COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R6 / 4-23)
Prescribed by the Department of Local Government Finance

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FORM CF-1 / Real Property

INSTRUCTIONS:

- Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).
- 2. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
- 3. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15 or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.3(j))
- 4. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property)

PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.3 (k) and (I).

| SECTION 1 | TAXPAYER | INFORMATION | | | | |
|--|-----------------------------|----------------------|-------|---|--|--------------------------------------|
| Name of Taxpayer | | | | | County | |
| CPUS Anson Building 8A, LP | | | Bo | Boone | | |
| Address of Taxpayer (number and street, city, state, and ZIP code) | | | | | DLGF Taxing District Number | |
| C/O CBRE Investment Managemer | nt,P.O. Box 638, Addison, | TX | | | | |
| Name of Contact Person | Telephone Number | | 1 | Email Address | | |
| Aaron Reynolds | (214) 863-4206 | | aa | aaron.reynolds@cbreim.com | | |
| SECTION 2 | LOCATION AND DESC | | | | | |
| Name of Designating Body | Resolution Number | | | Estimated Start Date (month, day, year) | | |
| Town of Whitestown, IN | 2014-14 | | 1 1 1 | 7/1/2014 | | |
| Location of Property 4255 S 500 E, Whitestown, IN | | | | Ac | ctual S | tart Date (month, day, year) |
| Description of Real Property Improvements | | | | Est | timate | d Completion Date (month, day, year, |
| 708,304 square foot office-warehou | associated parking area and | | | 2/25/2015 | | |
| site improvements | | | | | Actual Completion Date (month, day, year | |
| • | | | | | | |
| SECTION 3 | EMPLOYEES | AND SALARIES | | | | |
| EMPLOYEES AND S | SALARIE\$ | AS ESTIMATED ON SB-1 | | TED ON SB-1 | | ACTUAL |
| Current Number of Employees | | 50 | | | | 499 |
| Salaries | | 1,500,000 | | | | 45,800,000 |
| Number of Employees Retained | | | | | | |
| Salaries | | | | | | |
| Number of Additional Employees | | | | | | |
| Salaries | • | † | | | | |
| SECTION 4 | COST AN | ID VALUES | | | | |
| COST AND VALUES | REAL ESTATE IMPROVEMENTS | | | | | |
| AS ESTIMATED ON SB-1 | COST | | | ASSESSED VALUE | | |
| Values Before Project | \$ 0 | | | \$ 0 | | |
| Plus: Values of Proposed Project | \$ 16,282,620 | | | \$ 16,282,620 | | |
| Less: Values of Any Property Being Replaced | \$ | | | \$ | | |
| Net Values Upon Completion of Project | \$ 16,282,620 | | | \$ | | |
| ACTUAL | COST | | | ASSESSED VALUE | | |
| Values Before Project | \$ | | | \$ 1,914,900 | | |
| Plus: Values of Proposed Project | \$ | | | \$ 34,046,400 | | |
| Less: Values of Any Property Being Replaced | \$ | | | \$ | | |
| Net Values Upon Completion of Project | \$ * (SEE BELOW COMMENT) | | | \$ 35,961,300 | | |
| | CONVERTED AND OTHER BE | ENEFITS PROMI | SED B | | | |
| | D AND OTHER BENEFITS | | | ESTIMATED ON SB | 1-1 | ACTUAL |
| Amount of Solid Waste Converted | | | | | | |
| Amount of Hazardous Waste Converted | | | | | | |
| Other Benefits: | | | | | | |
| SECTION 6 | TAXPAYER (| CERTIFICATION | | | | |
| I hereby certify that the representations in | this statement are true. | | | | | |
| Signature of Authorized Representative | | Title | | | | Date Signed (month, day, year) |
| | | 1// | 1 | resident | - | |

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.3 and IC 6-1.1-12.1-5.9)

- 1. Not later than forty-five (45) days after receipt of this form, the designating body <u>may</u> determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).
- 2. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.
- Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts
 to substantially comply with the Statement of Benefits (Form SB-1/Real Property), and whether any failure to substantially comply was caused by factors
 beyond the control of the property owner.
- 4. If the designating body determines that the property owner has **NOT** made reasonable efforts to comply, the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.

| We have reviewed the CF-1 and find that: | | | | | | | |
|---|------------------------------------|--|--|--|--|--|--|
| The Property Owner IS in Substantial Compliance | | | | | | | |
| The Property Owner IS NOT in Substantial Compliance | | | | | | | |
| Other (specify) | | | | | | | |
| Reasons for the Determination (attach additional sheets if necessary) | | | | | | | |
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| | | | | | | | |
| Signature of Authorized Member | Date Signed (month, day, year) | | | | | | |
| | out olymonia, day, your, | | | | | | |
| Attested By | Designating Body | | | | | | |
| Town of Whitestown, IN | | | | | | | |
| If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and | | | | | | | |
| time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.) Time of Hearing AM Date of Hearing (month, day, year) Location of Hearing | | | | | | | |
| ☐ PM | ,, | | | | | | |
| | | | | | | | |
| HEARING RESULTS (to be completed after the hearing) | | | | | | | |
| Approved | ☐ Denied (see Instruction 4 above) | | | | | | |
| Reasons for the Determination (attach additional sheets if necessary) | | | | | | | |
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| | | | | | | | |
| Signature of Authorized Member | Date Signed (month, day, year) | | | | | | |
| Attested By Designating Body | | | | | | | |
| Town of Whitestown, IN | | | | | | | |
| APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)] | | | | | | | |
| A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner, | | | | | | | |