APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT

CONTACT PERSON

ADDRESS

PHONE EMAIL

Lee Farms Metropolitan District No. 4 c/o SpencerFane, LLP

1700 Lincoln Street, Suite 2000

Denver, CO 80203

Russ Dykstra 303-839-3800

rdykstra@spencerfane.com

For the Year Ended 12/31/23 or fiscal year ended:

PART 1 - CERTIFICATION OF PREPARER

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.

NAME: TITLE

FIRM NAME (if applicable)

ADDRESS

Diane Wheeler District Accountant Simmons & Wheeler, P.C.

304 Inverness Way South, Suite 490, Englewood, CO 80112

using Governmental or Proprietary fund types		, , , , , , , , , , , , , , , , , , ,	
Please indicate whether the following financial information is recorded	GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)
Qione K Whater			3/11/2024
PREPARER (SIGNATURE REQUIRED)		D	ATE PREPARED
PHONE 303-689-0833			

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

	equipment, and proceeds from dept of lease trainsactions. I manifest miorination will not include fund equity information.					Diagram and Aleia
Line#			escription		Round to nearest Dollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$	14,944	space to provide
2-2		Specific owner	rship	\$	1,076	any necessary explanations
2-3		Sales and use		\$	-	expialiations
2-4		Other (specify)):	\$	-	
2-5	Licenses and permi	its		\$	-	
2-6	Intergovernmental:		Grants	\$	-	
2-7			Conservation Trust Funds (Lottery)	\$	-	
2-8			Highway Users Tax Funds (HUTF)	\$	-	
2-9			Other (specify):	\$	-	
2-10	Charges for service	S		\$	-	
2-11	Fines and forfeits			\$	-	
2-12	Special assessmen	ts		\$	-	
2-13	Investment income			\$	-	
2-14	Charges for utility s	services		\$	-	
2-15	Debt proceeds		(should agree with line 4-4, colun	nn 2) \$	-	
2-16	Lease proceeds			\$	-	
2-17	Developer Advance	s received	(should agree with line	\$ 4-4)	-	
2-18	Proceeds from sale	of capital asset	s	\$	-	
2-19	Fire and police pen	sion		\$	-	
2-20	Donations			\$	-	
2-21	Other (specify):			\$	-	
2-22				\$	-	
2-23				\$	-	
2-24		(add lii	nes 2-1 through 2-23) TOTAL REVEN	NUE \$	16,020	

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

Line#	Description		Round to nearest	Dollar	Please use this
3-1	Administrative		\$	299	space to provide
3-2	Salaries		\$	-	any necessary explanations
3-3	Payroll taxes		\$	-	expianations
3-4	Contract services		\$	-	
3-5	Employee benefits		\$	-	
3-6	Insurance		\$	-	
3-7	Accounting and legal fees		\$	-	
3-8	Repair and maintenance		\$	-	
3-9	Supplies		\$	-	
3-10	Utilities and telephone		\$	-	
3-11	Fire/Police		\$	-	
3-12	Streets and highways		\$	-	
3-13	Public health		\$	-	
3-14	Capital outlay		\$	-	
3-15	Utility operations		\$	-	
3-16	Culture and recreation		\$	-	
3-17	Debt service principal (sho	uld agree with Part 4)	\$	-	
3-18	Debt service interest		\$	-	
3-19	Repayment of Developer Advance Principal (shou	ld agree with line 4-4)	\$	-	
3-20	Repayment of Developer Advance Interest		\$	-	
3-21	Contribution to pension plan (she	ould agree to line 7-2)	\$	-	
3-22	Contribution to Fire & Police Pension Assoc. (she	ould agree to line 7-2)	\$	-	
3-23	Other (specify):				
3-24	Transfer to Lee Farms MD No.1		\$	15,721	
3-25			\$	-	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITU	RES/EXPENSES	\$	16,020	

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - <u>STOP</u>. You may not use this form. Please use the "Application for Exemption from Audit -<u>LONG FORM</u>".

