |
| | emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| If no, M | JST explain: | | |
| | PART 10 - GENERAL INFORMATION | | |
| | Please answer the following questions by marking in the appropriate boxes. | Yes | No |
| 10-1 | Is this application for a newly formed governmental entity? | | 2 |
| If yes: | Date of formation: | 1.5 | |
| 10-2 | Has the entity changed its name in the past or current year? | | |
| | nao ano onangou no namo ni ano puot or ourrent yourr | | <u>.</u> |
| | | | |
| | | | |
| If yes: | Please list the NEW name & PRIOR name: | | |
| | | | |
| 10-3 | Is the entity a metropolitan district? | 2 | |
| | Please indicate what services the entity provides: | 100 | |
| | Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation | | |
| 10-4 | Does the entity have an agreement with another government to provide services? | | 1 |
| If yes: | List the name of the other governmental entity and the services provided: | | |
| - | | | |
| 10-5 | Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | 1 |
| If yes: | Date Filed: | | |
| | | | |
| 10-6 | Does the entity have a certified Mill Levy? | | 1 |
| If yes: | | | |
| | Please provide the following mills levied for the year reported (do not report \$ amounts) | : | |
| | Bond Redemption mills | | |
| | General/Other mills | | - |
| | Total mills | | |
| | Yes | No | N/A |
| | NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has | | |
| 10-7 | the entity filed its preceding year annual report with the State Auditor as required | — | — |
| | under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | | |
| | | | |
| | | | |
| | Please use this space to provide any additional explanations or comments not pr | oviously included | |

| PART 11 - GOVERNING BO | DY APPROVAL |
|------------------------|-------------|
|------------------------|-------------|

Please answer the following question by marking in the appropriate box

NO

YES

6

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, or

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| i init the | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|--|
| Board | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this |
| Member 1 | Lynette Vernon | application for exemption from audit. Signed Date: Mar 26, 2024 My term Expires: May 2027 |
| Board | Print Board Member's Name | IPaul Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this |
| Aember 2 | Pual Vernon | application for exemption from audit. Signed <u>Faul告Um</u> Date: <u>Mar 27, 2024</u> My term Expires:May 2025 |
| Boerd | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. |
| 3 | | Signed Date: My term Expires: |
| Boerd Aember 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Boerd Aember 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Aember 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Boerd Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No.3 | For the Year Ended | | | | |
|---|---|---------------------------------|--|--|--|--|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 | | | | |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended: | | | | |
| | Centennial, CO 80112 | | | | | |
| CONTACT PERSON | William P. Ankele, Jr. | | | | | |
| PHONE | 303-858-1800 | | | | | |
| EMAIL | wpankele@wbapc.com | | | | | |
| PART 1 - CERTIFICATION OF PREPARER | | | | | | |
| I certify that I am skilled in go my knowledge. | vernmental accounting and that the information in the application is comple | te and accurate, to the best of | | | | |

| NAME: | Diane Wheeler | | | | | | |
|---|---------------------------------------|---------------------|--|---------------|--|--|--|
| TITLE | District Accountant | District Accountant | | | | | |
| FIRM NAME (if applicable) | Simmons & Wheeler, P.C. | | | | | | |
| ADDRESS | 304 Inverness Way South, Suite 490, E | Englewood, CO 8 | 0112 | | | | |
| PHONE | 303-689-0833 | | | | | | |
| PREPARER (SIGNATURE REQUIRED) | | | | DATE PREPARED | | | |
| Qion K Uhalu | | | | 3/26/2024 | | | |
| Please indicate whether the following financial information is recorded | | | GOVERNMENTAL PROPRIET (MODIFIED ACCRUAL BASIS) (CASH OR BUDGET. | | | | |
| using Governmental or Proprieta | ry fund types | 7 | | | | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | | Des | cription | Round to nearest Dollar | Please use this |
|-------|-----------------------------|-------------------|--|-------------------------|------------------|
| 2-1 | Taxes: | Property | (report mills levied in Question 10-6) | \$ - | space to provide |
| 2-2 | 9 | Specific owners | hip | \$ - | any necessary |
| 2-3 | Ş | Sales and use | | \$ - | explanations |
| 2-4 | (| Other (specify): | | \$ - | |
| 2-5 | Licenses and permits | 6 | | \$ - | |
| 2-6 | Intergovernmental: | | Grants | \$ - | 7 |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ - | 7 |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ - | 7 |
| 2-9 | | | Other (specify): | \$ - | |
| 2-10 | Charges for services | | | \$ - | |
| 2-11 | Fines and forfeits | | | \$ - | |
| 2-12 | Special assessments | | | \$ - | |
| 2-13 | Investment income | | | \$ - | |
| 2-14 | Charges for utility se | rvices | | \$ - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ - | |
| 2-16 | Lease proceeds | | | \$ - | |
| 2-17 | Developer Advances | received | (should agree with line 4-4) | \$ - | |
| 2-18 | Proceeds from sale o | of capital assets | | \$ - | |
| 2-19 | Fire and police pensi | on | | \$ - | |
| 2-20 | Donations | | | \$ - | |
| 2-21 | Other (specify): | | | \$ - | |
| 2-22 | | | | \$ - | |
| 2-23 | | | | \$ - | |
| 2-24 | | (add line | es 2-1 through 2-23) TOTAL REVENUE | \$ - | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | | Round to nearest Dollar | Please use this |
|----------|--|----------------------------|-------------------------|------------------|
| 3-1 | Administrative | | \$ - | space to provide |
| 3-2 | Salaries | - | \$ - | any necessary |
| 3-3 | Payroll taxes | - | \$ - | explanations |
| 3-4 | Contract services | - | \$ - | |
| 3-5 | Employee benefits | - | \$ - | |
| 3-6 | Insurance | | \$ - | |
| 3-7 | Accounting and legal fees | | \$ - | |
| 3-8 | Repair and maintenance | - | \$ - | |
| 3-9 | Supplies | - | \$ - | |
| 3-10 | Utilities and telephone | - | \$ - | |
| 3-11 | Fire/Police | | \$ - | |
| 3-12 | Streets and highways | | \$ - | |
| 3-13 | Public health | | \$ - | |
| 3-14 | Capital outlay | - | \$ - | |
| 3-15 | Utility operations | - | \$ - | |
| 3-16 | Culture and recreation | - | \$ - | |
| 3-17 | Debt service principal | (should agree with Part 4) | \$ - | |
| 3-18 | Debt service interest | - | \$ - | |
| 3-19 | Repayment of Developer Advance Principal (s | hould agree with line 4-4) | \$ - | |
| 3-20 | Repayment of Developer Advance Interest | - | \$ - | |
| 3-21 | Contribution to pension plan | (should agree to line 7-2) | \$ - | |
| 3-22 | Contribution to Fire & Police Pension Assoc. | (should agree to line 7-2) | \$ - | |
| 3-23 | Other (specify): | - | | |
| 3-24 | | - | \$ - | 7 |
| 3-25 | | | \$ - | |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPEND | ITURES/EXPENSES | \$ - | |
| IC TOTAL | | | ALOO OOO OTOD Y | |

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - <u>STOP</u>. You may not use this form. Please use the "Application for Exemption from Audit - <u>LONG FORM</u>".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUED |), Al | ND RE | ETIR | ED | |
|------------|---|------------------|---------------|----------|--------------|---|------------|--|
| | Please answer the following questions by marking the | | | Ĩ. | | | es | No |
| 4-1 | Does the entity have outstanding debt? | | | | | - E | 1 | 2 |
| | If Yes, please attach a copy of the entity's Debt Repayment | | | | | | | 2 |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explanation | <u>ain belov</u> | N: | | | | 1 | |
| | N/A | | | | | | | |
| 4-3 | Is the entity current in its debt service payments? If no, MUS | ST expla | in below: | | - | E | 1 | 2 |
| | N/A | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | Outet | anding at | leeu | d during | Partico | t during | Outstanding at |
| | (please only include principal amounts)(enter all amount as positive numbers) | | prior year* | | year | the second se | sar | year-and |
| | General obligation bonds | \$ | - | \$ | | S | | 5 |
| | Revenue bonds | \$ | - | \$ | | S | | S |
| | Notes/Loans | \$ | - | \$ | - | S | | 5 - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | _ | \$ | | S | | s - |
| | Developer Advances | \$ | - | \$ | | S | | \$ |
| | Other (specify): | \$ | - | \$ | | S | | \$ |
| | TOTAL | \$ | _ | \$ | | S | - | S |
| **Subscrip | otion Based Information Technology Arrangements | · · | agree to prio | <u> </u> | nd balance | | _ | |
| | Please answer the following questions by marking the appropriate boxe | | | r your c | THU DISIGNAL | (| 05 | No |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | | 2 | |
| If yes: | How much? | \$ | 2,0 | 00,00 | 0,000.00 | | | |
| | Date the debt was authorized: | | 5/4/2 | 010 | | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 1 | 3 | |
| If yes: | How much? | \$ | | | | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | still res | ponsible | for? | | | 3 | 2 |
| If yes: | What is the amount outstanding? | \$ | - | | - 1 - I | [| | |
| 4-8 | Does the entity have any lease agreements? | | | | | 1 | 3 | 1 |
| If yes: | What is being leased? | | | | | | | |
| | What is the original date of the lease? | | | | | | | |
| | Number of years of lease? | | | | | | - | 173 |
| | Is the lease subject to annual appropriation? | | | | | | 3 | 4 |
| | What are the annual lease payments? | \$ | an atter a | | | a company | - | and a second |
| | Part 4 - Please use this space to provide any explanations/co | omments | s or attac | n sepa | wate doc | umenta | tion, if r | needed |

| | PART 5 - CASH AND INVESTME | NTS | | - Andrew |
|--------|---|------|--------|-----------------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Tota |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ - | |
| 5-2 | Certificates of deposit | | \$ - | al and a second |
| | Total Cash Deposits | | | S |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | |
| | | | 10 | |
| | | | 4 - | |
| 5-3 | | | 3 . | |
| | | | 3 - | - |
| | | _ | 3 - | - |
| | Total Investments | | | 5 |
| | Total Cash and Investments | | | 5 |
| | Please answer the following questions by marking in the appropriate boxes | Yes. | No | N/A |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. | | | E |
| | seq., C.R.S.? | - | | |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public | - | 100 | Trains. |
| | depository (Section 11-10.5-101, et seq. C.R.S.)? | | | D |
| no, Ml | UST use this space to provide any explanations: | | | |
| | rict has no bank accounts at this time | | | |

he District has no bank accounts at this time.

| | PART 6 - CAPITAL AND | | JSE ASSE | | |
|-----|---|--|---|-----------|---------------------|
| | Please answer the following questions by marking in the appropriat | e boxes. | | Yes | No |
| 6-1 | Does the entity have capital assets? | | | | |
| 6-2 | Has the entity performed an annual inventory of capital a 29-1-506, C.R.S.,? If no, MUST explain: | assets in accordance | with Section | | |
| | N/A | | | | |
| 6-3 | Complete the following capital & right-to-use assets table: | Balance - beginning of the year* | Additions (Must be included in Part 3 | Delations | Year-End Balance |
| | Land | \$ - | \$ - | \$ - | \$ |
| | Buildings | \$ - | \$ | 5 - | \$ |

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-*must tie to prior year ending balance

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Machinery and equipment

Construction In Progress (CIP)

Leased & SBITA Right-to-Use Assets

(Please enter a negative, or credit, balance)

Accumulated Depreciation/Amortization

Furniture and fixtures

Infrastructure

Other (explain):

TOTAL

| | PART 7 - PENSION INFORMA | TIO | N | | |
|---------|---|-----|-----|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | 2 |
| 7-2 | 7-2 Does the entity have a volunteer firefighters' pension plan? | | | | 9 |
| If yes: | Who administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | 1.4 | | |
| | State contribution amount: | \$ | | | |
| | Other (gifts, donations, etc.): | \$ | | | |
| | TOTAL | \$ | | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

Part 7 - Please use this space to provide any explanations or comments:

| | PART 8 - BUDGET IN | FORMATION | | |
|---------|---|------------------------------|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for th in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | e current year | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | | | |
| If yes: | Please indicate the amount budgeted for each fund for the year | reported: | | |
| | Governmental/Proprietary Fund Name | Total Appropriations By Fund | | |
| | General Fund \$ | - |] | |

| | PART 9 - TAXPAYER'S BILL OF RIGHTS (TABC |)R) | |
|--------------------|--|---------------|----|
| | Please answer the following question by marking in the appropriate box | Yes | No |
| 9-1 | Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| o, MI | JST explain: | | |
| | | | _ |
| | PART 10 - GENERAL INFORMATION | | |
| | Please answer the following questions by marking in the appropriate boxes. | Yes | lo |
| 0-1 | Is this application for a newly formed governmental entity? | | |
| ves: | Date of formation: | | |
| 0-2 | Has the entity changed its name in the past or current year? | | |
| | | | |
| | | | |
| yes: | Please list the NEW name & PRIOR name: | | |
| | | | |
|)-3 | Is the entity a metropolitan district? | 1 | |
| | Please indicate what services the entity provides: | | |
| | Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreationSanitary | - | |
| 0-4 yes: | Does the entity have an agreement with another government to provide services? List the name of the other governmental entity and the services provided: | | |
| yes. | List the name of the other governmental entity and the services provided. | | |
| 0-5 | Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | |
| /es: | Date Filed: | | |
| | | | |
|)-6 | Does the entity have a certified Mill Levy? | | |
| /es: | Please provide the following mills levied for the year reported (do not report \$ amounts): | | |
| | Flease provide the following mins levied for the year reported (do not report \$ amounts): | | |
| | Bond Redemption mills | | |
| | General/Other mills | | |
| | Total mills | - | |
| | NEW 20221 If the entity is a Title 22 Special District formed on an after 7/1/2000, here | No | нA |
| 0-7 | NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required | | |
| 0-1 | under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | | |
| | | | |
| | | | |
| | Please use this space to provide any additional explanations or comments not previous | sly included: | |

| PART 11 - GOVERNING BODY APPROVAL | | |
|--|-----|----|
| Please answer the following question by marking in the appropriate box | YES | NO |
| | | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy? ☑

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, or

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| | governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|--|
| Board Member 1 | Print Board Member's Name Lynette Vernon | I Lynette Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Decred | Print Board Member's Name | IPaul Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this |
| Board Member 2 | Paul Vernon | application for exemption from audit. Signed <u>Faults Uam</u> Date: <u>Mar 27, 2024</u> My term Expires: <u>May 2025</u> |
| Board Member 3 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| | Print Board Member's Name | Date: My term Expires: I, attest I am a duly elected or appointed board |
| Board Member 4 | | member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board /ember 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board lember 7 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No. 4 | For the Year Ended |
|--------------------|--|----------------------|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended |
| | Centennial, CO 80112 | |
| CONTACT PERSON | William P. Ankele, Jr. | |
| PHONE | 303-858-1800 | |
| EMAIL | wpankele@wbapc.com | |
| | PART 1 - CERTIFICATION OF PREPARER | |

 Diane Wheeler
 Diane Wheeler

 TITLE
 District Accountant

 FIRM NAME (if applicable)
 Simmons & Wheeler, P.C.

 ADDRESS
 304 Inverness Way South, Suite 490, Englewood, CO 80112

| PHONE | 303-689-0833 | | | |
|---|--------------------------|--|---|--|
| PREPAI | RER (SIGNATURE REQUIRED) | | D | ATE PREPARED |
| Qione K. Walon | | | | 3/26/2024 |
| Please indicate whether the following financial information is recorded | | GOVERNMENTAL (MODIFIED ACCRUAL BASIS) | | PROPRIETARY (CASH OR BUDGETARY BASIS) |
| using Governmental or Proprietary | / fund types | \checkmark | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | Description | | Round to nearest Dollar | Please use this | |
|-------------------|---------------------------|----------------|--|-----------------|------------------|
| 2-1 | Taxes: Pro | operty | (report mills levied in Question 10-6) | \$ - | space to provide |
| 2-2 | Sp | ecific owners | ship | \$ - | any necessary |
| 2-3 | Sa | les and use | | \$ - | explanations |
| 2-4 | Otl | her (specify): | | \$ - | |
| 2-5 | Licenses and permits | | | \$ - | |
| 2-6 | Intergovernmental: | | Grants | \$ - | |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ - | |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ - | |
| 2-9 | | | Other (specify): | \$ - | |
| 2-10 | Charges for services | | | \$ - | |
| 2-11 | Fines and forfeits | | | \$ - | |
| 2-12 | Special assessments | | | \$ - | |
| 2-13 | Investment income | | | \$ - | |
| 2-14 | Charges for utility servi | ces | | \$ - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ - | |
| 2-16 | Lease proceeds | | | \$ - | |
| 2-17 | Developer Advances re- | ceived | (should agree with line 4-4) | \$ - | |
| 2-18 | Proceeds from sale of c | capital assets | ; | \$ - | |
| 2-19 | Fire and police pension | 1 | | \$ - | |
| 2-20 | Donations | | | \$ - | |
| 2-21 | Other (specify): | | | \$ - | |
| 2 - 22 | | | | \$ - | |
| 2-23 | | | | \$ - | |
| 2-24 | | (add lin | es 2-1 through 2-23) TOTAL REVENUE | \$ - | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | Round to nearest Dollar | Please use this |
|---------|--|-------------------------------------|------------------|
| 3-1 | Administrative | - \$ | space to provide |
| 3-2 | Salaries | \$ - | any necessary |
| 3-3 | Payroll taxes | \$ - | explanations |
| 3-4 | Contract services | \$ - | - |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ - | |
| 3-7 | Accounting and legal fees | \$ - | |
| 3-8 | Repair and maintenance | \$ - | |
| 3-9 | Supplies | \$ - | 1 |
| 3-10 | Utilities and telephone | \$ - | 1 |
| 3-11 | Fire/Police | \$ - | 1 |
| 3-12 | Streets and highways | \$ - |] |
| 3-13 | Public health | \$ - |] |
| 3-14 | Capital outlay | \$ - | 1 |
| 3-15 | Utility operations | - \$ |] |
| 3-16 | Culture and recreation | \$ - |] |
| 3-17 | Debt service principal (should agree with Part 4 | \$ - |] |
| 3-18 | Debt service interest | \$ - | 1 |
| 3-19 | Repayment of Developer Advance Principal (should agree with line 4-4 | \$ - | 1 |
| 3-20 | Repayment of Developer Advance Interest | \$ - |] |
| 3-21 | Contribution to pension plan (should agree to line 7-2 | \$ - |] |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2 | \$ - |] |
| 3-23 | Other (specify): | |] |
| 3-24 | | \$ - |] |
| 3-25 | | - \$ |] |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | - \$ | |
| f TOTAL | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER that | n \$100,000 - <u>STOP</u> . You may | not use this |

form. Please use the "Application for Exemption from Audit - LONG FORM".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUED |), A | ND RI | ETIR | RED | | |
|------------|---|-----------|---------------|--------|-------------|------------|------------------|----------|----|
| | Please answer the following questions by marking the | appropr | iate boxes. | Č. | | | Yes | No | |
| 4-1 | | | | | | | | | |
| | If Yes, please attach a copy of the entity's Debt Repayment Schedule. | | | | | | | | |
| 4-2 | 4-2 Is the debt repayment schedule attached? If no, MUST explain below: | | | | | | | 2 | |
| | N/A | | | | | | | | |
| | | | | | | | | 1.000 | |
| 4-3 | Is the entity current in its debt service payments? If no, MUS | ST expla | ain below: | | | . 4 | | 2 | |
| | N/A | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | | | | 2122 - | 10 m | - | COOLANS. | |
| | (please only include principal amounts)(enter all amount as positive | | anding at | ไรรเ | led during | 1200.08000 | id during | Outstand | |
| | numbers) | end of | prior year* | | year | 100.00 | yoar | year-e | nd |
| | General obligation bonds | \$ | - | \$ | | s | | s | - |
| | Revenue bonds | \$ | - | \$ | | \$ | - | S | - |
| | Notes/Loans | \$ | - | \$ | - | \$ | 1 | S | - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | - | \$ | - | \$ | 121 | S | - |
| | Developer Advances | \$ | - | \$ | - | \$ | - | S | - |
| | Other (specify): | \$ | - | \$ | | \$ | ~ | S | - |
| | TOTAL | \$ | - | \$ | | \$ | | S | - |
| **Subscrip | otion Based Information Technology Arrangements | *Must | agree to prio | r year | end balance | 1 | | | |
| | Please answer the following questions by marking the appropriate boxe | es. | | | | | Yes | Ne | |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | | | | |
| If yes: | | \$ | | | 00.000.00 | 1 | | | |
| | Date the debt was authorized: | | 5/4/2 | 010 | | | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 2 8 | | 12 | |
| If yes: | | \$ | | | - | | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | still res | ponsible | for? | | | | 1 | |
| If yes: | What is the amount outstanding? | \$ | | | - | | 155 | 123 | |
| 4-8 | Does the entity have any lease agreements? | | | | | | | 2 | |
| If yes: | What is being leased? What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | | | | |
| | Is the lease subject to annual appropriation? | | | | | 1 | | 121 | |
| | What are the annual lease payments? | \$ | | | | T | head | | |
| | Part 4 - Please use this space to provide any explanations/co | | s or attack | 1 ser | arate doc | umant | ation if a | beheal | |
| | | | | | | all really | and a start of a | o super | |

| | PART 5 - CASH AND INVESTME | NTS | | |
|----------|---|-----|--------|-------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Total |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ - | |
| 5-2 | Certificates of deposit | | \$ - | 1 |
| | Total Cash Deposits | | | \$ |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | 200 C |
| | | | 5 - | 1 |
| 5-3 | | | \$ - | |
| 5-0 | | | \$ - | |
| | | | \$ - | 1.0 |
| | Total Investments | _ | | \$ |
| | Total Cash and Investments | | | \$ - |
| | Please answer the following questions by marking in the appropriate boxes | Yes | No | NIA |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | 2 |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | | 1 |
| lf no, M | UST use this space to provide any explanations: | | | |

