Submitted:

6:11:44PM

Thursday, October 28, 2021

CDIAC #: 2016-3898

STATE OF CALIFORNIA **MELLO-ROOS COMMUNITY FACILITIES DISTRICT (CFD)**

YEARLY FISCAL STATUS REPORT

California Debt and Investment Advisory Commission

915 Capitol Mall, Room 400, Sacramento, CA 95814 P.O. Box 942809, Sacramento, CA 94209-0001

(916) 653-3269 Fax (916) 654-7440

I.	GFN	ERAL	INFC)RMA	MOIT
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Poway Unified School District CFD No 10 A. Issuer

IA A Torrey Highlands - Subarea IV B. Project Name

2017 Spec Tax Ref Bonds C. Name/ Title/ Series of Bond Issue

D. Date of Bond Issue 1/10/2017

E. Original Principal Amount of Bonds \$7,030,000.00

F. Reserve Fund Minimum Balance Required Amount \$0.00

II. FUND BALANCE FISCAL STATUS

6/30/2021 Balances Reported as of:

\$5,645,000.00 A. Principal Amount of Bonds Outstanding

\$0.00 B. Bond Reserve Fund

\$0.00 C. Capitalized Interest Fund

D. Construction Fund(s) \$0.00

III. ASSESSED VALUE OF ALL PARCELS IN CFD SUBJECT TO SPECIAL TAX

1/1/2021 A. Assessed or Appraised Value Reported as of:

From Equalized Tax Roll

From Appriasal of Property

(Use only in first year or before annual tax roll billing commences)

\$340.919.895.00 B. Total Assessed Value of All Parcels

IV. TAX COLLECTION INFORMATION

\$1,080,059.96 A. Total Amount of Special Taxes Due Annually

B. Total Amount of Unpaid Special Taxes Annually \$0.00

Ν C. Does this agency participiate in the County's Teeter Plan?

V. DELINQUENT REPORTING INFORMATION

Delinquent Parcel Information Reported as of Equalized Tax Roll of: 10/11/2021

A. Total Number of Delinquent Parcels:

\$0.00 B. Total Amount of Taxes Due on Delinquent Parcels:

(Do not include penalties, penalty interest, etc.)

VI. FORECLOSURE INFORMATION FOR FISCAL YEAR

(Aggregate totals, if foreclosure commenced on same date) (Attach additional sheets if necessary.)

Date Foreclosure Commenced	Total Number of Foreclosure Parcels	Total Amount of Tax Due on Foreclosure Parcels
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00

For Office Use Only Fiscal Year

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VII. ISSUE RETIRED

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iscal Year

(Indicate reason for retirement)					
Matured Redeemed Entirely Other					
If Matured, indicate final maturity date:					
If Redeemed Entirely, state refunding bond title & CDIAC #:					
and redemption date:					
If Other:					
and date:					
VIII. NAME OF PARTY COMPLETING THIS FORM					
VIII. IAMIL OF TAKEE COMELLETING THIS FORM					

Nehal Thumar Name Title Vice President

DTA Firm/ Agency

5000 Birch Street, Suite 3000 Address

Newport Beach, CA 92660 City/ State/ Zip

Phone Number (949) 955-1500 Date of Report 10/28/2021

nehal@financedta.com E-Mail

IX. ADDITIONAL COMMENTS: