### 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 qualify for exemption from audit, a local government must complete an Application for Exemption from Audit EACH YEAR and submit it to the Office of the State Auditor (OSA) for approval.

Any preparer of an Application for Exemption from Audit must be an independent accountant with knowledge of governmental accounting.

APPLICATIONS SUBMITTED ON FORMS OTHER THAN THOSE PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED.

Proprietary Activity should be reported on the Cash or Budgetary Basis -- A Budget to GAAP reconciliation is provided in Part 3

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

Approval for an exemption from audit is granted only upon the review by the OSA.

#### READ ALL INSTRUCTIONS BEFORE COMPLETING AND SUBMITTING THIS FORM

ALL APPLICATIONS MUST BE FILED WITH THE OSA <u>WITHIN 3 MONTHS</u> AFTER THE ACCOUNTING YEAR-END. FOR EXAMPLE, APPLICATIONS MUST BE RECEIVED BY THE OSA ON OR BEFORE MARCH 31 FOR GOVERNMENTS WITH A DECEMBER 31 YEAR-END. APPLICATIONS FOR EXEMPTION FROM AUDIT SUBMISSIONS ARE NOT ELIGIBLE FOR AN EXTENSION OF TIME.

GOVERNMENTAL ACTIVITY SHOULD BE REPORTED ON THE MODIFIED ACCRUAL BASIS

PROPRIETARY ACTIVITY SHOULD BE REPORTED ON A BUDGETARY BASIS

#### POSTMARK DATES WILL NOT BE ACCEPTED AS PROOF OF SUBMISSION ON OR BEFORE THE STATUATORY DEADLINE

PRIOR YEAR FORMS ARE OBSOLETE AND WILL NOT BE ACCEPTED.

FOR YOUR REFERENCE, COLORADO REVISED STATUTES CAN BE FOUND AT THIS ADDRESS:

http://www.lexisnexis.com/hottopics/Colorado/

APPLICATIONS MUST BE FULLY AND ACCURATELY COMPLETED.

Governmental Activity should be reported on the Modified Accrual Basis

In that event, AN AUDIT SHALL BE REQUIRED.

	CHECKLIST CHECKLIST								
	Has the preparer signed the application?	Checkout our web portal. Register your							
	Has the entity corrected all Prior Year Deficiencies as communicated by the OSA?	account and submit electronic Applications							
	Has the application been PERSONALLY reviewed and approved by the governing body?	for Exemption From Audit, Extension of							
	Are all sections of the form complete, including responses to all of the questions?	Time to File requests, Audited Financial							
	Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section?	Statements, and more! See the link below.							
	Will this application 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 <u>PERSONALLY</u> reviewed and approved the resolution in an open public meeting?	Click here to go to the portal							
	☐ Has the resolution been signed by a <u>MAJORITY</u> of the governing body? (See sample resolution.)								
	Will this application 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 body?								
	FILING METHODS								
	WEB PORTAL: Register and submit your Applications at our web portal: <a href="https://apps.leg.co.gov/osa/lg">https://apps.leg.co.gov/osa/lg</a> For faster processing the web portal is	the preferred method for submission							
	MAIL: Office of the State Auditor Local Government Audit Division 1525 Sherman St., 7th Floor Denver, CO 80203								
	Please Note: The OSA's email addresses have changed as of December 1, 2023. Please ensure you are using the email address noted below.								
UES	STIONS? Email: osa.lg@coleg.gov or Phone: 303-869-3000 IMPORTANT!								
II Ar	polications for Examption from Audit are subject to review and approval by the Office of the State Auditor								