The District has no bank accounts at this time.

| | PART 6 - CAPITAL AND RIG | HT-TO-L | ISE ASSE | TS | |
|---|--|-----------|----------------|--------------------|----------|
| | Please answer the following questions by marking in the appropriate boxe | s. | | Yes | No |
| 6-1 | Does the entity have capital assets? | | | | |
| 6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain: | | | | | |
| | N/A | | | | |
| 6-3 | Complete the following conital & right to use access table: | Balance - | Addition (Must | Contraction of the | Veur-End |

| | | ear* | 1. A A A A A A A A A A A A A A A A A A A | art 3) | 37.0 | 100000 | Balant | ce |
|---|----|------|--|--------|------|--------|--------|----|
| Land | \$ | - | \$ | | \$ | ×. | S | - |
| Buildings | \$ | - | \$ | 14 | \$ | - ¥ | S | - |
| Machinery and equipment | \$ | - | \$ | | \$ | | S | - |
| Furniture and fixtures | \$ | - | \$ | | 5 | ÷. | S | - |
| Infrastructure | \$ | - | \$ | | \$ | - | 5 | - |
| Construction In Progress (CIP) | \$ | - | \$ | | \$ | | 5 | - |
| Leased & SBITA Right-to-Use Assets | \$ | - | \$ | | \$ | | S | - |
| Other (explain): | \$ | - | \$ | | \$ | | S | - |
| Accumulated Depreciation/Amortization | ¢ | | ¢ | | | | | |
| (Please enter a negative, or credit, balance) | φ | - | \$ | | 9 | | S | - |
| TOTAL | \$ | - | \$ | 27 | S | - | S | - |

*must tie to prior year ending belance

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | PART 7 - PENSION INFORMA | TIC | N | 1.0 | |
|--|---|-----|---|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 Does the entity have an "old hire" firefighters' pension plan? | | | | | |
| 7-2 Does the entity have a volunteer firefighters' pension plan? | | | | | |
| If yes: | If yes: Who administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | - | | |
| | State contribution amount: | | - | | |
| | Other (gifts, donations, etc.): | \$ | - | | |
| | TOTAL \$ | | | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |
| | Part 7 Diagon upo this analog to provide any explanation | | and the second se | | |

Part 7 - Please use this space to provide any explanations or comments:

| | PART 8 - BUDGET INFORMAT | ION | | |
|-----|---|------|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes. | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | | D | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$ - |
| Capital Project Fund | \$ - |
| | |
| | |

| | PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB | 0R) | |
|-------|--|----------------|----|
| | Please answer the following question by marking in the appropriate box | Yes | No |
|)-1 | Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 per emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| o, Ml | JST explain: | | |
| | | | |
| | PART 10 - GENERAL INFORMATION | | |
| | Please answer the following questions by marking in the appropriate boxes. | Yes | No |
| 0-1 | Is this application for a newly formed governmental entity? | | 2 |
| ves: | Date of formation: | | |
| 0-2 | Has the entity changed its name in the past or current year? | D | 2 |
| | | | |
| | | | |
| yes: | Please list the NEW name & PRIOR name: | | |
| | | | - |
| 0-3 | Is the entity a metropolitan district? Please indicate what services the entity provides: | Ð | |
| | Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation | | |
| 0-4 | Does the entity have an agreement with another government to provide services? | 17 | 12 |
| yes: | List the name of the other governmental entity and the services provided: | - | |
| | | 1.1 | 28 |
| 0-5 | Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | 12 |
| yes: | Date Filed: | | |
| 0-6 | Does the entity have a certified Mill Levy? | | 1 |
| /es: | | | |
| | Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): | | |
| | Bond Redemption mills | | |
| | General/Other mills | | |
| | Total mills | | |
| | | No | НA |
| 0-7 | NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required | D | |
| u=/ | under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | | |
| | | | |
| | | | |
| | Please use this space to provide any additional explanations or comments not previou | usly included: | |

| | PART 11 - GOVERNING BODY APPROVAL | | |
|------|--|----------|----|
| | Please answer the following question by marking in the appropriate box | YES | NO |
| 12_1 | If you plan to submit this form electronically, have you read the new Electronic Signature | v | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| Print the i | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|---|
| Board Member 1 | Print Board Member's Name Lynette Vernon | ILynette Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Board Member | Print Board Member's Name Paul Vernon | My term Expires: <u>May 2027</u> I <u>Paul Vernon</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. |
| 2 | | Signed <u>Parts Jem</u> Date: Mar 27, 2024 My term Expires: <u>May 2025</u> |
| Board Member 3 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No. 5 | For the Year Ended |
|--------------------|--|-----------------------|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended: |
| | Centennial, CO 80112 | |
| CONTACT PERSON | William P. Ankele, Jr. | |
| PHONE | 303-858-1800 | |
| EMAIL | wpankele@wbapc.com | |
| | PART 1 - CERTIFICATION OF PREPARER | |

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.
NAME:
Diane Wheeler
District Accountant
FIRM NAME (if applicable)
ADDRESS
J04 Inverness Way South, Suite 490, Englewood, CO 80112

| PHONE | 303-689-0833 | | | | | |
|-----------------------------------|---|--|-----------------------|---|--|--|
| PREPARER (SIGNATURE REQUIRED) | | | | DATE PREPARED | | |
| Qion K thata | | | | 3/26/2024 | | |
| | ether the following financial information is recorded al or Proprietary fund types | | MENTAL RUAL BASIS) | PROPRIETARY (CASH OR BUDGETARY BASIS) | | |
| using Governmental or Proprietary | | | | | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | | De | scription | Round to nearest Dollar | Please use this |
|-------|---------------------------|-------------------|--|-------------------------|------------------|
| 2-1 | Taxes: | Property | (report mills levied in Question 10-6) | \$ - | space to provide |
| 2-2 | | Specific owner | ship | \$ - | any necessary |
| 2-3 | | Sales and use | | \$ - | explanations |
| 2-4 | | Other (specify): | : | \$ - | |
| 2-5 | Licenses and permits | s | | \$ - | |
| 2-6 | Intergovernmental: | | Grants | \$ - | |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ - | |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ - | |
| 2-9 | | | Other (specify): | \$ - | |
| 2-10 | Charges for services | 5 | | \$ - | |
| 2-11 | Fines and forfeits | | | \$ - | |
| 2-12 | Special assessments | 5 | | \$ - | |
| 2-13 | Investment income | | | \$ - | |
| 2-14 | Charges for utility se | ervices | | \$ - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ - | |
| 2-16 | Lease proceeds | | | \$ - | |
| 2-17 | Developer Advances | received | (should agree with line 4-4) | \$ - | |
| 2-18 | Proceeds from sale of | of capital assets | 5 | \$ - | |
| 2-19 | Fire and police pensi | ion | | \$ - | |
| 2-20 | Donations | | | \$ - | |
| 2-21 | Other (specify): | | | \$ - | |
| 2-22 | | | | \$ - | |
| 2-23 | | | | \$ - | |
| 2-24 | | (add lir | es 2-1 through 2-23) TOTAL REVENUE | \$ - | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | Round to nearest Dollar | Please use this |
|---------|--|---|------------------|
| 3-1 | Administrative | \$ - | space to provide |
| 3-2 | Salaries | \$ - | any necessary |
| 3-3 | Payroll taxes | \$ - | explanations |
| 3-4 | Contract services | \$ - | |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ - |] |
| 3-7 | Accounting and legal fees | \$ - |] |
| 3-8 | Repair and maintenance | - \$ |] |
| 3-9 | Supplies | \$ - |] |
| 3-10 | Utilities and telephone | \$ - |] |
| 3-11 | Fire/Police | \$ - |] |
| 3-12 | Streets and highways | \$ - |] |
| 3-13 | Public health | \$ - |] |
| 3-14 | Capital outlay | \$ - | |
| 3-15 | Utility operations | \$ - | |
| 3-16 | Culture and recreation | \$ - |] |
| 3-17 | Debt service principal (should agree with Part 4 | - \$ |] |
| 3-18 | Debt service interest | \$ - |] |
| 3-19 | Repayment of Developer Advance Principal (should agree with line 4-4 | - \$ |] |
| 3-20 | Repayment of Developer Advance Interest | \$ - |] |
| 3-21 | Contribution to pension plan (should agree to line 7-2 | - \$ |] |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2 | - \$ |] |
| 3-23 | Other (specify): | |] |
| 3-24 | | \$ - |] |
| 3-25 | | \$ - |] |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | - \$ | |
| f TOTAL | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER that | n \$100,000 - <u>STOP</u>. You may | not use this |

