APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT

ADDRESS

CONTACT PERSON

Jones Metropolitan District No. 4 8390 E Crescent Parkway

Sutie 300

Greenwood Village, CO 80111

Jason Carroll 303-779-5710

Jason.Carroll@claconnect.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:

PHONE EMAIL

TITLE

FIRM NAME (if applicable)

ADDRESS PHONE Jason Carroll

Accountant for the District CliftonLarsonAllen LLP

8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111

303-779-5710

PREPARER (SIGNATURE REQUIRED)			ATE PREPARED
See attached accountants compilation report			2/23/2024
Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)

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.

Line#		De	scription	Round to nearest Dollar		Please use this
2-1	Taxes: F	Property	(report mills levied in Question 10-6)	\$	3	space to provide
2-2	S	Specific owner	ship	\$	0	any necessary
2-3	S	Sales and use		\$ -		explanations
2-4		Other (specify)		\$ -		
2-5	Licenses and permits			\$ -		
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 services			\$ -		
2-11	Fines and forfeits			\$ -		
2-12	Special assessments			\$ -		
2-13	Investment income			\$ -		
2-14	Charges for utility ser	vices		\$ -		
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -		
2-16	Lease proceeds			Ψ		
2-17	Developer Advances i	received	(should agree with line 4-4)	\$ -		
2-18	Proceeds from sale of	f capital assets	5	\$ -		
2-19	Fire and police pension	on		\$ -		
2-20	Donations			\$ -		
2-21	Other (specify):			\$ -		
2-22				\$ -		
2-23				\$ -		
2-24		(add lin	es 2-1 through 2-23) TOTAL REVENUE	\$	3	

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

	interest payments on long-term debt. Financial information will not in	<u>iciuae tuna equity intori</u>	matic		
Line#	Description			Round to nearest Dollar	Please use this
3-1	Administrative		\$	-	space to provide
3-2	Salaries		\$	-	any necessary
3-3	Payroll taxes		\$	-	explanations
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	(should agree with Part 4)	\$	-	
3-18	Debt service interest		\$	-	
3-19	Repayment of Developer Advance Principal (s	should agree with line 4-4)	\$	-	
3-20	Repayment of Developer Advance Interest		\$	-	
3-21	Contribution to pension plan	(should agree to line 7-2)	\$	-	
3-22	Contribution to Fire & Police Pension Assoc.	(should agree to line 7-2)	\$	-	
3-23	Other (specify):				
3-24	Transfers to Jones Community Authority		\$	3	
3-25	County Treasurer's fee		\$	0	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDI	TURES/EXPENSES	\$	3	

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			, AND RI	ETIRED			
	Please answer the following questions by marking the	appropri	ate boxes.		Yes		No	
4-1	Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule.						✓	
4-2	Is the debt repayment schedule attached? If no. MUST explain N/A. The Districts has no debt.]		✓	
4-3	Is the entity current in its debt service payments? If no, MUS	T evnla	in helow:				7	
	N/A. The Districts has no debt.	OKDIG					_	
4-4	Please complete the following debt schedule, if applicable:							
	(please only include principal amounts)(enter all amount as positive numbers)		anding at prior year*	Issued during year	Retired dur year	ing	Outstandi year-er	
	General obligation bonds	\$	-	\$ -	\$	- 1	\$	-
	Revenue bonds	\$	-	\$ -	\$	-	\$	-
	Notes/Loans	\$	-	\$ -	\$	-	\$	-
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$	-	\$ -	\$	- 1	\$	-
	Developer Advances	\$	-	\$ -	\$		\$	_
	Other (specify):	\$		\$ -	\$		\$	_
	TOTAL	\$	_	\$ -	\$	_	\$ \$	
**Subscript	tion Based Information Technology Arrangements		agree to prio	ι Ψ r year-end balance	<u> </u>		Ψ	
<u> </u>	Please answer the following questions by marking the appropriate boxes		ig. oo to piio	. your one bearing	Yes		No	
4-5	Does the entity have any authorized, but unissued, debt?				V			
If yes:	How much?	\$	3	74,880,000.00				
	Date the debt was authorized:		5/5/2	020	1			
4-6	Does the entity intend to issue debt within the next calendar	year?					✓	
If yes:	How much?	\$		-				
4-7	Does the entity have debt that has been refinanced that it is s	till res	ponsible	for?	.		✓	
If yes:	What is the amount outstanding?	\$		-	7			
4-8	Does the entity have any lease agreements?				. .		V	
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 payments?	\$		- 		:6		
	Part 4 - Please use this space to provide any explanations/cor	nments	or attaci	n separate dod	umentation	, it ne	eaea	
	PART 5 - CASH AND	INV	ESTN	IENTS				
	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	investr	nents).			L	Ψ	
	(in this series a matach rand, prodoction and continue							
					\$	-		
5-3					\$	-		
					\$	-		
					\$	- +	Φ.	
	Total Investments						\$	-
	Total Cash and Investments						\$	-
	Please answer the following questions by marking in the appropri	riate hov	AC	Yes	No		N/A	

✓

V

Are the entity's Investments legal in accordance with Section 24-75-601, et.

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:

5-4

5-5

seq., C.R.S.?

	PART 6 - CAPITAL AND RI	GHT-TO-L	JSE ASSE	ETS	
	Please answer the following questions by marking in the appropriate box	es.		Yes	No
6-1	Does the entity have capital assets?				V
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		V
	N/A. The District has no capital assets.				
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 v	ear ending balance		

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

	PART 7 - PENSION INFORMATION					
	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?				V	
7-2	Does the entity have a volunteer firefighters' pension plan?				✓	
If yes:	: Who administers the plan?					
	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 comments:					

	PART 8 - BUDGET I	NFORMAT	ΓΙΟΝ		
	Please answer the following questions by marking in the appropriate boxe		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	V		
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				
	Governmental/Proprietary Fund Name	Total Appropriat	ions By Fund		
	General Fund	\$	-		
	Debt Service Fund	\$	1,000		

	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.	V	

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?		V	
If yes:	Date of formation:]		
10-2	Has the entity changed its name in the past or current year?		✓	
If yes:	Please list the NEW name & PRIOR name:	1		
10-3	Is the entity a metropolitan district?			
	Please indicate what services the entity provides: See Below	1		
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: See Below			
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during	, 	V	
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		20.797	
	General/Other mills Total mills		20.797	
	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has	No	N/A	
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.]		

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

10-3: The District was established to provide for acquisition, construction, and instillation for water, sanitation, drainage, street improvements, parks and recreational facilities, television relay and translation, and mosquito control.

10-4: Jones Metro District Nos. 1-5 and Jones District CAB are providing services to the Jones community.

	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 tl	he	names	of ALL	members	of curren
		gover	nina ba	dy below	

A <u>MAJORITY</u> of the members of the governing body must sign below.

	Print Board Member's Name	IAndrea Ferber, attest I am a duly elected or appointed
Board		board member, and that I have personally reviewed and approve this application
Board Member	Andrea Ferber	for exemption from audit.
1		Signed
		Date:
		My term Expires: May 2025
	Print Board Member's Name	IJason Mitchell, attest I am a duly elected or appointed
Board		board member, and that I have personally reviewed and approve this application
Member	Jason Mitchell	for exemption from audit.
2		Signed
_		Date:
		My term Expires: May 2027
	Print Board Member's Name	IJames Priestley, attest I am a duly elected or appointed
Board		board member, and that I have personally reviewed and approve this application
Member	James Priestley	for exemption from audit.
3	-	Signed
		Date:
		My term Expires: May 2027
Board	Print Board Member's Name	IWhitney Skylar, attest I am a duly elected or appointed
		board member, and that I have personally reviewed and approve this application
Member	Whitney Skylar	for exemption from audit.
4		Signed
		Date:
		My term Expires: May 2027
	Print Board Member's Name	ICary Wicker, attest I am a duly elected or appointed
Board		board member, and that I have personally reviewed and approve this application
Member	Cary Wicker	for exemption from audit.
5		Signed
		Date:
		My term Expires: May 2025
	Print Board Member's Name	I, attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from audit.
6		Signed
		Date:
	B: (B M N	My term Expires:
	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Board		exemption from audit.
Member		·
7		Signed
		Date: My term Expires:
		my term expires



CliftonLarsonAllen LLP 8390 East Crescent Parkway, Suite 300 Greenwood Village, CO 80111 phone 303-779-5710 fax 303-779-0348 claconnect.com

Accountant's Compilation Report

Board of Directors
Jones Metropolitan District No. 4
Arapahoe County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Jones Metropolitan District No. 4 as of and for the year ended December 31, 2023, 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 Jones Metropolitan District No. 4.

Greenwood Village, Colorado

Clifton Larson allen LA

February 23, 2024