

TY2025 Form 8038-CP MeF ATS Scenario 7
EIN: 00-9000006

Forms Required: 8038-CP

Attachment: AmendedReturnChanges2

PreparerFirmGrp

PreparerFirmEIN – 00-5000002

PreparerFirmName – Hatch Accountancy Services

PreparerFirmUSAddress – 123 Jefferson Avenue, Bedford Falls, NY 10507

MultSoftwarePackagesUsedInd -- no

OriginatorGrp

EFIN – as assigned

OriginatorTypeCd – ERO

PractitionerPINGrp

EFIN – as assigned

PIN – 15512

PinEnteredByCd – ERO or N/A for Online Filer

SignatureOptionCd – Pin Number or Binary Attachment 8453 Signature Document

ReturnTypeCd – 8038CP

TaxPeriodEndDt – 12/31/2025

Filer

EIN – 00-9000006

BusinessName – Anytown

BusinessNameControlTxt -- ANYT

USAddress – 123 Street, No Town, GA 30308

IssuerSignatureGrp

PersonNm – George Bailey

PersonTitleTxt -- President

PhoneNum – 518-555-1212

EmailAddressTxt --

SignatureDt – self-select

TaxpayerPIN – self-select

TY2025 8038-CP MeF ATS Scenario 7 cont.

PreparerPersonDetail

PreparerPersonNm – Jane YYY

PTIN – P900000009

PhoneNum – 404-111-0000

EmailAddressTxt --

PreparationDt – self select

SelfEmployedInd – Y

SigningOfficerGrp

PersonFirstNm - John

PersonLastNm - XYZ

SSN – 111-00-1111

IRSResponsiblePrtyInfoCurrInd -- Y

binaryAttachmentCnt – 0

Return for Credit Payments to Issuers of Qualified Bonds

OMB No. 1545-0047

► Go to www.irs.gov/Form8038CP for instructions and the latest information.

| | |
|---------------|---|
| Part I | Information on Entity That Is To Receive Payment |
|---------------|---|

Check if **Amended Return** (see instructions) ☐

| | | | |
|---|---|---|--|
| 1 | Name of entity that is to receive payment of the credit | 2 | Employer identification number (EIN) |
| 3 | Number and street (or P.O. box no. if mail is not delivered to street address) | | Room/suite |
| 4 | City, town, or post office; state; and ZIP code | | |
| 5 | Name and title of designated contact person whom the IRS may contact for more information | 6 | Telephone number of contact person shown on line 5 |

Part II Reporting Authority

| | | |
|--|------------|---|
| 7 Issuer's name (if same as line 1, enter "SAME" and skip lines 8, 9, 11, 15, and 16) | | 8 EIN |
| 9 Number and street (or P.O. box no. if mail is not delivered to street address) | Room/suite | 10 Report number (see instructions) <div> <div></div> <div></div> <div></div> </div> |
| 11 City, town, or post office; state; and ZIP code | | 12 Date of issue (MM/DD/YYYY) |
| 13 Name of issue | | 14 CUSIP number (see instructions) |
| 15 Name and title of officer or other person whom the IRS may contact for more information | | 16 Telephone number of contact person shown on line 15 |

| | | | | | |
|------------|--|----------|-----------------------|------------|--|
| 17a | Check applicable box (see instructions) <input type="checkbox"/> Variable rate bond <input type="checkbox"/> Fixed rate bond | b | Enter the issue price | 17b | |
| c | Enter code number for type of bonds (see instructions) | | | | |

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| Part III | Payment of Credit (For specified tax credit bonds with multiple maturities, see instructions.) |
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|------------|---|--|
| 18 | Interest payment date to which this payment of credit relates (MM/DD/YYYY) | |
| 19a | Interest payable to bondholders on the interest payment date. See instructions | 19a |
| b | For specified tax credit bonds only, enter the applicable credit rate determined under sec. 54A(b)(3) <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> % | |
| c | For specified tax credit bonds only, complete Schedule A and enter amount from Schedule A, line 3 | 19c |
| 20 | Amount of credit allowed for the interest payment date (complete only line 20a, 20b, 20c, 20d, 20e, or 20f) | |
| a | Build America bonds. Multiply line 19a by 35% (0.35) | 20a |
| b | Recovery zone economic development bonds. Multiply line 19a by 45% (0.45) | 20b |
| c | New clean renewable energy bonds, enter the smaller of lines 19a or 19c | 20c |
| d | Qualified energy conservation bonds, enter the smaller of lines 19a or 19c | 20d |
| e | Qualified zone academy bonds, enter the smaller of lines 19a or 19c | 20e |
| f | Qualified school construction bonds, enter the smaller of lines 19a or 19c | 20f |
| 21 | Adjustment to previous credit payments (complete line 21a OR line 21b only): | |
| a | Net increase to previous payments | 21a |
| b | Net decrease to previous payments | 21b |
| c | Enter explanation code for lines 21a or 21b (see instructions) <input type="text"/> <input type="text"/> <input type="text"/> | |
| 22 | Amount of credit payment requested. Combine either line 20a, 20b, 20c, 20d, 20e, or 20f with line 21a or line 21b | 22 |
| 23a | Has there been a change to the debt service schedule most recently filed with the IRS? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| b | If "Yes," enter the explanation code and attach the revised debt service schedule (see instructions) <input type="text"/> <input type="text"/> <input type="text"/> | |
| 24a | Have you paid or will you pay all the interest from line 19a on or before the date from line 18? See instructions | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| b | If "No," enter the explanation code (see instructions). <input type="text"/> <input type="text"/> <input type="text"/> | |
| 25 | Is this return submitted for the final interest payment date for the bonds? | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| | | | | | | | | | | | | | | | | | |
|-----------------------|-----------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Direct Deposit | 26 | Enter direct deposit information below: | | | | | | | | | | | | | | | |
| | a | Routing number | | | | | | | | Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings | | | | | | | |
| | c | Account number | | | | | | | | | | | | | | | |

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|----------------------|---|
| Signature and | 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 authorize the IRS to send the requested refundable credit payment to the entity identified in Part I, and I consent to the disclosure of the issuer's return information, as necessary to process the refundable credit payment, to the designated contact person(s) listed above in Parts I and II, as applicable. |
|----------------------|---|

Signature of issuer _____ **Date** _____ **Type or print name and title** _____

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|---------------------------------------|----------------------------|----------------------|------|---|------|
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| | Firm's name ▶ | | | Firm's EIN ▶ | |
| | Firm's address ▶ | | | Phone no. | |

Issuer's name: Anytown

EIN: 00-9000006

Interest payment date: 12/31/2025

Report number: 401

Explanation for Amended Return

AmendedReturnChanges2 (Part I, Amended Return Checkbox):

| Part Number | Line Number | Amount on previous return | Amount on amended return | Explanation |
|-------------|-------------|---------------------------|--------------------------|--|
| Part III | 20b | 458,000.00 | 459,000.40 | Typo. The actual amount on the previous return is 458,000.00. The actual amount on the amended return is 459,000.40. |
| Part III | 22 | 458,000.00 | 459,000.40 | Typo. The actual amount on the previous return is 458,000.00. The actual amount on the amended return is 459,000.40. |