

TY2026 Form 8038-CP MeF ATS Scenario 6
EIN: 00-9000005

Forms Required: 8038-CP

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 – 12/31/2026

Filer

EIN – 00-9000005

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

TY2026 8038-CP MeF ATS Scenario 6 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

Form **8038-CP**(Rev. January 2022)
Department of the Treasury
Internal Revenue Service**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 <u>ABC Bank</u>		2 Employer identification number (EIN) <u>00-5000001</u>
3 Number and street (or P.O. box no. if mail is not delivered to street address) <u>789 Street</u>		Room/suite
4 City, town, or post office; state; and ZIP code <u>Some Town, GA 30308</u>		
5 Name and title of designated contact person whom the IRS may contact for more information <u>Jeff Turner, Director</u>		6 Telephone number of contact person shown on line 5 <u>(518) 555-2323</u>

Part II Reporting Authority

7 Issuer's name (if same as line 1, enter "SAME" and skip lines 8, 9, 11, 15, and 16) <u>Anytow</u>		8 EIN <u>00-9000005</u>
9 Number and street (or P.O. box no. if mail is not delivered to street address) <u>123 Street</u>	Room/suite	10 Report number (see instructions) <u>4 0 1</u>
11 City, town, or post office; state; and ZIP code <u>No Town, GA 30308</u>		12 Date of issue (MM/DD/YYYY) <u>12/31/2017</u>
13 Name of issue <u>Qualif Energy Conserv Bnd, Series A</u>		14 CUSIP number (see instructions) <u>None</u>
15 Name and title of officer or other person whom the IRS may contact for more information <u>George Bailey, President</u>		16 Telephone number of contact person shown on line 15 <u>(518) 555-1212</u>
17a Check applicable box (see instructions) ► <input checked="" type="checkbox"/> Variable rate bond <input type="checkbox"/> Fixed rate bond		b Enter the issue price ► <u>17b</u> <u>10,000,000.00</u>
c Enter code number for type of bonds (see instructions) <u>1 1 0</u>		

Part III Payment of Credit (For specified tax credit bonds with multiple maturities, see instructions.)

18 Interest payment date to which this payment of credit relates (MM/DD/YYYY)	<u>12/31/2026</u>	
19a Interest payable to bondholders on the interest payment date. See instructions		<u>1,020,000.00</u>
b For specified tax credit bonds only, enter the applicable credit rate determined under sec. 54A(b)(3) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> %		
c For specified tax credit bonds only, complete Schedule A and enter amount from Schedule A, line 3		
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)		
b Recovery zone economic development bonds. Multiply line 19a by 45% (0.45)		<u>459,000.00</u>
c New clean renewable energy bonds, enter the smaller of lines 19a or 19c		
d Qualified energy conservation bonds, enter the smaller of lines 19a or 19c		
e Qualified zone academy bonds, enter the smaller of lines 19a or 19c		
f Qualified school construction bonds, enter the smaller of lines 19a or 19c		
21 Adjustment to previous credit payments (complete line 21a OR line 21b only):		
a Net increase to previous payments		
b Net decrease to previous payments		
c Enter explanation code for lines 21a or 21b (see instructions) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
22 Amount of credit payment requested. Combine either line 20a, 20b, 20c, 20d, 20e, or 20f with line 21a or line 21b		<u>459,000.00</u>
23a Has there been a change to the debt service schedule most recently filed with the IRS?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
b If "Yes," enter the explanation code and attach the revised debt service schedule (see instructions) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
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 checked="" type="checkbox"/> No <input type="checkbox"/>	
b If "No," enter the explanation code (see instructions) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
25 Is this return submitted for the final interest payment date for the bonds?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Direct Deposit	26 Enter direct deposit information below:	
	a Routing number <u>0 1 2 3 4 5 6 7 2</u>	b Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
	c Account number <u>4 0 5 2 5 3 7 6</u>	

Signature and Consent 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	<u>George Bailey, President</u> Type or print name and title
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Paid Preparer Use Only	Print/Type preparer's name <u>Jane YYY</u>	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN <u>P90000009</u>
	Firm's name ► <u>Hatch Accountancy Services</u>			Firm's EIN ► <u>00-5000002</u>	
	Firm's address ► <u>123 Jefferson Avenue, Bedford Falls, NY 10507</u>			Phone no. <u>404-111-0000</u>	

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 52810E

Form **8038-CP** (Rev. 1-2022)