



NIXON PEABODY LLP
ATTORNEYS AT LAW

NIXONPEABODY.COM
@NIXONPEABODYLLP

Bruce M. Serchuk

Partner

T 202-585-8267

bserchuk@nixonpeabody.com

Nixon Peabody LLP
799 9th Street NW
Suite 500
Washington, DC 20001-4501
202-585-8000

August 19, 2019

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Internal Revenue Service Center
Ogden, Utah 84201

Town of Hempstead Local Development Corporation – Tax-Exempt Revenue
Refunding Bonds, Series 2019A (Circulo Real Property Holding
Corporation/Evergreen Charter School Project)

Ladies and Gentlemen:

Enclosed is the Form 8038 Information Return for Tax-Exempt Private Activity Bond
Issues, for the above-referenced issue.

Thank you for your attention to this matter.

Sincerely yours,

Bruce M. Serchuk

7015152000093939949

Information Return for Tax-Exempt Private Activity Bond Issues

(Under Internal Revenue Code section 149(e))

OMB No. 1545-0720

▶ See separate instructions.

▶ Go to www.irs.gov/Form8038 for instructions and the latest information.

Part I Reporting Authority Check if Amended Return

1 Issuer's name Town of Hempstead Local Development Corporation		2 Issuer's employer identification number 11-2798949	
3a Name of person (other than issuer) with whom the IRS may communicate about this return (see instructions)		3b Telephone number of other person shown on 3a	
4 Number and street (or P.O. box if mail is not delivered to street address) 350 Front Street, Second Floor		6 Report number (For IRS Use Only) 1 <input type="checkbox"/> <input type="checkbox"/>	
5 Room/suite		7 Date of issue (MM/DD/YYYY) 08/08/19	
8 City, town, or post office, state, and ZIP code Hempstead, New York 15530		9 CUSIP number 424682KN1	
10a Name and title of officer or other employee of the issuer whom the IRS may call for more information Frederick E. Parola, Executive Director		10b Telephone number of officer or other employee shown on 10a 516-489-3179	

Part II Type of Issue (Enter the issue price.)

	Issue Price
11 Exempt facility bond:	
a Airport (sections 142(a)(1) and 142(c))	11a
b Docks and wharves (sections 142(a)(2) and 142(c))	11b
c Water furnishing facilities (sections 142(a)(4) and 142(e))	11c
d Sewage facilities (section 142(a)(5))	11d
e Solid waste disposal facilities (section 142(a)(6))	11e
f Qualified residential rental projects (sections 142(a)(7) and 142(d)) (see instructions)	11f
Meeting 20-50 test (section 142(d)(1)(A)) <input type="checkbox"/>	
Meeting 40-60 test (section 142(d)(1)(B)) <input type="checkbox"/>	
Meeting 25-60 test (NYC only) (section 142(d)(6)) <input type="checkbox"/>	
Has an election been made for deep rent skewing (section 142(d)(4)(B))? <input type="checkbox"/> Yes <input type="checkbox"/> No	
g Facilities for the local furnishing of electric energy or gas (sections 142(a)(8) and 142(f))	11g
h Facilities allowed under a transitional rule of the Tax Reform Act of 1986 (see instructions)	11h
Facility type	
1986 Act section	
i Qualified enterprise zone facility bonds (section 1394) (see instructions)	11i
j Qualified empowerment zone facility bonds (section 1394(f)) (see instructions)	11j
k Other (see instructions)	11k
l Qualified public educational facility bonds (sections 142(a)(13) and 142(k))	11l
m Mass commuting facilities (sections 142(a)(3) and 142(c))	11m
n Qualified highway or surface freight transfer facilities (sections 142(a)(15) and 142(m))	11n
o Other (see instructions)	
p Local district heating or cooling facilities (sections 142(a)(9) and 142(g))	11p
q Other (see instructions)	11q
12a Qualified mortgage bond (section 143(a))	12a
b Other (see instructions)	12b
13 Qualified veterans' mortgage bond (section 143(b)) (see instructions) ▶	13
Check the box if you elect to rebate arbitrage profits to the United States <input type="checkbox"/>	
14 Qualified small issue bond (section 144(a)) (see instructions) ▶	14
Check the box for \$10 million small issue exemption <input type="checkbox"/>	
15 Qualified student loan bond (section 144(b))	15
16 Qualified redevelopment bond (section 144(c))	16
17 Qualified hospital bond (section 145(c)) (attach schedule—see instructions)	17
18 Qualified 501(c)(3) nonhospital bond (section 145(b)) (attach schedule—see instructions)	18
Check box if 95% or more of net proceeds will be used only for capital expenditures ▶ <input checked="" type="checkbox"/>	13,640,000.00
19 Nongovernmental output property bond (treated as private activity bond) (section 141(d))	19
20a Other (see instructions)	
b Reissuance (see instructions)	20b
c Other. Describe (see instructions) ▶	20c

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 49973K

Form 8038 (Rev. 9-2018)

Note to Line 8: Tax-Exempt Revenue Refunding Bonds, Series 2019A (Circulo Real Property Holding Corporation/Evergreen Charter School Project)

Part III Description of Bonds (Complete for the entire issue for which this form is being filed.)					
	(a) Final maturity date	(b) Issue price	(c) Stated redemption price at maturity	(d) Weighted average maturity	(e) Yield
21	12/01/44	\$ 13,640,000.00	\$ 13,640,000.00	17.1222 years	6.7883 %

Part IV Uses of Proceeds of Issue (including underwriters' discount)		Amount
22	Proceeds used for accrued interest	22 0.00
23	Issue price of entire issue (enter amount from line 21, column (b))	23 13,640,000.00
24	Proceeds used for bond issuance costs (including underwriters' discount)	24 237,969.63
25	Proceeds used for credit enhancement	25 0.00
26	Proceeds allocated to reasonably required reserve or replacement fund	26 1,136,771.26
27	Proceeds used to refund prior tax-exempt bonds. Complete Part VI	27 0.00
28	Proceeds used to refund prior taxable bonds. Complete Parts V and VI	28 12,232,475.98
29	Add lines 24 through 28	29 13,607,216.87
30	Nonrefunding proceeds (subtract line 29 from line 23, enter amount here, and complete Part V)	30 32,783.13

Part V Description of Property Financed		Amount			
Caution: Do not complete for qualified student loan bonds, qualified mortgage bonds, or qualified veterans' mortgage bonds.					
31 Type of Property Financed:					
a	Land	31a			
b	Buildings and structures	31b			
c	Equipment with recovery period of more than 5 years	31c			
d	Equipment with recovery period of 5 years or less	31d			
e	Other. Describe (see instructions) Issuer Fee, Title Insurance	31e 32,783.13			
32 North American Industry Classification System (NAICS) of the projects financed.					
a	NAICS Code	Amount of nonrefunding proceeds	c	NAICS Code	Amount of nonrefunding proceeds
b	813319	\$ 32,783.13	d		\$

Part VI Description of Refunded Bonds (Complete this part only for refunding bonds.)		
33	Enter the remaining weighted average maturity of the tax-exempt bonds to be refunded	years
34	Enter the remaining weighted average maturity of the taxable bonds to be refunded	9.2613 years
35	Enter the last date on which the refunded tax-exempt bonds will be called (MM/DD/YYYY)	08 / 08 / 2019
36	Enter the date(s) the refunded bonds were issued (MM/DD/YYYY)	03 / 07 / 2007

