STATE OF CALIFORNIA
MARKS-ROOS YEARLY FISCAL STATUS REPORT
FOR LOCAL OBLIGORS

California Debt and Investment Advisory Commission
915 Capitol Mall, Room 400, Sacramento, CA 95814
P.O. Box 942809, Sacramento, CA 94209-0001
Tel: (916) 653-3269 Fax (916) 654-7440

California Government Code Section 6599.1 requires that all issuers selling Marks-Roos bonds, which is part of the Marks-Roos Local Bond Pooling Act of 1985, after January 1, 1996 are required to report specific information to the Commission by October 30th of the current year and each year thereafter, until maturity.

I. GENERAL INFORMATION
A. Local Obligor Issuer
   Sacramento Redevelopment Agency
B. Name/ Title/ Series of Bond Issue
   2005 Loan Agreement
C. Project Name
   Oak Park
D. Date of Bond Issue/Loan
   11/17/2005
E. Original Principal Amount of Bonds/Loan
   $8,843,743.00
F. Reserve Fund Minimum Balance Required
   - Part of Authority Reserve Fund
   Yes X Amount: $2,935,550.00
   No
   - Percent of Reserve fund: 19.86%
   No
G. Name of Authority that purchased debt
   Sacramento City Financing Authority
H. Date of Authority Bond(s) Issuance
   11/17/2005

II. FUND BALANCE FISCAL STATUS
Balances Reported as of:
A. Principal Amount of Bonds/Loan Outstanding
   $1,863,743.20
B. Bond Reserve Fund
   $2,935,550.00
C. Capitalized Interest Fund
   $0.00
D. Administrative Fee Charged by Authority
   $124.05

III. DELINQUENT REPORTING INFORMATION
Have delinquent Taxes been reported:
   Yes X No
Delinquent Parcel Information Reported as of Equalized Tax Roll of:
A. Delinquency Rate
   2.91%
B. Does this Agency participate in the County’s Teeter Plan:
   Yes X No
C. Taxes Due
   $7,971,902.20
D. Taxes Unpaid
   $231,718.21

IV. ISSUE RETIRED
This issue is retired and no longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for retirement)
Matured
Redeemed/Repaid Entirely
Other
If Matured, indicate final maturity date:
If Redeemed/Repaid Entirely, state refunding bond title/ Loan, and CDIAC#:
and redemption/repayment date:
If Other:
and date:

V. NAME OF PARTY COMPLETING THIS FORM
Name
Claudia Lara
Title
Debt Analyst
Firm/ Agency
City of Sacramento
Address
915 I Street, HCH 3rd Floor
City/ State/ Zip
Sacramento, Ca 95814
Phone Number
(916) 808-2267
E-Mail
CTO_Debt@cityofSacramento.org
Date of Report
10/27/2021
VI. COMMENTS: