

**Information Return for Tax Credit Bonds
and Specified Tax Credit Bonds**► Under Internal Revenue Code section 149(e)
► See separate instructions.

OMB No. 1545-2160

Part I Reporting AuthorityCheck if Amended Return ☐

1 Issuer's name	2 Issuer's employer identification number (EIN)
3 Name of person (other than the issuer) with whom the IRS may communicate about this return (See instructions.)	4 Report number (For IRS Use Only) [] [] []
5 Number and street (or P.O. Box if mail is not delivered to street address)	
6 City, town, or post office, state, and ZIP code	7 Date of issue (MM/DD/YYYY) / /
8 Name of issue	9 CUSIP number
10 Name and title of officer of issuer whom the IRS may call for more information (See instructions.)	11 Telephone number of officer or other person

Part II Type of Issue

1 Tax Credit Bond Code (See instructions, enter three digit code for the type of issue)	► [] [] []
2 Description: _____	
3 Has the issuer made an irrevocable election to apply section 6431(f)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
4 Enter the first interest payment date (MM/DD/YYYY) ► _____ / _____ / _____	
5 Interest payment date frequency (Check box; see instructions and attach debt service schedule):	
a <input type="checkbox"/> annual,	
b <input type="checkbox"/> semi-annual,	
c <input type="checkbox"/> quarterly,	
d <input type="checkbox"/> monthly, or	
e <input type="checkbox"/> other	
f If line 5e above is checked, please describe the payment frequency: _____	

Part III Description of Obligations

1 Issue price	1	
2 Stated redemption price at maturity	2	
3 Final maturity date (enter date MM/DD/YYYY) ► _____ / _____ / _____		
4 Applicable credit rate	4	[] [] [] [] [] [] %
5 Maximum term	5	[] [] [] [] [] [] years
6 Permitted Sinking Fund Yield	6	[] [] [] [] [] [] %
7 Enter the interest rate on the bonds	7	[] [] [] [] [] [] %
8 If the issue is a variable rate issue, check box 8a <input type="checkbox"/> Enter the frequency rates are reset 8b ► _____		

Part IV Proceeds of Issue (Including underwriters' discount)**Amount**

1 Sale Proceeds	1	
2 Proceeds used for bond issuance cost (including underwriters' discount)	2	
3 Estimated investment proceeds	3	
4 Expected available project proceeds (Subtract line 2 from line 1 and add line 3)	4	
5 Matching pledged funds	5	
6 Other (describe) ► _____	6	
7 Total proceeds (Add lines 4 through 6)	7	

Part V Description of Use of Proceeds for Qualified Purpose Expenditures**Amount**

1a Loans to qualified borrower(s)	1a	
b If a written loan commitment was obtained prior to issue date, check box <input type="checkbox"/>		
c Name of borrower ► _____		
d EIN of borrower ► _____ (Attach list if more than one)		
2 Land	2	
3 Buildings and structures	3	
4 Furniture or equipment with recovery period of more than 5 years	4	
5 Furniture or equipment with recovery period of 5 years or less	5	
6 Grants	6	
7 Demonstration projects	7	
8 Public education campaigns	8	
9 Repairs or other rehabilitation expenditures	9	

Description of Use of Proceeds for Qualified Purpose Expenditures (Continued)

10	Developing course materials and/or staff training expenditures	10	
11	Pay principal, interest, or premiums on qualified bonds	11	
12	Refinance a qualified indebtedness	12	
13	Other (describe) ▶ _____	13	
14	Total qualified purpose expenditures (Sum of lines 1a through 13)	14	
15	Percentage of total proceeds to be used for qualified purpose expenditures (Divide line 14 in Part V by line 7 in Part IV, multiply result by 100)	15	. %
16	If some portion of proceeds was used to reimburse issuer for amounts paid for a qualified purpose, enter the amount of reimbursement	16	
17	If some portion of proceeds was to reimburse issuer for amounts paid for a qualified purpose, enter the date the official intent was adopted (MM/DD/YYYY) ▶ / /	17	

Part VI Allocation of National, State, Tribal, or Local Bond Limitation Amount

(Enter source and amount of allocation and attach copy of certificate)

		Amount
1a	Volume cap allocation amount	1a
	Year of Allocation Amount of Carryforward	
b	National, check box ▶ <input type="checkbox"/> Local, check box ▶ <input type="checkbox"/>	
c	State, check box ▶ <input type="checkbox"/>	
d	Tribal, check box ▶ <input type="checkbox"/>	
2	If box 1c is checked, enter State abbreviation ▶ <input type="text"/>	

