APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

 NAME OF GOVERNMENT ADDRESS
 Piney Lake Trails Metropolitan District No. 2
 For the Year Ended 12/31/23

 C/o Spencer Fane 1700 Lincoln Street, Suite 2000 Denver, CO 80203
 or fiscal year ended: 0 or fiscal year en

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) Simmons & Wheeler, P.C.

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

PHONE 303-689-0833

Qian, K. Uhulin	Mar	Mar 24, 2024		
Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)		
using Governmental or Proprietary fund types		0		

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#	WAS DEED LOCALING	D	escription	U.S.	Round to nearest Dollar	Please use this
2-1	Taxes: P	operty	(report mills levied in Question 10-6)	\$	-	space to provide
2-2	S	pecific owne	rship	\$. •	any necessary
2-3	S	ales and use	1	\$	•	explanations
2-4	0	ther (specify)	:	\$	-	
2-5	Licenses and permits			\$	-	
2-6	Intergovernmental:		Grants	\$	-	1
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			\$	49]
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 asset	s	\$	-	
2-19	Fire and police pensio	า		\$	-	
2-20	Donations			\$	•	
2-21	Other (specify):			\$		
2-22				\$	-	
2-23				\$	-	
2-24		(add lii	nes 2-1 through 2-23) TOTAL REVENUE	S		

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 intorn		
Line#	Description		Round to nearest Dollar	Please use this
3-1	Administrative		\$ -	space to provide
3-2	Salaries		\$ -	any necessary explanations
3-3	Payroll taxes		\$ -	explanations
3-4	Contract services		\$ -	
3-5	Employee benefits	Г	\$ -	-
3-6	Insurance		\$ -	7
3-7	Accounting and legal fees		\$ -	
3-8	Repair and maintenance	- [\$ -	
3-9	Supplies		\$ -	7
3-10	Utilities and telephone	1	\$ -	
3-11	Fire/Police	Γ	\$ -	1
3-12	Streets and highways	Г	\$ -	7
3-13	Public health	- 1	\$ -	
3-14	Capital outlay		\$ -	
3-15	Utility operations	Ī	\$ -	7
3-16	Culture and recreation	- 1	\$ -	7
3-17	Debt service principal (should agree	with Part 4)	\$ -	7
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (should agree to	vith line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest	Γ	\$ -	7
3-21	Contribution to pension plan (should agree	e to line 7-2)	\$ -	7
3-22	Contribution to Fire & Police Pension Assoc. (should agree	e to (ine 7-2)	\$ -	7
3-23	Other (specify):			
3-24			\$ -	7
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EX	(PENSES	\$ -	
60				The second second

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	3 ISSUEC	ANDR	FTIRED_	
	Please answer the following questions by marking the		TANDEN	Yes	No
4-1	Does the entity have outstanding debt?	• •		D D	■ NO
4.5	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 below:		, .	
		IVE 1:			
4-3		T		J	227
4-3	Is the entity current in its debt service payments? If no, MUS	explain below:			
4-4					Contract of the last of
	Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive	Outstanding 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	\$ -	\$ -	\$ -	\$ -
**Subscrip	tion Based Information Technology Arrangements	*Must agree to prio	r year-end balance		
4.5	Please answer the following questions by marking the appropriate boxes			Yes	No
4-5	Does the entity have any authorized, but unissued, debt? How much?	\$ 6	16,000,000.00	∅	
n you.	Date the debt was authorized:	5/3/2	· · ·		
4-6	Does the entity intend to issue debt within the next calendar		022) 0	Ø
If yes:	•	\$		1	-
4-7	Does the entity have debt that has been refinanced that it is s	till responsible	for?	, .	☑
If yes:	•	\$	-]	
4-8	Does the entity have any lease agreements?			0	@
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?	\$		1	
	Part 4 - Please use this space to provide any explanations/cor		separate doc	umentation, if r	needed
			•	•	
					25/07/1
	PART 5 - CASH AND	INVESTM	IENTS		
	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				Ψ

	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		\$	7
	Total Cash Deposits			\$ -
	Investments (if investment is a mutual fund, please list underlying investments):	RIF.	l	
			\$ -	7
- 2			\$ -	
5-3			\$ -	7
		32	\$ -	
	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.?	ø	D	0
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.)?	a	0	0
o. M	UST use this space to provide any explanations:			

If no, MUST use this space to provide any explanations:

Please answer the following questions by marking in the appropri	ate boxes.				Y	'es		No
Does the entity have capital assets?								6
Has the entity performed an annual inventory of capital 29-1-506, C.R.S.,? If no, MUST explain:	assets in acco	rdance	with Sec	ion	•			0
Complete the following capital & right-to-use assets table:	Baland beginning year	of the	Additions be include Part 3	ed in	Dele	etions		ar-Ei
Land	\$	•	\$	- 1	\$	-	\$	
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)	\$	-	\$	-	\$	-	s	
TOTAL	\$		\$	_	\$		\$	

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

	DARTE REMOVALING COMM	TIC	N. 1		
	PART 7 - PENSION INFORMA	ALIC	JN		
	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 explanation	s or c	comments:		

	PART 8 - BUDGE	T INFORMAT	ION		
	Please answer the following questions by marking in the appropriate		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		Ø	D	o
8-2	Did the entity pass an appropriations resolution, in accord 29-1-108 C.R.S.? If no, MUST explain:	lance with Section	Ø	0	G
If yes:	Please indicate the amount budgeted for each fund for the	year reported:			
	Governmental/Proprietary Fund Name	Total Appropriati	ons By Fund		
		\$	51,242		
		8			

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	Please answer the following question by marking in the appropriate box	Yes	No
9	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.	Ø	
If n	n 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?		9	
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?	J @	D	
	Please indicate what services the entity provides:	<u>u</u>	ы	
	Streets, traffic control, water, sewer, park and recreation, transportation, directional drilling]		
10-4	Does the entity have an agreement with another government to provide services?	,	2	
If yes:	List the name of the other governmental entity and the services provided:			
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during		0	
If yes:	Date Filed:			
10-6	Does the entity have a certified Mill Levy?	, –	a	
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		-	
	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has	No	N/A	
10-7	the entity filed its preceding year annual report with the State Auditor as required		0	
	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 provide	ucly 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 th	e names of ALL members of current governing body below.	A MAJORITY of the members of the governing body must sign below.
Board Member 1	Print Board Member's Name Thomas Clark	Thomas Clark, 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 Joshua Brgoch	IJoshua Brgoch, 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 Bryan Horan	IBryan Horan, 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 4	Print Board Member's Name	I
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
Board Member 7	Print Board Member's Name	I

Piney Lake Trails 2 2023

Final Audit Report

2024-03-25

Created:

2024-03-24

By:

Diane Wheeler (diane@simmonswheeler.com)

Status:

Signed

Transaction ID:

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- Document e-signed by Tom Clark (tclark@ventanacap.com)
 Signature Date: 2024-03-25 2:39:24 PM GMT Time Source: server
- Agreement completed.
 2024-03-25 2:39:24 PM GMT