APPLICATION FOR EXEMPTION FROM AUDIT LONG FORM NAME OF GOVERNMENT Beebe Draw Farms Metro District No. 1 For the Year Ended 8390 East Crescent Parkway ADDRESS 12/31/2024 Suite 300 or fiscal year ended: Greenwood Village, CO 80111-2814 CONTACT PERSON Gigi Pangindian 303-779-5710 PHONE EMAIL gigi.pangindian@claconnect.com

CERTIFICATION OF PREPARER

I certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am aware that the Audit Law requires that a person independent of the entity complete the application if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separate from the entity.

NAME: TITLE Gigi Pangindian Accountant for the District
CliftonLarsonAllen LLP FIRM NAME (if applicable)
ADDRESS Ciliton.arsonAlien LLP
3390 East Crescent Parkway, Suite 300, Greenwood Village, CO 80111-2814
303-779-5710
CPA Firm providing accounting services to the District PHONE RELATIONSHIP TO ENTITY

PREPARER (SIGNATURE REQUIRED)	DATE PREPARED (No exemption shall be granted prior to the clo- of said fiscal year)				
See attached accountant's compilation report.	3/20/2025				
Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.]		NO			
		V	If Yes, date	filed:	

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Please indicate the name of the fund (i.e., General Fund, Debt Service Fund, etc.)

NOTE: Attach additional sheets as necessary.

