# **APPLICATION FOR EXEMPTION FROM AUDIT**

# SHORT FORM

NAME OF GOVERNMENT
ADDRESS
Cherry Creek South Metropolitan District No. 6
8390 East Crescent Parkway
Suite 300
Greenwood Village, CO 80111-2814

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

**CONTACT PERSON** 

PHONE EMAIL Gigi Pangindian
303-779-5710
gigi.pangindian@claconnect.com

## **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: Gigi Pangindian

TITLE Accountant for the District

FIRM NAME (if applicable) CliftonLarsonAllen LLP

ADDRESS 8390 East Crescent Parkway, Suite 300, Greenwood Village, CO 80111-2814

PHONE 303-779-5710

| THORE  | 335 1.16 51.16                        |          |                                       |  |  |
|--|---------------------------------------|----------|---------------------------------------|--|--|
| PREPARER (SIGNATURE REQUIRED)  |                                       |          | DATE PREPARED                         |  |  |
| SEE ATTACHED ACCOUNTANT'S COMPILATION REPOR  | RT                                    | 3/9/2024 |                                       |  |  |
| Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types | GOVERNMENTAL (MODIFIED ACCRUAL BASIS) |          | 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# |                              | Description                           |                      | Round to nearest Dollar | Please use this  |
|-------|------------------------------|---------------------------------------|----------------------|-------------------------|------------------|
| 2-1   | Taxes: Proper                | y (report mills levied in Question 10 | -6)                  |                         | space to provide |
| 2-2   | Specifi                      | c ownership                           | \$                   | 25                      | any necessary    |
| 2-3   | Sales a                      | nd use                                | \$                   | ,                       | explanations     |
| 2-4   | Other (                      | specify):                             | \$                   | -                       |                  |
| 2-5   | Licenses and permits         |                                       | \$                   | -                       |                  |
| 2-6   | Intergovernmental:           | Grants                                | \$                   |                         |                  |
| 2-7   |                              | Conservation Trust Funds              |                      |                         |                  |
| 2-8   |                              | Highway Users Tax Funds               |                      |                         |                  |
| 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 services |                                       | \$                   | •                       |                  |
| 2-15  | Debt proceeds                | (should agree with                    | line 4-4, column 2)  |                         |                  |
| 2-16  | Lease proceeds               |                                       | \$                   |                         |                  |
| 2-17  | Developer Advances receive   |                                       | agree with line 4-4) |                         |                  |
| 2-18  | Proceeds from sale of capit  | al assets                             | \$                   |                         |                  |
| 2-19  | Fire and police pension      |                                       | \$                   | <u> </u>                |                  |
| 2-20  | Donations                    |                                       | \$                   | •                       |                  |
| 2-21  | Other (specify):             |                                       | \$                   |                         |                  |
| 2-22  |                              |                                       | \$                   |                         |                  |
| 2-23  |                              |                                       | \$                   | -                       |                  |
| 2-24  |                              | (add lines 2-1 through 2-23) TO       | TAL REVENUE \$       | 296                     |                  |

## **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   | i morade rand equity inform  | Round to nearest Dollar | F   | Please use this  |
|-------|---|------------------------------|-------------------------|-----|------------------|
| 3-1   | Administrative  |                              | \$                      | _ 5 | space to provide |
| 3-2   | Salaries  |                              | \$                      | _   | any necessary    |
| 3-3   | Payroll taxes   |                              | \$                      | - 6 | 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                | (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): Transfers to Town of Parker            |                              | \$                      | 22  |                  |
| 3-24  | Transfers to Cherry Creek South Metropolitan District N | lo. 5                        |                         | 270 |                  |
| 3-25  | County Treasurer's Fees                                 |                              | \$                      | 4   |                  |
| 3-26  | (add lines 3-1 through 3-24) TOTAL EXPEN                | DITURES/EXPENSES             | \$                      | 296 |                  |

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>".

