APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

8390 East Crescent Parkway
Suite 300
Greenwood Village, CO 80111-2814

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

CONTACT PERSON

PHONE EMAIL Gigi Pangindian
303-779-5710
gigi.pangindian@claconnect.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: Gigi Pangindian

TITLE Accountant for the District

FIRM NAME (if applicable) CliftonLarsonAllen LLP

ADDRESS 8390 East Crescent Parkway, Suite 300, Greenwood Village, CO 80111-2814

PHONE 303-779-5710

PREPARER (SIGNATURE REQUIRED)		D	ATE PREPARED
SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT			March 21, 2024
Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

Line#		De	scription		Round to neare	st Dollar	Please use this
2-1	Taxes: Pro	perty	(report mills levied in Ques	stion 10-6)	\$	30,820	space to provide
2-2	Spe	cific owners	ship		\$	2,220	any necessary
2-3	Sale	es and use			\$	-	explanations
2-4	Oth	er (specify):			\$	-	
2-5	Licenses and permits				\$	-	
2-6	Intergovernmental:		Grants		\$	-	
2-7			Conservation Trust	Funds (Lottery)	\$	-	
2-8			Highway Users Tax	Funds (HUTF)	\$	-	
2-9			Other (specify):		\$	-	
2-10	Charges for services				\$	-	
2-11	Fines and forfeits				\$	-	
2-12	Special assessments				\$	-	
2-13	Investment income				\$	-	
2-14	Charges for utility service	es			\$	-	
2-15	Debt proceeds		(should agr	ee with line 4-4, column 2)	\$	-	
2-16	Lease proceeds				\$	-	
2-17	Developer Advances rec		,	should agree with line 4-4)	\$	-	
2-18	Proceeds from sale of ca	apital assets	5		\$	-	
2-19	Fire and police pension				\$	-	
2-20	Donations				\$	-	
2-21	Other (specify):				\$	-	
2-22	Interest income				\$	1	
2-23					\$	-	
2-24		(add lin	es 2-1 through 2-23)	TOTAL REVENUE	\$	33,041	

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		\$	10	space to provide
3-2	Salaries		\$	-	any necessary
3-3	Payroll taxes		\$	-	explanations
3-4	Contract services		\$	-	
3-5	Employee benefits		\$	-	
3-6	Insurance		\$	-	
3-7	Accounting and legal fees		\$	-	
3-8	Repair and maintenance		\$	-	
3-9	Supplies		\$	-	
3-10	Utilities and telephone		\$	-	
3-11	Fire/Police		\$	-	
3-12	Streets and highways		\$	-	
3-13	Public health		\$	-	
3-14	Capital outlay		\$	-	
3-15	Utility operations		\$	-	
3-16	Culture and recreation		\$	-	
3-17	Debt service principal	(should agree with Part 4)	\$	-	
3-18	Debt service interest		\$	-	
3-19	Repayment of Developer Advance Principal	(should agree with line 4-4)	\$	-	
3-20	Repayment of Developer Advance Interest		\$	-	
3-21	Contribution to pension plan	(should agree to line 7-2)	\$	-	
3-22	Contribution to Fire & Police Pension Assoc.	(should agree to line 7-2)	\$	-	
3-23	Other (specify):				
3-24	County Treasurer's Fees			616	
3-25	Transfer to The Brands East Metro District No. 4		\$ 32,	295	
3-26	(add lines 3-1 through 3-24) TOTAL EXPE	NDITURES/EXPENSES	\$ 32,	921	

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	2 ISSUE		ETIPED	
4-1	Please answer the following questions by marking the a Does the entity have outstanding debt?	appropriate boxes		Yes	No
4-1	If Yes, please attach a copy of the entity's Debt Repayment S	chedule.			Ц
4-2	Is the debt repayment schedule attached? If no, MUST explai				7
	N/A. The District's outstanding debt is a \$50 liability to the Develo		is subject to]	
	annual appropriation.		-		
4-3	Is the entity current in its debt service payments? If no, MUS	explain below	/:	"	7
	N/A. See comments in 4-2.]	
4-4	Please complete the following debt schedule, if applicable:	Outoton din mon	la a coa di decessa se	Detined during	Outotonding of
	(please only include principal amounts)(enter all amount as positive	Outstanding at end of prior year	Issued during vear	Retired during vear	Outstanding at year-end
	numbers)	ena or prior year	year	year	year-end
	General obligation bonds	\$ -	\$ -	\$ -	\$ -
	Revenue bonds	\$ -	\$ -	\$ -	\$ -
	Notes/Loans	\$ -	\$ -	\$ -	\$ -
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$ -	\$ -	\$ -	\$ -
	Developer Advances	\$ 50) \$ -	\$ -	\$ 50
	Other (specify):	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ 50		\$ -	\$ 50
**Subscrip	ntion Based Information Technology Arrangements		ior year-end balance	 '	-
	Please answer the following questions by marking the appropriate boxes			Yes	No
4-5	Does the entity have any authorized, but unissued, debt?	Φ.	005 000 000	_	
If yes:	How much?	\$	225,000,000	_	
	Date the debt was authorized:		11/4/2014	J	
4-6	Does the entity intend to issue debt within the next calendar				✓
If yes:	How much?	\$	-	_	_
4-7	Does the entity have debt that has been refinanced that it is s		e for?		✓
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?			1	
	Is the lease subject to annual appropriation?			J 🗆	П
	What are the annual lease payments?	\$		<u> </u>	
	Part 4 - Please use this space to provide any explanations/con	∟ → nments or atta	ch separate dod	umentation. if	needed
	,				

	PART 5 - CASH AND INVESTME	ENTS				
	Please provide the entity's cash deposit and investment balances.		Am	ount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$	425		
5-2	Certificates of deposit		\$	-		
	Total Cash Deposits				\$	425
	Investments (if investment is a mutual fund, please list underlying investments):					
			\$			
				-		
5-3			\$	-		
			\$	-		
	Total Investments		Ψ	-	\$	
	Total Cash and Investments				<u>φ</u> \$	425
				_	Φ	
	Please answer the following questions by marking in the appropriate boxes	Yes		Vo		N/A
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?]		7
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.)?	✓]		
If no, MI	JST use this space to provide any explanations:					

1?

Please answer the following questions by ma	rking in the appropria	ate boxes.				Yes		No
Does the entity have capital assets?					I			1
Has the entity performed an annual in 29-1-506, C.R.S.,? If no, MUST explain		assets in accordance	with S	Section	I			4
N/A. The District has no capital assets.								
Complete the following capital & right-to-use	assets table:	Balance - beginning of the year*	be inc	ons (Must cluded in art 3)	De	letions		ar-En Ilance
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)	on	\$ -	\$	-	\$	-	\$	
TOTAL		\$ -	\$	-	\$	-	\$	
Part 6 - Please use this space to p		*must tie to prior ye						

Please answer the following questions by marking in the appropriate boxes.

7-1 Does the entity have an "old hire" firefighters' pension plan?
7-2 Does the entity have a volunteer firefighters' pension plan?

If yes: Who administers the plan?

Indicate the contributions from:

Tax (property, SO, sales, etc.):

State contribution amount:

Other (gifts, donations, etc.):

TOTAL

S -

Part 7 - Please use this space to provide any explanations or comments:

What is the monthly benefit paid for 20 years of service per retiree as of Jan

	PART 8 - BUDGE	[INFORMA]	ΓΙΟΝ		
	Please answer the following questions by marking in the appropriate	boxes.	Yes	No	N/A
8-1	Did the entity file a budget with the Department of Local Affairs in accordance with Section 29-1-113 C.R.S.? If no, MUST explain	•	7		
8-2	Did the entity pass an appropriations resolution, in accord 29-1-108 C.R.S.? If no, MUST explain:	lance with Section	V		
If yes:	Please indicate the amount budgeted for each fund for the	year reported:			
	Governmental/Proprietary Fund Name	Total Appropriat	ions By Fund		
	General Fund	\$	-		
	Debt Service Fund	\$	32,977		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	Please answer the following question by marking in the appropriate box	Yes	No
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.	Ţ.	Ш
If no, M	UST 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?		7
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		√
If yes:	Please list the NEW name & PRIOR name:	1	
10-3	Is the entity a metropolitan district?] 	
	Please indicate what services the entity provides:	_	
	See explanation below.		
10-4	Does the entity have an agreement with another government to provide services?		7
If yes:	List the name of the other governmental entity and the services provided:	1	
10-5	Has the district filed a <i>Title 32</i> , <i>Article 1 Special District Notice of Inactive Status</i> during		√
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?	´	
If yes:	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills	Contract obligation	39.000
	Total mills		39.000
	Yes	No	N/A
10-7	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required		
	under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain.	1	

Please use this space to provide any additional explanations or comments not previously included:

10-3: Financing for the planning, design, acquisition, construction, installation, relocation, redevelopment, operations and maintenance of the public improvements within the District including streets, parks and recreation, water and wastewater facilities, transportation, mosquito control, safety protection, fire protection, television relay and translation, and security.

