



# COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R6 / 4-23)

Prescribed by the Department of Local Government Finance

20 24 PAY 20 25  
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).

### INSTRUCTIONS:

1. 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).

## SECTION 1 TAXPAYER INFORMATION

Name of Taxpayer <b>Lord Realty Holdings LLC - ETAL</b>		County <b>Boone County</b>
Address of Taxpayer (number and street, city, state, and ZIP code) <b>P.O. Box 460459, Denver, CO 80246-9998</b>		DLGF Taxing District Number <b>020</b>
Name of Contact Person <b>Lynn Ornellas, Financial Controller</b>	Telephone Number <b>( 720 ) 907-9792</b>	Email Address <b>lornellas@lordrealtyco.com</b>

## SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body <b>Town Council of the Town of Whitestown, Indiana</b>	Resolution Number <b>2021-27</b>	Estimated Start Date (month, day, year) <b>08/01/2021(Bldg 5 &amp; 6)</b>
Location of Property <b>6350 Commerce Dr., Whitestown, IN 46075</b>		Actual Start Date (month, day, year) <b>09/06/2022 (Bldg 6)</b>
Description of Real Property Improvements <b>Bldg 6: Approx 297,000 sq ft "flex" style building with office and warehouse components.</b>		Estimated Completion Date (month, day, year) <b>7/31/2023 (Bldg 5 &amp; 6)</b>
		Actual Completion Date (month, day, year) <b>11/13/2023 (Bldg 6)</b>

## SECTION 3 EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	0	0
Salaries	\$0.00	\$0.00
Number of Employees Retained	0	0
Salaries	\$0.00	\$0.00
Number of Additional Employees	See SB-1, file combined	0
Salaries	See SB-1, file combined	\$0.00


## SECTION 4 COST AND VALUES

COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values Before Project	\$	\$
Plus: Values of Proposed Project	\$ See SB-1, file combined	\$
Less: Values of Any Property Being Replaced	\$	\$
Net Values Upon Completion of Project	\$ See SB-1, file combined	\$
ACTUAL	COST	ASSESSED VALUE
Values Before Project	\$	\$
Plus: Values of Proposed Project	\$ 19,622,925 as of 01/01/2024	\$ 19,411,900 as of 01/01/2024
Less: Values of Any Property Being Replaced	\$	\$
Net Values Upon Completion of Project	\$ 19,622,925 as of 01/01/2024	\$ 19,411,900 as of 01/01/2024

## SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted	0.00	0.00
Amount of Hazardous Waste Converted	0.00	0.00
Other Benefits:	n/a	n/a

## SECTION 6 TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.		
Signature of Authorized Representative 	Title <b>For Geoffrey G. Lord, Property Manager</b>	Date Signed (month, day, year) <b>05/09/2024</b>

*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 may 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.
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:			
<input type="checkbox"/>	The Property Owner <b>IS</b> in Substantial Compliance		
<input type="checkbox"/>	The Property Owner <b>IS NOT</b> in Substantial Compliance		
<input type="checkbox"/>	Other (specify) _____		
Reasons for the Determination (attach additional sheets if necessary)			
Signature of Authorized Member			Date Signed (month, day, year)
Attested By		Designating Body <b>Town Council of the Town of Whitestown, Indiana</b>	
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	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Hearing (month, day, year)	Location of Hearing

**HEARING RESULTS (to be completed after the hearing)**

- Approved**
 **Denied (see Instruction 4 above)**

Reasons for the Determination (attach additional sheets if necessary)			
Signature of Authorized Member			Date Signed (month, day, year)
Attested By		Designating Body <b>Town Council of the Town of Whitestown, Indiana</b>	

**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.