Form **8038-G** (Rev. September 2011)

Department of the Treasury Internal Revenue Service

Information Return for Tax-Exempt Governmental Obligations

► Under Internal Revenue Code section 149(e)
 ► See separate instructions.

Caution: If the issue price is under \$100,000, use Form 8038-GC.

OMB No. 1545-0720

Pa	rt I Reporting Autho	If Amended R	If Amended Return, check here ▶ □				
1	Issuer's name		2 Issuer's emp	2 Issuer's employer identification number (EIN)			
3a	Name of person (other than issuer) with whom the IRS may communica	3b Telephone no	umber of other person shown on 3a			
4	Number and street (or P.O. box if	mail is not delivered to street address	s)	Room/suite	e 5 Report numl	per (For IRS Use Only)	
						3	
6	City, town, or post office, state, ar	d ZIP code			7 Date of issue)	
8	Name of issue				9 CUSIP numi	per	
10a	Name and title of officer or other einstructions)		10b Telephone number of officer or other employee shown on 10a				
Par	Type of Issue (er	nter the issue price). See	the instructions and	attach so	chedule.		
11						11	
12	Health and hospital .					12	
13	•					13	
14	•					14	
15		ewage bonds)				15	
16	· · · · · · · · · · · · · · · · · · ·					16	
17						17	
18	Other. Describe ▶					18	
19	If obligations are TANs o	r RANs, check only box 19a			▶ 🗆		
	If obligations are BANs,	check only box 19b			🕨 🗀		
20		orm of a lease or installment					
Dor	t III Description of O	bligations Complete for	the entire issue for	which th	nia form ia boing	filed	
Par	Description of O	bligations. Complete for				illea.	
	(a) Final maturity date	(b) Issue price	(c) Stated redempt price at maturity		(d) Weighted average maturity	(e) Yield	
21		\$	\$		years	9	
Par	t IV Uses of Proceed	ls of Bond Issue (includi	ng underwriters'	discount	t)		
22	Proceeds used for accru					22	
23	•	e (enter amount from line 21,	. ,,			23	
24		ssuance costs (including unde		. 24			
25	Proceeds used for credit	enhancement		. 25			
26	Proceeds allocated to re-	asonably required reserve or	replacement fund				
27	Proceeds used to curren	tly refund prior issues		. 27			
28	Proceeds used to advan	•		. 28			
29	Total (add lines 24 throug					29	
30		of the issue (subtract line 29				30	
Par		efunded Bonds. Complet	· · · · · · · · · · · · · · · · · · ·				
31		hted average maturity of the		-		years	
32	0 0	hted average maturity of the				years	
33	Enter the last date on wh	nich the refunded bonds will l	be called (MM/DD/Y)	YYY)			
34	Enter the date(s) the refu	nded bonds were issued ► (I	MM/DD/YYYY)				

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Part	VI M	liscellaneous									
35	Enter tl	ne amount of the state volume cap all	ocated to the issue under section 14	1(b)(5)		35					
36a	Enter tl	ne amount of gross proceeds invested	contract								
	(GIC) (s	ee instructions)	[36a							
b	Enter tl	ne final maturity date of the GIC ►									
С	Enter th	ne name of the GIC provider $ ightharpoonup$									
37	Pooled	financings: Enter the amount of the	ike loans								
		r governmental units	L	37							
38a	🛾 If this issue is a loan made from the proceeds of another tax-exempt issue, check box 🕨 🗌 and enter the following inform										
b	b Enter the date of the master pool obligation ▶										
С		ne EIN of the issuer of the master poo				_					
d	Enter the name of the issuer of the master pool obligation ▶										
39	If the issuer has designated the issue under section 265(b)(3)(B)(i)(III) (small issuer exception), check box										
40	If the issuer has elected to pay a penalty in lieu of arbitrage rebate, check box										
41a		suer has identified a hedge, check he		rmation:							
b	Name o	of hedge provider ►									
C	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
	d Term of hedge ►										
42	· · · · · · · · · · · · · · · · · · ·										
43 If the issuer has established written procedures to ensure that all nonqualified bonds of this											
		according to the requirements under the Code and Regulations (see instructions), check box									
44											
45a						amount					
of reimbursement ▶											
b	Enter ti										
Signa	ature	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that I consent to the IRS's disclosure of the issuer's return information, as necessary to									
and		process this return, to the person that I have authorized above.									
Cons	ent			k							
		Signature of issuer's authorized representa	tive Date	Type or p	rint name and	title					
Daid		Print/Type preparer's name	Preparer's signature	Date		T if PTIN					
Paid Preparer Use Only						mployed					
		Firm's name			Firm's EIN ▶						
		Firm's address ▶	Phone no.								
						2222					

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