	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?	V	

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 th	ne names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must sign below.
Board	Print Board Member's Name	I, Martin Lind, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 1	Martin Lind	Signed MATTIN (JWA) Date:
	Print Board Member's Name	I, <u>Justin Donahoo</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
Board Member 2	Justin Donahoo	audit. Signed Justin Donaltoo Date:
Board	Print Board Member's Name	I, Marissa Donahoo, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
Member 3	Marissa Donahoo	audit. Signed Date: 12C416EE08C March 26, 2024 11:39 AM MDT My term Expires: May 2027
Board	Print Board Member's Name	I, <u>Austin Lind</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 4	Austin Lind	Date:
Board	Print Board Member's Name	I, Garrett Scallon, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
Member 5	Garrett Scallon	Signed Carvell Scallon Date:
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Member 6		exemption from audit. Signed Date: My term Expires:
Board Member 7	Print Board Member's Name	I



CliftonLarsonAllen LLP 8390 East Crescent Parkway, Suite 300 Greenwood Village, CO 80111 phone 303-779-5710 fax 303-779-0348 claconnect.com

Accountant's Compilation Report

Board of Directors
The Brands East Metropolitan District No. 2
Larimer County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of The Brands East Metropolitan District No. 2 as of and for the year ended December 31, 2023, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to The Brands East Metropolitan District No. 2.

Greenwood Village, Colorado

CliftonLarsonAllen LLP

March 21, 2024

Certificate Of Completion

Envelope Id: 0930A008263E4591A779C39D6C476CD4

Subject: Please DocuSign: Brands East MD2-2023 AExempt.pdf, Brands East MD3-2023 AExempt.pdf

Source Envelope:

Document Pages: 18

Certificate Pages: 2 AutoNav: Enabled

Envelopeld Stamping: Enabled

Time Zone: (UTC-07:00) Mountain Time (US & Canada)

Envelope Originator:

Status: Completed

Lara Wynn

1625 Pelican Lakes Point, Suite 201

Windsor, CO 80550 lwynn@watervalley.com IP Address: 70.91.169.129

Record Tracking

Status: Original

3/26/2024 11:26:25 AM

Holder: Lara Wynn

lwynn@watervalley.com

Location: DocuSign

Signer Events

Austin Lind

ALIND@WATERVALLEY.COM

Security Level: Email, Account Authentication

(None)

Signature

Signatures: 10

Initials: 0

Signature Adoption: Drawn on Device Using IP Address: 70.91.169.129

Timestamp

Sent: 3/26/2024 11:34:55 AM Viewed: 3/27/2024 9:37:39 AM Signed: 3/27/2024 9:37:48 AM

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Garrett Scallon

gscallon@watervalley.com Chief Operating Officer

Security Level: Email, Account Authentication

(None)

Garrett Scallon

Justin Donalioo

1E0D65E83C2E44E

Signature Adoption: Pre-selected Style Using IP Address: 70.91.169.129

Signature Adoption: Pre-selected Style

Using IP Address: 71.237.41.137

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Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Justin Donahoo justin@jumahomes.com

Owner/Manager JUMA HOMES

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Marissa Donahoo marissa@watervalley.com

Security Level: Email, Account Authentication

(None)

NO 12C416EE08C34F7...

Signed using mobile

Signature Adoption: Drawn on Device Using IP Address: 71.237.41.137

Signed using mobile

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

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Sent: 3/26/2024 11:34:56 AM Viewed: 3/26/2024 11:39:35 AM Signed: 3/26/2024 11:39:46 AM

Signer Events

Martin Lind

mlind@watervalley.com

Security Level: Email, Account Authentication

(None)

Signature Adoption: Pre-selected Style

Using IP Address: 174.198.65.178

Signed using mobile

Signature

Martin Lind

-2D24A9FEA47645E...

Timestamp

Sent: 3/26/2024 11:34:57 AM Viewed: 3/26/2024 11:46:23 AM Signed: 3/26/2024 11:47:23 AM

Electronic Record and Signature Disclosure:Not Offered via DocuSign

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Witness Events Notary Events	Signature Signature	Timestamp
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Notary Events	Signature	Timestamp
Notary Events Envelope Summary Events	Signature Status	Timestamp Timestamps
Notary Events Envelope Summary Events Envelope Sent	Signature Status Hashed/Encrypted	Timestamps 3/26/2024 11:34:57 AM
Notary Events Envelope Summary Events Envelope Sent Certified Delivered	Signature Status Hashed/Encrypted Security Checked	Timestamps 3/26/2024 11:34:57 AM 3/26/2024 11:46:23 AM