APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT

CONTACT PERSON

ADDRESS

PHONE

Crossroads East Metropolitan District
c/o White Bear Ankele Tanaka & Waldron, P.C.

2154 East Commons Ave, Ste 2000 Centennial, CO 80122 Jennifer Gruber Tanaka

303.858.1800

EMAIL <u>jtanaka@wbapc.com</u>

For the Year Ended 12/31/23 or fiscal year ended:

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: TITLE

FIRM NAME (if applicable)

ADDRESS PHONE Diane Wheeler
District Accountant
Simmons & Wheeler, P.C.

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

303-689-0833

Please indicate whethe using Governmental or	r the following financial information is recorded			PROPRIETARY (CASH OR BUDGETARY BASIS)	
Qione K Whee	la-			3/5/2024	
PREPARER (SIGNATURE REQUIRED)			DATE PREPARED		

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 Do	ollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$	-	space to provide
2-2		Specific owners	ship	\$	-	any necessary explanations
2-3		Sales and use		\$	-	explanations
2-4		Other (specify):		\$	-	
2-5	Licenses and permi	ts		\$	-	
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 service	S		\$	-	
2-11	Fines and forfeits			\$	-	
2-12	Special assessment	ts		\$	-	
2-13	Investment income			\$	-	
2-14	Charges for utility s	ervices		\$	-	
2-15	Debt proceeds		(should agree with line 4-4, column 2	' <u>'</u>	-	
2-16	Lease proceeds			\$	-	
2-17	Developer Advance	s received	(should agree with line 4-4	<u> </u>	22,222	
2-18	Proceeds from sale	of capital assets	5	\$	-	
2-19	Fire and police pens	sion		\$	-	
2-20	Donations			\$	-	
2-21	Change in develope	r advances rece	vable	\$	1,661]
2-22				\$	-	
2-23				\$	-	
2-24		(add lin	es 2-1 through 2-23) TOTAL REVENUE	\$	23,883	

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.

	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		\$ 2,008	space to provide	
3-2	Salaries		\$ -	any necessary explanations	
3-3	Payroll taxes		\$ -	explanations	
3-4	Contract services		\$ -		
3-5	Employee benefits		\$ -		
3-6	Insurance		\$ 2,850		
3-7	Accounting and legal fees		\$ 13,842		
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 (s	should agree with Part 4)	\$ -		
3-18	Debt service interest		\$ -		
3-19	Repayment of Developer Advance Principal (si	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			\$ -	1	
3-25			\$ -	1	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDI	TURES/EXPENSES	\$ 18,700		

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 OUTSTANDING	G, I	SSUEC), <i>F</i>	AND RE	ETIR	ED		
	Please answer the following questions by marking the	appro	priate boxes.			•	Yes		No
4-1	Does the entity have outstanding debt?					✓			
	If Yes, please attach a copy of the entity's Debt Repayment S								
4-2	Is the debt repayment schedule attached? If no, MUST explain	n bel	ow:		_				☑
	Developer Advances to be repaid with available funds								
4-3	Is the entity current in its debt service payments? If no, MUS	T exp	lain below	:		✓			
	Developer Advances to be repaid with available funds								
4-4	Please complete the following debt schedule, if applicable:								
	(please only include principal amounts)(enter all amount as positive		standing at	Iss	ued during	Retire	d during		tanding at
	numbers)	end	of prior year*		year	7	/ear	y y	ear-end
	General obligation bonds	\$	_	\$		\$	_	\$	
	Revenue bonds	\$		\$		\$		\$	
	Notes/Loans	\$		\$		\$		\$	
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$		\$		\$		\$	
	Developer Advances	\$		\$	22,222	\$	-	\$	22,222
	Other (specify):	\$		\$		\$		\$	
	TOTAL	\$		\$	22,222	\$		\$	22,222
**Subscrin	tion Based Information Technology Arrangements		st agree to pric	<u> </u>		_ +		Ψ	
Guboonp	Please answer the following questions by marking the appropriate boxes		st agree to pric	n yea	r-end balance		Yes		No
4-5	Does the entity have any authorized, but unissued, debt?								
If yes:	How much?	\$		2,5	00,000.00				
	Date the debt was authorized:		11/5/	2019)				
4-6	Does the entity intend to issue debt within the next calendar	year'	?			·]		☑
If yes:	How much?	\$							
4-7	Does the entity have debt that has been refinanced that it is	still re	esponsible	for?)	' c	.		✓
If yes:	What is the amount outstanding?	\$			-				
4-8	Does the entity have any lease agreements?	<u> </u>				' c]		☑
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?						-		☑
	What are the annual lease payments?	\$			-				
	Part 4 - Please use this space to provide any explanations/cor	nmer	nts or attac	h se	parate doc	umenta	ation, if r	ieede	d