	LC	NG FORI	VI			
E OF GOVERNMENT	Foundry Loveland Metropolitan District	For the Year Ended				
RESS	c/o Pinnacle Consulting Group, Inc.	12/31/2023				
	550 W. Eisenhower Blvd.					or fiscal year ended:
	Loveland, CO 80537					
TACT PERSON	Amanda Castle					
NE	970-669-3611					
IL	AmandaC@pcgi.com					
	CERTIFICA					
endent of the entity complete thes: E:	ountant with knowledge of governmental accounting and that the information is application if revenues or expenditure are at least \$100,000 but not more than \$  Amanda Castle  District Accountant  Pinnacle Consulting Group, Inc.	n the Application	is complete and a	ccurate to the best of my ki	nowledge. I am a rate from the enti	ware that the Audit Law requires that a persony.
pendent of the entity complete th E: E I NAME (if applicable) RESS	ountant with knowledge of governmental accounting and that the information in a application if revenues or expenditure are at least \$100,000 but not more than \$  Amanda Castle  District Accountant  Pinnacle Consulting Group, Inc.  550 W. Eisenhower Blvd.	n the Application	is complete and a	ccurate to the best of my ki	nowledge. I am a	ware that the Audit Law requires that a persony.
pendent of the entity complete th E: E I NAME (if applicable) RESS NE	ountant with knowledge of governmental accounting and that the information in a application if revenues or expenditure are at least \$100,000 but not more than \$  Amanda Castle  District Accountant  Pinnacle Consulting Group, Inc.  550 W. Eisenhower Blvd.  (970) 669-3611	n the Application	is complete and a	ccurate to the best of my ki	nowledge. I am a	ware that the Audit Law requires that a persony.
pendent of the entity complete th E: E I NAME (if applicable) RESS	puntant with knowledge of governmental accounting and that the information is application if revenues or expenditure are at least \$100,000 but not more than \$  Amanda Castle  District Accountant  Pinnacle Consulting Group, Inc.  550 W. Eisenhower Blvd.  [970] 669-3611  District Accountant	n the Application	is complete and a	ccurate to the best of my ki	nowledge. I am a	ware that the Audit Law requires that a personal ty.
pendent of the entity complete th E: E I NAME (if applicable) RESS NE	ountant with knowledge of governmental accounting and that the information in a application if revenues or expenditure are at least \$100,000 but not more than \$  Amanda Castle  District Accountant  Pinnacle Consulting Group, Inc.  550 W. Eisenhower Blvd.  (970) 669-3611	n the Application	is complete and a	ccurate to the best of my ki	nowledge. I am a	ty.
endent of the entity complete the E: E: NAME (if applicable) RESS NE LITIONSHIP TO ENTITY  Amount of the entity filed for, or has the or	puntant with knowledge of governmental accounting and that the information is application if revenues or expenditure are at least \$100,000 but not more than \$  Amanda Castle  District Accountant  Pinnacle Consulting Group, Inc.  550 W. Eisenhower Blvd.  [970] 669-3611  District Accountant  PREPARER (SIGNATURE REQUIRED)	n the Application	is complete and a	ccurate to the best of my ki	rate from the entit	ty.