	PART 4 - DEBT OUTSTANDING	G, ISSUED	, AND RE	ETIRED	
	Please answer the following questions by marking the	appropriate boxes.		Yes	No
4-1	Does the entity have outstanding debt?				☑
	If Yes, please attach a copy of the entity's Debt Repayment S				
4-2	Is the debt repayment schedule attached? If no, MUST explain	n below:		-	☑
	N/A				
4-3	Is the entity current in its debt service payments? If no, MUS	T explain below:			☑
	N/A				
4-4	Please complete the following debt schedule, if applicable:				
	(please only include principal amounts)(enter all amount as positive	Outstanding at end of prior year*	Issued during vear	Retired during vear	Outstanding at year-end
	numbers)	end of prior year	year	year	year-end
	General obligation bonds	\$ -	\$ -	\$ -	\$ -
	Revenue bonds	\$ -	\$ -	\$ -	\$ -
	Notes/Loans	\$ -	\$ -	\$ -	\$ -
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$ -	\$ -	\$ -	\$ -
	Developer Advances	\$ -	\$ -	\$ -	\$ -
	Other (specify):	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -
*Subscrip	ntion Based Information Technology Arrangements	*Must agree to prio	r year-end balance		
	Please answer the following questions by marking the appropriate boxes			Yes	No
4-5	Does the entity have any authorized, but unissued, debt?			☑ 1	
If yes:	How much?	*	98,000,000.00		
	Date the debt was authorized:	5/3/2	016		
4-6	Does the entity intend to issue debt within the next calendar				☑
If yes:	How much?	\$	-		
4-7	Does the entity have debt that has been refinanced that it is s		for?	. –	☑
If yes:	What is the amount outstanding?	\$	-		
4-8	Does the entity have any lease agreements?			 1	☑
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 navments?	¢		_]	_

PART 5 - CASH AND INVESTMENTS Please provide the entity's cash deposit and investment balances. Amount Total \$ 5-1 YEAR-END Total of ALL Checking and Savings Accounts 5-2 Certificates of deposit \$ **Total Cash Deposits** \$ Investments (if investment is a mutual fund, please list underlying investments): \$ 5-3 \$ \$ Total Investments \$ **Total Cash and Investments** \$ Please answer the following questions by marking in the appropriate boxes Yes No N/A Are the entity's Investments legal in accordance with Section 24-75-601, et. 5-4 ✓ seq., C.R.S.? Are the entity's deposits in an eligible (Public Deposit Protection Act) public ✓ depository (Section 11-10.5-101, et seq. C.R.S.)? If no, MUST use this space to provide any explanations:

Part 4 - Please use this space to provide any explanations/comments or attach separate documentation, if needed

	PART 6 - CAPITAL AND RI	GHT-TO-U	ISE ASSE	TS	
	Please answer the following questions by marking in the appropriate box	es.		Yes	No
6-1	Does the entity have capital assets?				Ø
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	s in accordance	with Section	☑	
		D.J.	A d d'4' /88 4		
6-3	Complete the following capital & right-to-use assets table:	Balance - beginning of the year*	Additions (Must be included in Part 3)	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Infrastructure	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Leased & SBITA Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

*must tie to prior year ending balance

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

	PART 7 - PENSION INFORMA	TIOI	V			
	Please answer the following questions by marking in the appropriate boxes.			Yes	No	
7-1	Does the entity have an "old hire" firefighters' pension plan?				Ø	
7-2	Does the entity have a volunteer firefighters' pension plan?				☑	
If yes:						
	Indicate the contributions from:					
	Tax (property, SO, sales, etc.):	\$	-			
	State contribution amount:	\$	-			
	Other (gifts, donations, etc.):		-			
	TOTAL	\$	-			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$	-			
	Part 7 - Please use this space to provide any explanations	or co	mments	:		

	PART 8 - BUDGET II	NFORMAT	TION		
	Please answer the following questions by marking in the appropriate boxe	s.	Yes	No	N/A
8-1	Did the entity file a budget with the Department of Local Affairs for in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	the current year	☑		0
0.0					
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:				
If yes:	Please indicate the amount budgeted for each fund for the year	ar roportod:			
ii yes.	riease indicate the amount budgeted for each fund for the yea	ii reported.			
	Governmental/Proprietary Fund Name	Total Appropriat	ions By Fund		
	General Fund	\$	16,059		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	Please answer the following question by marking in the appropriate box	Yes	No
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.	<u>u</u>	

If no, MUST explain:

	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1	Is this application for a newly formed governmental entity?		
If yes:	Date of formation:]	
10-2	Has the entity changed its name in the past or current year?	J	☑
16			
If yes:	Please list the NEW name & PRIOR name:	1	
10-3	Is the entity a metropolitan district?	<u> </u> ☑	
10-0	Please indicate what services the entity provides:	<u>.</u>	
	Sanitary sewer/storm drainage, streets, water, traffic and safety controls, park and recreation]	
10-4	Does the entity have an agreement with another government to provide services?		☑
If yes:	List the name of the other governmental entity and the services provided:	-	
]	
10-5	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during	 1	☑
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?	⊒ ☑	
If yes:			
	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		65.000
	Total mills		65.000
	Yes	No	N/A
40.7	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the autitudities are adding a constant with the State Auditor on required. □		
10-7	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.		
	and of a local of the following product explain	1	

Please use this space to provide any additional explanations or comments not previously included:

	PART 11 - 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?	☑	_

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

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.

Print th	ne names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must sign below.
Board Member 1	Print Board Member's Name John Covert	IJohn Covert, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signedfolia_C_Covert
Board Member 2	Print Board Member's Name David Duncan	IDavid Duncan
Board Member 3	Print Board Member's Name Todd Johnson	ITodd Johnson, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed
Board Member 4	Print Board Member's Name	I
Board Member 5	Print Board Member's Name	I
Board Member 6	Print Board Member's Name	I
Board Member 7	Print Board Member's Name	I

Lee Farms 4 2023

Final Audit Report 2024-03-19

Created: 2024-03-18

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Signed

Transaction ID: CBJCHBCAABAAZEMuAFTcFagR-UgltWUdks9MkR7HO4W6

"Lee Farms 4 2023" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2024-03-18 3:23:38 PM GMT
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2024-03-18 3:24:38 PM GMT
- Document emailed to david@c3landllc.com for signature 2024-03-18 3:24:38 PM GMT
- Document emailed to todd@terraformas.com for signature 2024-03-18 3:24:38 PM GMT
- Document emailed to john.covert@cushwake.com for signature 2024-03-18 3:24:38 PM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)
 Signature Date: 2024-03-18 3:24:45 PM GMT Time Source: server
- Email viewed by todd@terraformas.com 2024-03-18 3:25:36 PM GMT
- Signer todd@terraformas.com entered name at signing as Todd A. Johnson 2024-03-18 3:25:56 PM GMT
- Document e-signed by Todd A. Johnson (todd@terraformas.com)
 Signature Date: 2024-03-18 3:25:58 PM GMT Time Source: server
- Email viewed by john.covert@cushwake.com 2024-03-18 7:55:15 PM GMT
- Signer john.covert@cushwake.com entered name at signing as John C. Covert 2024-03-18 7:55:46 PM GMT



Document e-signed by John C. Covert (john.covert@cushwake.com)
Signature Date: 2024-03-18 - 7:55:48 PM GMT - Time Source: server

Email viewed by david@c3landllc.com 2024-03-19 - 8:53:01 PM GMT

Signer david@c3landllc.com entered name at signing as David Duncan 2024-03-19 - 8:53:50 PM GMT

Document e-signed by David Duncan (david@c3landllc.com)
Signature Date: 2024-03-19 - 8:53:52 PM GMT - Time Source: server

Agreement completed. 2024-03-19 - 8:53:52 PM GMT