	Please provide the entity's cash deposit and investment balances.		Amount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$ 3,000		
5-2	Certificates of deposit		\$ -		
	Total Cash Deposits			\$	3,000
	Investments (if investment is a mutual fund, please list underlying investments):				
			\$ -		
5-3			\$ -		
5-3			\$ -		
			\$ -		
	Total Investments			\$	-
	Total Cash and Investments			\$	3,000
	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.?	☑ ☑		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.)?	Ø		ı	0

	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?				Ø
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	s 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)	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Infrastructure	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Leased & SBITA Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	-	\$ -	-

*must tie to prior year ending balance

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

		_			
	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?				Ø
7-2	Does the entity have a volunteer firefighters' pension plan?				Ø
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 explanations	or c	omments	:	

PART 8 - BUDGET INFORMATION Please answer the following questions by marking in the appropriate boxes. Yes No N/A Did the entity file a budget with the Department of Local Affairs for the current year 8-1 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 \$ 50,000

	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)]?	Ø	
	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.	<u>u</u>	

If no, MUST 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?		
If yes:	Date of formation:	1	
10-2		1	
10-2	Has the entity changed its name in the past or current year?		☑
If yes:	Please list the NEW name & PRIOR name:		
-]	
10-3	Is the entity a metropolitan district?	. ☑	
	Please indicate what services the entity provides:		
	Sanitary, Storm Drainage, Water, Streets, Traffic and Safety Controls, Park and Recreations TV		
10-4	Does the entity have an agreement with another government to provide services?	_	☑
If yes:	List the name of the other governmental entity and the services provided:	1	
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during		☑
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?		☑
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		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 previously 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?	Ø	

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 sign below.
Board Member 1	Print Board Member's Name Andrew Klein	I Andrew Klein , 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 Mar 24, 2024 My term Expires: 05/2027
Board Member 2	Print Board Member's Name Paige Langley	I Paige Langley, 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 Paige Langley Date: Mar 24, 2024 My term Expires:05/2025
Board Member 3	Print Board Member's Name Megan Waldschmidt	I Megan Waldschmidt, 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 Mar 24, 2024 My term Expires: 05/2027
Board Member 4	Print Board Member's Name Mark Witkiewicz	I Mark Witkiewicz , 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
Board Member 6	Print Board Member's Name	I
Board Member 7	Print Board Member's Name	I

Crossroads East Metro 2023

Final Audit Report 2024-03-25

Created: 2024-03-24

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Signed

Transaction ID: CBJCHBCAABAAb-_vp1lvLAb4VqUqiducRVh5ujcyQhw0

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- Document created by Diane Wheeler (diane@simmonswheeler.com) 2024-03-24 9:32:31 PM GMT
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- Document emailed to meganw@westsideinv.com for signature 2024-03-24 9:33:50 PM GMT
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- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)
 Signature Date: 2024-03-24 9:33:57 PM GMT Time Source: server
- Email viewed by plangley@westsideinv.com 2024-03-24 9:44:39 PM GMT
- Signer plangley@westsideinv.com entered name at signing as Paige Langley 2024-03-24 9:45:01 PM GMT
- Document e-signed by Paige Langley (plangley@westsideinv.com)
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- Email viewed by aklein@westsideinv.com 2024-03-24 9:59:32 PM GMT



- Signer aklein@westsideinv.com entered name at signing as Andrew Klein 2024-03-24 9:59:48 PM GMT
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 Signature Date: 2024-03-24 9:59:50 PM GMT Time Source: server
- Email viewed by meganw@westsideinv.com 2024-03-25 4:38:45 AM GMT
- Signer meganw@westsideinv.com entered name at signing as Megan Waldschmidt 2024-03-25 4:39:17 AM GMT
- Document e-signed by Megan Waldschmidt (meganw@westsideinv.com)
 Signature Date: 2024-03-25 4:39:19 AM GMT Time Source: server
- Email viewed by markw@westsideinv.com 2024-03-25 1:55:08 PM GMT
- Signer markw@westsideinv.com entered name at signing as Mark J Witkiewicz 2024-03-25 1:55:39 PM GMT
- Document e-signed by Mark J Witkiewicz (markw@westsideinv.com)
 Signature Date: 2024-03-25 1:55:41 PM GMT Time Source: server
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