### **APPLICATION FOR EXEMPTION FROM AUDIT**

### **SHORT FORM**

NAME OF GOVERNMENT ADDRESS	Gateway at Prospect Metropolitan District No. 1 2154 E. Commons Ave., Suite 2000	For the Year Ended
ABBILLOO	Centennial, CO 80122	or fiscal year ended:
CONTACT PERSON	Robert Rogers, Esq.	
PHONE	303-858-1800	
EMAIL	rrogers@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: Robert Rogers, Esq.

TITLE Legal Counsel

FIRM NAME (if applicable) White Bear Ankele Tanaka & Waldron

ADDRESS 2154 E. Commons Ave., Suite 2000, Suite 2000

PHONE 303-858-1800

DATE PREPARED 23-Mar-23

### PREPARER (SIGNATURE REQUIRED)

Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types

GOVERNMENTAL (MODIFIED ACCRUAL BASIS)

(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#		Descr	iption		Round to nearest Dollar	Please use this
2-1	Taxes: Prope	rty (re	eport mills levied in Question 10-6)	\$		space to provide
2-2	Specif	ic ownersh	ip	\$	-	any necessary
2-3	Sales	and use		\$	-	explanations
2-4	Other	(specify):		\$	-	
2-5	Licenses and permits			\$	-	
2-6	Intergovernmental:	G	rants	\$	-	
2-7		С	onservation Trust Funds (Lottery)	\$	-	
2-8		Н	ighway Users Tax Funds (HUTF)	\$	-	
2-9		0	ther (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)	Ψ	-	
2-16	Lease proceeds			\$	-	
2-17	Developer Advances receive	ed	(should agree with line 4-4)	\$	-	
2-18	Proceeds from sale of capi	tal 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	\$	-	

### **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 Pa	art 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (should agree with line	e 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21	Contribution to pension plan (should agree to line	e 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (should agree to line	e 7-2)	\$ -	
3-23	Other (specify):		\$ -	
3-24			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENS	SES	\$ -	

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	2 122	HED	ΛN	D DI	TIE	ED		
	Please answer the following questions by marking the	· ·		, AIN	ט או		Yes		No
4-1	Does the entity have outstanding debt?							~	_
4-2	If Yes, please attach a copy of the entity's Debt Repayment S							[-	7
4-2	Is the debt repayment schedule attached? If no, MUST explain The District has no outstanding debt.	n:				]		Ľ	_
	l l l l l l l l l l l l l l l l l l l								
4-3	Is the entity current in its debt service payments? If no, MUS	T explain	:					<b>~</b>	
	The District has no outstanding debt.								
4.4									
4-4	Please complete the following debt schedule, if applicable:	Outstan	ding at	Issued	durina	Retir	ed during	Outsta	nding at
	(please only include principal amounts)(enter all amount as positive numbers)	end of pr		ye	ear		year		r-end
	General obligation bonds	<b>C</b>		Φ.		<b>C</b>		Ф.	
	Revenue bonds	\$	-	\$ \$		\$		<u>\$</u> \$	
	Notes/Loans	\$	-	\$	_	\$	_	\$	_
	Lease Liabilities	\$	-	\$	-	\$	-	\$	_
	Developer Advances	<u> </u>		\$	_	\$	-	\$	-
	Other (specify):	\$	-	\$	-	\$	-	\$	-
	TOTAL	\$	-	\$	-	\$	-	\$	-
			to prior ye	ar endino	balance				
4.5	Please answer the following questions by marking the appropriate boxes  Does the entity have any authorized, but unissued, debt?	i.				_	Yes	ı	No
<b>4-5</b> If yes:	How much?	\$	2 1	25,000,	000 00	ì	$\triangle$	l	
ii yes.	Date the debt was authorized:	Ψ	5/8/2		000.00	}			
4-6	Does the entity intend to issue debt within the next calendar	vear?	0/0/2	010		J			✓
If yes:	How much?	\$			_	]		-	
4-7	Does the entity have debt that has been refinanced that it is	still respo	nsible f	or?		J		[	✓
If yes:	What is the amount outstanding?	\$			-	]			
4-8	Does the entity have any lease agreements?					,		[	✓
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?					J		[	✓
	What are the annual lease payments?	\$			-	]			
	Please use this space to provide any	explanat	ions or	comme	ents:				
	PART 5 - CASH AND	INVE	STM	ENT	S				
	Please provide the entity's cash deposit and investment balances.	INVE	STM	ENT	S		mount	Te	otal
5-1	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings Accounts	INVE	STM	IENT	S	\$	mount -	T	otal
5-1 5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings Accounts Certificates of deposit	INVE	STM	IENT	S				otal
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings Accounts Certificates of deposit Total Cash Deposits			IENT	S	\$		<b>T</b> (	otal -
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings Accounts Certificates of deposit			IENT	S	\$			otal -
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings Accounts Certificates of deposit Total Cash Deposits			IENT	S	\$			otal -

	PART 5 - CASH AND INVESTME	ENTS		
	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		\$ -	
	Total Cash Deposits			\$ -
	Investments (if investment is a mutual fund, please list underlying investments):			
			\$ -	]
5-3			\$ -	
3-3			\$ -	
			\$ -	
	Total Investments			\$ -
	Total Cash and Investments			\$ -
	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.?			<b>V</b>
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.)?			<b>✓</b>
If no, M	UST use this space to provide any explanations:			

	PART 6 - CAPITAL AND RI	GHI.	TO-L	SE A	SSE	TS			
	Please answer the following questions by marking in the appropriate box		10-0	OL A		Ye	s		No
6-1	Does the entity have capital assets?								<b>V</b>
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	s in acco	ordance	with Sec	tion				7
	The District has no capital assets.								
6-3	Complete the following capital & right-to-use assets table:		nce - ng of the ar*	Additions be includ Part 3	ed in	Deletions			ar-End lance
	Land	\$	-	\$	-	\$	-	\$	-
	Buildings	\$	-	\$	-	\$	-	\$	-
	Machinery and equipment	\$	-	\$	-	\$	-	\$	-
	Furniture and fixtures	\$	-	\$	-	\$	-	\$	-
	Infrastructure	\$	-	\$	-	\$	-	\$	-
	Construction In Progress (CIP)	\$	-	\$	-	\$	-	\$	-
	Leased Right-to-Use Assets	\$	-	\$ \$	-	\$	-	\$ \$	
	Other (explain): Accumulated Depreciation/Amortization	Ф	-	Φ		Φ	-	φ —	-
	(Please enter a negative, or credit, balance)	\$	-	\$	-	\$	-	\$	_
	TOTAL	\$	-	\$	_	\$	-	\$	-
	Please use this space to provide any	explana	tions or	commen	ts:	·			
	PART 7 - PENSION	INFO	RMA	TION					
	Please answer the following questions by marking in the appropriate box	es.				Ye	s		No
7-1	Does the entity have an "old hire" firefighters' pension plan?								2
7-2	Does the entity have a volunteer firefighters' pension plan?							Ŀ	7
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?  Please use this space to provide any explanations or comments:								
	Flease use tills space to provide ally	ехріапа	lions or	Commen	ι5.				
	PART 8 - BUDGET	INFO	RMA	TION					
	Please answer the following questions by marking in the appropriate box			Yes		No	,		N/A
8-1	Did the entity file a budget with the Department of Local Affai		е						_
	current year in accordance with Section 29-1-113 C.R.S.?			$\checkmark$					
8-2	Did the entity pass an appropriations resolution, in accordan 29-1-108 C.R.S.? If no, MUST explain:	ce with S	Section	<b>V</b>					
If yes:	Please indicate the amount budgeted for each fund for the ye	ar repor	ted:						
	Governmental/Proprietary Fund Name General Fund	Total /	Appropria	tions By Fı	und -				

9-1	Note: An election to exempt the government from the spending limitations of TABOR loss not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.						
lf no, Ml	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?		$\checkmark$				
If yes: 10-2	Date of formation:  Has the entity changed its name in the past or current year?		<b>V</b>				
If yes:	Please list the NEW name & PRIOR name:						
10-3	Is the entity a metropolitan district? Please indicate what services the entity provides:	✓					
<b>10-4</b> If 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:		✓				
<b>10-5</b> If yes:	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during Date Filed:		<b>V</b>				
<b>10-6</b> If yes:	Does the entity have a certified Mill Levy?		<b>V</b>				
. , - 3.	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):						
	Bond Redemption mills General/Other mills		-				
	Total mills						
	Please use this space to provide any explanations or comments:						

PART 9 - TAXPAYER'S BILL OF RIGHTS (TABOR)

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)]?

10-3 - Services provided by the District include street improvements, parks and recreation, water, sanitation/storm, sewer, transportation, mosquito control, safety protection, fire protection, TV relay and translation, security, operations and maintenance and directional drilling.

	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?	<b>V</b>				

# 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.

	Print the names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
Board Member 1	Print Board Member's Name  Jim Birdsall	I, James Birdsall, 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	I Robert K. McKenna, 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:May 2025
Board Member 3	Print Board Member's Name	I Robert T. McKenna, 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 R. TIM MCKENNA (Mar 28, 2023 MD)  Date: Mar 28, 2023  My term Expires: May 2025
Board Member 4	Print Board Member's Name  Lincoln Samelson	I Lincoln Samelson, 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 5	Print Board Member's Name	I LindseySamelson, 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 6	Print Board Member's Name	I
Board Member 7	Print Board Member's Name	I

# 2022 Audit Exemption Applications

### Interim Agreement Report

2023-03-31

Created: 2023-03-28

By: Brittany Jurney (bjurney@wbapc.com)

Status: Out for Signature

Transaction ID: CBJCHBCAABAAloSsmvj6bLwusL6aiPl4irT5ewUv96WK

#### Agreement History

Agreement history is the list of the events that have impacted the status of the agreement prior to the final signature. A final audit report will be generated when the agreement is complete.

## "2022 Audit Exemption Applications" History

- Document created by Brittany Jurney (bjurney@wbapc.com) 2023-03-28 3:29:54 PM GMT
- Document emailed to robertkmckenna@gmail.com for signature 2023-03-28 4:07:37 PM GMT
- Document emailed to Lindsey Samelson (lindsey.samelson@gmail.com) for signature 2023-03-28 4:07:38 PM GMT
- Document emailed to lincoln@contrarianinvestors.com for signature 2023-03-28 4:07:38 PM GMT
- Document emailed to Jim Birdsall (jim@tbgroup.us) for signature 2023-03-28 4:07:38 PM GMT
- Document emailed to tim.mckenna@neihartland.com for signature 2023-03-28 4:07:38 PM GMT
- Email viewed by Jim Birdsall (jim@tbgroup.us)
  2023-03-28 5:27:27 PM GMT
- Document e-signed by Jim Birdsall (jim@tbgroup.us)

  Signature Date: 2023-03-28 5:27:55 PM GMT Time Source: server
- Email viewed by tim.mckenna@neihartland.com 2023-03-28 10:19:59 PM GMT



- Signer tim.mckenna@neihartland.com entered name at signing as R. TIM MCKENNA 2023-03-28 10:23:07 PM GMT
- Document e-signed by R. TIM MCKENNA (tim.mckenna@neihartland.com)
  Signature Date: 2023-03-28 10:23:09 PM GMT Time Source: server
- Document shared with Abby Franz (afranz@wbapc.com) by Brittany Jurney (bjurney@wbapc.com) 2023-03-31 2:50:06 PM GMT
- Email viewed by lincoln@contrarianinvestors.com 2023-03-31 5:43:20 PM GMT
- Signer lincoln@contrarianinvestors.com entered name at signing as Lincoln Samelson 2023-03-31 5:43:55 PM GMT
- Document e-signed by Lincoln Samelson (lincoln@contrarianinvestors.com)

  Signature Date: 2023-03-31 5:43:57 PM GMT Time Source: server

Names and email addresses are entered into the Acrobat Sign service by Acrobat Sign users and are unverified unless otherwise noted.