APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Altamira Metropolitan District No. 4	For the Year Ended		
ADDRESS	c/o Spencer Fane, LLP	12/31/23		
	1700 Lincoln Street, Suite 2000	or fiscal year ended:		
	Denver, Colorado 80203-4554			
CONTACT PERSON	Russ Dykstra			
PHONE	(303) 839-3800			
EMAIL	rdykstra@spencerfane.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:	Diane Wheeler			
TITLE	District Accountant			
FIRM NAME (if applicable)	I NAME (if applicable) Simmons & Wheeler, P.C.			
ADDRESS	304 Inverness Way South, Suite 490, Englewood, CO 80112			
PHONE	303-689-0833			

FREFARER (SIGNATURE REQUIRED)				
Qione K Wheelon		Mar 18, 20)24	
Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)		PROPRIETARY (CASH OR BUDGETARY BASIS)	
using Governmental or Proprietary fund types				

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 Dollar	Please use this
2-1	Taxes: Pr	operty	(report mills levied in Question 10-6)	\$ -	space to provide
2-2	Sp	ecific owner	ship	\$ -	any necessary
2-3	Sa	les and use		\$ -	explanations
2-4	Ot	her (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 serv	ices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	- \$	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances re	ceived	(should agree with line 4-4)	- \$	
2-18	Proceeds from sale of	capital assets	5	\$ -	
2-19	Fire and police pensior	า		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add lin	es 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	ĺ	\$ -	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 a	agree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19		ree 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			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURE	S/EXPENSES	\$-	

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	G, I	SSUED	, AND RI	ETIRED	
	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					
4-2	Is the debt repayment schedule attached? If no, MUST expla	ain bel	ow:			
	N/A					
4-3	Is the entity current in its debt service payments? If no, MUS					
4 -3	N/A	JIEN	faill below.		1	
4-4	Please complete the following debt schedule, if applicable:					
	(please only include principal amounts)(enter all amount as positive		standing at	Issued during	Retired during	Outstanding at
	numbers)	end	of prior year*	year	year	year-end
	General obligation bonds	\$	-	\$-	\$-	\$-
	Revenue bonds	\$	-	\$ -	\$ -	\$ -
	Notes/Loans	\$	-	\$-	\$ -	\$ -
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$	-	\$-	\$ -	\$ -
	Developer Advances	\$	-	\$ -	\$ -	\$ -
	Other (specify):	\$	-	\$ -	\$ -	\$ -
	TOTAL	\$	-	\$ -	\$ -	\$ -
**Subscri	ption Based Information Technology Arrangements	*Mus	st agree to prio	r year-end balance	•	
	Please answer the following questions by marking the appropriate boxe	es.			Yes	No
4-5	Does the entity have any authorized, but unissued, debt?	•			⊡	
If yes:	How much?	\$		32,100,000.00		
	Date the debt was authorized:		11/4/2	2004		
4-6	Does the entity intend to issue debt within the next calenda	r <u>year</u> '	?			
If yes:	How much?	\$		-	ļ	
4-7	Does the entity have debt that has been refinanced that it is	still r	esponsible	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?					
	Is the lease subject to annual appropriation?					
	What are the annual lease payments?	\$			1	-
	Part 4 - Please use this space to provide any explanations/co		te or attack	- soparato doc	umontation if	noodod

	PART 5 - CASH AND INVESTME	NTS				
	Please provide the entity's cash deposit and investment balances.		A	mount	Tot	al
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):					
			\$	-		
5.0			\$	-		
5-3			\$	-		
			\$	-		
	Total Investments				\$	-
	Total Cash and Investments				\$	-
	Please answer the following questions by marking in the appropriate boxes	Yes		No	N/.	4
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seg., C.R.S.?	V	[2		
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.)?		[L		
lf no, Ml	JST use this space to provide any explanations:					

	PART 6 - CAPITAL AND I	RIGHT	-TO-U	ISE	ASSE	ETS		
	Please answer the following questions by marking in the appropriate	boxes.					Yes	No
6-1	6-1 Does the entity have capital assets?							Ø
6-2	6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain:					[Z	
6-3	Complete the following capital & right-to-use assets table:	beginn	lance - ling of the rear*	be inc	ons (Must luded in art 3)	De	eletions	ear-End alance
	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:

S

	PART 7 - PENSION INFORMA	TIC	DN		
	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?				
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	\$	-		
	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 comments:

	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 for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	V		
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	Ø		

If yes: Please indicate the amount budgeted for each fund for the year reported:

Governmental/Proprietary Fund Name	Total Appropriations By Fund
General Funds	\$ -

	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.	Ū	
lf no, ML	JST explain:		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	Νο
10-1	Is this application for a newly formed governmental entity?		V
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		J
If yes:	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?		
	Please indicate what services the entity provides:		
10-4	Streets, Water and Parks and Recreation 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:		
п усэ.			
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 <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		-
	Total mills		-
	Yes	No	N/A
40.7	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 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	N			

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 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 David Duncan	IDavid Duncan, 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 John Covert	IJohn Covert, 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 3	Print Board Member's Name Todd Johnson	ITodd Johnson, 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:_Mar 18, 2024 My term Expires:May 2027
Board Member 4	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 exemption from audit. Signed Date: My term Expires:
Board Member 5	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 exemption from audit. Signed Date: My term Expires:
Board Member 6	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 exemption from audit. Signed Date: My term Expires:
Board Member 7	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 exemption from audit. Signed Date: My term Expires:

Altamira _4 2023

Final Audit Report

2024-03-19

Created:	2024-03-18
Ву:	Diane Wheeler (diane@simmonswheeler.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAW9WEnbwlHLi3zbPDpR3q57MDniClkNG1

"Altamira _4 2023" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2024-03-18 - 2:10:58 PM GMT
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2024-03-18 - 2:12:04 PM GMT
- Document emailed to david@c3landllc.com for signature 2024-03-18 - 2:12:04 PM GMT
- Document emailed to todd@terraformas.com for signature 2024-03-18 - 2:12:04 PM GMT
- Document emailed to john.covert@cushwake.com for signature 2024-03-18 2:12:04 PM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com) Signature Date: 2024-03-18 - 2:12:34 PM GMT - Time Source: server
- Email viewed by todd@terraformas.com 2024-03-18 - 3:17:59 PM GMT
- Signer todd@terraformas.com entered name at signing as Todd A. Johnson 2024-03-18 - 3:18:17 PM GMT
- Document e-signed by Todd A. Johnson (todd@terraformas.com) Signature Date: 2024-03-18 - 3:18:19 PM GMT - Time Source: server
- Email viewed by john.covert@cushwake.com 2024-03-18 - 7:51:13 PM GMT
- Signer john.covert@cushwake.com entered name at signing as John C. Covert 2024-03-18 - 7:51:44 PM GMT

👃 Adobe Acrobat Sign

Document e-signed by John C. Covert (john.covert@cushwake.com) Signature Date: 2024-03-18 - 7:51:46 PM GMT - Time Source: server

- Email viewed by david@c3landllc.com 2024-03-19 - 8:43:44 PM GMT
- Signer david@c3landllc.com entered name at signing as David Duncan 2024-03-19 8:44:13 PM GMT
- Document e-signed by David Duncan (david@c3landllc.com) Signature Date: 2024-03-19 - 8:44:15 PM GMT - Time Source: server

Agreement completed. 2024-03-19 - 8:44:15 PM GMT