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	

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	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
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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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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

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	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:

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• 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						
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)-7 the entity filed its preceding year annual report with the State Auditor as required		17	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has				
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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.

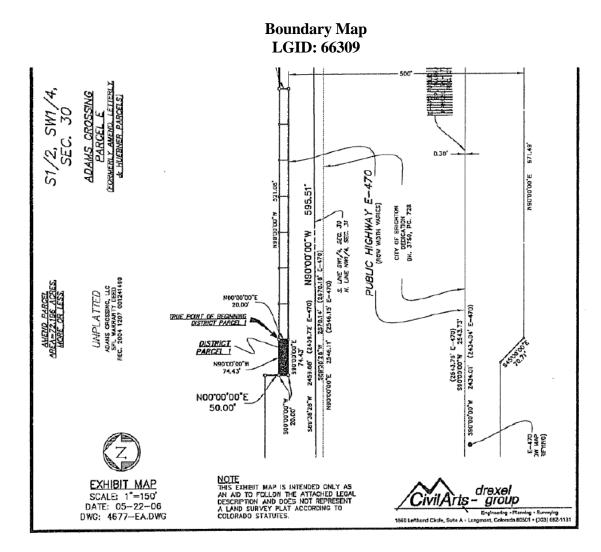
2) Submit the application electronically via email and either,

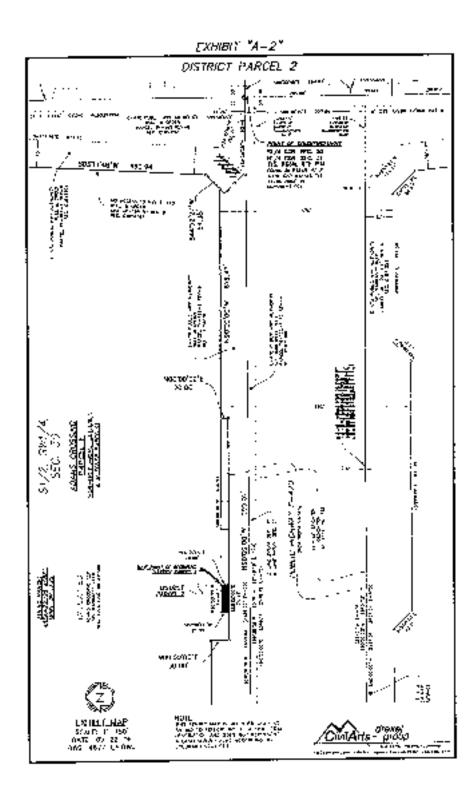
a. Include a copy of an adopted resolution that documents formal approval by the Board, \boldsymbol{or}

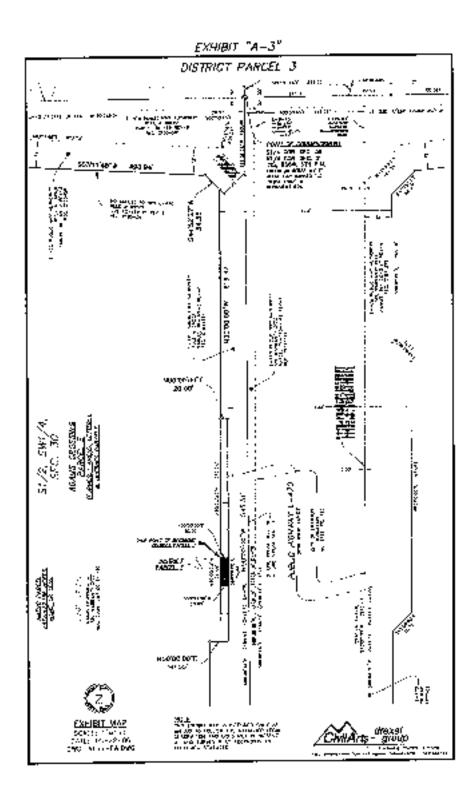
b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

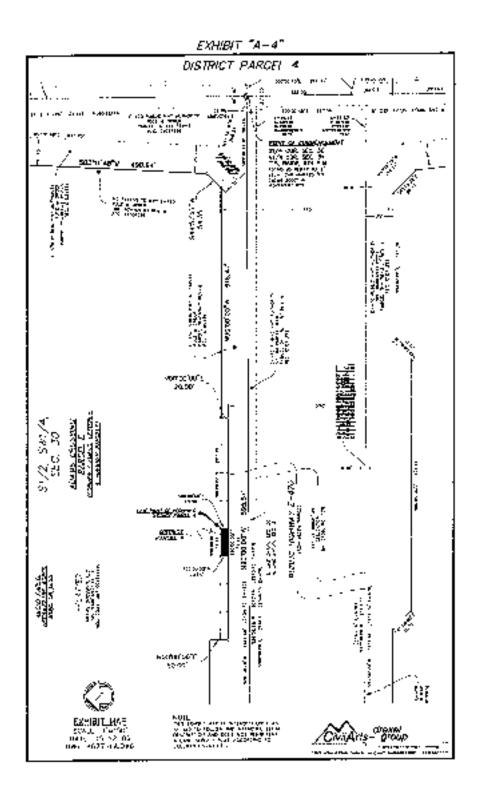
	names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must sign below.
Board Member 1	Print Board Member's Name Lynette Vernon	I Lynette Vernon , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve 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:

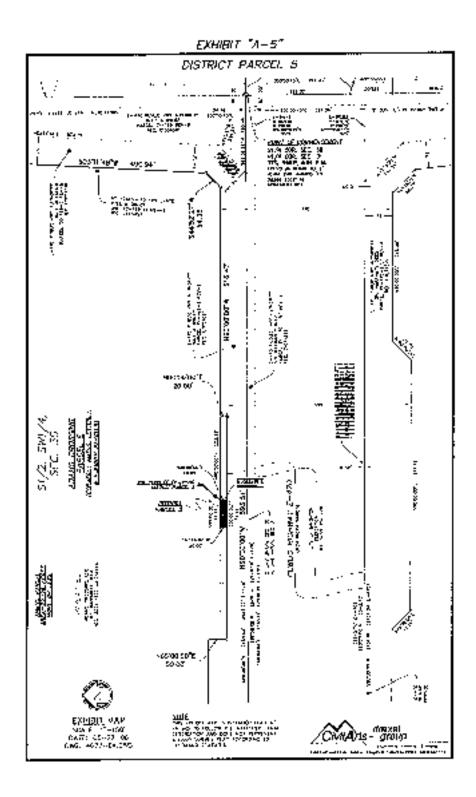
EXHIBIT C Current Boundary Maps

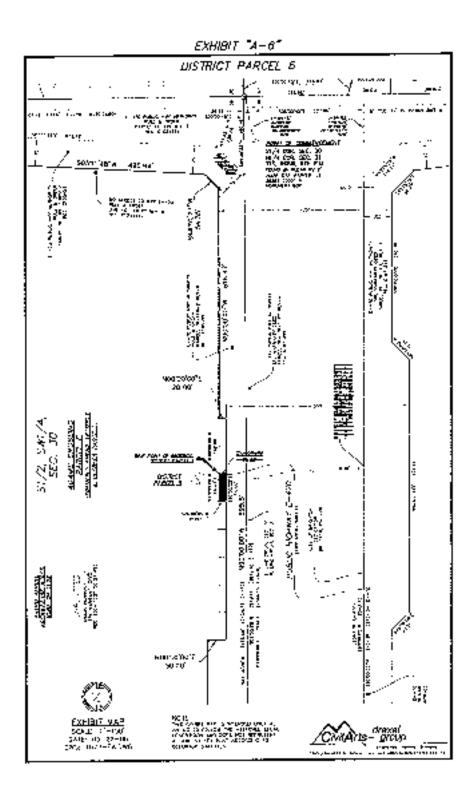


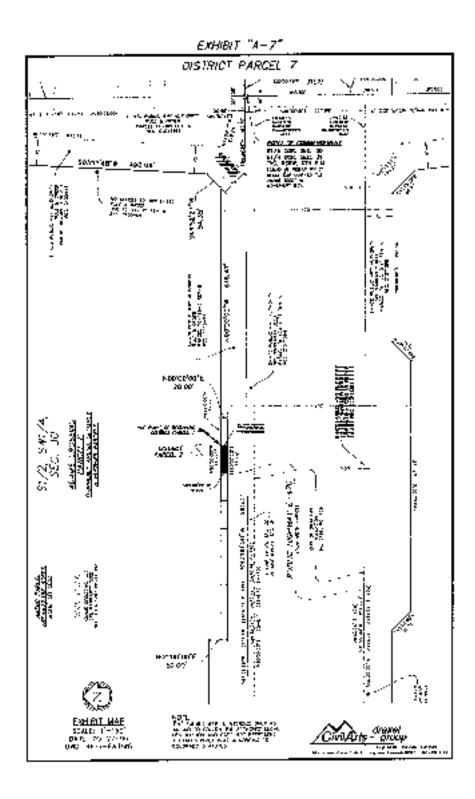












LGID: 66316