Part VII Miscellaneous	
37	Name of governmental unit(s) approving issue (see the instructions) Town Supervisor of the Town of Hempstead, New York, Hearing Date: 02/11/2019, Approval Date: 08/01/2019
38	Check the box if you have designated any issue under section 265(b)(3)(B)(i)(III) <input type="checkbox"/>
39	Check the box if you have elected to pay a penalty in lieu of arbitrage rebate <input type="checkbox"/>
40a	Check the box if you have identified a hedge and enter the following information <input type="checkbox"/>
b	Name of hedge provider
c	Type of hedge
d	Term of hedge
41	Check the box if the hedge is superintegrated <input type="checkbox"/>
42a	Enter the amount of gross proceeds invested or to be invested in a guaranteed investment contract (GIC)
b	Enter the final maturity date of the GIC (MM/DD/YYYY) / /
c	Enter the name of the GIC provider
43	Check the box if the issuer has established written procedures to ensure that all nonqualified bonds of this issue are remediated in accordance with the requirements under the Code and Regulations (see instructions) <input checked="" type="checkbox"/>
44	Check the box if the issuer has established written procedures to monitor the requirements of section 148 <input checked="" type="checkbox"/>
45a	Enter the amount of reimbursement if some portion of the proceeds was used to reimburse expenditures 0.00
b	Enter the date the official intent was adopted (MM/DD/YYYY) / /
46	Check the box if the issue is comprised of qualified redevelopment, qualified small issue, or exempt facilities bonds, and provide name and EIN of the primary private user <input type="checkbox"/>

Name ▶

EIN

Part VIII Volume Caps		Amount
47	Amount of state volume cap allocated to the issuer. Attach copy of state certification	47
48	Amount of issue subject to the unified state volume cap	48
49	Amount of issue not subject to the unified state volume cap or other volume limitations:	49 13,640,000.00
a	Of bonds for governmentally owned solid waste facilities, airports, docks, wharves, environmental enhancements of hydroelectric generating facilities, or high-speed intercity rail facilities	49a
b	Under a carryforward election. Attach a copy of Form 8328 to this return	49b
c	Under transitional rules of the Tax Reform Act of 1986. Enter Act section ▶	49c
d	Under the exception for current refunding (section 146(j) and section 1313(a) of the Tax Reform Act of 1986)	49d
50a	Amount of issue of qualified veterans' mortgage bonds	50a
b	Enter the state limit on qualified veterans' mortgage bonds	50b
51a	Amount of section 1394(f) volume cap allocated to issuer. Attach copy of local government certification	51a
b	Name of empowerment zone ▶	
52	Amount of section 142(k)(5) volume cap allocated to issuer. Attach copy of state certification	52

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.

Signature of issuer's authorized representative: *Frederick E. Parola* Date: *8/7/19* Frederick E. Parola, CEO

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	Preparer's PTIN
	Bruce M. Serchuk	<i>Bruce M. Serchuk</i>	8/19/19		P01067708
	Firm's name ▶ Nixon Peabody LLP	Firm's EIN ▶		16-0764720	
	Firm's address ▶ 799 9th Street NW, Suite 500, Washington, DC 20001	Phone no.		202-585-8000	

**Town of Hempstead Local Development Corporation
Tax-Exempt Revenue Refunding Bonds, Series 2019A (Circulo Real Property Holding
Corporation/Evergreen Charter School Project)**

**Form 8038—Information Return for Tax-Exempt Private Activity Bond Issues
Attachment**

Line 18

1. Name of Organization: Circulo Real Property Holding Corporation; Evergreen Charter School
2. Employer Identification Number: 83-1227110; 26-4652712
3. Amount of Bonds benefiting the Organization: \$13,640,000

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**INTERNAL REVENUE SERVICE
CENTER
OGDEN, UTAH 84201**



9590 9402 4663 8323 3904 49

2

7015 1520 0000 9393 9949

COMPLETE THIS SECTION ON DELIVERY

A. Signature

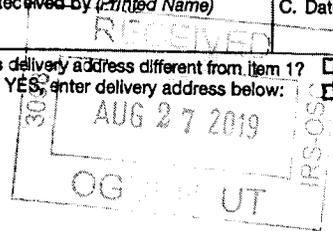
X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No



3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total	\$
Street	\$
City	\$

**INTERNAL REVENUE SERVICE
CENTER
OGDEN, UTAH 84201**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 1520 0000 9393 9949