			Sovernmental Funds odified Accrual Bas				Fiduciary Funds udgetary Basis)
Line #	Description	General Fund	CTF	Fund*	Description	Fund*	Fund*
	Assets				Assets		
1-1	Cash & Cash Equivalents	\$ 12,230		\$ -	Cash & Cash Equivalents	Ψ	- \$ -
1-2	Investments	\$ 77,713		\$ -	Investments	7	- \$ -
1-3	Receivables	\$ -	\$ 2,000		Receivables	Ť	- \$ -
1-4	Due from Other Entities or Funds	\$ 15,813		\$ -	Due from Other Entities or Funds	-	- \$ -
1-5	Property Tax Receivable	\$ 371,607	\$ -	\$ -	Other Current Assets [specify]	-	- \$ -
	All Other Assets		•	•	Total Current Assets	-	- \$ - - \$ -
1-6	Lease Receivable (as Lessor)			\$ -		Ψ	Ψ
1-7	Other [specify]	\$ -	\$ -	\$ -	Capital & Right to Use Assets, net (from Part 6-4)	<u> </u>	- \$ -
1-8	Receivable from County Treasurer	\$ 1,213		\$ -	Other Long Term Assets [specify]	7	- \$ -
1-9	Prepaid Insurance	\$ 3,946		\$ -		-	- \$ -
1-10	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ -	\$ -	\$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	Ψ	- \$ -
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS Deferred Outflows of Resources:	\$ 482,522	\$ 18,198	\$ -	(add lines 1-1 through 1-10) TOTAL ASSETS Deferred Outflows of Resources	\$	- \$ -
4.40	[specify]		•	•	1	•	
1-12		\$ - \$ -	•	\$ -	[specify]		- \$ -
1-13	[specify]	T	\$ -	\$ -	[specify]	*	- \$ -
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS TOTAL ASSETS AND DEFERRED OUTFLOWS		\$ -	7	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS TOTAL ASSETS AND DEFERRED OUTFLOWS		- \$ - - \$ -
1-15	Liabilities	\$ 482,522	\$ 18,198	\$ -	Liabilities	\$	- \$ -
1-16	Accounts Payable	\$ 17,672	\$ -	\$ -	Accounts Payable	\$	- \$ -
1-17	Accrued Payroll and Related Liabilities	\$ 17,072	\$ -	\$ -	Accrued Payroll and Related Liabilities	•	- \$ -
1-17	Unearned Revenue	\$ -	\$ -	\$ -	Accrued Interest Payable		- \$ -
1-10	Due to Other Entities or Funds	\$ 89,881		\$ -	Due to Other Entities or Funds		- \$ -
1-19	All Other Current Liabilities	\$ 09,001	\$ -	\$ -	All Other Current Liabilities		- \$ -
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	7		\$ -	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES		- \$ -
1-22	All Other Liabilities [specify]	\$ 107,555	\$ -	\$ -	Proprietary Debt Outstanding (from Part 4-4)		- \$ -
1-23	All Other Elabilities [specify]	\$ -	\$ -	\$ -	Other Liabilities [specify]		- s -
1-24		\$ -	\$ -	\$ -	Other Liabilities [specify]	Ţ	- S -
1-25		\$ -	\$ -	\$ -		*	- S -
1-26		s -	\$ -	\$ -			- \$ -
1-27	(add lines 1-22 through 1-26) TOTAL LIABILITIES		·	-	(add lines 1-22 through 1-26) TOTAL LIABILITIES		- S -
1-27	Deferred Inflows of Resources:	φ 107,555	Ψ -		Deferred Inflows of Resources	Ψ	- 9
1-28	Deferred Property Taxes	\$ 371,607	\$ -	\$ -	Pension/OPEB Related	\$	- S -
1-29	Lease related (as lessor)	\$ -	\$ -	\$ -	Other [specify]		- S -
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS			\$ -	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS		- \$ -
. 00	Fund Balance	5 011,007	-	*	Net Position	*	
1-31	Nonspendable Prepaid	\$ 3.946	\$ -	\$ -	Net Investment in Capital and Right-to Use Assets	\$	- S -
1-32	Nonspendable Inventory	\$ -	\$ -	\$ -			1.
1-33	Restricted TABOR RESERVE	\$ 13,500	•	\$ -	Emergency Reserves	\$	- S -
1-34	Committed [specify]	\$ -	\$ -	\$ -	Other Designations/Reserves		- S -
1-35	Assigned [specify]	\$ -	\$ -	\$ -	Restricted	*	- S -
1-36	Unassigned:	\$ (14.084)	,	·	Undesignated/Unreserved/Unrestricted	·	- S -
1-37	Add lines 1-31 through 1-36	. (,001)			Add lines 1-31 through 1-36		1
	This total should be the same as line 3-36				This total should be the same as line 3-36		
	TOTAL FUND BALANCE	\$ 3.362	\$ 18.198	s -	TOTAL NET POSITION		- s -
1-38	Add lines 1-27, 1-30 and 1-37	. 2,002			Add lines 1-27, 1-30 and 1-37		
	This total should be the same as line 1-15				This total should be the same as line 1-15		
	TOTAL LIABILITIES, DEFERRED INFLOWS,				TOTAL LIABILITIES, DEFERRED INFLOWS,		
	AND FUND BALANCE	\$ 482,522	\$ 18,198	\$ -	AND NET POSITION	\$	- \$ -
					ny item on this nage		

Please use this space to provide explanation of any item on this page

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governmental Funds		s		Proprietary/Fi	duciary Funds
Line #	Description	General Fund	CTF	Fund*	Description	Fund*	Fund*
	Tax Revenue				Tax Revenue		
2-1	Property [include mills levied in question 10-7]	\$ 408,511	\$ -	\$ -	Property [include mills levied in question 10-7]	\$ -	\$ -
2-2	Specific Ownership	\$ 14,783	\$ -	\$ -	Specific Ownership	\$ -	\$ -
2-3	Sales and Use Tax	\$ -	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -
2-4	Other Tax Revenue [specify]	\$ -	\$ -	\$ -	Other Tax Revenue [specify]	\$ -	\$ -
2-5	Backfill Revenue	\$ 11,710	\$ -	\$ -		\$ -	\$ -
2-6		\$ -	\$ -	\$ -		\$ -	\$ -
2-7		\$ -	\$ -	\$ -		\$ -	\$ -
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 435,003	\$ -	\$ -	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)	\$ -	\$ 2,000	\$ -	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	\$ -	\$ -
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	\$ 12,865	\$ 800	\$ -	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 2-9 through 2-23 TOTAL REVENUES	\$ 447,868	\$ 2,800	\$ -	Add lines 2-9 through 2-23 TOTAL REVENUES		\$ -
	Other Financing Sources				Other Financing Sources		
2-25	Debt Proceeds	\$ -	\$ -	\$ -	Debt Proceeds	\$ -	\$ -
2-26	Lease Proceeds	\$ -	\$ -	\$ -	Lease Proceeds	\$ -	\$ -
2-27	Developer Advances	\$ -	\$ -	\$ -	Developer Advances	\$ -	\$ -
2-28	Other [specify]	\$ -	\$ -	\$ -	Other [specify]	\$ -	\$ -
2-29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	s -	\$ -	s -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES		\$ -
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES				Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES		
2-31	TOTAL REVEROLD AND OTHER FINANCING SOURCES	\$ 447,868	\$ 2,800	- \$			\$ -
2-31	IE CRAND TOTAL REVENUES	S AND OTHER EIN	IANCING SOURCE	ES EOD ALL EUN	GRAND TO	OTALS (ALL FUNDS)	\$ 450,669

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES FOR ALL FUNDS (LINE 2-31) ARE GREATER THAN \$750,000 - <u>\$TOP.</u>

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.

Please use this space to provide explanation of any item on this page

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

		Governmental Funds				Proprietary/Fiduciary Funds		
Line #	Description	General Fund	CTF	Fund*	Description	Fund*	Fund*	
	Expenditures	,			Expenses			
3-1	General Government	\$ 111,198	\$ -	\$ -	General Operating & Administrative	\$ -	\$ -	
3-2	Judicial	\$ -	\$ -	\$ -	Salaries	\$ -	\$ -	
3-3	Law Enforcement	\$ -	\$ -	\$ -	Payroll Taxes	\$ -	7	
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	\$ -	7	
3-10	Transfers to other districts	\$ -	\$ -	\$ -	Utilities	\$ -	\$ -	
3-11	Other [specify]	\$ -	\$ -	\$ -	Contributions to Fire & Police Pension Assoc.	\$ -	Ψ	
3-12	Transfer to Beebe Draw Farms Authority	\$ 329,445	\$ -		Other [specify]	\$ -	\$ -	
3-13		\$ -	\$ -	\$ -		\$ -	\$ -	
3-14	Capital Outlay	\$ -	\$ -	\$ -	Capital Outlay	\$ -	\$ -	
	Debt Service				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	\$ -	\$ -	7	Bond Issuance Costs	\$ -	\$ -	
3-18	Developer Principal Repayments	\$ -	\$ -	\$ -	Developer Principal Repayments	\$ -	\$ -	
3-19	Developer Interest Repayments	\$ -	\$ -	\$ -	Developer Interest Repayments	\$ -	\$ -	
3-20	All Other [specify]	\$ -	\$ -	\$ -	All Other [specify]	\$ -	\$ -	
3-21		\$ -	\$ -	\$ -		\$ -	Ψ	
3-22		\$ -	\$ -	\$ -		\$ -	7	
3-23		\$ -	\$ -	\$ -		\$ -	\$ -	
3-24	Add lines 3-1 through 3-23 TOTAL EXPENDITURES	\$ 440,643	\$ -	\$ -	Add lines 3-1 through 3-23 TOTAL EXPENSES		\$ -	
3-25						L (ALL FUNDS)	\$ 440,643	
		\$ -	s -	\$ -	Net Interfund Transfers (In) Out		1,	
3-26	Interfund Transfers (In)			\$ -	1	-	1	
3-27	Interfund Transfers Out		-		Other [specify][enter negative for expense] Depreciation/Amortization			
3-28 3-29	Other Expenditures (Revenues)	\$ -	\$ - \$ -	\$ -	- '	\$ - \$ -	+ -	
3-29		\$ -	\$ -	\$ - \$ -	Other Financing Sources (from line 2-28) Capital Outlay (from line 3-14)	\$ - \$ -	1	
3-30		\$ -	\$ -	\$ -	Debt Principal (from line 3-14)	\$ -	1	
	(Add lines 3-26 through 3-31) TOTAL		-	-	(Add lines 3-27, 3-30, and 3-31, subtract lines 3-28	·	-	
3-32	TRANSFERS AND OTHER EXPENDITURES	\$ -	\$ -	\$ -	and 3-29) TOTAL GAAP RECONCILING ITEMS	\$ -	\$ -	
	Excess (Deficiency) of Revenues and Other Financing				Net Increase (Decrease) in Net Position			
3-33	Sources Over (Under) Expenditures				Line 2-30, less line 3-24, plus line 3-32, less line 3-26			
	Line 2-30, less line 3-24, less line 3-32	\$ 7,225	\$ 2,800	-		\$ -	\$ -	
3-34	Fund Balance, January 1 from December 31 prior year report				Net Position, January 1 from December 31 prior year report			
_ 0.1	, , Dodonibol or phot your report	\$ (5,863)	\$ 15,398	\$ -		s -	s -	
3-35	Prior Period Adjustment (MUST explain)	\$ 2,000		s -	Prior Period Adjustment (MUST explain)	\$ -	s -	
	Fund Balance, December 31	Ψ 2,000	· -		Net Position, December 31	Ψ -	Ψ -	
3-36	Sum of Lines 3-33, 3-34, and 3-35				Sum of Lines 3-33, 3-34, and 3-35			
	This total should be the same as line 1-37.	\$ 3,362	\$ 18,198	\$ -	This total should be the same as line 1-37.	\$ -	\$ -	
	IE ODAN	ID TOTAL EVDEN			OF ARE THAN \$750 OOD OTOR			

IF GRAND TOTAL EXPENDITURES FOR ALL FUNDS (Line 3-25) ARE 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.

Please use this space to provide explanation of any item on this page

3-35: Adjust incorrect accrual.

	PART 4	4 - DEBT OUTSTANDI	ING, ISSL	JED, AND	RETIRED	
	Please answer the following questions by marking	ng the appropriate boxes.		Yes	No	Please use this space to provide any explanations
4-1	Does the entity have outstanding debt?					or comments
	(If 'No' is checked, skip to question 4-5)					
	(If 'Yes' is checked, please attach a copy of the entity's debt repayment schedul	e)				
4-2	Is the debt repayment schedule attached? If no, MUST explain:				✓	
	N/A - District has no Debt.					
4-3	Is the entity current in its debt service payments? If no, MUST explain:				V	
	N/A - District has no Debt.					
4-4	Please complete the following debt schedule, if applicable:					
	(please complete the following debt schedule, if applicable:	Outstanding at	ed during year	Retired during	Outstanding at	
	(enter all amounts as positive numbers)	end of prior year*	ca daring 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	*Must agree to prior year-end ba		*	· -	
	Please answer the following questions by marking			Yes	No	
4-5	Does the entity have any authorized but unissued debt as of its fiscal year	· ·		V		
If yes:	How much?	\$ 4,500,000				
	Date the debt was authorized:	11/2/2010		V		
	Is the authorized but unissued debt further limited by the entity's most re					
ii yes.	How much? Date of the most recent Service Plan:	\$ 3,000,000 3/16/2011				
4-7	Does the entity intend to issue debt within the next calendar year?	3/16/2011				
If yes:	How much?	\$ -				
4-8	Does the entity have debt that has been refinanced that it is still respons				V	
If yes:	What is the amount outstanding?	\$ -		L.J		
4-9	Does the entity have any lease agreements?	•		П	☑	
	What is being leased?					
, 00.	What is the original date of the lease?					
	Number of years of lease?					
	Is the lease subject to annual appropriation?				2	
	What are the annual lease payments?	\$ -				
	.,					
		PART 5 - CASH AN	ND INVES	STMENTS	3	
	Please provide the entity's cash deposit and	investment balances.		Amount	Total	Please use this space to provide any explanations
5-1	YEAR-END Total of ALL Checking and Savings accounts			\$ 12,230		or comments
5-2	Certificates of deposit			\$ -		
		TOTAL CA	SH DEPOSITS		\$ 12,2	30
5-3	Investments (if investment is a mutual fund, please list underlying investments):					
	ColoTrust			\$ 77,713		
	ColoTrust CTF			\$ 16,198		
				\$ -		
				\$ -		
			NVESTMENTS		\$ 93,9	11
		TOTAL CASH AND I	NVESTMENTS		\$ 106,1	41
	Please answer the following questions by marking in the a	ppropriate boy	Yes	No	N/A	
5-4		• • • •	ves	NO	N/A	
5-4	Are the entity's investments legal in accordance with Section 24-75-601, Are the entity's deposits in an eligible (Public Deposit Protection Act) pul					
5-5	(Section 11-10.5-101, et seq. C.R.S.)? If no, MUST explain:	one depository	✓			

