	APPLICATION FO	R EXEMP	TION FROM	M AUDIT	DETERMINED AND PROPERTY.		
		ONG FOR	M				
NAME OF GOVERNMENT	Wildwing Metropolitan District No. 4	ONO I OIL	101		For the Year Forded		
ADDRESS	c/o Pinnacle Consulting Group, Inc.		For the Year Ended 12/31/2022				
	550 W Eisenhower Blvd				or fiscal year ended:		
	Loveland, CO 80537				of fiscal year ended:		
CONTACT PERSON	Amanda Castle				-		
PHONE	(970)669-3611				7		
EMAIL	amandac@pcgi.com				_		
CERTIFICATION OF PREPARER							
certify that I am an independent account ndependent of the entity complete the a	stant with knowledge of governmental accounting and that the information it polication if revenues or expenditure are at least \$100,000 but not more than s	n the Application i	is complete and ac	ccurate to the best of my knowledge. I am award	e that the Audit Law requires that a person		
NAME:	Amanda Castle	problem and	it madpendent met	and someone who is separate from the entity.			
TITLE	Assistant Director of Finance & Accounting				\dashv		
FIRM NAME (if applicable)	Pinnacle Consulting Group, Inc.				\dashv		
ADDRESS	550 W Eisenhower Blvd				-		
PHONE	970-669-3611						
DATE PREPARED	2/28/2022	1)					
RELATIONSHIP TO ENTITY	District Consultant						
PREPARER (SIGNATURE REC	UUIRED)	Mary Transport	STATE OF THE PERSON NAMED IN	AND STREET, ST	AND THE RESERVE TO BE A SECOND OF THE PERSON		
Amand	& Owet	1					
las the entity filed for, or has the dist	rict filed, a Title 32, Article 1 Special District Notice of Inactive Status	YES	NO				
during the year? [Applicable to Title 3	32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-			If Yes, date filed:			
104 (3), C.R.S.]			v				