form. Please use the "Application for Exemption from Audit - LONG FORM".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUED |), A | ND RI | ETIR | RED | | |
|------------|---|------------|---------------|--------|-------------|------------|-------------|-------------|---|
| | Please answer the following questions by marking the | e appropri | ate boxes. | Ĩ | | | Yes | No | 5 |
| 4-1 | 4-1 Does the entity have outstanding debt? | | | | | | | Ø | |
| | If Yes, please attach a copy of the entity's Debt Repayment | | | | | 1 | 100 | - | |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explanation | ain belov | V: | | | ÷ 4 | | 2 | |
| | N/A | | | | | | | | |
| | | | | | | L | | - | |
| 4-3 | Is the entity current in its debt service payments? If no, MU | ST expla | in below: | | | 1 4 | | 12 | |
| | N/A | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | | | | 232 | Lo X | - | Contena and | |
| | (please only include principal amounts)(enter all amount as positive | | anding at | ไรรเ | led during | 1200.08000 | id during | Outstand | |
| | numbers) | end of | prior year* | | year | 100.00 | year | year-and | |
| | General obligation bonds | \$ | - | \$ | 1.1 | ŝ | | s | - |
| | Revenue bonds | \$ | - | \$ | | \$ | - | S | - |
| | Notes/Loans | \$ | - | \$ | - | s | - | S | - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | - | \$ | - | \$ | - | S | - |
| | Developer Advances | \$ | - | \$ | - | \$ | - | S | - |
| | Other (specify): | \$ | - | \$ | - | \$ | - | S | - |
| | TOTAL | \$ | - | \$ | (+) | \$ | | S | - |
| **Subscrip | tion Based Information Technology Arrangements | *Must a | igree to prio | r year | end balance | E. | _ | | |
| | Please answer the following questions by marking the appropriate boxe | es. | | | | | Yes | No | |
| 4-5 | Does the entity have any authorized, but unissued, debt? | A | | 00.00 | | 1 | | | 1 |
| If yes: | | \$ | | | 00.000.00 | | | | |
| | Date the debt was authorized: | | 5/4/2 | 010 | | 1 | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 2 | | 14 | |
| If yes: | | \$ | | | - | 1 | - | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | | ponsible | tor? | | | 1 | 12 | |
| If yes: | What is the amount outstanding? | \$ | | | - | | | 100 | |
| 4-8 | Does the entity have any lease agreements? What is being leased? | | | | - | . I. | | 2 | 1 |
| If yes: | What is being leased? What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | | | | |
| | Is the lease subject to annual appropriation? | L | | | | 1 | | E | 1 |
| | What are the annual lease payments? | \$ | | | | | P.P. | | |
| | Part 4 - Please use this space to provide any explanations/co | omments | or attacl | n sep | arate doc | ument | ation, if r | leeded | |
| | | | | | | | | | |

| | PART 5 - CASH AND INVESTME Please provide the entity's cash deposit and investment balances. | NTS | Am | ount . | | Total |
|-------|---|-----|----|--------|-------|-------|
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ | - | | |
| 5-2 | Certificates of deposit | | \$ | | 1 | |
| | Total Cash Deposits | | | | \$ | |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | | 100 | |
| | | | 5 | | 1 | |
| 5-3 | | | \$ | | 1 | |
| 5=5 | | | \$ | | | |
| | | | \$ | | 1.0 | |
| | Total Investments | | | | \$ | |
| | Total Cash and Investments | | | | \$ | |
| | Please answer the following questions by marking in the appropriate boxes | Yes | | 10 | 14010 | NIA |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | | | 1 |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | | 6 | | 2 |
| no, M | UST use this space to provide any explanations: | | | | | |

The District has no bank accounts at this time.

| | PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS | | | | | | | |
|-----|---|-----------|-----------------|-----------|----------|--|--|--|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No | | | |
| 6-1 | Does the entity have capital assets? | | | | | | | |
| 6-2 | 6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain: | | | | | | | |
| | N/A | | | | | | | |
| 6-3 | Complete the following canital & right-to-use assets table: | Balance - | Additiona (Must | Deletions | Vear-End | | | |

| Machinery and equipment | \$ - | \$ | \$ | | S |
|--|---------|--------|----|----|---|
| Furniture and fixtures | \$ - | \$ | \$ | ÷. | S |
| Infrastructure | \$ - | \$ | 5 | | 5 |
| Construction In Progress (CIP) | \$ - | \$ | \$ | | 5 |
| Leased & SBITA Right-to-Use Assets | \$ - | \$ | \$ | - | S |
| Other (explain): | \$ - | \$ | \$ | | S |
| Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance) | \$ - | \$ | \$ | - | s |
| TOTAL | \$ - | \$ | S | | S |

\$ \$

*must tie to prior year ending belonce

Part

5 5

\$ \$

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ice

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-

S

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | PART 7 - PENSION INFORMA | TIO | N | No. | |
|---------|---|------------|--------------------|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | |
| 7-2 | Does the entity have a volunteer firefighters' pension plan? | | | | |
| If yes: | Who administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | - | | |
| | State contribution amount: | \$ | - | | |
| | Other (gifts, donations, etc.): | \$ | | | |
| | TOTAL | \$ | | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |
| | Part 7 - Please use this snace to provide any explanation | e or c | in many a state of | | |

| | PART 8 - BUDGET INFORMAT | ION | | |
|-----|---|-----|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | 2 | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | | | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

Land

Buildings

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$ - |
| Capital Project Fund | \$ - |
| | |
| | |

| PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB | OR) | |
|--|----------------------|----|
| Please answer the following question by marking in the appropriate box | Yes | No |
| 9-1 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 per emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| o, MUST explain: | | |
| PART 10 - GENERAL INFORMATION | | |
| Please answer the following questions by marking in the appropriate boxes. | Yes | No |
| Is this application for a newly formed governmental entity? | | 2 |
| yes: Date of formation: | 1 | |
| 0-2 Has the entity changed its name in the past or current year? | | 2 |
| | | |
| yes: Please list the NEW name & PRIOR name: | | |
| Sanitary sewer/strom drainage, streets, water, traffic and safety controls, park & recreation | | - |
| 0-3 Is the entity a metropolitan district? Please indicate what services the entity provides: | E. | |
| | 1 | |
| 0-4 Does the entity have an agreement with another government to provide services? | | 12 |
| yes: List the name of the other governmental entity and the services provided: | 1 | |
| 0-5 Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during | | 1 |
| yes: Date Filed: | | |
| 0-6 Does the entity have a certified Mill Levy? | | 1 |
| yes: Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): | | |
| Bond Redemption mills | | |
| General/Other mills | | |
| Total mills | | |
| NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has | No | HA |
| NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has 0-7 the entity filed its preceding year annual report with the State Auditor as required under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | . U | |
| | | |
| Please use this space to provide any additional explanations or comments not previo | 」 ously included: | |

| | PART 11 - GOVERNING BODY APPROVAL | | |
|------|--|--------------|----|
| | Please answer the following question by marking in the appropriate box | YES | NO |
| 12_1 | If you plan to submit this form electronically, have you read the new Electronic Signature | \checkmark | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?
☑

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|--|
| Board Member 1 | Print Board Member's Name Lynette Vernon | I Lynette Vernon , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Board Member 2 | Print Board Member's Name Paul Vernon | IPaul Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Faults Jame Date: Mar 27, 2024 |
| Board Member 3 | Print Board Member's Name | My term Expires: May 2025 I |
| Board Member 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed boar member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No. 6 | For the Year Ended |
|--------------------|--|----------------------|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended |
| | Centennial, CO 80112 | |
| CONTACT PERSON | William P. Ankele, Jr. | |
| PHONE | 303-858-1800 | |
| EMAIL | wpankele@wbapc.com | |
| | PART 1 - CERTIFICATION OF PREPARER | |

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.
NAME:
Diane Wheeler
District Accountant
FIRM NAME (if applicable)
Simmons & Wheeler, P.C.
ADDRESS
BHONE
202 690 0933

| PREPARER (SIGNATURE REQUIRED) | | D | ATE PREPARED |
|--|-------------------------|---|--|
| Qione K Usula- | 3/26/2024 | | |
| Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types | GOVERN (MODIFIED ACC | | PROPRIETARY (CASH OR BUDGETARY BASIS) |
| using Governmental or Proprietary fund types | ~ | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | | Des | scription | Rou <u>nd</u> | to nearest Dollar | Please use this |
|-------|----------------------------|------------------|--|---------------|-------------------|------------------|
| 2-1 | Taxes: F | Property | (report mills levied in Question 10-6) | \$ | - | space to provide |
| 2-2 | S | Specific owners | ship | \$ | - | any necessary |
| 2-3 | S | Sales and use | | \$ | - | explanations |
| 2-4 | (| Other (specify): | | \$ | - | |
| 2-5 | Licenses and permits | 5 | | \$ | - | |
| 2-6 | Intergovernmental: | | Grants | \$ | - | 1 |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ | - | 1 |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ | - | 1 |
| 2-9 | | | Other (specify): | \$ | - | 1 |
| 2-10 | Charges for services | | | \$ | - | 1 |
| 2-11 | Fines and forfeits | | | \$ | - | |
| 2-12 | Special assessments | | | \$ | - |] |
| 2-13 | Investment income | | | \$ | - | |
| 2-14 | Charges for utility ser | rvices | | \$ | - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ | - | |
| 2-16 | Lease proceeds | | | \$ | - | |
| 2-17 | Developer Advances | received | (should agree with line 4-4) | \$ | - | |
| 2-18 | Proceeds from sale of | f capital assets | 5 | \$ | - | |
| 2-19 | Fire and police pension | on | | \$ | - | |
| 2-20 | Donations | | | \$ | - | |
| 2-21 | Other (specify): | | | \$ | - |] |
| 2-22 | | | | \$ | - |] |
| 2-23 | | | | \$ | - |] |
| 2-24 | | (add lin | es 2-1 through 2-23) TOTAL REVENUE | \$ | | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | Round to nearest Dollar | Please use this |
|---------|--|---|------------------|
| 3-1 | Administrative | - \$ | space to provide |
| 3-2 | Salaries | \$ - | any necessary |
| 3-3 | Payroll taxes | \$ - | explanations |
| 3-4 | Contract services | \$ - | - |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ - | |
| 3-7 | Accounting and legal fees | \$ - | |
| 3-8 | Repair and maintenance | - \$ | |
| 3-9 | Supplies | \$ - | |
| 3-10 | Utilities and telephone | \$ - | |
| 3-11 | Fire/Police | \$ - | |
| 3-12 | Streets and highways | \$ - | |
| 3-13 | Public health | \$ - | |
| 3-14 | Capital outlay | \$ - | |
| 3-15 | Utility operations | \$ - | |
| 3-16 | Culture and recreation | \$ - | |
| 3-17 | Debt service principal (should agree with Part 4 | \$ - | |
| 3-18 | Debt service interest | \$ - | |
| 3-19 | Repayment of Developer Advance Principal (should agree with line 4-4 | - \$ | |
| 3-20 | Repayment of Developer Advance Interest | \$ - | |
| 3-21 | Contribution to pension plan (should agree to line 7-2 | \$ - | |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2 | - \$ | |
| 3-23 | Other (specify): | | |
| 3-24 | | \$ - | |
| 3-25 | | \$ - |] |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | \$- | |
| f TOTAL | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER that | n \$100,000 - <u>STOP</u>. You may | not use this |

form. Please use the "Application for Exemption from Audit - LONG FORM".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUED |), A | ND RI | ETIR | RED | | |
|------------|---|----------|---------------|--------|-------------|---------------|--------------------|----------------|----|
| | Please answer the following questions by marking the | appropr | iate boxes. | Ĩ | | | Yes | No | |
| 4-1 | | | | | | | | D | |
| | If Yes, please attach a copy of the entity's Debt Repayment Schedule. | | | | | | 12 | - | |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explanation | ain belo | w: | | | 1 | | 7 | |
| | N/A | | | | | | | | |
| | | | | | | | | 1000 | |
| 4-3 | Is the entity current in its debt service payments? If no, MUS | ST expla | ain below: | | | . 4 | | 12 | |
| | N/A | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | | | | 2122 - | 10 m | - | Constant, | |
| | (please only include principal amounts)(enter all amount as positive | | anding at | Issu | led daming | 120.5800.0 | id during | Outstanding at | |
| | numbers) | end of | prior year* | | year | 100.00 | yoar | year-a | nd |
| | General obligation bonds | \$ | - | \$ | | s | | s | - |
| | Revenue bonds | \$ | - | \$ | | \$ | - | S | - |
| | Notes/Loans | \$ | - | \$ | - | \$ | - | S | - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | - | \$ | - | \$ | 121 | S | - |
| | Developer Advances | \$ | - | \$ | - | \$ | - | S | - |
| | Other (specify): | \$ | - | \$ | - | \$ | - | S | - |
| | TOTAL | \$ | - | \$ | | \$ | | S | - |
| **Subscrip | otion Based Information Technology Arrangements | *Must a | agree to prio | r year | end balance | E. | | | |
| | Please answer the following questions by marking the appropriate boxe | es. | | | | | Yes | NG | |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | | | | |
| If yes: | | \$ | | | 00.000.00 | 1 | | | |
| | Date the debt was authorized: | | 5/4/2 | 010 | _ | I | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 2 8 | | 1 | |
| If yes: | | \$ | | | - | 1 | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | | ponsible | for? | | | | 1 | |
| If yes: | 0 | \$ | | | | | 355 | 122 | |
| 4-8 | Does the entity have any lease agreements? | | | | | | | 2 | |
| If yes: | What is being leased? What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | | | | |
| | Is the lease subject to annual appropriation? | | | | | 1 | | 121 | |
| | What are the annual lease payments? | \$ | | | | T | had | | |
| | Part 4 - Please use this space to provide any explanations/co | | s or attacl | 1 ser | arate doc | umant | ation if e | ieeded | |
| | | | | | | all the first | and a start of the | o su su | |

| | PART 5 - CASH AND INVESTME | NTS | | |
|----------|---|-----|--------|-----------------------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Total |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ - | and the second second |
| 5-2 | Certificates of deposit | | \$ - | 1.1 |
| | Total Cash Deposits | | | \$ |
| | Investments (if investment is a mutual fund, please list underlying investments): | | 1.1 | 7-22 |
| | | | 5 - | |
| 5-3 | | | \$. | |
| | | | \$ - | |
| | | | \$ - | |
| | Total Investments | | | \$ |
| | Total Cash and Investments | | | \$ |
| | Please answer the following questions by marking in the appropriate boxes | Yes | No | NIA |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | | 1 |
| lf no, M | UST use this space to provide any explanations: | | | |

The District has no bank accounts at this time.

| | PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS | | | | | | | |
|-----|--|-------|---------|----------|--|--|--|--|
| | Please answer the following questions by marking in the appropriate boxes. | Y | es | No | | | | |
| 6-1 | Does the entity have capital assets? | | 1 | | | | | |
| 6-2 | Has the entity performed an annual inventory of capital assets in accordance with Sect 29-1-506, C.R.S.,? If no, MUST explain: | ion 🗆 | 1 | | | | | |
| | N/A | | | | | | | |
| 6-3 | Balance - Addition | Muset | inter i | Vegr-End | | | | |

| Complete the following capital & right-to-use assets table. | beginning of the | Part 3) | Deletions | BHAInce | |
|--|------------------|---------|-----------|---------|--|
| Land | \$ - | \$ | \$ - | S | |
| Buildings | \$ - | \$ | \$ - | S - | |
| Machinery and equipment | \$ - | \$ | \$ - | S - | |
| Furniture and fixtures | \$ - | \$ | \$ - | S - | |
| Infrastructure | \$ - | \$ | \$ - | 5 | |
| Construction In Progress (CIP) | \$ - | \$ | \$. | 5 | |
| Leased & SBITA Right-to-Use Assets | \$ - | \$ | \$ - | \$ | |
| Other (explain): | \$ - | \$ | \$ - | S - | |
| Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance) | \$ - | \$ | \$ - | s - | |
| TOTAL | \$ - | \$ - | \$ - | S - | |

*must tie to prior year ending adapter Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | PART 7 - PENSION INFORMA | TIC | N | 1. | |
|---------|---|----------------------------------|------------------------------|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | |
| 7-2 | Does the entity have a volunteer firefighters' pension plan? | | | | |
| If yes: | Who administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | Tax (property, SO, sales, etc.): | | | |
| | State contribution amount: | | | | |
| | Other (gifts, donations, etc.): | \$ | - | | |
| | TOTAL | \$ | | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |
| | Part 7 Diagon upo this analog to provide any explanation | | and the second second second | | |

| | PART 8 - BUDGET INFORMAT | ION | | |
|-----|---|------|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes. | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | 2 | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | V | | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$ - |
| Capital Project Fund | \$ - |
| | |
| | |

| PART 9 - TAXPAYER'S BILL OF RIGHTS (TAE | BOR) | |
|--|-----------------|----|
| Please answer the following question by marking in the appropriate box | Yes | No |
| Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 per emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| o, MUST explain: | | |
| | | _ |
| PART 10 - GENERAL INFORMATION | | |
| Please answer the following questions by marking in the appropriate boxes. | Yee | No |
| Is this application for a newly formed governmental entity? 0-1 | | 1 |
| yes: Date of formation: | Т | |
| 0-2 Has the entity changed its name in the past or current year? | | |
| | | |
| | | |
| yes: Please list the NEW name & PRIOR name: | | |
| | | _ |
| 0-3 Is the entity a metropolitan district? | 13 | |
| Please indicate what services the entity provides: Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation | 1 | |
| D-4 Does the entity have an agreement with another government to provide services? | 1 | 2 |
| /es: List the name of the other governmental entity and the services provided: | L) | |
| | 1 | |
| 0-5 Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | 1 |
| /es: Date Filed: | 7 | |
| | | |
| D-6 Does the entity have a certified Mill Levy? | | Ū |
| /es: Please provide the following mills levied for the year reported (do not report \$ amounts); | | |
| Bond Redemption mills | - | |
| General/Other mills | | |
| Total mills | | |
| Yes | No | нA |
| NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has | D | |
| 0-7 the entity filed its preceding year annual report with the State Auditor as required | | |
| under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | 7 | |
| | | |
| Please use this space to provide any additional explanations or comments not previ | ously included: | |

| | PART 11 - GOVERNING BODY APPROVAL | | |
|------|--|----------|----|
| | Please answer the following question by marking in the appropriate box | YES | NO |
| 12_1 | If you plan to submit this form electronically, have you read the new Electronic Signature | v | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

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• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|--|
| Board Member 1 | Print Board Member's Name Lynette Vernon | ILynette Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Board Member 2 | Print Board Member's Name Paul Vernon | I Paul Vernon , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Factor for exemption Date: Mar 27, 2024 My term Expires: May 2025 |
| Board Member 3 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed boar member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No. 7 | For the Year Ended |
|--------------------|--|-----------------------|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended: |
| | Centennial, CO 80112 | |
| CONTACT PERSON | William P. Ankele, Jr. | |
| PHONE | 303-858-1800 | |
| EMAIL | wpankele@wbapc.com | |
| | PART 1 - CERTIFICATION OF PREPARER | |

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.
NAME:
Diane Wheeler
District Accountant
FIRM NAME (if applicable)
Simmons & Wheeler, P.C.
ADDRESS
BHONE
202 690 0933

| PREPARER (SIGNATURE REQUIRED) | | | ATE PREPARED |
|---|--------------|--|--|
| Qiane K Waster | 3/26/2024 | | |
| Please indicate whether the following financial information is recorded | (MODIFIED AC | | PROPRIETARY (CASH OR BUDGETARY BASIS) |
| using Governmental or Proprietary fund types | V | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | | Des | scription | Rou <u>nd</u> | to nearest Dollar | Please use this |
|-------|----------------------------|------------------|--|---------------|-------------------|------------------|
| 2-1 | Taxes: F | Property | (report mills levied in Question 10-6) | \$ | - | space to provide |
| 2-2 | S | Specific owners | ship | \$ | - | any necessary |
| 2-3 | S | Sales and use | | \$ | - | explanations |
| 2-4 | (| Other (specify): | | \$ | - | |
| 2-5 | Licenses and permits | 5 | | \$ | - | |
| 2-6 | Intergovernmental: | | Grants | \$ | - | 1 |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ | - | 1 |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ | - | 1 |
| 2-9 | | | Other (specify): | \$ | - | 1 |
| 2-10 | Charges for services | | | \$ | - | 1 |
| 2-11 | Fines and forfeits | | | \$ | - | |
| 2-12 | Special assessments | | | \$ | - |] |
| 2-13 | Investment income | | | \$ | - | |
| 2-14 | Charges for utility ser | rvices | | \$ | - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ | - | |
| 2-16 | Lease proceeds | | | \$ | - | |
| 2-17 | Developer Advances | received | (should agree with line 4-4) | \$ | - | |
| 2-18 | Proceeds from sale of | f capital assets | 5 | \$ | - | |
| 2-19 | Fire and police pension | on | | \$ | - | |
| 2-20 | Donations | | | \$ | - | |
| 2-21 | Other (specify): | | | \$ | - |] |
| 2-22 | | | | \$ | - |] |
| 2-23 | | | | \$ | - |] |
| 2-24 | | (add lin | es 2-1 through 2-23) TOTAL REVENUE | \$ | | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | Round to nearest Dollar | Please use this |
|---------|--|---|------------------|
| 3-1 | Administrative | - \$ | space to provide |
| 3-2 | Salaries | \$ - | any necessary |
| 3-3 | Payroll taxes | \$ - | explanations |
| 3-4 | Contract services | \$ - | - |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ - | |
| 3-7 | Accounting and legal fees | \$ - | |
| 3-8 | Repair and maintenance | - \$ | |
| 3-9 | Supplies | \$ - | |
| 3-10 | Utilities and telephone | \$ - | |
| 3-11 | Fire/Police | \$ - | |
| 3-12 | Streets and highways | \$ - | |
| 3-13 | Public health | \$ - | |
| 3-14 | Capital outlay | \$ - | |
| 3-15 | Utility operations | \$ - | |
| 3-16 | Culture and recreation | \$ - | |
| 3-17 | Debt service principal (should agree with Part 4 | \$ - | |
| 3-18 | Debt service interest | \$ - | |
| 3-19 | Repayment of Developer Advance Principal (should agree with line 4-4 | - \$ | |
| 3-20 | Repayment of Developer Advance Interest | \$ - | |
| 3-21 | Contribution to pension plan (should agree to line 7-2 | \$ - | |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2 | - \$ | |
| 3-23 | Other (specify): | | |
| 3-24 | | \$ - | |
| 3-25 | | \$ - |] |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | \$- | |
| f TOTAL | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER that | n \$100,000 - <u>STOP</u>. You may | not use this |

form. Please use the "Application for Exemption from Audit - LONG FORM".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUEC |), A | ND RI | ETIR | ED | | |
|-----------|--|--------------------------|---------------|-------|-------------|-----------|---------------|----------------|---|
| | Please answer the following questions by marking the | e appropri | ate boxes. | Ĩ. | | | Yes | No | |
| 4-1 | Does the entity have outstanding debt? | | | | | (| 1 | | |
| | If Yes, please attach a copy of the entity's Debt Repayment Schedule. | | | | | | 22 | 1000 | |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explanation | ain belov | N: | | | . 4 | | | |
| | N/A | | | | | | | | |
| | | | - | - | | | | | |
| 4-3 | | | | | | | 1 | [2] | |
| | N/A | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | | | | 2122 - | Le mi | | CONTRACTOR NO. | |
| | (please only include principal amounts)(enter all amount as positive | | anding at | Issu | ed during | 120105000 | d during | Cutstanding at | |
| | numbers) | end of | prior year* | | year | | ioar | | |
| | General obligation bonds | \$ | - | \$ | | ŝ | | s | - |
| | Revenue bonds | \$ | - | \$ | | \$ | - | S | - |
| | Notes/Loans | \$ | - | \$ | 14 | S | 4 | S | - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | - | \$ | - | \$ | | S | - |
| | Developer Advances | \$ | - | \$ | | \$ | | S | - |
| | Other (specify): | \$ | - | \$ | <u></u> | \$ | - | S | - |
| | TOTAL | \$ | - | \$ | | ŝ | | S | - |
| **Subscri | otion Based Information Technology Arrangements | *Must a | agree to pric | | and balance | F | | | |
| | Please answer the following questions by marking the appropriate box | es. | | | | 2 | Yes | Nc | |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | | | | |
| If yes: | | \$ | | | 0,000.00 | 1 | | | |
| | Date the debt was authorized: | | 5/4/2 | 2010 | - | 1 | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 2. 9 | | 12 | |
| If yes: | How much? | \$ | | | | | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | s still responsible for? | | | | 12 | | 1 | |
| If yes: | What is the amount outstanding? | \$ | | | | | | | |
| 4-8 | Does the entity have any lease agreements? | | | | | | 2 | | |
| If yes: | What is being leased? | | | | - | | | | |
| | What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | 1 | | 12 | |
| | Is the lease subject to annual appropriation? | ¢ | | | | 1 . U | - | 12 | |
| | What are the annual lease payments? Part 4 - Please use this space to provide any explanations/cc | \$ | oration | hear | anato data | 1 | ation if | in such as | |
| | i art + - i lease use this space to provide any explaitations/co | minents | o allac | n sep | mate coc | -unieric | actions, in a | leeded | |

| | PART 5 - CASH AND INVESTME | NTS | | |
|----------|---|---|--------|-------------------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Total |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ - | |
| 5-2 | Certificates of deposit | | \$ - | 1.1 |
| | Total Cash Deposits | | | \$ |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | 9-30 ⁻ |
| | | | 5 - | |
| 5-3 | | | \$. | |
| 5-5 | | | \$ - | |
| | | _ | \$ - | |
| | Total Investments | | | \$ - |
| | Total Cash and Investments | and the second se | | \$ |
| | Please answer the following questions by marking in the appropriate boxes | Yes | No | NA |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | 2 |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | | 1 |
| lf no, M | JST use this space to provide any explanations: | | | |

The District has no bank accounts at this time.

| PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS | | | | | | | |
|--|---|-------------------------------|-----------------|-----------|----------|--|--|
| | Please answer the following questions by marking in the appropriate box | es. | | Yes | No | | |
| 6-1 | Does the entity have capital assets? | | | | | | |
| 6-2 | Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain: | | | | | | |
| | N/A | | | | | | |
| 6-3 | Complete the following capital & right-to-use assets table: | Balance - beginning of the | Additions (Must | Deletions | Vear-End | | |

| complete the following capital & right-to-use assets table. | year | | art 3) | 1000 | entonis. | Belanc | e |
|---|------|------|--------|------|----------|--------|---|
| Land | \$ | - \$ | - | \$ | ~ | S | - |
| Buildings | \$ | - \$ | 14 | \$ | ÷ | S | - |
| Machinery and equipment | \$ | - \$ | | \$ | | S | - |
| Furniture and fixtures | \$ | - \$ | | \$ | ÷. | S | - |
| Infrastructure | \$ | - \$ | | \$ | | 5 | - |
| Construction In Progress (CIP) | \$ | - \$ | | \$ | | 5 | - |
| Leased & SBITA Right-to-Use Assets | \$ | - \$ | + | \$ | | S | - |
| Other (explain): | \$ | - \$ | | \$ | | S | - |
| Accumulated Depreciation/Amortization | \$ | - \$ | | 4 | | | |
| (Please enter a negative, or credit, balance) | Ψ | - V | | Š | | s | - |
| TOTAL | \$ | - \$ | | S | - | S | - |

*must tie to prior year ending belance

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | PART 7 - PENSION INFORMA | TIC | N | | |
|---------|---|--------|------------------------|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | |
| 7-2 | Does the entity have a volunteer firefighters' pension plan? | | | | |
| If yes: | Who administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | - | | |
| | State contribution amount: | \$ | - | | |
| | Other (gifts, donations, etc.): | \$ | | | |
| | TOTAL | \$ | - | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |
| | Part 7 Please use this space to provide any explanation | c or o | to set on a second set | | |

| | PART 8 - BUDGET INFORMAT | ION | | |
|-----|---|-----|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | | | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$ - |
| Capital Project Fund | \$ - |
| | |
| | |

| PART 9 - TAXPAYER'S BILL OF RIGHTS (TA | BOR) | |
|--|-------------------|----|
| Please answer the following question by marking in the appropriate box | Yes | No |
| Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 per emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |
| o, MUST explain: | | |
| | | |
| PART 10 - GENERAL INFORMATION | | |
| Please answer the following questions by marking in the appropriate boxes. | Yes | No |
| Is this application for a newly formed governmental entity? 0-1 | | 1 |
| yes: Date of formation: | | |
| 0-2 Has the entity changed its name in the past or current year? | | |
| | - | |
| | | |
| yes: Please list the NEW name & PRIOR name: | | |
| | | 1 |
| 0-3 Is the entity a metropolitan district? | Ð | |
| Please indicate what services the entity provides: Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation | -1 | |
| D-4 Does the entity have an agreement with another government to provide services? | 172 | 2 |
| /es: List the name of the other governmental entity and the services provided: | 0 | |
| | The second | |
| 0-5 Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | 1 |
| ves: Date Filed: | | |
| | | |
| 0-6 Does the entity have a certified Mill Levy? | | 1 |
| /es: Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): | | |
| Bond Redemption mills | 1 | |
| General/Other mills | | |
| Total mills | | |
| Yes | No | HA |
| NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has | D | |
| 0-7 the entity filed its preceding year annual report with the State Auditor as required | | |
| under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain. | | |
| | | |
| Please use this space to provide any additional explanations or comments not prev | viously included: | |

| | PART 11 - GOVERNING BODY APPROVAL | | | | |
|------|--|----------|----|--|--|
| | Please answer the following question by marking in the appropriate box | YES | NO | | |
| 12_1 | If you plan to submit this form electronically, have you read the new Electronic Signature | v | | | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

| | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|---|
| Board Member 1 | Print Board Member's Name Lynette Vernon | I Lynette Vernon , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Board Member 2 | Print Board Member's Name Paul Vernon | I Paul Vernon , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Fault Jume Date: Mar 27, 2024 |
| | Print Board Member's Name | My term Expires: <u>May 2025</u> I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for |
| Board Member 3 | | exemption from audit. Signed Date: My term Expires: |
| Board Member 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Adams Crossing Metropolitan District No. 8 | For the Year Ended |
|--------------------|--|-----------------------|
| ADDRESS | c/o White Bear Ankele Tanaka & Waldron | 12/31/23 |
| | 2154 E. Commons Avenue, Suite 2000 | or fiscal year ended: |
| | Centennial, CO 80112 | |
| CONTACT PERSON | William P. Ankele, Jr. | |
| PHONE | 303-858-1800 | |
| EMAIL | wpankele@wbapc.com | |
| | PART 1 - CERTIFICATION OF PREPARER | |

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.
NAME:
Diane Wheeler
District Accountant
FIRM NAME (if applicable)
Simmons & Wheeler, P.C.
304 Inverness Way South, Suite 490, Englewood, CO 80112

| PHONE | 303-689-0833 | | | |
|--|--------------------------|--|---|--|
| PREPA | RER (SIGNATURE REQUIRED) | | D | ATE PREPARED |
| Qion K Waln | | | | 3/26/2024 |
| Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types | | GOVERNMENTAL (MODIFIED ACCRUAL BASIS) | | PROPRIETARY (CASH OR BUDGETARY BASIS) |
| | | √ | | |

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | | Des | scription | Rou <u>nd</u> | to nearest Dollar | Please use this |
|-------|----------------------------|------------------|--|---------------|-------------------|------------------|
| 2-1 | Taxes: F | Property | (report mills levied in Question 10-6) | \$ | - | space to provide |
| 2-2 | S | Specific owners | ship | \$ | - | any necessary |
| 2-3 | S | Sales and use | | \$ | - | explanations |
| 2-4 | (| Other (specify): | | \$ | - | |
| 2-5 | Licenses and permits | 5 | | \$ | - | |
| 2-6 | Intergovernmental: | | Grants | \$ | - | 1 |
| 2-7 | | | Conservation Trust Funds (Lottery) | \$ | - | 1 |
| 2-8 | | | Highway Users Tax Funds (HUTF) | \$ | - | 1 |
| 2-9 | | | Other (specify): | \$ | - | 1 |
| 2-10 | Charges for services | | | \$ | - | 1 |
| 2-11 | Fines and forfeits | | | \$ | - | |
| 2-12 | Special assessments | | | \$ | - |] |
| 2-13 | Investment income | | | \$ | - | |
| 2-14 | Charges for utility ser | rvices | | \$ | - | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$ | - | |
| 2-16 | Lease proceeds | | | \$ | - | |
| 2-17 | Developer Advances | received | (should agree with line 4-4) | \$ | - | |
| 2-18 | Proceeds from sale of | f capital assets | 5 | \$ | - | |
| 2-19 | Fire and police pension | on | | \$ | - | |
| 2-20 | Donations | | | \$ | - | |
| 2-21 | Other (specify): | | | \$ | - |] |
| 2-22 | | | | \$ | - |] |
| 2-23 | | | | \$ | - |] |
| 2-24 | | (add lin | es 2-1 through 2-23) TOTAL REVENUE | \$ | | |

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description | Round to nearest Dollar | Please use this |
|---------|--|---|------------------|
| 3-1 | Administrative | - \$ | space to provide |
| 3-2 | Salaries | \$ - | any necessary |
| 3-3 | Payroll taxes | \$ - | explanations |
| 3-4 | Contract services | \$ - | - |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ - | |
| 3-7 | Accounting and legal fees | \$ - | |
| 3-8 | Repair and maintenance | - \$ | |
| 3-9 | Supplies | \$ - | |
| 3-10 | Utilities and telephone | \$ - | |
| 3-11 | Fire/Police | \$ - | |
| 3-12 | Streets and highways | \$ - | |
| 3-13 | Public health | \$ - | |
| 3-14 | Capital outlay | \$ - | |
| 3-15 | Utility operations | \$ - | |
| 3-16 | Culture and recreation | \$ - | |
| 3-17 | Debt service principal (should agree with Part 4 | - \$ | |
| 3-18 | Debt service interest | \$ - | |
| 3-19 | Repayment of Developer Advance Principal (should agree with line 4-4 | - \$ | |
| 3-20 | Repayment of Developer Advance Interest | \$ - | |
| 3-21 | Contribution to pension plan (should agree to line 7-2 | \$ - | |
| 3-22 | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2 | - \$ | |
| 3-23 | Other (specify): | | |
| 3-24 | | \$ - | |
| 3-25 | | \$ - |] |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | \$- | |
| f TOTAL | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER that | n \$100,000 - <u>STOP</u>. You may | not use this |

form. Please use the "Application for Exemption from Audit - LONG FORM".

| | PART 4 - DEBT OUTSTANDIN | G, IS | SUEC |), A | ND RI | ETIR | ED | | |
|-----------|--|------------|---------------|-------|-------------|-----------|---------------|----------------|----------|
| | Please answer the following questions by marking the | e appropri | ate boxes. | Ĩ. | | | Yes | No | |
| 4-1 | Does the entity have outstanding debt? | | | | | (| 1 | | |
| | If Yes, please attach a copy of the entity's Debt Repayment | | | | | 1 | 22 | 1000 | |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explanation | ain belov | N: | | | . 4 | | | |
| | N/A | | | | | | | | |
| | | | | | | | - | - | |
| 4-3 | Is the entity current in its debt service payments? If no, MU | SI expla | in below: | | | 4 | 1 | [2] | |
| | N/A | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | | | | 2122 - | Le mi | | CONTRACTOR NO. | |
| | (please only include principal amounts)(enter all amount as positive | | anding at | Issu | ed during | 120105000 | d during | Outstandin | <u> </u> |
| | numbers) | end of | prior year* | | year | | ioar | year-and | à |
| | General obligation bonds | \$ | - | \$ | | ŝ | | s | - |
| | Revenue bonds | \$ | - | \$ | | \$ | - | S | - |
| | Notes/Loans | \$ | - | \$ | 14 | S | 4 | S | - |
| | Lease & SBITA** Liabilities [GASB 87 & 96] | \$ | - | \$ | - | \$ | | S | - |
| | Developer Advances | \$ | - | \$ | | \$ | | S | - |
| | Other (specify): | \$ | - | \$ | <u></u> | \$ | - | S | - |
| | TOTAL | \$ | - | \$ | | ŝ | | S | - |
| **Subscri | otion Based Information Technology Arrangements | *Must a | agree to pric | | and balance | F | | | |
| | Please answer the following questions by marking the appropriate box | es. | | | | 2 | Yes | No | |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | | | | |
| If yes: | | \$ | | | 0,000.00 | 1 | | | |
| | Date the debt was authorized: | | 5/4/2 | 2010 | - | 1 | | | |
| 4-6 | Does the entity intend to issue debt within the next calenda | r year? | | | | 2. 9 | | 12 | |
| If yes: | How much? | \$ | | | | | | | |
| 4-7 | Does the entity have debt that has been refinanced that it is | still res | ponsible | for? | | 12 | | 1 | |
| If yes: | What is the amount outstanding? | \$ | | | - | | | | |
| 4-8 | Does the entity have any lease agreements? | | | | | | | 2 | |
| If yes: | What is being leased? | | | | - | | | | |
| | What is the original date of the lease? | | | | | | | | |
| | Number of years of lease? | | | | | 1 | | 12 | |
| | Is the lease subject to annual appropriation? | ¢ | | | | 1. U. | - | 12 | |
| | What are the annual lease payments? Part 4 - Please use this space to provide any explanations/cc | \$ | oration | hear | anato data | 1 | ation if | in such as | |
| | i art + - i lease use this space to provide any explaitations/co | minents | o allac | n sep | mate 000 | -unieric | actions, in a | leeded | |

| | PART 5 - CASH AND INVESTME | NTS | | |
|----------|---|---|--------|-------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Total |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$ - | |
| 5-2 | Certificates of deposit | | \$ - | 1.1 |
| | Total Cash Deposits | | | \$ |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | 100 |
| | | | 5 - | |
| 5-3 | | | \$. | |
| 5-5 | | | \$ - | |
| | | | \$ - | |
| | Total Investments | | | \$ |
| | Total Cash and Investments | and the second se | | \$ |
| | Please answer the following questions by marking in the appropriate boxes | Yes | No | NA |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | 2 |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | | | 2 |
| lf no, M | UST use this space to provide any explanations: | | | |

The District has no bank accounts at this time.

| | PART 6 - CAPITAL AND RIC | HT-TO-U | SE ASSE | TS | |
|---|---|-------------------------------|-----------------|-----------|----------|
| | Please answer the following questions by marking in the appropriate box | es. | | Yes | No |
| 6-1 | Does the entity have capital assets? | | | | |
| 6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain: | | | | | |
| | N/A | | | | |
| 6-3 | Complete the following capital & right-to-use assets table: | Balance - beginning of the | Additions (Must | Deletions | Vear-End |

| complete the following capital & right-to-use assets table. | year | | art 3) | 1000 | entonis. | Belanc | e |
|---|------|------|--------|------|----------|--------|---|
| Land | \$ | - \$ | - | \$ | ~ | S | - |
| Buildings | \$ | - \$ | 14 | \$ | ÷ | S | - |
| Machinery and equipment | \$ | - \$ | | \$ | | S | - |
| Furniture and fixtures | \$ | - \$ | | \$ | ÷. | S | - |
| Infrastructure | \$ | - \$ | | \$ | | 5 | - |
| Construction In Progress (CIP) | \$ | - \$ | | \$ | | 5 | - |
| Leased & SBITA Right-to-Use Assets | \$ | - \$ | + | \$ | | S | - |
| Other (explain): | \$ | - \$ | | \$ | | S | - |
| Accumulated Depreciation/Amortization | \$ | - \$ | | 4 | | | |
| (Please enter a negative, or credit, balance) | Ψ | - V | | Š | | s | - |
| TOTAL | \$ | - \$ | | S | - | S | - |

*must tie to prior year ending belance

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

| | PART 7 - PENSION INFORMA | TIC | N | | |
|--|---|--------|------------------------|-----|----|
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | |
| 7-2 Does the entity have a volunteer firefighters' pension plan? | | | | | |
| If yes: | If yes: Who administers the plan? | | | | |
| | Indicate the contributions from: | | | | |
| | Tax (property, SO, sales, etc.): | \$ | - | | |
| | State contribution amount: | \$ | - | | |
| | Other (gifts, donations, etc.): | \$ | | | |
| | TOTAL | \$ | - | | |
| | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ | - | | |
| | Part 7 Please use this space to provide any explanation | c or o | to set on a second set | | |

| | PART 8 - BUDGET INFORMAT | ION | | |
|-----|---|------|----|-----|
| | Please answer the following questions by marking in the appropriate boxes. | Yes. | No | N/A |
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | 2 | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | | | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$ - |
| Capital Project Fund | \$ - |
| | |
| | |

| Please answer the following question by marking in the appropriate box 9-1 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to examplify a government from the speciar dimension of TABOR and example the government from the 3 period entergency reserve requirement. All governments should determine if they meet this requirement of TABOR. no, MUST explain: PARC 10 - GENERAL INFORMATION Please answer the following questions by marking in the appropriate boxes. Is this application for a newly formed governmental entity? 10-1 If yes: Date of formation: 10-2 Has the entity changed its name in the past or current year? 11-3 Is the entity a metropolitan district? Please indicate what services the entity provides: Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation 10-4 Does the entity have an agreement with another government to provide services? 10-5 Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during 10-6 Does the entity have a certified Mill Levy? 11/5 Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during 10-6 |) | OR) | PART 9 - TAXPAYER'S BILL OF RIGH | | | | |
|--|--|-----|---|-------|--|--|--|
| Note: An election to exempt the government from the spending imitations of TAGOR does not exempt the government from the 3 period Note: An election to exempt the governments should determine if they meet the requirement of TABOR. Note: An election to exempt the governments should determine if they meet the requirement of TABOR. Note: An election to exempt the governments should determine if they meet the requirement of TABOR. Note: An election to exempt the government should determine if they meet the requirement of TABOR. Note: An election to exempt the government should determine if they meet the requirement of TABOR. Note: An election to exempt the government should determine if they meet the requirement of TABOR. Note: An election to exempt the government should determine if they meet the requirement of TABOR. Note: An election to exempt the government should determine if they meet the requirement of TABOR. Note: An election to exempt the following questions by marking in the appropriate boxes. Is the entity changed its name in the past or current year? New: Please list the NEW name & PRIOR name: Interview of the other government at entity provides: Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation Interview and greement with another government to provide services? Is the entity have an agreement with another government to provide services? Is the name of the other governmental entity an | Yes N | | | | | | |
| Please answer the following questions by marking in the appropriate boxes. Is this application for a newly formed governmental entity? 1 yes: Date of formation: 0-2 Has the entity changed its name in the past or current year? yes: Please list the NEW name & PRIOR name: 0-3 Is the entity a metropolitan district? Please indicate what services the entity provides: Sanitary sewer/storm drainage, streets, water, traffic & safety controls, park & recreation 0-4 Does the entity have an agreement with another government to provide services? List the name of the other governmental entity and the services provided: 0-5 Has the district filed a <i>Title 32</i> , <i>Article 1 Special District Notice of Inactive Status</i> during 0-6 Does the entity have a certified Mill Levy? yes: Please provide the following mills levied for the year reported (do not report \$ amounts): Bond Redemption mills General/Other mills Total mills 0-7 the entity fied its preceding year annual report with the State Auditor as required | 2 0 | | Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the | | | | |
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| Please use this space to provide any additional explanations or comments not previously in | | | Discourse dela seconda de la constitución del 1915 este este del 1915 este del 1915 este del 1915 este del 1915 | L | | | |

| | PART 11 - GOVERNING BODY APPROVAL | | | | |
|------|--|----------|----|--|--|
| | Please answer the following question by marking in the appropriate box | YES | NO | | |
| 12_1 | If you plan to submit this form electronically, have you read the new Electronic Signature | v | | | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

