Submitted:

Thursday, October 22, 2020 4:36:54PM CDIAC #: 2014-2105

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 For Office Use Only

Fiscal Year

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	Riverside Unified School District CFD No 21				

B. Name/ Title/ Series of Bond Issue	2015 Special Tax Ref Bonds			
C. Project Name	IA No 2, Alicante			
 D. Date of Bond Issue/Loan E. Original Principal Amount of Bonds/Loa F. Reserve Fund Minimum Balance Requested Part of Authority Reserve Fund G. Name of Authority that purchased debits H. Date of Authority Bond(s) Issuance 	ired Yes Amount: \$0.00 Yes X Percent of Reserve fund: 7.30%	lo X lo 🗌		
Balances Reported as of : A. Principal Amount of Bonds/Loan Outst B. Bond Reserve Fund C. Capitalized Interest Fund D. Administrative Fee Charged by Author	\$0.00 \$0.00 ity \$0.00			
III. DELINQUENT REPORTING INFORMATION	UN			

Delinquent Parcel Informatio	10/8/2020				
A. Delinquency Rate	2.31%				
B. Does this Agency participate in the County's Teeter Plan:				No	Х
C. Taxes Due	\$186,547.20				
D. Taxes Unpaid	\$4,304.26				

Yes

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IV. ISSUE RETIRED

This issue	is retired	and no longer subject to the	Yearly	Fiscal	Status	report filing requirements.	(Indicate reason for retirem	ent)
Matured		Redeemed/Repaid Entirely		Other				

No

If Matured, indicate final maturity date:

Have delinquent Taxes been reported:

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	Nehal Thumar
Title	Vice President
Firm/ Agency	DTA
Address	5000 Birch Street, Suite 3000
City/ State/ Zip	Newport Beach, CA 92660
Phone Number	(949) 955-1500
E-Mail	nehal@financedta.com

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VI. COMMENTS: