APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

FOR LOCAL GOVERNMENTS WITH EITHER REVENUES OR EXPENDITURES MORE THAN \$100,000 BUT NOT MORE THAN \$750,000

Under the Local Government Audit Law (Section 29-1-601, et seq., C.R.S.) any local government may apply for an exemption from audit if neither revenues nor expenditures exceed \$750,000 for the year.

| | | EXEMPTIONS FROM AUDIT | ARE NOT AUTOMATIC | | | | |
|-------------|-----------------------------|---|--|---|--|--|--|
| To qu | alify for exempti | on from audit, a local government must complete an Application for Exemption from Audit EACH YEAR and s | submit it to the Office of the State Auditor (OSA) f | for approval. | | | |
| Any p | reparer of an Ap | pplication for Exemption from Audit must be an independent accountant with knowledge of governmental acco | unting. | | | | |
| Appro | val for an exem | ption from audit is granted only upon the review by the OSA. | | | | | |
| | | READ ALL INSTRUCTIONS BEFORE COMPL | LETING AND SUBMITTING THIS FOR | RM | | | |
| DECE GOV | MBER 31 YEAR ERNMENTAL A | MUST BE FILED WITH THE OSA <u>WITHIN 3 MONTHS</u> AFTER THE ACCOUNTING YEAR-END. FOR EXAN R-END. <i>APPLICATIONS FOR EXEMPTION FROM AUDIT SUBMISSIONS ARE NOT ELIGIBLE FOR AN EX</i> <u>CTIVITY</u> SHOULD BE REPORTED ON THE <u>MODIFIED ACCRUAL BASIS</u> I <u>VITY</u> SHOULD BE REPORTED ON A <u>BUDGETARY BASIS</u> | TENSION OF TIME. | | | | |
| | | POSTMARK DATES WILL <u>NOT</u> BE ACCEPTED AS PROOF OF SU | | | | | |
| | | S ARE OBSOLETE AND WILL <u>NOT</u> BE ACCEPTED. | , | REVISED STATUTES CAN BE FOUND AT THIS ADDRESS: | | | |
| | | MITTED ON FORMS OTHER THAN THOSE PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED. | http://www.lexisnexis.com/hottopics/Colorado/ | | | | |
| APPL | ICATIONS MUS | T BE FULLY AND ACCURATELY COMPLETED. | | | | | |
| | | CHECKL | IST | | | | |
| | Has the prep | arer signed the application? | | Checkout our <u>web portal</u> . Register your | | | |
| | Has the entit | y corrected all Prior Year Deficiencies as communicated by the OSA? | | account and submit electronic Applications | | | |
| | Has the appl | ication been <u>PERSONALLY</u> reviewed and approved by the governing body? | | for Exemption From Audit, Extension of | | | |
| | Are all section | ons of the form complete, including responses to all of the questions? | | Time to File requests, Audited Financia Statements, and more! See the link below | | | |
| | Did you inclu | Ide any relevant explanations for unusual items in the appropriate spaces at the end of each section? | | | | | |
| | Will this app | lication be submitted electronically? | | | | | |
| | | If yes, have you read and understand the new Electronic Signature Policy? See new here policy | | | | | |
| | or | | | | | | |
| | | Have you included a resolution? | | | | | |
| | | Does the resolution state that the governing body PERSONALLY reviewed and approved the resolution | tion in an open public meeting? | Click here to go to the portal | | | |
| | | Has the resolution been signed by a MAJORITY of the governing body? (See sample resolution.) | | | | | |
| | Will this app | lication be submitted via a mail service? (e.g. US Post Office, FedEx, UPS, courier.) | | | | | |
| | | If yes, does the application include ORIGINAL INK SIGNATURES from the MAJORITY of the governing | ng body? | | | | |
| | | FILING MET | | | | | |
| | | FILING MET | | | | | |
| | | Register and submit your Applications at our web portal: https://apps.leg.co.gov/osa/lg Office of the State Auditor Local Government Audit Division 1525 Sherman St., 7th Floor Denver, CO 80203 | For faster processing the web portal is | the preferred method for submission | | | |
| | | Please Note: The OSA's email addresses have changed as of December 1, 2023. Please ensure you are | using the email address noted below. | | | | |
| QUE | STIONS? | Email: osa.lg@coleg.gov or Phone: 303-869-3000 | | | | | |
| Gove | rnmental Activity | remption from Audit are subject to review and approval by the Office of the State Auditor. / should be reported on the Modified Accrual Basis lould be reported on the Cash or Budgetary Basis A Budget to GAAP reconciliation is provided in Part 3 | | | | | |

Α

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year.

In that event, AN AUDIT SHALL BE REQUIRED.

| OocuSign Envelope ID: D86A3 | 046-733B-4AB7-A160-74A0995BADC6 | |
|-----------------------------|--|-----------------------|
| , i | APPLICATION FOR EXEMPTION FROM AUDIT | |
| | LONG FORM | |
| NAME OF GOVERNMENT | River Park Metropolitan District | For the Year Ended |
| ADDRESS | 28 2nd Ste., Unit 213 | 12/31/2023 |
| | Edwards, CO 81632 | or fiscal year ended: |
| CONTACT PERSON | Kenneth J Marchetti | |
| PHONE | (970) 926-6060 | |
| EMAIL | debbie@mwcpaa.com | |
| | CERTIFICATION OF PREPARER | |
| | puntant with knowledge of governmental accountin g and that the information in the Application is complete and accurate to the best of my kno e application if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separat | |
| NAME: | Kenneth J Marchetti | |
| TITLE | Principal/CPA | |
| FIRM NAME (if applicable) | Marchetti & Weaver, LLC | |
| ADDRESS | 28 2nd St, Unit 213, Edwards, CO 81632 | |
| PHONE | (970) 926-6060 | |
| RELATIONSHIP TO ENTITY | Outside Accountant, all major decisions made by the Board of Directors | |
| | PREPARER (SIGNATURE REQUIRED) | DATE PREPARED |
| Khranchott | AT I I I I I I I I I I I I I I I I I I I | 3/6/2024 |

| Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status | YES | NO | | |
|--|-----|----|---------------------|--|
| during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.] | | | If Yes, date filed: | |
| 104 (0), 0.1.0.1 | — | _ | | |

DocuSign Envelope ID: D86A3046-733B-4AB7-A160-74A0995BADC6 PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

| NOTE: A | ttach additional sheets as necessary. | Governme | ntal Funds | | Proprietary/Fid | luciarv Funds | |
|---------|---|------------------|------------|---|-----------------|---------------|---|
| Line # | Description | General Fund* | Fund* | Description | Fund* | Fund* | Please use this space to provide explanation of any |
| | Assets | | | Assets | | | items on this page |
| 1-1 | Cash & Cash Equivalents | \$ 9,704 | \$- | Cash & Cash Equivalents | \$- | \$ - | |
| 1-2 | Investments | \$ 34,223 | \$- | Investments | \$- | \$- | |
| 1-3 | Receivables | \$- | \$- | Receivables | \$- | \$ - | - |
| 1-4 | Due from Other Entities or Funds | \$ 576 | \$- | Due from Other Entities or Funds | \$- | \$ - | |
| 1-5 | Property Tax Receivable | \$ 166,398 | \$- | Other Current Assets [specify] | | | - |
| | All Other Assets [specify] | | | · | \$- | \$ - |] |
| 1-6 | Lease Receivable (as Lessor) | \$- | \$- | Total Current Assets | \$- | \$ - | |
| 1-7 | Prepaid Expenses | \$ 3,389 | \$- | Capital & Right to Use Assets, net (from Part 6-4) | \$- | \$ - | 1 |
| 1-8 | | \$ - | | Other Long Term Assets [specify] | | \$ - | 1 |
| 1-9 | | | | | | \$ - | - |
| 1-10 | | \$- | | | \$- | | 1 |
| 1-11 | (add lines 1-1 through 1-10) TOTAL ASSETS | \$ 214,289 | \$ - | (add lines 1-1 through 1-10) TOTAL ASSETS | | \$ - | 1 |
| | Deferred Outflows of Resources: | •, | - | Deferred Outflows of Resources | • | • | 1 |
| 1-12 | [specify] | \$- | \$ - | [specify] | \$- | \$ - | 1 |
| 1-13 | | • \$ - | | [specify] | \$- | · | - |
| 1-14 | (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS | • | | (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS | | | 1 |
| 1-15 | TOTAL ASSETS AND DEFERRED OUTFLOWS | | | TOTAL ASSETS AND DEFERRED OUTFLOWS | | | 1 |
| | Liabilities | ¢ 211,200 | Ŷ | Liabilities | Ŷ | Ŷ | 1 |
| 1-16 | | \$ 3,731 | \$- | Accounts Payable | \$- | \$ - | 1 |
| 1-17 | Accrued Payroll and Related Liabilities | \$- | \$ - | Accrued Payroll and Related Liabilities | \$ - | \$ - | |
| 1-18 | Unearned Revenue | \$- | \$- | Accrued Interest Payable | \$- | \$ - | 1 |
| 1-19 | Due to Other Entities or Funds | \$- | \$- | Due to Other Entities or Funds | \$- | \$ - | |
| 1-20 | All Other Current Liabilities | \$- | \$ - | All Other Current Liabilities | \$ - | \$ - | 1 |
| 1-21 | (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES | \$ 3,731 | \$- | (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES | \$- | \$ - | 1 |
| 1-22 | | \$- | \$ - | Proprietary Debt Outstanding (from Part 4-4) | \$ - | \$ - | 1 |
| 1-23 | | \$- | \$- | Other Liabilities [specify]: | \$- | \$ - | 1 |
| 1-24 | | \$- | \$ - | | \$ - | \$ - | 1 |
| 1-25 | | \$- | \$ - | | \$ - | \$ - | 1 |
| 1-26 | | \$- | \$ - | | \$ - | \$ - | 1 |
| 1-27 | (add lines 1-21 through 1-26) TOTAL LIABILITIES | | | (add lines 1-21 through 1-26) TOTAL LIABILITIES | | | 1 |
| | Deferred Inflows of Resources: | , . | • | Deferred Inflows of Resources | | • | 1 |
| 1-28 | E | \$ 166,398 | \$ - | Pension/OPEB Related | \$- | \$ - | 1 |
| 1-29 | | | \$ - | Other [specify] | \$- | | - |
| 1-30 | (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS | | | (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS | | · | 1 |
| | Fund Balance | , | • | Net Position | | • | 1 |
| 1-31 | - | \$ 3,389 | \$- | | \$- | \$ - | 1 |
| | | \$ - | \$- | | | | 1 |
| 1-33 | | \$ 4,122 | | Emergency Reserves | \$- | \$ - | 1 |
| 1-34 | | | | Other Designations/Reserves | | \$ - | - |
| 1-35 | | • \$ | \$ - | Restricted | \$- | · | - |
| 1-36 | - | \$ | | Undesignated/Unreserved/Unrestricted | | \$ - | - |
| 1-37 | Add lines 1-31 through 1-36 | . 00,000 | | Add lines 1-31 through 1-36 | + | • | |
| | This total should be the same as line 3-33 | | | This total should be the same as line 3-33 | | | |
| | TOTAL FUND BALANCE | \$ 44,160 | \$- | TOTAL NET POSITION | \$ | \$ - | |
| 1-38 | Add lines 1-27, 1-30 and 1-37 | φ -++,100 | Ψ - | Add lines 1-27, 1-30 and 1-37 | φ - | Ψ - | - |
| | This total should be the same as line 1-57 | | | This total should be the same as line 1-15 | | | |
| | TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND | | | TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET | | | |
| | | \$ 214,289 | \$ | POSITION | \$ | \$ - | |
| | | φ <u>214,209</u> | Ψ - | | Ψ - | Ψ - | |

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

| | | Governme | ental Funds | | Proprietary | Fiduciary Funds | |
|-----|---|---------------|-------------|---|-------------|-----------------|--|
| e # | Description | General Fund* | Fund* | Description | Fund* | Fund* | Please use this space to provide explanation of a |
| 1 | ax Revenue | | | Tax Revenue | | | items on this page |
| -1 | Property [include mills levied in Question 10-6] | \$ 124,688 | \$- | Property [include mills levied in Question 10-6] | \$ | - \$ | - |
| -2 | Specific Ownership | \$ 8,128 | \$- | Specific Ownership | \$ | - \$ | - |
| -3 | Sales and Use Tax | \$- | \$- | Sales and Use Tax | \$ | - \$ | - |
| -4 | Other Tax Revenue [specify]: | \$- | \$- | Other Tax Revenue [specify]: | \$ | - \$ | - |
| -5 | | \$- | \$- | | \$ | - \$ | - |
| -6 | | \$- | \$- | | \$ | - \$ | - |
| -7 | | \$- | \$- | | \$ | - \$ | - |
| -8 | Add lines 2-1 through 2-7 TOTAL TAX REVENUE | \$ 132,816 | \$- | Add lines 2-1 through 2-7 TOTAL TAX REVENUE | \$ | - \$ | - |
| -9 | Licenses and Permits | \$- | \$- | Licenses and Permits | \$ | - \$ | - |
| 10 | Highway Users Tax Funds (HUTF) | \$ - | \$ - | Highway Users Tax Funds (HUTF) | \$ | - \$ | - |
| 11 | Conservation Trust Funds (Lottery) | \$ - | \$ - | Conservation Trust Funds (Lottery) | \$ | - \$ | - |
| 12 | Community Development Block Grant | \$ - | \$ - | Community Development Block Grant | \$ | - \$ | - |
| 13 | Fire & Police Pension | \$ - | \$ - | Fire & Police Pension | \$ | - \$ | - |
| 14 | Grants | \$ - | \$ - | Grants | \$ | - \$ | - |
| 15 | Donations | \$ - | \$ - | Donations | \$ | - \$ | - |
| 16 | Charges for Sales and Services | \$ - | \$ - | Charges for Sales and Services | \$ | - \$ | - |
| 17 | Rental Income | \$ - | \$ - | Rental Income | \$ | - \$ | - |
| 18 | Fines and Forfeits | \$ - | \$ - | Fines and Forfeits | \$ | - \$ | - |
| 19 | Interest/Investment Income | \$ 4,569 | \$ - | Interest/Investment Income | \$ | - \$ | - |
| 20 | Tap Fees | \$ - | \$ - | Tap Fees | \$ | - \$ | - |
| 21 | Proceeds from Sale of Capital Assets | \$ - | \$ - | Proceeds from Sale of Capital Assets | | | - |
| 22 | All Other [specify]: | \$ - | \$ - | All Other [specify]: | \$ | - \$ | - |
| 23 | | \$ - | \$ - | | \$ | - \$ | - |
| 24 | Add lines 2-8 through 2-23 TOTAL REVENUES | \$ 137,384 | \$- | Add lines 2-8 through 2-23 TOTAL REVENUES | | - \$ | - |
| | Other Financing Sources | | | Other Financing Sources | | | _ |
| 25 | Debt Proceeds | \$ - | \$- | Debt Proceeds | \$ | - \$ | -] |
| 26 | Lease Proceeds | \$ - | \$ - | Lease Proceeds | \$ | - \$ | - |
| 27 | Developer Advances | \$ - | \$ - | Developer Advances | • | - \$ | -1 |
| 28 | Other [specify]: | \$ - | \$ - | Other [specify]: | \$ | - \$ | - |
| 29 | Add lines 2-25 through 2-28 | | | Add lines 2-25 through 2-28 | | | GRAND TOTALS |
| 30 | TOTAL OTHER FINANCING SOURCES | <u></u> ъ - | \$ - | TOTAL OTHER FINANCING SOURCES | \$ | - \$ | - |
| ~~ | Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES | \$ 137,384 | \$ - | Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES | \$ | - \$ | - \$ 137 |

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

| | | Govern | ment | al Funds | | Proprieta | ry/Fidu | ciary Funds | Blassa use this oness to |
|------------|---|---------------|---------|-----------------|---|-----------|---------|-------------|---|
| .ine # | Description | General Fund* | | Fund* | Description | Fund* | | Fund* | Please use this space to provide explanation of an |
| | Expenditures | | | | Expenses | | | | items on this page |
| 3-1 | General Government | \$ 15,7 | 84 \$ | - 3 | General Operating & Administrative | \$ | - \$ | | - |
| 3-2 | Judicial | \$ | - \$ | - 3 | Salaries | \$ | - \$ | | - |
| 3-3 | Law Enforcement | \$ | - \$ | · - | Payroll Taxes | \$ | - \$ | | - |
| 3-4 | Fire | \$ | - \$ | · - | Contract Services | \$ | - \$ | | - |
| 3-5 | Highways & Streets | \$ | - \$ | · - | Employee Benefits | \$ | - \$ | | - |
| 8-6 | Solid Waste | \$ | - \$ | · - | Insurance | \$ | - \$ | | - |
| 3-7 | Contributions to Fire & Police Pension Assoc. | \$ | - \$ | · - | Accounting and Legal Fees | \$ | - \$ | | - |
| 3-8 | Health | \$ | - \$ | · - | Repair and Maintenance | \$ | - \$ | | - |
| 3-9 | Culture and Recreation | \$ | - \$ | - 3 | Supplies | \$ | - \$ | | - |
| 3-10 | Transfers to other districts | \$ | - 9 | - S | Utilities | \$ | - \$ | | - |
| 3-11 | Other [specify]: | \$ | - 9 | - S | Contributions to Fire & Police Pension Assoc. | \$ | - \$ | | - |
| 3-12 | | \$ | - 9 | | Other [specify] | \$ | - \$ | | - |
| 3-13 | | \$ | - 9 | | | \$ | - \$ | | - |
| 3-14 | Capital Outlay | \$ | - 9 | | Capital Outlay | \$ | - \$ | | - |
| | Debt Service | · • | | - | Debt Service | Ŧ | | | |
| -15 | Principal (should match amount in 4-4) | \$ 30.0 | 00 \$ | 3 - | Principal (should match amount in 4-4) | \$ | - \$ | | - |
| -16 | Interest | , | 60 \$ | | Interest | \$ | - \$ | | - |
| -17 | Bond Issuance Costs | | 60 \$ | | Bond Issuance Costs | \$ | - \$ | | - |
| -18 | Developer Principal Repayments | \$ | - 9 | | Developer Principal Repayments | \$ | - \$ | | - |
| -19 | Developer Interest Repayments | \$ | - 9 | | Developer Interest Repayments | \$ | - \$ | | - |
| -20 | All Other [specify]: | \$ | - 9 | | All Other [specify]: | \$ | - \$ | | |
| | Paying Agent Fee | | 00 \$ | | All Other [specify]. | \$ | - \$ | | - GRAND TOTAL |
| -22 | Add lines 3-1 through 3-21 TOTAL EXPENDITURES | ¢ 100.0 | | · | Add lines 3-1 through 3-21 TOTAL EXPENSES | ¢ | - \$ | | - \$ 122,30 |
| -23 | Interfund Transfers (In) | \$ | - 9 | · - | Net Interfund Transfers (In) Out | \$ | - \$ | | - |
| | Interfund Transfers Out | \$ | - 9 | | Other [specify][enter negative for expense] | \$ | - \$ | | |
| | Other Expenditures (Revenues): | \$ | - 9 | | Depreciation/Amortization | \$ | - \$ | | - |
| -26 | other Experiateres (Revenues). | \$ | - 4 | | Other Financing Sources (Uses) (from line 2-28) | \$ | - \$ | | - |
| -20 | | \$ | - 4 | | Capital Outlay (from line 3-14) | \$ | - \$ | | - |
| -28 | | \$ | - 4 | | Debt Principal (from line 3-14) | \$ | - \$ | | - |
| -28 -29 | (Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES | | | | (Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS | - | - 0 | | - |
| .30 | Excess (Deficiency) of Revenues and Other Financing | φ | - \$ | | | Φ | - \$ | | - |
| -30 | Sources Over (Under) Expenditures | | | | Net Increase (Decrease) in Net Position | | | | |
| | Line 2-29, less line 3-22, less line 3-29 | \$ 15,0 | 80 \$ | , | Line 2-29, less line 3-22, plus line 3-29, less line 3-23 | \$ | - \$ | | |
| | Line 2-23, 1033 into 0-22, 1033 into 0-23 | φ 15,0 | 00 4 | - | | φ | - o | 1 | - |
| 24 | Fund Balance, January 1 from December 31 prior year report | | | | Net Position, January 1 from December 31 prior year | | | | |
| -51 | r and balance, sandary r nom becember or phot year report | \$ 29,0 | 79 | , | report | \$ | ۰ | | |
| 20 | Drive Devied Adjustment (MUCT surplain) | | | | - Drive Daried Adjustment (MUCT surlein) | | - \$ | | - |
| | Prior Period Adjustment (MUST explain) | \$ | - \$ | - | Prior Period Adjustment (MUST explain) | \$ | - \$ | | <u>-</u> |
| -33 | Fund Balance, December 31 | | | | Net Position, December 31 | | | | |
| | Sum of Lines 3-30, 3-31, and 3-32 | | | | Sum of Lines 3-30, 3-31, and 3-32 | • | | | |
| | This total should be the same as line 1-37. | | 60 \$ | FOP. You may no | This total should be the same as line 1-37. | \$ | - \$ | | - |

(303) 869-3000 for assistance.

| Docuc | PART 4 - DEBT OUTSTANDING, | ISSUED, A | AND RETIRED | |
|---------|--|------------------------|-------------------------|--|
| | Please answer the following questions by marking the appropriate boxes. | YES | NO | Please use this space to provide any explanations or comments: |
| 4-1 | Does the entity have outstanding debt? | v | | |
| 4-2 | Is the debt repayment schedule attached? If no, MUST explain: | \checkmark | | |
| | | | | |
| 4-3 | Is the entity current in its debt service payments? If no, MUST explain: | \checkmark | | |
| | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: (please only include principal amounts) Outstanding at beginning of year year | Retired during year | Outstanding at year-end | |
| | General obligation bonds \$ 1,595,367 \$ | - \$ 30,000 | \$ 1,565,367 | |
| | | - \$ - | \$ - | |
| | | | \$ | |
| | | | \$ - | |
| | | - \$ - | \$ - | |
| | | - \$ - | \$ - | |
| **Subs | TOTAL \$ 1,595,367 \$ cription Based Information Technology Arrangements *Must agree to prior year-end balance | - \$ 30,000 | \$ 1,565,367 | |
| Jubs | Please answer the following questions by marking the appropriate boxes. | YES | NO | |
| 4-5 | Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]? | | | |
| 16 | How much? \$ 1,162,633 | _ | — | |
| If yes: | Date the debt was authorized: 5/4/2004 | | | |
| 4-6 | Does the entity intend to issue debt within the next calendar year? | | \checkmark | |
| If yes: | How much? | _ | _ | |
| 4-7 | Does the entity have debt that has been refinanced that it is still responsible for? | | \checkmark | |
| If yes: | What is the amount outstanding? \$ | | | |
| 4-8 | What is being leased? | | | |
| ii yes. | What is the original date of the lease? | | | |
| | Number of years of lease? | | | |
| | Is the lease subject to annual appropriation? | | | |
| | What are the annual lease payments? \$ | | | |
| | PART 5 - CASH AND I | NVESTME | NTS | |
| | Please provide the entity's cash deposit and investment balances. | AMOUNT | TOTAL | Please use this space to provide any explanations or comments: |
| | YEAR-END Total of ALL Checking and Savings accounts | \$ 9,704 | | |
| 5-2 | Certificates of deposit | \$ - | | |
| | TOTAL CASH DEPOSIT | S | \$ 9,704 | |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | |
| | CSafe | \$ 34,223 | | |
| 5-3 | | \$ - | | |
| | | \$ - | | |
| | | \$ - | | |
| | TOTAL INVESTMENT | | \$ 34,223 | |
| | TOTAL CASH AND INVESTMENT | | \$ 43,926 | |
| | Please answer the following question by marking in the appropriate box YES | NO | N/A | |
| 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- | | | |
| 0-0 | 10.5-101, et seq. C.R.S.)? If no, MUST explain: | | — | |
| | | | | |

Do

| cuSig | n Envelope ID: D86A3046-733B-4AB7-A160-74A0995BADC6 | 6 - CAPITAL | | | SE ASSETS | |
|-------|--|--|------------------------|-----------|--|---|
| F | Please answer the following question by marking in the appropriate box | | | YES | NO | Please use this space to provide any explanations or comments |
| | Does the entity have capitalized assets? | | | | | |
| -2 F | las the entity performed an annual inventory of capital assets in accordance with NUST explain: | h Section 29-1-506, C | .R.S.? If no, | | | |
| -3 | | Delawar | | | _ | |
| Ĭ | Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS: | Balance - beginning of the year | Additions* | Deletions | Year-End Balance | |
| | and | \$- | | | - \$ | - |
| | Buildings | \$ - | | \$ | - \$ | <u>·</u> |
| | lachinery and equipment | \$ - | | \$ | - \$ | <u>-</u> |
| | urniture and fixtures nfrastructure | \$ \$ | | \$ \$ | - \$ | <u>·</u> |
| | Constructure | \$ | | | - \$ - \$ | |
| | eased & SBITA Right-to-Use Assets | \$ - | | \$ | - \$ | <u>·</u> |
| | ntangible Assets | | | \$ | - \$ | - |
| | Other (explain): | \$- | | \$ | - \$ | - |
| A | ccumulated Amortization Right to Use Assets (Enter a negative, or credit, balance) | \$ - | \$ - | \$ | - \$ | • |
| A | Accumulated Depreciation (Enter a negative, or credit, balance) | \$- | \$- | \$ | - \$ | - |
| | TOTAL | \$- | \$- | \$ | - \$ | - |
| | Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS: | Balance - beginning of the year | Additions* | Deletions | Year-End Balance | |
| | and | | | | - \$ | · _ |
| | Buildings | | | \$ | - \$ | <u> </u> |
| | Aachinery and equipment furniture and fixtures | - | | \$ | - \$ - \$ | <u>·</u> |
| | nfrastructure | | | \$ | - \$ - \$ | - |
| | Construction In Progress (CIP) | - | | \$ | - \$ | <u>·</u> |
| | eased & SBITA Right-to-Use Assets | | | \$ | - \$ | - |
| | ntangible Assets | | | 1. | - \$ | - |
| | Other (explain): | | \$- | | - \$ | • |
| | ccumulated Amortization Right to Use Assets (Enter a negative, or credit, balance) | | | | - \$ | - |
| A | ccumulated Depreciation (Enter a negative, or credit, balance) | \$ - | | \$ | - \$ | <u> </u> |
| | TOTAL | \$- | \$- | \$ | - \$ | - |
| | | * Must agree to prior yea * Generally capital asset in accordance with the g | additions should be re | | utlay on line 3-14 and capitalize explain any discrepancy | d |
| | | | | | ION | |
| | | PARI (- PE | | | | |
| * | | PART 7 - PE | | YES | NO | Please use this space to provide any explanations or comments |
| | Does the entity have an "old hire" firefighters' pension plan? | PART / - PE | | | | Please use this space to provide any explanations or comments |

Indicate the contributions from:

| Tax (property, SO, sales, etc.): | \$ - |
|---|---------|
| State contribution amount: | \$ - |
| Other (gifts, donations, etc.): | \$ - |
| ΤΟΤΑΙ | \$ - |
| What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ - |

| | PART 8 - | BUDGET INFO | DRMATIO | N | |
|---------|--|-------------------|---------|-----|--|
| | Please answer the following question by marking in the appropriate box | YES | NO | N/A | Please use this space to provide any explanations or comments: |
| 8-1 | Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | I | | | |
| 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 appropriated for each fund separately for the year reported | | | | |
| | Governmental/Proprietary Fund Name Total Appro | priations By Fund | | | |
| | General Fund \$ | 148,677 | | | |
| | \$ | - | | | |
| | \$ | - | | | |
| | <u> </u> | - | | | |

| PART 9 - TAX PAYER'S BILL C | | | |
|---|----------------|------------------|--|
| Please answer the following question by marking in the appropriate box | YES | NO | Please use this space to provide any explanations or comments: |
| -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. | | | |
| PART 10 - GENERAL IN | IFORMATIC | N | |
| Please answer the following question by marking in the appropriate box | YES | NO | Please use this space to provide any explanations or comments: |
| -1 Is this application for a newly formed governmental entity? | | I | |
| Date of formation: | | | |
| 0-2 Has the entity changed its name in the past or current year? | | | |
| VEW name |] | | |
| PRIOR name | | | |
|)-3 Is the entity a metropolitan district? | , | | |
| Please indicate what services the entity provides: | _ | | |
| Water, Sanitation, Parks and Recreation | | | |
| 0-5 Does the entity have an agreement with another government to provide services? | v | | |
| ^{res:} List the name of the other governmental entity and the services provided: | | | |
| SDA Pool for insurance. |] | | |
| D-6 Does the entity have a certified mill levy? | | | |
| es: Please provide the number of mills levied for the year reported (do not enter \$ amounts): | | | |
| Bond Redemption mills 45.216 | | | |
| General/Other mills 6.183 Total mills 51.399 | | | |
| Total minis 51.059 | NO | N/A | |
| NEW 2023I If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its -7 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. | | | |
| | | | |
| Discos uso this space to provide any additional symposite | | nto not province | ly included: |
| Please use this space to provide any additional explanat | ions of commen | nis not previous | iy moluded. |

| | | OSA USE ONL | .Y | | |
|---------------------------------|--------------------------------------|---------------|------------------------------|-----------------|-------|
| Entity Wide: | General Fund | | Governmental Funds | | Notes |
| Unrestricted Cash & Investments | \$ 43,926 Unrestricted Fund Balan | \$ 36,650 | Total Tax Revenue | \$ 132,816 | |
| Current Liabilities | \$ 3,731 Total Fund Balance | \$ 44,160 | Revenue Paying Debt Service | \$ 137,384 | |
| Deferred Inflow | \$ 166,398 PY Fund Balance | \$ 29,079 | Total Revenue | \$ 137,384 | |
| | Total Revenue | \$ 137,384 | Total Debt Service Principal | \$ 30,000 | |
| | Total Expenditures | \$ 122,304 | Total Debt Service Interest | \$ 69,760 | |
| | | | Total Assets | \$ 214,289 | |
| | | | Total Liabilities | \$ 3,731 | |
| Governmental | Interfund In | \$ - | | | |
| Total Cash & Investments | \$ 43,926 Interfund Out | \$ - | Enterprise Funds | | |
| Transfers In | \$ - Proprietary | | Net Position | \$ - | |
| Transfers Out | \$ - Current Assets | \$ - | PY Net Position | \$ - | |
| Property Tax | \$ 124,688 Deferred Outflow | \$ - | Government-Wide | | |
| Debt Service Principal | \$ 30,000 Current Liabilities | \$ - | Total Outstanding Debt | \$ 1,565,367 | |
| Total Expenditures | \$ 122,304 Deferred Inflow | \$ - | Authorized but Unissued | \$ 1,162,633 | |
| Total Developer Advances | \$ - Cash & Investments | \$ - | Year Authorized | 5/4/2004 | |
| Total Developer Repayments | \$ - Principal Expense | \$ - | | | |

| PART 12 - 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 Procedures

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.

Below is the certification and approval of the governing body By signing, each individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual member certifies that this Application for Exemption from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a governmental agency with revenue and expenditures of \$750,000 or less must have an application prepared by an independent accountant with knowledge of governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

| MUST Print t | he names of <u>ALL</u> members of the governing body below. | <u>A MAJORITY</u> of the members of the governing body must sign below. |
|--------------|---|---|
| 1 | Full Name Jeffery Spanel | I, Jeffery Spanel, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application of exemption from audit. SignedDate: |
| | Full Name | I Fizabeth Spenel attest that I am a duly elected or appointed hoard member and that I have personally reviewed and |
| 2 | Elizabeth Spanel | I, Elizabeth Spanel, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this arguments for exemption from audit. 3/26/2024 Signed_179EFA2E76E74E7 |
| | Full Name | I, , attest that I am a duly elected or appointed board member, and that I have |
| 3 | | method between and approve this application for exemption from audit. Signed My term Expires: |
| 4 | Full Name | I, , attest that I am a duly elected or appointed board member, and that I have |
| | | personally reviewed and approve this application for exemption from audit. Signed My term Expires: |
| | Full Name | I, , attest that I am a duly elected or appointed board member, and that I have |
| 5 | | bersonally reviewed and approve this application for exemption from audit. Signed My term Expires: |
| | Full Name | I, , attest that I am a duly elected or appointed board member, and that I have |
| 6 | | method between and approve this application for exemption from audit. Signed My term Expires: |
| | Full Name | I, , attest that I am a duly elected or appointed board member, and that I have |
| 7 | | h,, all struct rain a day elected of appointed board member, and that mave personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires: |

EXAMPLE - DO NOT FILL OUT THIS PAGE

This sample resolution/ordinance for exemption from audit is provided as an example of the documentation that is required, the wording may be used as a basis for your own local government document, if needed, however you MUST draft your own ordinance or resolution making any changes where applicable. Legal counsel should be consulted regarding any questions.

RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT

(Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDI7 FOR YEAR 20XX FOR THE (name of government), STATE OF COLORADO.

WHEREAS, the (governing body) of (name of government) wishes to claim execution from the audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, Section 29-1-604, C.R.S., states that any local government where neither revenues for expenditures exceed seven hundred and fifty thousand dollars may, with the approval of the State Auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and

[Choose 1 or 2 below, whichever is applicable]

(1)WHEREAS, neither revenue nor expenditures for (name of covery pent) exceeded \$100,000 for Year 20XX; and

WHEREAS, an application for exemption from audi, fix (nome of government) has been prepared by (name of individual), a person skilled in governmental accounting; and

(2)WHEREAS, neither revenues nor expenditives for (ance of government) exceeded \$750,000 for Year 20XX; and

WHEREAS, an application for exemption from an tit for (name of government) has been prepared by (name of individual or firm), an independent accountant with vnowledge of governmental accounting; and

WHEREAS, said application for exemption from aucit has been completed in accordance with regulations, issued by the State Auditor.

NOW THEREFOR . be it resolved/or lained by the (governing body) of the (name of government) that the application for exemption from a vdit for (name of yovernment) for the year ended _______, 20XX, has been personally reviewed and is hereby appreciative and of the (governing body) of the (name of government); that those members of the (governing body) have signified their approval by signing below; and that this resolution shall be attached to, and shall become a pay of the application for exemption from audit of the (name of government) for the year ended _______, 20XX

ADOPTED THIS _____ day of ______, A.D. 20XX.

| Mayor/President/Chairman, etc. | | \bigcap | |
|--|-----------------|-----------|--|
| ATTEST: | | | |
| Town Clerk, Secretary, etc. | | | |
| | Date | | |
| ype or Print Names of Members of Governing Body | Term Expires | Signature | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |