STATE OF CALIFORNIA
MARKS-ROOS YEARLY FISCAL STATUS
REPORT
FOR AUTHORITY ISSUE
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

Fiscal Year 2015

CDIAC # ______

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

I. GENERAL INFORMATION

	А.	Authority Issuer	Sacrame	ento C	ity Fin	ancing	Authority				
	В.	Name/Title/Series of Senior Issue:	Bond Issue Yes	_	ax Alloca	tion Rever		ries B (Merge	ed Downtown a	Ind Oak Pa	ark Projects)
	C.	Project Name	103				nd Oak Par				
	D.	Date of Bond Issuance 12/07/2005									
	E.	Original Principal An	nount of Bond	_{s \$} 46,	750,0	00.00					
	F.	Reserve Fund Minim	um Balance R	equired		Yes	Amount \$	14,777,	899.26*	🗆	No
	G.	Total Issuance Costs		rt Issuance	Costs on	y at initial	iling)				
II.	FU	JND BALANCE F	TISCAL ST	ATUS							
	Bal	ances reported as of	June 30, 20	015 (Year)							
	A. Principal Amount of Bonds Outstanding			_{\$} 36,	790,00	0.00					
	В.	B. Total Bond Reserve Fund			_{\$} 14,777,899.26*						
	В	Bond Reserve Cash <u>9</u>			Bond Reserve Surety Bond <u>14,777,899.26*</u>						
	C.	Capitalized Interest F	und		₅n/a						
TTT	A T		NCLAT IN	TODM		T					

III. AUTHORITY FINANCIAL INFORMATION

A. Fees Paid for Professional Services (Annual Totals)

1. Type of Service	2. Amount of Fees	
Trustee Services	_{\$} 2,100.00*	
	\$	
	\$	
	\$	
	s	

Add sheet, if necessary

B. Local Obligor

1. Issuer/Borrower	2. Bond Purchase (BP)	3. Original Amount of Purchase/	4. Administration Fee	
	or Loan (L)	Loan (from Authority Issue)	(Charged to LOB) this FY	
Sacramento City Financing Authority/Redevelopment Agency of the City of \$	L	_{\$} 83,528,492.55	_{\$} 1,857.10**	
Sacramento City Financing Authority/Redevelopment Agency of the City of \$	L	_{\$} 8,843,743.20	_{\$} 242.90**	
		\$	\$	
		\$	\$	

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(Continued)

B. Redeemed Entirely I Yes X No If yes, state refunding bond title and CDIAC #:and redemption date:and redemption date: C. Otherand date V. NAME OF PARTY COMPLETING THIS FORM NAMECoin Bettis TITLE TITLE TITLE FIRM/AGENCY Sacramento City Financing Authority ADDRESS ADDRESS GITY/STATE/ZIP CODE GITY/STATE/ZIP CODE PHONE DATE OF REPORT EMAIL Cettris@city/fsacramento.org TIB. Data are combined for Saries A8B "TIB. Data are combined for Saries A8B	C. Investment Contracts
2. Commission/Fee for Contract Total \$ na 3. Interest Earnings on Contract Current \$ na D. Are the taxes paid under the County's Teeter Plan? > Yes No IV. ISSUE RETIRED This issue is retired and no longer subject to the Yearly Fiscal Status filing requirements. (Indicate reason for retirement.) A. Matured Yes No If yes, indicate final maturity date: B. Redeemed Entirely Yes No If yes, state refunding bond title and CDLAC #:	
3. Interest Earnings on Contract Current \$	b. Other (see Guidelines for explanation)
3. Interest Earnings on Contract Current \$ via D. Are the taxes paid under the County's Teeter Plan? ∑ Yes No IV. ISSUE RETIRED This issue is retired and no longer subject to the Yearly Fiscal Status filing requirements. (Indicate reason for retirement.) A. Matured Yes No If yes, indicate final maturity date: B. Redeemed Entirely Yes No If yes, state refunding bond title and CDIAC #:	
D. Are the taxes paid under the County's Teeter Plan? X Yes No IV. ISSUE RETIRED This issue is retired and no longer subject to the Yearly Fiscal Status filing requirements. (Indicate reason for retirement.) A. Matured Yes No B. Redeemed Entirely Yes No B. Redeemed Entirely Yes No If yes, state refunding bond title and CDIAC #:	2. Commission/Fee for Contract Total \$
IV. ISSUE RETIRED This issue is retired and no longer subject to the Yearly Fiscal Status filing requirements. (Indicate reason for retirement.) A. Matured Yes B. Redeemed Entirely Yes B. Redeemed Entirely Yes and redemption date:	3. Interest Earnings on Contract Current \$
This issue is retired and no longer subject to the Yearly Fiscal Status filing requirements. (Indicate reason for retirement.) A. Matured Pression No If yes, indicate final maturity date: B. Redeemed Entirely Yes No If yes, state refunding bond title and CDIAC #:	D. Are the taxes paid under the County's Teeter Plan? X Yes No
A. Matured Yes No If yes, indicate final maturity date: B. Redeemed Entirely Yes No If yes, state refunding bond title and CDIAC #	IV. ISSUE RETIRED
B. Redeemed Entirely I Yes X No If yes, state refunding bond title and CDIAC #:and redemption date:and redemption date: C. Otherand date V. NAME OF PARTY COMPLETING THIS FORM NAMECoin Bettis TITLE TITLE TITLE FIRM/AGENCY Sacramento City Financing Authority ADDRESS ADDRESS GITY/STATE/ZIP CODE GITY/STATE/ZIP CODE PHONE DATE OF REPORT EMAIL Cettris@city/fsacramento.org TIB. Data are combined for Saries A8B "TIB. Data are combined for Saries A8B	This issue is retired and no longer subject to the Yearly Fiscal Status filing requirements. (Indicate reason for retirement.)
C. Other and date V. NAME OF PARTY COMPLETING THIS FORM NAME Colin Bettis TITLE Debt Analyst FIRM/AGENCY Sacramento City Financing Authority ADDRESS 015 1 Street, HCH 3rd Floor CITY/STATE/ZIP CODE Sacramento, CA 95814 PHONE 016-00000000000000000000000000000000000	
V. NAME OF PARTY COMPLETING THIS FORM NAME	and redemption date:
NAME Colin Bettis TITLE Debt Analyst FIRM/AGENCY Sacramento City Financing Authority ADDRESS 915 I Street, HCH 3rd Floor CITY/STATE/ZIP CODE Sacramento, CA 95814 PHONE 916-808-8292 DATE OF REPORT EMAIL cbettis@cityofsacramento.org VI. COMMENTS: ************************************	C. Other and date
FIRM/AGENCY Sacramento City Financing Authority ADDRESS 915 Street, HCH 3rd Floor CITY/STATE/ZIP CODE Sacramento, CA 95814 PHONE 916-808-8292 DATE OF REPORT 10/28/2015 EMAIL cbettis@cityofsacramento.org VI. COMMENTS: *I.F. Data are combined for Series A&B *II.B. Data are combined for Series A&B *II.A. Data are combined for Series A&B	
ADDRESS 915 I Street, HCH 3rd Floor CITY/STATE/ZIP CODE Sacramento, CA 95814 PHONE 916-808-8292 DATE OF REPORT 10/28/2015 EMAIL cbettis@cityofsacramento.org VI. COMMENTS: *1.F. Data are combined for Series A&B *1I.B. Data are combined for Series A&B *1I.A. Data are combined for Series A&B *1I.A. Data are combined for Series A&B	TITLE Debt Analyst
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*III.A. Data are combined for Series A&B	*I.F. Data are combined for Series A&B
*III.B. Data are combined for Series A&B	
	*III.B. Data are combined for Series A&B
**III.B. The Trustee Fees are split by proportion of outstanding debt at the prior year end.	**III.B. The Trustee Fees are split by proportion of outstanding debt at the prior year end.

Preparer_CB_ Reviewer _____