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NOTE: A	ttach additional sheets as necessary.	-	Cavaraments	al Funds		Р	roprietary/Fiduciary Funds	
		Photostolica	Governmenta					Please use this space to
Line #	Description	Gen	eral Fund	Debt Fund	Description		Fund* Fund*	provide explanation of any items on this page
SHOW					Assets			items on this page
	Assets Cash & Cash Equivalents	\$	182,643 \$			\$	- \$ -	
1-1 1-2	Investments	\$	- \$			\$	- \$ -	
1-2	Receivables	\$	246,256 \$		Receivables	\$	- \$ -	
1-3	Due from Other Entities or Funds	\$	170,482 \$		Due from Other Entities or Funds	\$	- \$ -	
1-5	Property Tax Receivable	\$	181,755 \$		Other Current Assets [specify]			1
1-5	All Other Assets [specify]			,		\$	- \$ -	
4.0	Lease Receivable (as Lessor)	\$	- \$	-	Total Current Assets	\$	- \$	
1-6	•	\$	4,765 \$		Capital & Right to Use Assets, net (from Part 6-4)	\$	- \$ -	
1-7	Prepaid Expense	\$	- \$		Other Long Term Assets [specify]	\$	- \$ -	
1-8		\$	- \$			\$	- \$ -	
1-9		\$	-   \$			\$	- \$ -	
1-10	(add lines 1-1 through 1-10) TOTAL ASSETS		785,900 \$		(add lines 1-1 through 1-10) TOTAL ASSETS	\$	- \$ -	
1-11	Deferred Outflows of Resources:	Ψ	, 00,000   0		Deferred Outflows of Resources			
1-12	[specify]	\$	-   \$		[specify]	\$	- \$ -	
1-12	[specify]	\$	-   \$		[specify]	\$	- \$ -	
1-13	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS		- 8		(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	\$	- \$ -	
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	785,900 \$	328,718	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	-   \$ -	
1-13	Liabilities				Liabilities			
1-16	Accounts Payable	\$	466,074 \$	ş <u>-</u>	Accounts Payable	\$	- \$ -	-
1-17	Accrued Payroll and Related Liabilities	\$	- 9	\$ -	Accrued Payroll and Related Liabilities	\$	- \$ -	-
1-18	Unearned Revenue	\$	-   \$	\$ -	Accrued Interest Payable	\$	- \$ -	-
1-19	Due to Other Entities or Funds	\$	-   9	\$ -	Due to Other Entities or Funds	\$	- \$ -	-
1-20	All Other Current Liabilities	\$	- 3	\$	All Other Current Liabilities	\$	- \$ -	
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$	466,074		(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$	- \$ -	
1-22	All Other Liabilities [specify]	\$	-   8	\$ -	Proprietary Debt Outstanding (from Part 4-4)	\$	- \$ -	-
1-23		\$	- 3		Other Liabilities [specify]:	\$	- \$ -	-
1-24		\$	-   5	\$ -		\$	- \$ -	_
1-25		\$	- 3			\$	- \$ -	_
1-26		\$	-   5			\$	- \$ - - \$ -	
1-27	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$	466,074	\$ -	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$	-   \$ -	
	Deferred Inflows of Resources:	,			Deferred Inflows of Resources		-   \$ -	
1-28	Deferred Property Taxes	\$	181,755		Pension/OPEB Related	\$	- \$ -	-
1-29	Lease related (as lessor)	\$	- :		Other [specify]	\$	- \$ -	
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	<b>S</b> \$	181,755	\$ 272,628	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$	- 3	
	Fund Balance		T		Net Position	\$	-   \$ -	
1-31	Nonspendable Prepaid	\$	4,765		Net Investment in Capital and Right-to Use Assets	Ψ	-   Ψ	_
1-32	Nonspendable Inventory	\$		\$ -	Emerganov Bosonyos	\$	-   \$ -	
1-33	Restricted [specify]	\$	17,660		Emergency Reserves	\$	- \$ -	7
1-34	Committed [specify]	\$	38,411		Other Designations/Reserves	\$	- \$ -	
1-35	Assigned [specify]	\$		\$ -	Restricted Undesignated/Unreserved/Unrestricted	\$	- \$ -	.†
1-36	Unassigned:	\$	77,236	<b>5</b> -		0.0000000000000000000000000000000000000		
1-37	Add lines 1-31 through 1-3				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 3-3	- 1000000000000000000000000000000000000			TOTAL NET POSITION		- s	
	TOTAL FUND BALANC	Ψ	138,072	\$ 56,090		Ψ	- <del>-</del> <del>-</del> -	
1-38	Add lines 1-27, 1-30 and 1-3				Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15			
	This total should be the same as line 1-1				TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET			-
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUN BALANC		705 000	\$ 328,718	POSITION		- s	
	BALANO	\$	785,900	\$ 320,718			U.T.	

## PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

	86529	Governmenta	l Funds		Proprietary	/Fiduciary Funds	
Line # Description		eneral Fund	Debt Fund	Description	Fund*	Fund*	Please use this space to provide explanation of any
Line # Description General Fund Debt Fund Tax Revenue				Tax Revenue		items on this page	
	\$	303,801 \$	41,427	Property [include mills levied in Question 10-6]	\$	- \$	
2-1 Property [include mills levied in Question 10-6] 2-2 Specific Ownership	\$	26,936 \$	3,673	Specific Ownership	\$	- \$	-
2-2 Specific Ownership 2-3 Sales and Use Tax	\$	- \$		Sales and Use Tax	\$	- \$	-
2-4 Other Tax Revenue [specify]:	\$	- \$		Other Tax Revenue [specify]:	\$	- \$	-
2-5 LURA - Property Tax	\$	70,272 \$	9,583		\$	- \$	-
2-6 Interest	\$	11,570 \$			\$	- \$	-
2-7	\$	- \$			\$	- \$	-
2-8 Add lines 2-1 through 2 TOTAL TAX REVENU		412,579 \$	55,449	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$	- \$	-
2-9 Licenses and Permits	\$	- \$	-	Licenses and Permits	\$	- \$	-
2-10 Highway Users Tax Funds (HUTF)	\$	- \$	-	Highway Users Tax Funds (HUTF)	\$	- \$	-
2-11 Conservation Trust Funds (Lottery)	\$	- \$	-	Conservation Trust Funds (Lottery)	\$	- \$	-
2-12 Community Development Block Grant	\$	- \$	-	Community Development Block Grant	\$	- \$	-
2-13 Fire & Police Pension	\$	- \$	-	Fire & Police Pension	\$	- \$	-
2-14 Grants	\$	- \$	-	Grants	\$	- \$	-
2-15 Donations	\$	- \$	-	Donations	\$	- \$	-
2-16 Charges for Sales and Services	\$	- \$	-	Charges for Sales and Services	\$	- \$	-
2-17 Rental Income	\$	- \$	-	Rental Income	\$	- \$	-
2-18 Fines and Forfeits	\$	- \$	-	Fines and Forfeits	\$	- \$	-
2-19 Interest/Investment Income	\$	- \$	-	Interest/Investment Income	\$	- \$	-
2-20 Tap Fees	\$	-   \$	-	Tap Fees	\$	- \$	-
2-21 Proceeds from Sale of Capital Assets	\$	-   \$	-	Proceeds from Sale of Capital Assets	-		
2-22 All Other [specify]: Trash Enclosure Reimbursement	\$	12,961	-	All Other [specify]:	\$	- \$	-
2-23 Plaza O&M/City of Loveland/Splash Pad Reimbursement	\$	163,130 \$	-	0.04h	\$	- \$	-
2-24 Add lines 2-8 through 2- TOTAL REVENU		588,670	55,449	Add lines 2-8 through 2-23 TOTAL REVENUES		-   \$	-
Other Financing Sources				Other Financing Sources			
2-25 Debt Proceeds	\$	- 3	-	Debt Proceeds	\$	- \$	-
2-26 Lease Proceeds	\$	- 3	-	Lease Proceeds	\$	- \$	-
2-27 Developer Advances	\$	- 5	-	Developer Advances	\$	- \$	-
2-28 Other [specify]:	\$	- 3	-	Other [specify]:	\$	- \$	-
2-29 Add lines 2-25 through 2 TOTAL OTHER FINANCING SOURC		- (	\$ -	Add lines 2-25 through 2-26 TOTAL OTHER FINANCING SOURCES		- \$	GRAND TOTALS
2-30 Add lines 2-24 and 2- TOTAL REVENUES AND OTHER FINANCING SOURC	29	588,670	\$ 55,449	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	-   \$	- \$ 644,1

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

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

	FART 3 - THANGE			al Funds	-	Proprietary/Fig	luciary Funds	Please use this space to
	Description	General Fund		Debt Fund	Description	Fund*	Fund*	provide explanation of any
Line #	PALICA DE DESERVA DE LA BARRACIA DE LA CARRESTA DE	General Felic	STATE STATE	3031000	Expenses			items on this page
3-1	Expenditures General Government	\$ 541,	240 \$	-	General Operating & Administrative	\$ -	•	
3-1	Contract Contracting	\$	- \$		Salaries	\$ -		
3-2	-	\$	- \$		Payroll Taxes	\$ -	•	
3-4	Law Linescomens	\$	- \$		Contract Services	\$ -		
3-4	1.110	\$	- \$	-	Employee Benefits	\$ -	*	
3-6	Solid Waste	\$	- \$		Insurance	<u> </u>	\$ -	
3-7		\$	- \$	-	Accounting and Legal Fees	\$ -	\$ -	
3-8	Health	\$	- \$	-	Repair and Maintenance	\$ -	\$ -	
3-9	Culture and Recreation	\$	- \$	-	Supplies	\$ -	\$ -	
3-10	Transfers to other districts	\$	- \$		Utilities	\$ -	\$ -	
3-10	Other [specify]:	\$	- \$		Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	
3-11	Other [specify]:	\$	- S		Other [specify]	\$ -	\$ -	
		\$	- \$			\$ -	\$ -	
3-13	Capital Outlay	\$	- \$		Capital Outlay	\$ -	\$ -	
3-14	Debt Service	<u> </u>			Debt Service			7
2.45	Principal (should match amount in 4-4)	\$	-   \$	16,000	Principal (should match amount in 4-4)	\$ -	\$ -	_
3-15 3-16	Interest	\$	- 9		Interest	\$ -	\$ -	
3-16 3-17	Bond Issuance Costs	\$	- 8		Bond Issuance Costs	\$ -	\$ -	
	Developer Principal Repayments	\$	- 9		Developer Principal Repayments	\$ -	\$ -	_
3-18		\$	- 9		Developer Interest Repayments	\$ -	\$ -	1
3-19	Developer Interest Repayments	\$	- 9	*	All Other [specify]:	\$ -	\$ -	
3-20	All Other [specify]: Treasurer's Fees	\$	- 8	*		\$ -	\$ -	GRAND TOTAL
3-21	Add lines 3-1 through 3-21		.240		Add lines 3-1 through 3-21	\$ -	\$ -	\$ 594,636
3-22	TOTAL EXPENDITURES	\$ 541			TOTAL EXILENSES		\$ -	
3-23	Interfund Transfers (In)	\$		,	Net Interfund Transfers (In) Out	T	\$ -	-
3-24	Interfund Transfers Out	\$		\$ -	Other [specify][enter negative for expense]	\$ -	\$ -	-
3-25	Other Expenditures (Revenues):	\$	- 3		Depreciation/Amortization	Ψ	\$ -	-
3-26	•	\$	-   \$		Other Financing Sources (Uses) (from line 2-28)	\$ -	\$ -	-
3-27		\$	- 3	•	Capital Outlay (from line 3-14)	\$ -	\$ -	-
3-28		\$	-   :	\$ -	Debt Principal (from line 3-15, 3-18)	\$ -	\$ -	
3-29	(Add lines 3-23 through 3-28) TOTAL				(Line 3-27, plus line 3-28, less line 3-26, less line 3-25			
	TRANSFERS AND OTHER EXPENDITURES	\$	- :	\$ -	plus line 3-24) TOTAL GAAP RECONCILING ITEMS	\$ -	-	
3-30	Excess (Deficiency) of Revenues and Other Financing				Net Increase (Decrease) in Net Position			
0-00	Sources Over (Under) Expenditures				Line 2-29, less line 3-22, plus line 3-29, less line 3-23			
	Line 2-29, less line 3-22, less line 3-29	\$ 47	7,430	\$ 2,053		\$ -	\$ -	4
	,				Net Position, January 1 from December 31 prior year			
3-31	Fund Balance, January 1 from December 31 prior year report				report			
	•	\$ 90	0,642	\$ 54,037		\$ -	\$ -	4
3-32	Prior Period Adjustment (MUST explain)	\$	-	\$ -	Prior Period Adjustment (MUST explain)	\$ -	\$ -	-
	Fund Balance, December 31				Net Position, December 31			
0-00	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.	\$ 138	3,072	\$ 56,090	This total should be the same as line 1-37.	\$ -		ol Covernment Division at