	PART 6 -	CAPITAL A	ND RIGHT-T	O-U	SE AS	SETS	
	Please answer the following questions by marking in the a				Yes	No	Please use this space to provide any explanations
6-1	Does the entity have capitalized assets?					V	or comments
	(If 'No' is checked, skip the rest of Part 6)						
6-2	Has the entity performed an annual inventory of capital assets in accordance with explain:	Section 29-1-506, C	.R.S.? If no, MUST	_		V	
	N/A no capital assets.						
6-3	Complete the following Capital & Right-To-Use Assets table for	Balance -					
	GOVERNMENTAL FUNDS:	beginning of the year*	Additions*	De	letions	Year-End Balance	
	Land			\$	-	\$ -	
	Buildings	\$ -	\$ -	\$	-	\$ -	
	Machinery and equipment	\$ -	\$ -	\$	-	\$ -	
	Furniture and fixtures	\$ -	\$ -	\$	-		
	Infrastructure	\$ -	\$ -	\$	-	\$ -	
	Construction In Progress (CIP)	\$ -	\$ -	\$	-	\$ -	
	Leased & SBITA Right-to-Use Assets	\$ -	\$ -	-		\$ -	
	Intangible Assets	\$ -	\$ -	-		\$ -	
	Other (explain):	\$ -	\$ -	\$	-		
	Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$	-	\$ -	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$		\$ -	
	TOTAL	\$ -	\$ -	\$	-	\$ -	
6-4	Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	Balance - beginning of the year	Additions*	De	letions	Year-End Balance	
	Land	\$ -	\$ -	\$	-	\$ -	
	Buildings	\$ -	\$ -	\$	-	\$ -	
	Machinery and equipment	\$ -	\$ -	\$	-	\$ -	
	Furniture and fixtures	\$ -	\$ -	\$	-	\$ -	
	Infrastructure	\$ -	\$ -	\$	-	\$ -	
	Construction In Progress (CIP)	\$ -	\$ -	\$	-	\$ -	
	Leased & SBITA Right-to-Use Assets	\$ -	\$ -	\$	-	\$ -	
	Intangible Assets	\$ -	\$ -	\$	-	\$ -	
	Other (explain):	\$ -	\$ -	\$	-	\$ -	
	Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$	-	\$ -	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$	-	\$ -	
	TOTAL	\$ -	\$ -	\$	-	\$ -	
		 Must agree to prior yea Generally capital asset accordance with the gove 		orted as o	apital outlay or ase explain an	n line 3-14 and capitalized in y discrepancy	
	PA	ART 7 - PENS	SION INFOR	RMA	ΓΙΟΝ		
	Please answer the following questions by marking in the a	ppropriate box.			Yes	No	Please use this space to provide any explanations
7-1	Does the entity have an "old hire" firefighters' pension plan?					✓	or comments
7-2	Does the entity have a volunteer firefighters' pension plan?					<u> </u>	
	Who administers the plan?			7			
,00.	Indicate the contributions from:			_			
	Tax (property, SO, sales, etc.):		\$ -	7			
	State contribution amount:		\$ -	+			
	Other (gifts, donations, etc.):		\$ -	+			
	(grita) deritational etc.).	TOTAL		1			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?		\$ -	-			

