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.
- 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))
- 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 (l).

SECTION 1	TAXPAY	ER INFORMATION			
Name of Taxpayer WSRE CR Whitestown Investors 11		County			
WSRE CP Whitestown Investors, LLC Address of Taxpayer (number and street, city, state, and ZIP code)			BOONE		
900 N Michigan Ave, Suite 1900, Chicago, IL 60611				LGF Taxing District Number	
Name of Contact Person		020-020			
Douglas J Welker		(312) 915-			
SECTION 2	LOCATION AND D	ESCRIPTION OF PR			
Name of Designating Body		Resolution Numb		stimated Start Date (month, day, year)	
Town of Whitestown 2006-022				lay 2016	
Location of Property			Ac	tual Start Date (month, day, year)	
3519 Perry Blvd, Lebanon, IN-Parce	l # 020-03421-05		M	lay 2016	
Description of Real Property Improvements				stimated Completion Date (month, day, ye.	
1 warehouse, 636,000 square feet	expandable to 1,000,000	0 square feet		May 2022	
				tual Completion Date (month, day, year	
SECTION 3	EMPL OVE	EC AND CALABIES	D	ecember 2020	
EMPLOYEES AND		ES AND SALARIES			
Current Number of Employees	SALARIES		STIMATED ON SB-1	ACTUAL	
Salaries		0		134	
Number of Employees Retained		0.00		4,541,615.56	
Salaries		0		0	
Number of Additional Employees		0.00		0.00	
Salaries		200		134	
SECTION 4		5,304,000		4,541,615.56	
COST AND VALUES	COST	AND VALUES			
			ATE IMPROVEMENTS		
AS ESTIMATED ON SB-1	COS	ST	AS	ASSESSED VALUE	
Values Before Project	\$		\$		
Plus: Values of Proposed Project	\$ 45,800,000		\$ 29,867,800	0	
Less: Values of Any Property Being Replaced	\$		\$		
Net Values Upon Completion of Project	\$		\$ 29,867,800		
ACTUAL	cos	T	ASSESSED VALUE		
Values Before Project	\$		\$		
Plus: Values of Proposed Project	\$ 45,800,000		\$ 29,867,800		
Less: Values of Any Property Being Replaced	\$		\$		
Net Values Upon Completion of Project	\$		\$ 29,867,800		
SECTION 5 WASTE	CONVERTED AND OTHER	BENEFITS PROMIS	ED BY THE TAXPAYER		
WASTE CONVERTED	AND OTHER BENEFITS		AS ESTIMATED ON SB-	-1 ACTUAL	
Amount of Solid Waste Converted					
Amount of Hazardous Waste Converted					
Other Benefits:			747		
SECTION 6		R CERTIFICATION			
I hereby certify that the representations in					
ignature of Authorized Representative Steve Brunson		Title Authorized Ag	uent .	Date Signed (month, day, year) 05/01/24	

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)

- 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).
- 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.
- 3 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 in Substantial Compliance						
The Property Owner IS NOT in Substantial Compliance							
Other (specify)							
Reasons for the Determination (attach additional sheets if necessary)							
Signature of Authorized Member		Date Signed (month, day, year)					
Attested By	Designating Body						
	Town of Whitestown						
If the property owner is found not to be in substantial compliance, the property time has been set aside for the purpose of considering compliance. (Hearing	owner shall receive the opportunity for	a hearing. The following date and					
Time of Hearing AM Date of Hearing (month, day, year		le date of mailing of this hotice.)					
□ PM							
HEARING RESULTS (to be	completed after the hearing)						
☐ Approved		e Instruction 4 above)					
Reasons for the Determination (attach additional sheets if necessary)							
Signature of Authorized Member		Date Signed (month, day, year)					
		Sate digited (month, day, year)					
Attested By	Designating Body						
	Town of Whitestown						
APPEAL RIGHTS [C 6-1.1-12.1-5.9(e)]						
A property owner whose deduction is denied by the designating body may appeal the designation Court together with a bond conditioned to pay the costs of the appeal if the	ignating body's decision by filing a complaint is all is determined against the property owner.	in the office of the clerk of the Circuit or					



STATEMENT OF BENEFITS **REAL ESTATE IMPROVEMENTS**

State Form 61787 (R8 / 10-14)

Prescribed by the Department of Local Government Finance

This statement is being completed for real property that qualifies under the following Indiana Code (check one box): ☐ Redevelopment or rehabilitation of real estate improvements (IC 8-1.1-12.1-4) Residentially distressed area (IC 6-1.1-12.1-4.1)

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-36		
38		
35.		

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FORM SB-1 / Real Property

PRIVACY NOTICE

Any information concerning the cost of the property and specific soluries peld to individual employees by the property owner is confidential per IC 6-1.1-12.1-5.1.

INSTRUCTIONS:

- INSTRUCTIONS:

 1. This statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitalization Area. Otherwise, this statement must be submitted to the designating body BEFORE the redevelopment or rehabilitation of real property for which the person wishes to claim a deduction.

 2. The statement of benefits form must be submitted to the designating body and the area designated an economic revitalization area before the initiation of the redevelopment or rehabilitation for which the person desires to claim a deduction.

 3. To obtain a deduction, a Form 322/RE must be filed with the County Auditor before May 10 in the year in which the addition to assessed valuation is

- made or not later than thirty (30) days after the assassment notice is maded to the property owner if it was malled after April 10. A property owner who falled to file a deduction application within the prescribed deadline may file on application between March 1 and May 10 of a subsequent year.

 4. A property owner who files for the deduction must provide the County Auditor and designating body with a Form CF-1/Real Property. The Form CF-1/Real Property should be attached to the Form 322/RE when the deduction is first claimed and then updated ennuelly for each year the deduction is applicable. IC 8-1.1-12.1-5.1(b)
- For a Form SB-1/Real Property that is approved after June 30, 2013, the designating body is required to establish an abatement schedule for each deduction allowed. For a Form SB-1/Real Property that is approved prior to July 1, 2013, the abatement schedule approved by the designating body together. IC 6-1 1-12 1-17.

TOTAL TOTAL	10 0-1.1-12.1-11						
SECTION 1		TAXPAYER	INFORMA	TION		A 10 30	
Name of texpayor							
Exeter State R		or a say					
140 W. Germa		ing zir code) I, Plymouth Meeting, PA	19462				
Name of contact person			Telephone i			E-mail addre	
Jason Honesty	y		(610)	234-3211		jhonest	y@exeterpg.com
SECTION 2		LOCATION AND DESCRIP	TION OF PI	ROPOSED PROJ	ECT		
Name of designating body					Resolution number		
Town of White:	stown					2006-0	
Location of property			County	0.000		DLGF taxing	district rumber
		8 550 S. Indianapolis rd		County			
		oment or rehabilitation <i>(use additions</i> expandable to 1,050,000 sf, and,				Estimated start date (month, day, year) May 2016	
The state of the s						Estimated completion date (month, day, year) May 2022	
SECTION 3	ESTIMAT	TE OF EMPLOYEES AND SALA	ARIES AS R	ESULT OF PROP	OSED PRO	DJECT	
Current number	Seluries	Number retained	Salarles		Number add	litional	Solories
0.00	\$0.00	0.00	\$0.00)	200.00		\$5,304,000.00
SECTION 4		ESTIMATED TOTAL COST AN	ND VALUE (OF PROPOSED F	ROJECT		يحاطانياني بالأر
				REAL	ESTATE II	MPROVEME	ENTS
				COST		A:	SSESSED VALUE
Current values							281,000.00
Plus estimated valu	ues of proposed project			45	00.000,008,		50,470,000.00
The second secon	property being replaced		0,00				
	es upon completion of pr		50,470,000.00		50,470,000.00		
SECTION 5	WA	STE CONVERTED AND OTHER	RENEFIT	S PROMISED BY	THE TAXE	AYER	and to the state of
Estimated solid was	ste-converted (pounds)_	0.00	Estimati	ed hezerdous was	te converte	d (pounds)	
Other banefils N. A.							
SECTION 6		TAXPAYER C	ERTIFICATI	ION	III Jan		
Designation of the first state of the contract of the con-		In this statement are true.					
Signature of authorized representative						Date signed (month, day, year) March 1, 2015	
Printed name of authorize	ed representative			Tille			
Kevin P Shea				authorized r	epresen	tative	

			FOR USE OF THE	DESIGNATING B	ODY	
We fli under	nd that the applicant meets to IC 8-1.1-12.1, provides for t	he general slanda the following limita	rds in the resolution add lions:	opted or to be ado	pled by this body. Se	ald resolution, passed or to be passed
A.	The designated area has be expires is	een imited to a pe	nod of time not to exce	ed	calender years* (see	s below). The date this deelgnation
B.	The type of deduction that it Redevelopment or rehab 2. Residentially distressed it	ilitation of real est		dto: Yes N Yes N		
c,	The amount of the deduction	n applicable la tim	ited to \$			
D.	Other fimitations or condition	ns (specify)				
E,	Number of years allowed:	☐ Year 1 ☐ Year 6	Year 2 Year 7	Year 3 Year 8	Year 4	Year 5 (* see below)
We he	☐ Yes ☐ No if yes, attach a copy of the a if no, the designating body i	abetement schedu s required to estat atton contained in	le to this form. blish an abatement ache the statement of benefit	edule before the do	aduction can be deter	nedule per IC 6-1.1-12.1-17? rmined. ctallons ere ressonable and have
Approved	(signature and litta of authorized	momber of designal	ing body)	Telephone number	-	Data signed (month, day, year)
Printed ne	Printed name of authorized member of designating body Name of designating body					
Attested b	y (signature and lille of altealer)			Printed name of att	ceter	
І вхрву А.	er is entitled to receive a dec For residentially distressed a	luction to a numbe ireas where the Fi	er of years that is less ti orm SB-1/Real Property	han the number of was approved on	years dealgnated uni for to July 1, 2013, the	e deductions established in IC
B.	6-1.1-12.1-4.1 remein in effe 2013, the designating body i (10) years. (See IC 6-1.1-12 For the redevelopment or rai	icl. The deduction is required to estail 2.1-17 below.) hebilitation of real esignating body re	period may not exceed offsh an abatement scho property where the For mains in effect. For a F.	five (5) years. Fo edule for each ded m SB-1/Resi Prop onn SB-1/Resi Pro	ir a Form SB-1/Real F luction allowed. The erty was approved pr operty that is approve	Property that is approved after June 30, deduction period may not exceed ten for to July 1, 2013, the abatement id after June 30, 2013, the designating
Abatan	1-12.1-17 ment ache dules	C WENTER HER	1)		* 58/00/10/1080	
section	4 or 4.5 of this chapter an a (1) The total a	batament schedul mount of the texps	nesa that is established e based on the followin lyer's investment in real equivalent jobs created,	g factors: I and personal pro		and that receives a deduction under
	(3) The averag (4) The Infrasti	e wage of the new ructure requiremen	vemployees compared	to the state minim vestment.	-	
	(b) This subsection applie for each deduction alice the deduction. An aba	is to a statement of wed under this challement schedule r	f benefits approved after apter. An abstement some may not exceed ten (10	er June 30, 2013. chedule must spec) vears.	bify the percentage ar	hall establish an abatement schedule nount of the deduction for each year of he abatement schedule axpires under
	the terms of the resolu	lon approved for a plug.	parucular laxpayer delo Laxbaver's statement o	re July 1, 2013, 16 If benefits.	ALLENIES IL GILOCI (TUM) (ne spalement schedule axpires under