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at

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	PART 4 - DEBT OUT	STANDING, IS	SSUED, AI	AD KETIKĖD	
	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?		Image: Control of the		
4-2	Is the debt repayment schedule attached? If no, MUST explain:		V	Ц	
[			Г		
1-3	Is the entity current in its debt service payments? If no, MUST explain:		<b>▽</b>		
. 1		Weeks controlly as a controlly to	THE PERSON AND RESIDENCE OF THE PERSON OF TH		
4-4	Please complete the following debt schedule, if applicable: (please only include principal beginning of years)		Retired during year	Outstanding at year-end	
	General obligation bonds	- \$ - 3			
	Revenue bonds \$		\$ - \$		
	Notes/Loans	,000 4	\$ 16,000 \$ \$ - \$		
	Lease & SBITA** Liabilities (GASB 87 & 96)  S 297.9	- \$ - \$ ,963 \$ - \$	T		
	Developer Advances	- \$ - 3	-	\$ -	
	TOTAL \$ 1,068,9	,963 \$ - 3		\$ 1,052,963	
Subsc		nior year-end balance	VEA	NO	
75	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.]?	-	_	_	
yes:	How much?  Date the debt was authorized:		_		
4-6	Does the entity intend to issue debt within the next calendar year?				
ves:	How much? \$	-		<b>☑</b>	
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			ت	
	What is the amount outstanding?			V	
	Does the entity have any lease agreements?  What is being leased?				
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?	OACH AND IN	/CCTMEN	TC	
		CASH AND IN	the section is the section of the section is	115	Places use this enges to avoide any evaluations as comments:
	Please provide the entity's cash deposit and investment balances.		AMOUNT	TOTAL	Please use this space to provide any explanations or comments:
5-1	YEAR-END Total of ALL Checking and Savings accounts	-	\$ 92,765 \$ -		
5-2	Certificates of deposit	OTAL CASH DEPOSITS		\$ 92,765	
	Investments (if investment is a mutual fund, please list underlying investments):		\$ 146,249		
	Colotrust		\$ -		
5-3			\$ -		
			\$ -	\$ 146.249	
		TOTAL INVESTMENTS		T	
		SH AND INVESTMENTS		\$ 239,014 N/A	
	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	n 11- 🕝			
•	10.5-101, et seq. C.R.S.)? If no, MUST explain:		1		
			1		

	ocuSign Envelope ID: F7A6014D-F0B7-4CBF-AB09-D38878D9A79D	- CAPITAL AN	DRIGHT	-TO-US	ASSETS	
		) - CAPITAL AIN	וווטוווטוו		NO	Please use this space to provide any explanations or comments:
	Please answer the following question by marking in the appropriate box			YES		Fredse use this space to provide any explanations of commence.
6-1	Does the entity have capitalized assets?			V		
6-2	Has the entity performed an annual inventory of capital assets in accordance with	Section 29-1-506, C.R.S.	.? If no,	V		
	MUST explain:					
6-3		Balance -				
	Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:		dditions*	Deletions	Year-End Balance	
	Complete the following capital and	year				
		\$ - \$	-	¢ -	\$ -	
	24114	\$ - \$	-		\$ -	
		\$ - \$		7	\$ -	
		\$ - \$	-		\$ -	
	annual and an annual and	\$ 1,792,959 \$	-		\$ 1,792,959	•
		\$ 1,792,959 \$	-		\$ -	
	ochou double in the group (all )	\$ - \$		·	\$ -	-
	Leaded a CDITY (Agin to Coo ) look	\$ - \$			\$ -	
	Threat grade 7 to 5 to 5	\$ - \$	-		\$ -	-
	Carron (explaint)	\$ - \$		•	\$ -	-
	/todamarated / mile manufacture (	\$ (296,477) \$		•		-
	Accumulated Depreciation (Enter a negative, or credit, balance)				· · · · · · · · · · · · · · · · · · ·	
	TOTAL	\$ 1,496,482 \$	-	\$ 89,648	\$ 1,406,834	
		Balance -				
6-4	Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	beginning of the A	Additions*	Deletions	Year-End Balance	
		year*				
	Land	\$ - \$	- 1	\$ -	\$ -	
	Buildings	\$ - \$	-	\$ -	- \$	
	Machinery and equipment	\$ - \$	-	\$ -	\$ -	
	Furniture and fixtures	\$ - \$	-	\$ -	\$ -	
	Infrastructure	\$ - \$	-	\$ -	\$ -	
	Construction In Progress (CIP)	\$ - \$	-	\$ -	\$ -	
	Leased & SBITA Right-to-Use Assets	\$ - \$	-	\$ -	\$ -	
	Intangible Assets	\$ - \$	-	\$ -	\$ -	
	Other (explain):	\$ - \$	-	\$ -	\$ -	
	Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ - \$	-	\$ -	\$ -	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ - \$	-	\$ -	\$ -	
	TOTAL	\$ - \$	-	\$ -	\$ -	]
		* Must agree to prior year-end		<u> </u>	1 -	
		* Generally capital asset addit	ions should be rep	orted at capital or	utlay on line 3-14 and capitalized	
		in accordance with the govern	ment's capitalizati	on policy. Please	explain any discrepancy	
		PART 7 - PENS	SION INF	ORMATI	ON	
				YES	NO	Please use this space to provide any explanations or comments:
	Describe and the leave on Hold hims!! fivefighters! nongion plan?				V	A CONTRACT OF THE PROPERTY OF
7-1	Does the entity have an "old hire" firefighters' pension plan?	•			_ _	
	Does the entity have a volunteer firefighters' pension plan?			=		
ır 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?	\$	-			
	, , , , , , , , , , , , , , , ,					