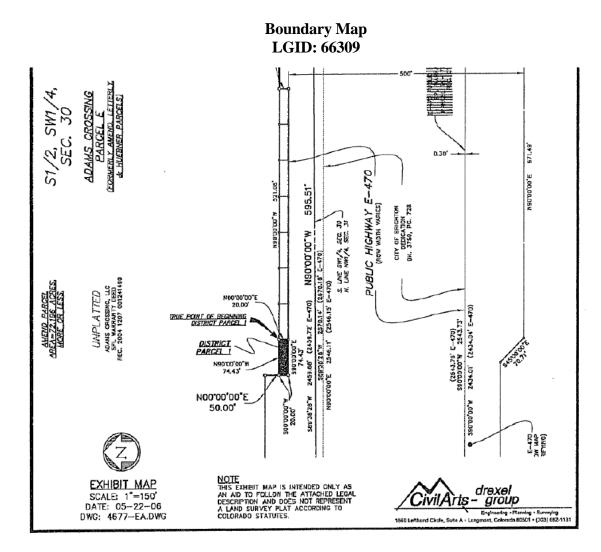
2) Submit the application electronically via email and either,

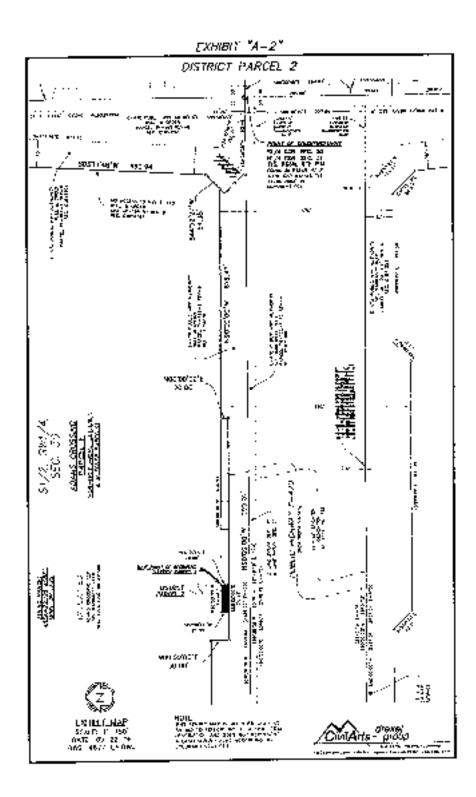
a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

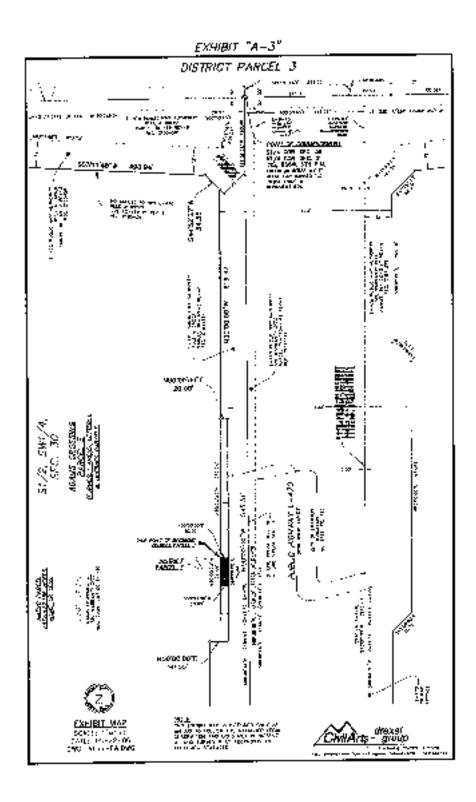
b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

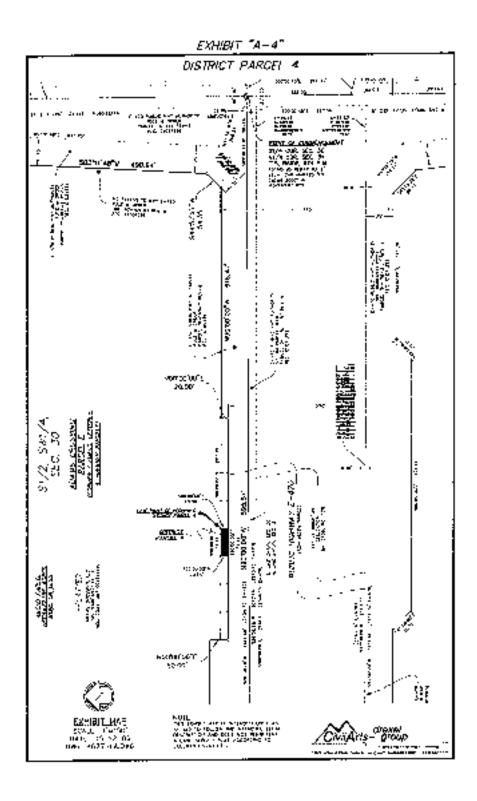
| | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below. |
|----------------------|---|--|
| Board Member 1 | Print Board Member's Name Lynette Vernon | I Lynette Vernon , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed |
| Board Member 2 | Print Board Member's Name Paul Vernon | IPaul Vernon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Faults Jume Date: Mar 27, 2024 |
| Board Member 3 | Print Board Member's Name | My term Expires: May 2025 I |
| Board Member 4 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 5 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 6 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |
| Board Member 7 | Print Board Member's Name | I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

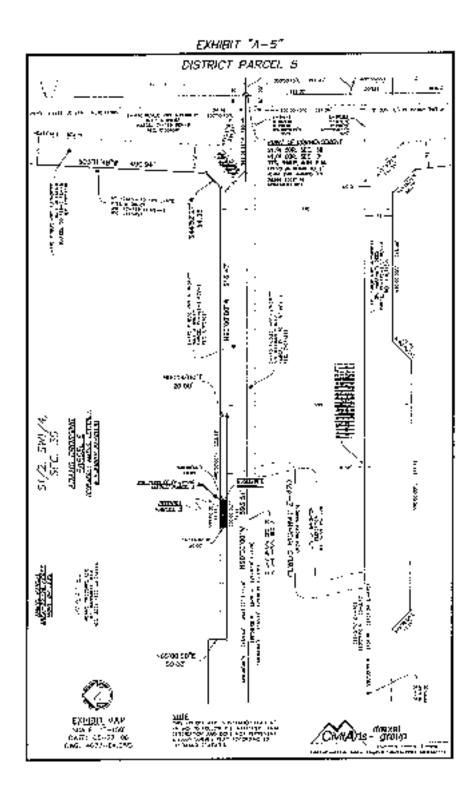
EXHIBIT C Current Boundary Maps

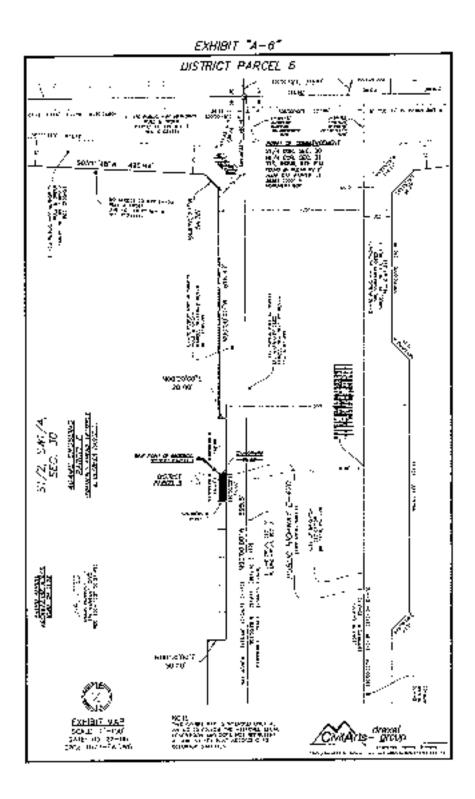


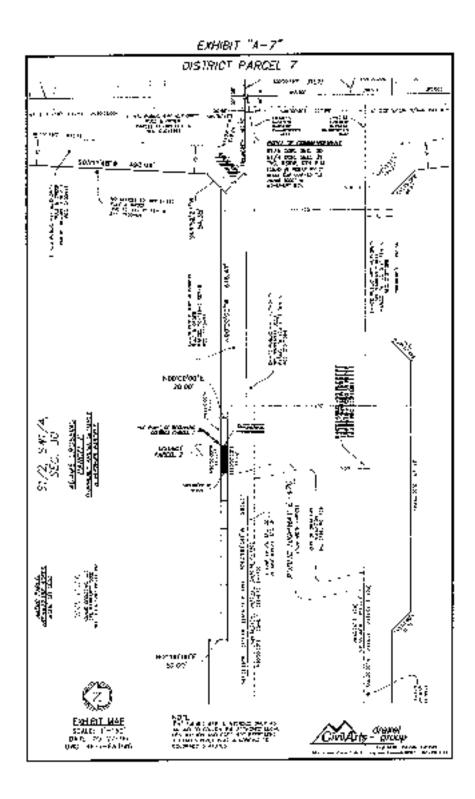












LGID: 66316