Part VII Miscellaneous

1	Arbitrage questions:
a	If there is a reserve or sinking fund that is expected to repay the issue at maturity, check box ▶ <input type="checkbox"/>
b	If 1a is checked and the reserve or sinking fund is funded in equal periodic installments, check box ▶ <input type="checkbox"/>
c	If either the funding of the reserve or sinking fund is expected to result in an amount greater than the amount necessary to repay the issue; or, if the yield on such fund is greater than the permitted sinking fund yield from line 6, Part III, check box ▶ <input type="checkbox"/>
d	If the issuer established written procedures to monitor the requirements of section 148 with respect to these bonds, check box ▶ <input type="checkbox"/>
2	If all federal, state, and local requirements governing conflicts of interest are satisfied with respect to this issue, check box ▶ <input type="checkbox"/>
3	If the entitlements to credits with respect to this bond issue are expected to be stripped, check box ▶ <input type="checkbox"/>
4	If the issuer established written procedures to ensure that all nonqualified bonds at the end of the applicable period are redeemed within 90 days, check box ▶ <input type="checkbox"/>
5	Other: ▶ <input type="checkbox"/>

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 consent to the IRS's disclosure of the issuer's return information, as necessary to process this return, to the person(s) that I have authorized above.

▶ _____ Date ▶ _____
Signature of issuer's authorized representative

Paid Preparer's Use Only Preparer's signature ▶ _____ Date _____ Check if self-employed ☐ Preparer's SSN or PTIN _____
Firm's name (or yours if self-employed), address, and ZIP code ▶ _____ EIN _____
Phone no. _____

Part VIII Consent to Disclosure of Certain Information from this Return

1	Does the issuer give the IRS consent to publish, through a website or in a publication, its name and address, employer identification number, name and description of bond issue, date of issuance, CUSIP number, issue price, final maturity date, stated redemption price at maturity, applicable credit rate, and maximum term, to assist in the proper reporting of interest, tax credits, or other benefits under IRC section 6049 and Regulations thereunder ▶ <input type="checkbox"/> Yes <input type="checkbox"/> No
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Under penalties of perjury, I declare that I am an officer of the above named issuer and that I am authorized to give consent on behalf of the above named issuer for the IRS to publish the items of information described in line 1 of Part VIII of this form to assist in the reporting obligations under IRC section 6049.

Sign Here ▶ _____ Date _____ ▶ _____
Signature

Issuer's name:

Issuer's employer identification number (EIN):

Schedule A

Schedule for New Clean Renewable Energy Bonds (New CREBs)

► Under Internal Revenue Code sections 54A and 54C

► See separate instructions.

Tax Credit Bond Code

102**Part I Issuer Questions**

		Yes	No
1	Is the issuer a public power provider?	1	
2	Is the issuer a cooperative electric company?	2	
3	Is the issuer a governmental body?	3	
4	Is the issuer a clean renewable energy bond lender?	4	
5	Is the issuer a not-for-profit electric utility which has received a loan/loan guarantee under the Rural Electrification Act?	5	
6	Have proceeds been used to acquire existing facilities? (See instructions.)	6	
7	Have proceeds been used to refinance existing facilities? (See instructions.)	7	
8	Is the issue date of the issue on or before the date that is 3 years after the volume cap allocation date? (See instructions.)	8	
9	Has the issuer designated these bonds as New CREBs for purposes of section 54C?	9	

Part II**Amount**

1	(For IRS Use Only)	1	
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Part III List of Qualified Renewable Energy Facilities

List the type of qualified renewable energy facilities (see instructions) to be financed by the bonds, the location, the owner of such facility, the owner's EIN, and the amount of available project proceeds to be used for that facility. (If more than one, attach schedule.)

Type of Facility: _____

Location of Facility: _____

Owner's Name: _____

Owner's EIN: _____

Amount of Available Project Proceeds \$: _____

Schedule B

Schedule for Qualified Energy Conservation Bonds (QECBs)

► Under Internal Revenue Code sections 54A and 54D

► See separate instructions.

Tax Credit Bond Code

103**Part I Issuer and Project Questions**

		Yes	No
1	Has the issuer designated these bonds as QECBs for purposes of section 54D?	1	
2	Has the allocation been reallocated from a large local government to a State?	2	
3	Is the issuer a large local government?	3	
4	Is the issuer an Indian tribal government?	4	
5	Are all proceeds to be used within the jurisdiction of the issuer?	5	
6	If the issuer issued the bonds based on a volume cap allocation received by another authorized entity (that allocated volume cap to the issue), check "Yes." If not, check "No." Provide the name of such authorized entity. Attach schedule if more than one entity's volume cap is used (See instructions.)	6	

Part II**Amount**

1	(For IRS Use Only)	1	
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Part III List of Conservation Purposes, Location of the Facilities, Amount of Proceeds Used for the Purpose, Private Activity User, and Private User's EIN.