|            | DART 4 DERT CUTCTANDING   | <u> </u> | 201155         |         | ND D         |         | .=-          |        |           |
|------------|---|----------|----------------|---------|--------------|---------|--------------|--------|-----------|
|            | PART 4 - DEBT OUTSTANDING   | i, K     | SSUEL          | ), ₽    | MD KI        | 3 I III | くヒレ          |        |           |
|            | Please answer the following questions by marking the  | approp   | oriate boxes.  |         |              |         | Yes          |        | No        |
| 4-1        | Does the entity have outstanding debt?  |          |                |         |              |         |              | Ŀ      | 7         |
| 4-2        | If Yes, please attach a copy of the entity's Debt Repayment S                                   |          |                |         |              |         |              | _      | 7         |
| 4-2        | Is the debt repayment schedule attached? If no, MUST explai The District currently has no debt. | n bei    | ow:            |         | _            | 1       |              | Ŀ      | 7         |
|            | The district currently has no debt.   |          |                |         |              |         |              |        |           |
| 4-3        | Is the entity current in its debt service payments? If no, MUS                                  | Гехр     | lain below     | :       |              | J       |              |        | 7         |
|            | N/A - see comments in 4-2   |          |                |         |              |         |              |        |           |
| 4-4        | Please complete the following debt schedule, if applicable:                                     |          |                |         |              |         |              |        |           |
|            | (please only include principal amounts)(enter all amount as positive                            |          | standing at    |         | ued during   |         | ed during    |        | ınding at |
|            | numbers)  | end d    | of prior year  |         | year         |         | year         | yea    | r-end     |
|            | General obligation bonds  | \$       | -              | \$      | -            | \$      | -            | \$     | -         |
|            | Revenue bonds   | \$       | -              | \$      | -            | \$      | -            | \$     | -         |
|            | Notes/Loans   | \$       | -              | \$      | -            | \$      | -            | \$     | -         |
|            | Lease & SBITA** Liabilities [GASB 87 & 96]  | \$       | -              | \$      | -            | \$      | -            | \$     |           |
|            | Developer Advances  | \$       | -              | \$      | -            | \$      | -            | \$     | -         |
|            | Other (specify):  | \$       | -              | \$      |              | \$      | -            | \$     |           |
|            | TOTAL   | \$       | -              | \$      |              | \$      | -            | \$     | -         |
| **Subscrip | tion Based Information Technology Arrangements  | *Mus     | t agree to pri | or 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?  |          |                |         |              |         | ✓            |        |           |
| If yes:    | How much?   | \$260    | 0,000,000 &    |         |              | ļ       |              |        |           |
|            | Date the debt was authorized:   |          | 11/2/2004      | & 5/5   | /2020        | ]       |              |        |           |
| 4-6        | Does the entity intend to issue debt within the next calendar                                   | year?    | )              |         |              | _       |              |        | <b>√</b>  |
| If yes:    | How much?   | \$       |                |         | -            | ]       |              |        |           |
| 4-7        | Does the entity have debt that has been refinanced that it is s                                 | till re  | sponsible      | for?    |              | -       |              |        | <b>√</b>  |
| If yes:    | What is the amount outstanding?   | \$       |                |         | -            | ]       |              |        |           |
| 4-8        | Does the entity have any lease agreements?  |          |                |         |              |         |              |        | <b>J</b>  |
| If yes:    | What is being leased?   |          |                |         |              | ]       |              |        |           |
|            | What is the original date of the lease?   |          |                |         |              |         |              |        |           |
|            | Number of years of lease?   |          |                |         |              |         |              |        | П         |
|            | Is the lease subject to annual appropriation?   | _        |                |         | _            | 1       |              |        |           |
|            | What are the annual lease payments?   | \$       | 40 00 -44      | h c r   | -            | ]       | tation if    | المامم |           |
|            | Part 4 - Please use this space to provide any explanations/con                                  | nmen     | its or attac   | n se    | parate doc   | umen    | tation, if n | eeaea  |           |
|            |   |          |                |         |              |         |              |        |           |

|           | PART 5 - CASH AND INVESTME  | NTS      |          |       |     |     |
|-----------|---|----------|----------|-------|-----|-----|
|           | Please provide the entity's cash deposit and investment balances.                 |          | An       | nount | Tot | al  |
| 5-1       | YEAR-END Total of ALL Checking and Savings Accounts                               |          | \$       | 375   |     |     |
| 5-2       | Certificates of deposit   |          | \$       | -     |     |     |
|           | Total Cash Deposits   |          |          |       | \$  | 375 |
|           | Investments (if investment is a mutual fund, please list underlying investments): |          |          |       |     | _   |
|           |   |          | <b>C</b> |       |     |     |
|           |   |          | \$       | -     |     |     |
| 5-3       |   |          | \$       | -     |     |     |
|           |   |          | \$       | -     |     |     |
|           | Tatal Investments   |          | \$       | -     | Φ.  |     |
|           | Total Investments   |          |          |       | \$  |     |
|           | Total Cash and Investments  |          |          |       | \$  | 375 |
|           | Please answer the following questions by marking in the appropriate boxes         | Yes      |          | No    | N/. | A   |
| 5-4       | Are the entity's Investments legal in accordance with Section 24-75-601, et.      | П        | г        | ٦     | 7   |     |
|           | seq., C.R.S.?   | ш        |          | _     | ت   |     |
| 5-5       | Are the entity's deposits in an eligible (Public Deposit Protection Act) public   |          | _        | _     |     |     |
|           | depository (Section 11-10.5-101, et seq. C.R.S.)?                                 | <b>√</b> | L        | _     |     |     |
| If no, Ml | JST use this space to provide any explanations:                                   |          |          |       |     |     |

|     | 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?  |  |  |           | <b>✓</b>            |
| 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                   |
|     | The District currently has no capital assets.   |  |  |           |                     |
| 6-3 | Complete the following capital & right-to-use assets table:   | Balance -<br>beginning of the<br>year* | Additions (Must<br>be included in<br>Part 3) | Deletions | Year-End<br>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 tip to prior ve                  | or anding halance                            |           |                     |

\*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  | TIO    | N       |     |    |
|---------|---|--------|---------|-----|----|
|         | 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?                    |        |         |     | 7  |
| 7-2     | Does the entity have a volunteer firefighters' pension plan?                      |        |         |     | 7  |
| 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                        | s or c | omments |     |    |
|         |   |        |         |     |    |

|         |  |                  | <u> </u>      |    |     |
|---------|--|------------------|---------------|----|-----|
|         | PART 8 - BUDGET I  | <b>NFORMA</b>    | ΓΙΟΝ          |    |     |
|         | Please answer the following questions by marking in the appropriate box  | es.              | 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 29-1-108 C.R.S.? If no, MUST explain:                                  | ce with Section  | V             |    |     |
|         |  |                  |               |    |     |
| If yes: | Please indicate the amount budgeted for each fund for the ye   | ar reported:     |               |    |     |
|         | Cavaramental/Drangiatory Frank Name  | Total Ammunuja   | tions By Fund |    |     |
|         | Governmental/Proprietary Fund Name   | Total Appropriat | lions by Fund |    |     |
|         | General Fund   | \$               | -             |    |     |
|         | Debt Service Fund  | \$               | 296           |    |     |
|         |  |                  |               |    |     |
|         |  |                  |               |    |     |
|         |  |                  |               |    |     |

|         | 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> | Ш  |
| If no M | UST overlain:   |          |    |

|                     | 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?  Date of formation:  |                 | V                         |
| If yes:<br>10-2     | Has the entity changed its name in the past or current year?   |                 | <b></b> ✓                 |
| If yes:             | Please list the NEW name & PRIOR name:   |                 |                           |
| 10-3                | Is the entity a metropolitan district? Please indicate what services the entity provides:  | ]<br>           |                           |
| <b>10-4</b> If yes: | Streets, Traffic Control, Water, Sewer, Parks and Recreation  Does the entity have an agreement with another government to provide services?  List the name of the other governmental entity and the services provided:                        | ]               | <b></b>                   |
| 10-5                | CCSMD No. 4 provides operational and administrative services to CCSMD Nos. 5 and 6.  Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during   |                 | <b></b>                   |
| If yes:             | Date Filed:  Does the entity have a certified Mill Levy?   |                 |                           |
| If yes:             | Please provide the following mills levied for the year reported (do not report \$ amounts):  |                 | _                         |
|                     | Bond Redemption mills General/Other mills Total mills  | Contractual Ob  | ligation 73.595<br>73.595 |
| 10-7                | NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has 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. | No I            | N/A                       |
|                     | Please use this space to provide any additional explanations or comments not previous  | busly 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? | 7   |    |

# 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 the            | names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must sign below.  |
|----------------------|---|--|
| Board                | Print Board Member's Name                             | I, Sarah Hunsche, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. |
| Member 1             | Sarah Hunsche   | Signed Sarah thursdu 3/19/2024  Date:  |
|                      | Print Board Member's Name                             | I, Kim Jensen, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.    |
| Board Member 2       | Kim Jensen  | Signed 3/20/2024  Date:  |
| Board                | Print Board Member's Name                             | I, Christopher Elliott, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from  |
| Member<br>3          | Christopher Elliot                                    | audit. Signed (Unitedur Elipt Date: STEASSBARFOLASS. 3/19/2024  My term Expires: May 2027  |
| Board                | Print Board Member's Name                             | I, Brian Trybus, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  |
| Member 4             | Brian Trybus  | Signed Date: My term Expires: May 2027   |
| Board<br>Member<br>5 | Print Board Member's Name                             | I  |
| Board<br>Member<br>6 | 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 exemption from audit.  Signed Date:  |
| Board<br>Member<br>7 | Print Board Member's Name                             | My term Expires:, 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 Date: 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 Cherry Creek South Metropolitan District No. 6 Douglas County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Cherry Creek South Metropolitan District No. 6 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 Cherry Creek South Metropolitan District No. 6.

Greenwood Village, Colorado

CliftonLarsonAllen LLP

March 9, 2024