D	ocuSign Envelope ID: F7A6014D-F0B7-4CBF-AB09-D38878D9A79D	BUDGET INF	ORMATION		
1000	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:
0.4	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:	V			
0 2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?  If no, MUST explain:	7			
	Please indicate the amount appropriated for each fund separately for the year reported				
		iations By Fund 560,890			
	General Fund \$ Debt Fund \$	53,705			
	\$	-			
	\$	- 	OF DIGUES /		
	PART 9 - TAX PAY	EKS BILL		NO NO	Please use this space to provide any explanations or comments:
	Please answer the following question by marking in the appropriate box	0/5)12	YES 🔽		Please use this space to provide any explanations of comments.
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 2 Note: An election to exempt the government from the 3 percer	nt emergency reserve	_	_	
			JEODMATION	100000000000000000000000000000000000000	
1976	PART 10 - 0	JENERAL II	VFORMATION	V .	
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
10-1	Is this application for a newly formed governmental entity?			V	
If yes:	D. A. of formation				
	Date of formation:				
10-2	Has the entity changed its name in the past or current year?			ightharpoons	
			7		
11 103.	NEW name		-		
	PRIOR name				
	Is the entity a metropolitan district?	-	<b>V</b>		
10-4	Please indicate what services the entity provides:		٦		
	Construction, financing, operations, and maintenance of Public Improvements				
	Does the entity have an agreement with another government to provide services?		ŭ		
If yes:	List the name of the other governmental entity and the services provided:		٦		·
	City of Loveland - Operations and Maintenance Agreement for the Foundry Development Public Plaza		_l. ☑		
	Does the entity have a certified mill levy?  Please provide the number of mills levied for the year reported (do not enter \$ amounts):		<u> </u>		
If yes:	Bond Redemption mills	3.357			
	0011014111041111	6.618			
	Total mills 5	2.975 YES	NO	N/A	
	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed	its 🗹			
10-7	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.				
	Please use this space to provide any ad	ditional evalence	ations or common	te not previou	isly included:
	Please use this space to provide any ad	ullional explana	ations of commen	its flot previol	aciy iliciados.