- 1** List the type of qualified conservation purpose described under section 54D(f) financed with the proceeds of the bonds, the location of the facility financed with the proceeds of the bond, and the amount of available project proceeds to be used for the qualified conservation purpose. If the bonds are private activity bonds, provide the name and EIN of all private users. (If the issuer is issuing bonds for more than one purpose or facility attach schedule.)

Type of qualified conservation purpose: _____

Location of facility financed with bond proceeds: _____

Amount of proceeds to be used for this purpose \$: _____

Are the bonds private activity bonds? ► ☐ Yes ☐ No

If "Yes," provide the name and EIN of each private user _____

Issuer's name:

Issuer's employer identification number (EIN):

Schedule C**Schedule for Qualified Zone Academy Bonds (QZABs)**

► Under Internal Revenue Code sections 54A and 54E

► See separate instructions.

Tax Credit Bond Code

104**Part I Academy and Issuer Information**

		Yes	No
1	Is the school located in an empowerment zone?	1	
2	Is the school located in an enterprise community?	2	
3	Is it expected that at least 35% of students attending the school or program will be eligible for free or reduced-cost lunches under the school lunch program established by the National School Lunch Act?	3	
4	Was the comprehensive educational plan of the school or program approved by the eligible local education agency?	4	
5	Is a carryover of unused limitation being used for this issue? If "Yes," enter the year in which the limitation arose. (See instructions.) ►	5	
6	Are the bonds issued by a state or local government within the jurisdiction of which the academy is located?	6	
7	Does the issuer have written commitments from private business entities to make qualified private business contributions having a present value of not less than 10% of the proceeds of this issue?	7	
8	Was the bond issuance approved in writing by the eligible local education agency?	8	
9	Have these bonds been designated by the issuer as QZABs for purposes of section 54E?	9	
10	Enter the name of the eligible local education agency:	10	

Part II Description of the Private Business Contribution

(Enter the value of the amount of contribution in each type)

	Amount
1 Equipment	1
2 Technical assistance	2
3 Services of donor's employees as volunteers	3
4 Opportunities for students outside of the academy	4
5 Other:	5

Part III Private Business Contributor Information (Attach a schedule if more than five donors)

1a	Enter the name of the first donor: _____
b	Enter the EIN of the first donor: _____
2a	Enter the name of the second donor: _____
b	Enter the EIN of the second donor: _____
3a	Enter the name of the third donor: _____
b	Enter the EIN of the third donor: _____
4a	Enter the name of the fourth donor: _____
b	Enter the EIN of the fourth donor: _____
5a	Enter the name of the fifth donor: _____
b	Enter the EIN of the fifth donor: _____

Issuer's name:

Issuer's employer identification number (EIN):

Schedule D

Schedule for Qualified School Construction Bonds (QSCBs)

► Under Internal Revenue Code sections 54A and 54F

► See separate instructions.

Tax Credit Bond Code

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Part I Use of Proceeds		Yes	No
1	Are the proceeds to be used for an Indian school? (See instructions.)	1	
2	Are all proceeds to be used within the jurisdiction of the issuer?	2	
3	Have these bonds been designated as QSCBs by the issuer for purposes of section 54F?	3	
4	Are the proceeds of the issue to be spent on costs of acquisition of furniture or equipment? If the answer is "No," skip line 5	4	
5	Is such furniture or equipment to be used in portions of the public school facility being constructed, rehabilitated, or repaired with the proceeds of the issue?	5	
6	Are the proceeds of the issue to be spent on the costs of land acquisition? If the answer is "No," skip line 7	6	
7	Are proceeds of the issue also to be spent on the costs of construction of a public school facility on such land?	7	

Part II		Amount
1	(For IRS Use Only)	1

Part III Issuer Information (Does not apply to issuers that are Indian tribal governments.)

1 If the issuer of the bonds is not the local educational agency in the jurisdiction of which the public school facility is located, please provide the name of such local educational agency. Attach schedule if more than one. (See instructions.)

2 If the issuer issued the bonds based on a volume cap allocation received by another authorized entity (that allocated volume cap to the issue), provide the name of such authorized entity. Attach schedule if more than one entity's volume cap is used. (See instructions.)
