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December 22, 2013

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Director
Internal Revenue Service Center
Ogden, Utah 84201

Re: $11,310,000 Rhode Island Health and Educational Building Corporation Public Schools Revenue Bond Financing Program Revenue Bonds Series 2013 H (Town of Little Compton Issue) dated December 10, 2013

Dear Sir or Madam:

Please find enclosed for filing IRS Form 8038-G, Information Return for Tax-Exempt Government Obligations for the following, prepared in connection with the above-referenced transaction.

Please acknowledge receipt of the form on the enclosed Acknowledgment Copy and return in the self-addressed envelope provided herein. If you have any questions, please do not hesitate to call.

Very truly yours,

Karen S.D. Grande

Enclosure

Certified Article Number
7196 9008 9111 9330 8739
SENDERS RECORD

AM 26469981.1

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

Part I **Reporting Authority** — If **Amended Return**, check here ▶ ☐

1 Issuer's name Rhode Island Health and Educational Building Corporation	2 Issuer's employer identification number (EIN) 52-1300173
3a Name of person (other than issuer) with whom the IRS may communicate about this return (see instructions) Karen S.D. Grande, Esquire	3b Telephone number of other person shown on 3a (401) 455-7608
4 Number and street (or P.O. box if mail is not delivered to street address) — Room/suite 170 Westminster Street, Suite 1200	5 Report number *(For IRS Use Only)* 3
6 City, town, or post office, state, and ZIP code Providence, Rhode Island 02903	7 Date of issue December 10, 2013
8 Name of issue $11,310,000 Public Schools Revenue Bond Financing Program Revenue Refunding Bond Series 2013 H (Town of Little Compton Issue)	9 CUSIP number 762243 7G2
10a Name and title of officer or other employee of the issuer whom the IRS may call for more information (see instructions) Robert Donovan, Executive Director	10b Telephone number of officer or other employee shown on 10a (401) 831-3770

Part II **Type of Issue (enter the issue price).** See the instructions and attach schedule.

11	Education	11	11,679,882	00
12	Health and hospital	12		
13	Transportation	13		
14	Public safety	14		
15	Environment (including sewage bonds)	15		
16	Housing	16		
17	Utilities	17		
18	Other. Describe ▶	18		
19	If obligations are TANs or RANs, check only box 19a ▶ ☐ If obligations are BANs, check only box 19b ▶ ☐			
20	If obligations are in the form of a lease or installment sale, check box ▶ ☐			

Part III **Description of Obligations.** 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	05/15/2034	$ 11,679,882	$ 11,310,000	12.1774 years	3.6977556282 %

Part IV **Uses of Proceeds of Bond Issue (including underwriters' discount)**

22	Proceeds used for accrued interest			22	0	00
23	Issue price of entire issue (enter amount from line 21, column (b))			23	11,679,882	00
24	Proceeds used for bond issuance costs (including underwriters' discount)	24	134,081 00			
25	Proceeds used for credit enhancement	25	0 00			
26	Proceeds allocated to reasonably required reserve or replacement fund	26	0 00			
27	Proceeds used to currently refund prior issues	27	9,800,000 00			
28	Proceeds used to advance refund prior issues	28	0 00			
29	Total (add lines 24 through 28)			29	9,934,081	00
30	Nonrefunding proceeds of the issue (subtract line 29 from line 23 and enter amount here)			30	1,745,801	00

Part V **Description of Refunded Bonds.** Complete this part only for refunding bonds.

31	Enter the remaining weighted average maturity of the bonds to be currently refunded ▶	0.0027 years
32	Enter the remaining weighted average maturity of the bonds to be advance refunded ▶	N/A years
33	Enter the last date on which the refunded bonds will be called (MM/DD/YYYY) ▶	12/13/2013
34	Enter the date(s) the refunded bonds were issued ▶ (MM/DD/YYYY)	12/12/2012

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 63773S Form **8038-G** (Rev. 9-2011)

Part VI Miscellaneous

35	Enter the amount of the state volume cap allocated to the issue under section 141(b)(5)	35	0	00
36a	Enter the amount of gross proceeds invested or to be invested in a guaranteed investment contract (GIC) (see instructions)	36a	0	00
b	Enter the final maturity date of the GIC ▶			
c	Enter the name of the GIC provider ▶			
37	Pooled financings: Enter the amount of the proceeds of this issue that are to be used to make loans to other governmental units	37	0	00

38a If this issue is a loan made from the proceeds of another tax-exempt issue, check box ▶ ☐ and enter the following information:

b Enter the date of the master pool obligation ▶

c Enter the EIN of the issuer of the master pool obligation ▶

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 If the issuer has identified a hedge, check here ▶ ☐ and enter the following information:

b Name of hedge provider ▶

c Type of hedge ▶

d Term of hedge ▶

42 If the issuer has superintegrated the hedge, check box ▶ ☐

43 If the issuer has established written procedures to ensure that all nonqualified bonds of this issue are remediated according to the requirements under the Code and Regulations (see instructions), check box ▶ ☒

44 If the issuer has established written procedures to monitor the requirements of section 148, check box ▶ ☒

45a If some portion of the proceeds was used to reimburse expenditures, check here ▶ ☐ and enter the amount of reimbursement ▶

b Enter the date the official intent was adopted ▶

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 that I have authorized above.

▶ Signature of issuer's authorized representative Date ▶ Robert Donovan, Executive Director
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Karen S.D. Grande	Karen S.D. Grande	12/23/13		P01078594

Firm's name ▶ Edwards Wildman Palmer LLP — Firm's EIN ▶ 05-0135015

Firm's address ▶ 111 Huntington Avenue, Boston, MA 02199 — Phone no. (617) 239-0176

7196 9008 9111 9330 8739

TO: Director
Internal Revenue Service Center
Ogden, Utah 84201

SENDER: Karen S.D. Grande

REFERENCE: RIHEBC/LC

PS Form 3800, January 2005

RETURN RECEIPT SERVICE		
	Postage	
	Certified Fee	
	Return Receipt Fee	
	Restricted Delivery	
	Total Postage & Fees	

USPS®
Receipt for Certified Mail™

No Insurance Coverage Provided
Do Not Use for International Mail

POSTMARK OR DATE

PROVIDENCE RI ANNEX 02940 DEC 23 2013

2. Article Number

7196 9008 9111 9330 8739

3. Service Type **CERTIFIED MAIL™**

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

1. Article Addressed to:
Director
Internal Revenue Service Center
Ogden, Utah 84201

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes
☐ No

RECEIVED
JAN 02 2014
OGDEN, UT
E1-255
IRS OSC

RIHEBC/LC

Karen S.D. Grande

PS Form 3811, January 2005 Domestic Return Receipt