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			A CONTRACTOR OF THE PARTY OF TH	OSA USE ONLY	STATE OF EXPENDEN	Notes
ntity Wide: nrestricted Cash & Investments urrent Liabilities leferred Inflow	\$ \$ \$	General Fund 239,014 Unrestricted Fund Balan 466,074 Total Fund Balance 454,383 PY Fund Balance Total Revenue Total Expenditures	1 S S S S S	Governmental Funds 115,647 Total Tax Revenue 138,072 Revenue Paying Debt Service 90,642 Total Revenue 588,670 Total Debt Service Principal 541,240 Total Debt Service Interest Total Labilities Total Liabilities	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	468,028 55,449 644,119 16,000 36,373 1,114,618 466,074
overnmental otal Cash & Investments ransfers In ransfers Out roperty Tax ebt Service Principal otal Expenditures otal Developer Advances otal Developer Repayments	\$ \$ \$ \$ \$ \$	Interfund In 238,494 Interfund Out Proprietary Current Assets 345,228 Deferred Outflow 16,000 Current Liabilities 594,636 Deferred Inflow Cash & Investments Principal Expense	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	- Enterprise Funds Net Position - PY Net Position - Government-Wide - Total Outstanding Debt - Authorized but Unissued - Year Authorized	\$ \$ \$ \$	- - 1,052,963 - 1/0/1900

DocuSign Envelope ID: F7A6014D-F0B7-4CBF-AB09-D38878D9A79D PART 12 - GOVERNING	ocuSign Envelope ID: F7A6014D-F0B7-4CBF-AB09-D38878D9A79D 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?	V						

## 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 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.

MIIST Drin	t the names of ALL members of the governing body below.	A MAJORITY of the members of the governing body must sign below.
WOOT FIIII	Full Name	Brandy Natalzia DocuSigned by: , attest that I am a duly elected or appointed board member,
	Brandy Natalzia	and that I have personally reviewed and approve this application for exemption from audit.  Signed National Nat
	Full Name	I,Cary Wicker, attest that I am a duly elected or appointed board member, and
2	Cary Wicker	that I have personally reviewed and approve this application for exemption from audit.  Signed
	Full Name	I,Vanessa Laureles, attest that I am a duly elected or appointed board member,
3	Vanessa Laureles	and that I have personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:May 2025
	Full Name	I. Ryan Eisenbraun , attes unitaried duly elected or appointed board member, and that I have personally
4	Ryan Eisenbraun	reviewed and approve this application for exemption from audit 20/2024   15:51:49 MDT Signed My term Expires: May 2027 St18E405280A478
	Full Name	I,Sebrina Osilka, রাইজ্ঞারিকের by a duly elected or appointed board member, and that I have personally
5	Sebrina Osilka	reviewed and approve this application for exemption from audit.  Signed
	Full Name	, attest that I am a duly elected or appointed board member, and that I have
6		personally reviewed and approve this application for exemption from audit.  Signed  My term Expires:
	Full Name	L. attest that I am a duly elected or appointed board member, and that I have
7		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.

PROCESTING AND PROCESS OF THE METERS OF THE OWN ASSETS
RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT (Pursuant to Section 29-1-604, C.R.S.)
A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR YEAR 20XX FOR THE (name of government). STATE OF COLORADO.
WHEREAS, the (governing body) of (name of government) wishes to claim exerciption 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 reven section 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 (pame of government) exceeded \$100,000 for Year 20XX; and
WHEREAS, an application for exemption from audit for (name of government) has been prepared by (name of individual), a person skilled in governmental accounting: and
OR
(2)WHEREAS, neither revenues nor expenditures for (name of government) exceeded \$750,000 for Year 20XX; and
WHEREAS, an application for exemption from subit for (name of government) has been prepared by (trame of individual or firm), an independent accountant with knowledge of governmental accounting; and
WHEREAS, said application for exemptical from soldit has been completed in accordance with regulations, issued by the State Auditor.
NOW THEREFORE be it resolved/ordained by the (governing body) of the (name of government) that the application for exemption from audit for (name of government) for the year ended
ADOPTED THIS day of, A.D. 20XX.

			_
Mayor/President/Chairman, etc.		<i>1</i> €	
•		A STATE OF THE STA	
ATTE <b>ST</b> :			
	(6)		
Town Clerk, Secretary, etc.			
•			
5 D :- 4 N	Date		
Type or Print Names of Members of Governing Body	Term Expres	Signature	
vicinites of Governing Body	DAGE	DIGINITAL	
- Constitutes	<u></u>		
	200		