	PART 8 - BUDGET I	NFOR	MATION		
	Please answer the following question by marking in the appropriate box.	'es	No	N/A	
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	7			Please use this space to provide any explanations or comments
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	7			
f yes:	Please indicate the amount appropriated for each fund separately for the year reported				
	(Please make sure each individual fund's appropriation agrees to how the budget was adopted. Do not combine funds)				
	Governmental/Proprietary Fund Name Total Appropriations By		[
	General Fund - to be amended \$	445,000]		
	\$ \$				
	\$	-			
	\$	-			
	PART 9 - TAX PAYER'S BILI	OFR	IGHTS (TAE	BOR)	
	Please answer the following question by marking in the appropriate box.		Yes	No	Please use this space to provide any explanations
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?		✓		or comments
	Note: An election to exempt the entity from the spending limitations of TABOR does not exempt the entity from the 3 percent emerg	ency			
	reserve requirement. All entities should determine if they meet this requirement of TABOR.				
	PART 10 - GENERAL	INFO	RMATION		
	Please answer the following questions by marking in the appropriate box.		Yes	No	Please use this space to provide any explanations
10-1	Is this application for a newly formed governmental entity?			V	or comments
f yes:	Date of formation:]		10-4: The District was established to provide public streets,
10-2	Has the entity changed its name in the past or current year?			✓	traffic and
f yes:	Please list the NEW name:				safety, water, sewer, park and recreation, television relay and
	Please list the PRIOR name:]		translation, and mosquito control facilities and improvements
10-3 10-4	Is the entity a metropolitan district? Please indicate what services the entity provides:		V		for the use and benefit of the inhabitants and taxpayers of the
10-4			1		District.
	See comments section				10-5: Beebe Draw Farms Authority
	Does the entity have an agreement with another government to provide services?		~		
f yes:	List the name of the other governmental entity and the services provided:		1		
	See comments section				
40.0	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to	Title 32	, –	✓	
10-6	special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.]				
	Date filed:				
10-7	Does the entity have a certified mill levy? Please provide the number of mills levied for the year reported (do not report \$ amounts):		V		
f yes:	Bond redemp	otion mills			
		ther mills		40.000	
		Total mills		40.000	
	Y	es	No	N/A	
10-8	If the entity is a Title 32 Special District formed 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.	<a>Z			
	Please use this space to provide any additional explan	ations or o	comments not prev	iously included	

PART 11 - GOVERNING BODY APPROVAL				
Please answer the following question by marking in the appropriate box.	Yes	No		
11-1 If you plan to submit this form electronically, have you read the Electronic Signature Policy?	V			

Office of the State Auditor - Local Government Division - Exemption Form Electronic Signature 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
- 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 two methods:

- 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 revenues and expenditures of more than \$100,000 but not more than \$750,000 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 or type the names of <u>ALL</u> members of the governing body below. A <u>MAJORITY</u> of the members of the governing body must sign below.							
	Board Member's Name:	William Caldwell						
Board Member 1	l attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature						
	My term expires: May 2027	Date						
	Board Member's Name:	Brenda Lewis						
Board Member 2	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: May 2025	Signature						
	,,,	Date						
	Board Member's Name:	Catrena Rosentreader						
Board Member 3	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature						
	My term expires: May 2025	Date						
	Board Member's Name:	Cindy Billinger						
Board Member 4	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature						
	My term expires: May 2027	Date						
	Board Member's Name:							
Board Member 5	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature						
	My term expires:	Date						
	Board Member's Name:							
Board Member 6	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature						
	My term expires:	Date						
	Board Member's Name:							
Board Member	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and							
7	approved this application for exemption from audit.	Signature						
	My term expires:	Date						



Accountant's Compilation Report

Board of Directors Beebe Draw Farms Metropolitan District No. 1 Weld County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Beebe Draw Farms Metropolitan District No. 1 as of and for the year ended December 31, 2024, 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 Beebe Draw Farms Metropolitan District No. 1.

Greenwood Village, Colorado

Clifton Larson Allen LLP

March 20, 2025