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

Governmental Funds Proprietary/Fiduciary Funds	* Indicate Name of F	Fund onal sheets as necessary.					
Assets	NOTE, Attach addition	onal sheets as hecessary.	Governmental Funds	s	P. Control of the Con	Proprietary/Fiduciary Funds	
Assets	Lino#	Description	General Fund Fu	hau	Description	Fund* Fund*	Please use this space to
Assets A	Ellie W	Seest piece					
Investments	Assets			/	The state of the s		and the page
Receivables						<u> </u>	
Due from Other Entitles or Funds \$ 1,402	1-2 Invest	tments		-	A Marie Control of the Control of th		_
Property Tax Receivable \$ 288,739 \$ Other Current Assets [specify] \$							
All Other Assets (specify S						\$ - \$ -	_
Total Current Assets S	9 30 5 5 5 5	Note to the second of the seco	\$ 288,739 \$	-	Other Current Assets [specify]		
Capital & Right to Use Assets, net (from Part 4-a)	All Oth	ther Assets [specify]					
1-9	1-6 Lea	ease Receivable (as Lessor)		-			
1-10	1-7			-			
1-10	1-8			-	Other Long Term Assets [specify]		
	1-9	*		-		· · · · · · · · · · · · · · · · · · ·	
Deferred Outflows of Resources:				-			
			\$ 290,231 \$	-		\$ - \$ -	
	Deferred	d Outflows of Resources:				r.	
Total Assets AND Deferred DUTFLOWS Secretary Sec				-			
TOTAL ASSETS AND DEFERRED OUTFLOWS \$ 290,231 \$				-			
Liabilities	And in column 2 is not a local division.			-			
Accounts Payable	-	The state of the s	\$ 290,231 \$	-		- \$	
Accrued Payroll and Related Liabilities							
1-18 Unearned Property Tax Revenue \$ - \$ - \$ - Due to Other Entities or Funds \$ 1,492 \$ - Due to Other Entities or Funds \$ - \$ - Due to Other Entities			· ·	-		Total Control of the	
Due to Other Entities or Funds							
All Other Current Liabilities \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$							
1-21		II ·					
1-22 All Other Liabilities [specity] \$ - \$ - \$ Proprietary Debt Outstanding (from Part 4-4) \$ - \$ - \$ - 1-24				-			_
1-23							-
1-24		ther Liabilities [specify]	* -				
1-25					Other Clabilities [specify].		-
1-26			T T			7	-
1-27 (add lines 1-21 through 1-26) TOTAL LIABILITIES \$ 1,492 \$ - (add lines 1-21 through 1-26) TOTAL LIABILITIES \$ - \$ - Deferred Inflows of Resources: 1-28 Deferred Property Taxes \$ 288,739 \$ - Pension/OPEB Related \$ - \$ - \$ - 1-29 Lease related (as lessor) \$ - \$ - Other [specify] \$ - \$ - \$ - 1-20 (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$ 288,739 \$ - (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$ - \$ - \$ - Pension/OPEB Related \$ - \$ - \$ - \$ - Pension/OPEB Related \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$							-
Deferred Inflows of Resources: Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ - \$ Deferred Inflows of Resources Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ - \$ Deferred Inflows Pension/OPEB Related \$ - \$ Deferred Inflows of Resources Pension/OPEB Related \$ - \$ Deferred Inflows	22002000	lines 4 24 through 4 26) TOTAL LIABILITIES	-	_	(add lines 1.21 through 1.26) TOTAL LIABILITIES		
1-28 Deferred Property Taxes			3 1,492 \$			- 5	
1-29 Lease related (as lessor) \$ - \$ - Other [specify] \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$		A STATE OF THE PARTY OF THE PAR	\$ 288 739 \$			s _ s	٦
1-30 (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$ 288,739 \$ - (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$ - \$ - Fund Balance							-
Fund Balance Net Position				MANUAL PRINTS	I Market		
		to be the second of the second	Ψ 200,700 ψ			Ψ	
, v,			\$ - \$			\$ - \$	
1-32 Nonspendable Inventory	100 and 000000000000000000000000000000000					L [*]	_
1-33 Restricted [specify] \$ - \$ - Emergency Reserves \$ - \$ -	A.*.				Emergency Reserves	\$ - \$	
1-34 Committed [specify] \$ - \$ - Other Designations/Reserves \$ - \$ -					and the second s		
1-35 Assigned [specify] \$ - \$ - Restricted \$ - \$ -				-			.1
1-36 Unassigned: \$ - \$ - Undesignated/Unrestricted \$ - \$ -	_			_			.]
1-37 Add lines 1-31 through 1-36 Add lines 1-31 through 1-36 Add lines 1-31 through 1-36	AND THE PARTY OF T						
This total should be the same as line 3-33							
TOTAL FUND BALANCE S - S - TOTAL NET POSITION S - S		TOTAL FUND BALANCE	8 - 8				
1-38 Add lines 1-27, 1-30 and 1-37 Add lines 1-27, 1-30 and 1-37 Add lines 1-27 (1-30 and 1-37 A	1-38						
This total should be the same as line 1-15	Street, F						
TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND	174 . 7 C.						
BALANCE \$ 290,231 \$ - POSITION \$ - \$ -	252323				POSITION	- \$	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governmental Funds		*	Proprietary/F	iduciary Funds	WELL STORY THE REAL PROPERTY.
Line#	Description	General Fund	Fund	Description	Fund*	Fund*	Please use this space to provide explanation of any
	Tax Revenue			Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$ 289,438	\$ -	Property [include mills levied in Question 10-6]	\$ -	\$ -	
2-2	Specific Ownership	\$ 20,706		Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	
2-4	Other Tax Revenue [specify]:	\$ -	\$ -	Other Tax Revenue [specify]:	\$ -	\$ -	
2-5	Interest	\$ 818			\$ -	\$ -	
2-6		\$ -	\$ -	E 49	\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 310,962	\$ -	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	\$ -	\$ -	1
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]:		\$ -	All Other [specify]:	\$ -	- \$	
2-23	,		\$ -		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES		\$ -	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ -	\$ -	
	Other Financing Sources			Other Financing Sources			
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	\$ -	
2-26	Lease Proceeds	\$ -	\$ -	Lease Proceeds	\$ -	\$ -	1
2-27	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -	
2-28	Other [specify]:	\$ -	\$ -	Other [specify]:	\$ -	\$ -	1
2-29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES		\$ -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	GRAND TOTALS
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 310,962	AND DESCRIPTION OF THE PROPERTY OF THE PERSON OF THE PERSO	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES			\$ 310,962

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.

This total should be the same as line 1-37.

	PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES								
	, i	Governme	ntal Funds		Proprietary/Fiduciary Funds	Diagonal de la constante			
Line#	Description	General Fund	Fund	Description	Fund* Fund*	Please use this space to provide explanation of any			
	Expenditures			Expenses	The proof of the second of the	items on this page			
3-1	General Government	\$ -	\$ -	General Operating & Administrative	\$ - \$	-			
3-2	Judicial	\$ -	\$ -	Salaries	\$ - \$	-			
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ - \$	-			
3-4	Fire	\$ -	\$ -	Contract Services	\$ - \$	-			
3-5	Highways & Streets	\$ -	\$ -	Employee Benefits	\$ - \$	-			
3-6	Solid Waste	\$ -	\$ -	Insurance	\$ - \$	_			
3-7	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	Accounting and Legal Fees	\$ - \$	-			
3-8	Health	\$ -	\$ -	Repair and Maintenance	\$ - \$	-			
3-9	Culture and Recreation	\$ -	\$ -	Supplies	\$ - \$	-			
3-10	Transfers to other districts	\$ 305,157	\$ -	Utilities	\$ - \$	-			
3-11	Other [specify]:		\$ -	Contributions to Fire & Police Pension Assoc.	\$ - \$	_			
	Treasurer's Fees	\$ 5,805		Other [specify]	\$ - \$	_			
3-13			\$ -		\$ - \$	_			
3-14	Capital Outlay		\$ -	Capital Outlay	\$ - \$	_			
0.14	Debt Service	4	1	Debt Service					
3-15	Principal (should match amount in 4-4)	\$ -	\$ -	Principal (should match amount in 4-4)	\$ - \$				
3-16	Interest		\$ -	Interest	\$ - \$	_			
3-17	Bond Issuance Costs		\$ -	Bond Issuance Costs	\$ - \$	_			
3-17	Developer Principal Repayments	1000	\$ -	Developer Principal Repayments	\$ - \$				
3-18	Developer Interest Repayments		\$ -	Developer Interest Repayments	\$ - \$	-			
3-19	All Other [specify]:		\$ -	All Other [specify]:	\$ - \$				
	All Other [specify]:		\$ -	All Other [specify].	\$ - \$	CDAND TOTAL			
3-21	Add lines 3-1 through 3-2	CONTRACTOR OF THE PARTY OF THE		Add lines 3-1 through 3-21	MINOR DE L'ANDRE DE L'	- GRAND TOTAL			
3-22	TOTAL EXPENDITURES	\$ 310,962		TOTAL EXPENSES	\$ - \$	- \$ 310,962			
	Interfund Transfers (In)			Net Interfund Transfers (In) Out	\$ - \$	-			
	Interfund Transfers Out		\$ -	Other [specify][enter negative for expense]	\$ - \$	_			
3-25	Other Expenditures (Revenues):		\$ -	Depreciation/Amortization	\$ - \$	-			
3-26		T	\$ -	Other Financing Sources (Uses) (from line 2-28)	\$ - \$	_			
3-27		\$ -	\$ -	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 TRANSFERS AND OTHER EXPENDITURES		\$ -	(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS					
0.00	Excess (Deficiency) of Revenues and Other Financing	\$ -	\$ -	IIIC 3-24) TOTAL GAA! NEGONGIENG TEMS	\$ - \$	-			
3-30	Sources Over (Under) Expenditures			Net Increase (Decrease) in Net Position					
	Line 2-29, less line 3-22, less line 3-29		\$ -	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	\$ -	Φ -		\$ - \$				
2 24	Fund Polones January 1 from December 21 prior veneral			Net Position, January 1 from December 31 prior year					
3-37	Fund Balance, January 1 from December 31 prior year report			report					
		\$ -	\$ -		\$ - \$	-			
	Prior Period Adjustment (MUST explain)	\$ -	\$ -	Prior Period Adjustment (MUST explain)	\$ - \$	_			
3-33	Fund Balance, December 31			Net Position, December 31					
	Sum of Lines 3-30, 3-31, and 3-32			Sum of Lines 3-30, 3-31, and 3-32		(12)			

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 (303) 869-3000 for assistance.

- This total should be the same as line 1-37.

	PART 4 - DEBT OUTSTAN	NDING, IS	SUED, A	AND RETIRED	
	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?			V	
4-2	Is the debt repayment schedule attached? If no, MUST explain:				
				_	
4-3	Is the entity current in its debt service payments? If no, MUST explain:		. 🗆		
4-4	Please complete the following debt schedule, if applicable: (please only include principal Outstanding at Iss	sued during F	Retired during		
	amounts) beginning of year*	year	year	Outstanding at year-end	
	General obligation bonds \$ - \$ Revenue bonds \$ - \$	- S		\$ -	
	Notes/Loans \$ - \$	- 5		\$ -	
	Lease Liabilities \$ - \$	- 5		\$ -	
	Developer Advances \$ - \$	- 8	1	\$ -	
	Other (specify): \$ - \$	- 8		\$ -	
	TOTAL \$ - \$	- 3	\$ -	\$ -	
	*must agree to prior year end	ing balance			
	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.]?		V		
If yes:	How much? \$ 15,963,020 Date the debt was authorized: 11/4/2014				
4-6	Does the entity intend to issue debt within the next calendar year?			V	
	How much?		_		
4-7	Does the entity have debt that has been refinanced that it is still responsible for?				
	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?				
	PART 5 - CASH	AND INV			
	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		\$ - \$ -		
5-2	Certificates of deposit	SH DEPOSITS	\$ -	\$ -	
	Investments (if investment is a mutual fund, please list underlying investments):	SIT DEF COITS			
	Investments (in investment is a mutuar rand, please list andenying investments).		\$ -		
			\$ -		
5-3			\$ -		
			\$ -		
	TOTAL IN	VVESTMENTS		\$ -	
	TOTAL CASH AND IN	VVESTMENTS		\$ -	
W 1	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. seg., C.R.S.?			V	
	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-				
5-5	10.5-101, et seq. C.R.S.)? If no, MUST explain:			✓	

	PART	6 - CAPITAL	AND RIC	GHT	-TO-USE	E AS	SETS	
	Please answer the following question by marking in the appropriate box				YES	THE.	NO	Please use this space to provide any explanations or comments:
	Does the entity have capitalized assets? Has the entity performed an annual inventory of capital assets in accordance with MUST explain:	Section 29-1-506, C	C.R.S.? If no,					
6-3	Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year 1	Additions 2		Deletions	Yea	ar-End Balance	
	Land		\$	- 3	\$ -	\$	-	
	Buildings		\$	- 3		\$	-	
	Machinery and equipment		\$	- :		\$		
	Furniture and fixtures		\$	- 3		\$	-	
	Infrastructure		\$	- 3		\$		
	Construction In Progress (CIP)		\$	- 3		\$		•
	Leased Right-to-Use Assets		\$	- 3		\$		
	Intangible Assets		\$	- 3		\$		
	Other (explain): Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)		\$	- :		\$		
	Accumulated Depreciation (Enter a negative, or credit, balance)		\$	-1:		\$		
	TOTAL					_		
	TOTAL		3	-	> -	\$	_	
6-4	Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	Balance - beginning of the year*	Additions		Deletions	Yea	ar-End Balance	
	Land		\$	- 3	\$ -	\$	-	
	Buildings	\$ -	\$	- :	\$ -	\$	-	
	Machinery and equipment	\$ -	\$	- :	\$ -	\$		
	Furniture and fixtures	\$ -	\$		\$ -	\$	-	
	Infrastructure		\$	- 1		\$		
	Construction In Progress (CIP)		\$	- 3		\$	-	
	Leased Right-to-Use Assets		\$	- 3		\$		
	Intangible Assets		\$	-		\$	-	
	Other (explain):		\$	-		\$	-	
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)		\$	-		\$		
	Accumulated Depreciation (Enter a negative, or credit, balance)			-		\$	<u>-</u>	
	TOTAL				\$ -	\$		
		* Must agree to prior ye - Generally capital asset accordance with the government	t additions should t	be repo zation p	rted at capital outl olicy. Please expl	ay on line ain any di	3-14 and capitalized in screpancy	
		PART 7 - PI	ENSION	NE	ORMATIC	NC		
		MATERIAL PROPERTY.			YES		NO	Please use this areas to provide any surface time at
7.1	Does the entity have an "old hire" firefighters' pension plan?							Please use this space to provide any explanations or comments:
7-2	Does the entity have an old line linelighters' pension plan? Who administers the plan?							
	Indicate the contributions from:							
	Tax (property, SO, sales, etc.):		\$	-				
	State contribution amount:		\$	_				
	Other (gifts, donations, etc.):		\$					
	Oction (gints, dominions, etc.).	TOTAL		-				
		TOTAL						
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?		\$					

	PART 8 -	BUDGET INF	ORMATION	V	
4 44	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:
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with	v			
٠,	Section 29-1-113 C.R.S.? If no, MUST explain: Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?	_	_		
8-2	If no, MUST explain:	v			
If yes:	Please indicate the amount appropriated for each fund separately for the year reported				
	Governmental/Proprietary Fund Name Total Appro	opriations By Fund			
	General Fund \$	321,146			
	\$				
	\$	-			
AVE T	PART 9 - TAX PA	YER'S BILL C	F RIGHTS	(TABOR)	
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section		☑		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 requirement, All governments should determine if they meet this requirement of TABOR.	3 percent emergency reserve			
		- GENERAL IN	FORMATIC	N	
n i	Please answer the following question by marking in the appropriate box	YEAR PALASA	YES	NO	Please use this space to provide any explanations or comments:
10-1	Is this application for a newly formed governmental entity?			v	reade ade this space to provide any explanations of comments.
If yes:					
	Date of formation:				
				☑	
10-2	Has the entity changed its name in the past or current year?			Ľ.	
If Yes:	NEW name				
	PRIOR name				
	Is the entity a metropolitan district?				
10-4	Please indicate what services the entity provides:				
	Provide the planning, design, acquistion, construction, installation, relocation, and redevelopment of Publ	lic Improvements.	_	_	
	Does the entity have an agreement with another government to provide services?		V		
If yes:	List the name of the other governmental entity and the services provided:				
	All services provided by Wildwing Metropolitan District No. 1	1			
	Does the entity have a certified mill levy?				
If yes:	Please provide the number of mills levied for the year reported (do not enter \$ amounts):	44.070	r		
		41.079 12.270			
		53.349			
	Please use this space to provide any	additional explanation	ns or comments	not previously inc	luded:
		11			

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OSA USE ONLY							
Entity Wide:	ALIEN MARKET MARKET	General Fund		Governmental Funds		Notes	
Unrestricted Cash & Investments	s	- Unrestricted Fund Bala	n \$	- Total Tax Revenue	S	310,962	
Current Liabilities	\$	1,492 Total Fund Balance	\$	- Revenue Paying Debt Service	\$		
Deferred Inflow	S	288,739 PY Fund Balance	\$	- Total Revenue	\$	310,962	
		Total Revenue	\$	310,962 Total Debt Service Principal	\$		
		Total Expenditures	\$	310,962 Total Debt Service Interest	\$		
Sovernmental		Interfund In	\$				
otal Cash & Investments	\$	- Interfund Out	\$	- Enterprise Funds			
ransfers In	\$	- Proprietary		Net Position	\$		
ransfers Out	\$	- Current Assets	\$	- PY Net Position	\$		
roperty Tax	\$	289,438 Deferred Outflow	\$	- Government-Wide			
Debt Service Principal	S	- Current Liabilities	\$	- Total Outstanding Debt	\$		
otal Expenditures	\$	310,962 Deferred Inflow	\$	- Authorized but Unissued	\$	15,963,020	
otal Developer Advances	\$	- Cash & Investments	\$	- Year Authorized		11/4/2014	
otal Developer Repayments	\$	- Principal Expense	\$				

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.

	Print the names of ALL members of the governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
	Full Name	I, Steve Lampo , attest that I am a duly elected or appointed board member, and that I have personally
	Steve Lampo	reviewed Stapptove the application for exemption from audit 3/10/2023 14:03:12 MST Signed Date:
	Full Name	— DocuSigned by:
2	Marshall Tieissen	personally neviewed and approve this application to exemption from a very possible prove the prove the provestion for exemption for exemption from a very possible prove the provestion for exemption
	Full Name	DocuSigned by: 1, Stuart Van Greuningen , attest that I am a duly elected or appointed board member, and that I have
	Stuart Van Greuningen	personally reviewed and approve this application for exemption for exemp
	Full Name	I, , attest that I am a duly elected or appointed board member, and that I have
4		personally reviewed and approve this application for exemption from audit. Signed
No. of Contract of	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
5		personally reviewed and approve this application for exemption from audit. Signed My term Expires:
	Full Name	I, , 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 Date: My term Expires:
THE POST OF THE	Full Name	I,, 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