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Certified Article Number

9314 AL99 0430 0005 1042 24

SENDERS RECORD

August 4, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Internal Revenue Service Center
Ogden, UT 84201

Re: Lancaster County Convention Center Authority
Hotel Room Rental Tax Revenue Bonds, Series of 2014

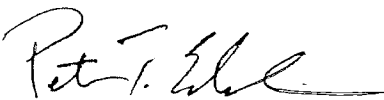
Ladies and Gentlemen:

Enclosed, pursuant to the provisions of the Internal Revenue Code of 1986, is Form 8038-G regarding the above-referenced Bonds. This Form 8038-G is being filed with you on behalf of the Lancaster County Convention Center Authority, Lancaster, Pennsylvania.

Thank you for your assistance in this matter.

Sincerely,

STEVENS & LEE


Peter T. Edelman

PTE/mm
Enclosure

Philadelphia • Reading • Valley Forge • Lehigh Valley • Harrisburg • Lancaster • Scranton
Wilkes-Barre • Princeton • Cherry Hill • New York • Wilmington

A PROFESSIONAL CORPORATION

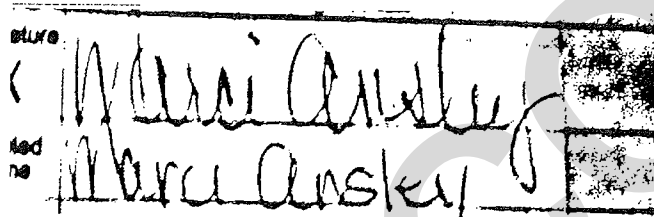


Date Produced: 08/11/2014

WALZ GROUP:

The following is the delivery information for Certified Mail™/RRE item number 9314 8699 0430 0005 1042 26. Our records indicate that this item was delivered on 08/09/2014 at 10:37 a.m. in OGDEN, UT 84201. The scanned image of the recipient information is provided below.

Signature of Recipient :



Address of Recipient :



Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,
United States Postal 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 <input type="checkbox"/>
1 Issuer's name Lancaster County Convention Center Authority		2 Issuer's employer identification number (EIN) 23-3039701
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) 25 South Queen Street	Room/suite	5 Report number (For IRS Use Only) 3
6 City, town, or post office, state, and ZIP code Lancaster, PA 17603		7 Date of issue 08/01/2014
8 Name of Issue Hotel Room Rental Tax Revenue Bonds, Series of 2014		9 CUSIP number NA
10a Name and title of officer or other employee of the issuer whom the IRS may call for more information (see instructions) Kevin R. Molloy, Executive Director		10b Telephone number of officer or other employee shown on 10a 717.207.4110

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

11 Education	11		
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 Convention Center	18	62,595,000	00
19 If obligations are TANs or RANs, check only box 19a <input type="checkbox"/>			
If obligations are BANs, check only box 19b <input type="checkbox"/>			
20 If obligations are in the form of a lease or installment sale, check box <input type="checkbox"/>			

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	12/01/2047	\$ 62,595,000	\$ 62,595,000	23.8107 years	Variable %

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

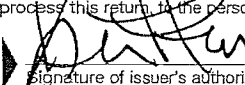
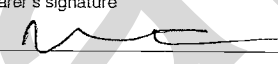
22 Proceeds used for accrued interest	22	0	00
23 Issue price of entire issue (enter amount from line 21, column (b))	23	62,595,000	00
24 Proceeds used for bond issuance costs (including underwriters' discount)	24	0	00
25 Proceeds used for credit enhancement	25	0	00
26 Proceeds allocated to reasonably required reserve or replacement fund	26	0	00
27 Proceeds used to currently refund prior issues	27	62,595,000	00
28 Proceeds used to advance refund prior issues	28	0	00
29 Total (add lines 24 through 28)	29	62,595,000	00
30 Nonrefunding proceeds of the issue (subtract line 29 from line 23 and enter amount here)	30	0	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	23.6033	years
32 Enter the remaining weighted average maturity of the bonds to be advance refunded		years
33 Enter the last date on which the refunded bonds will be called (MM/DD/YYYY)	08/01/2014	
34 Enter the date(s) the refunded bonds were issued (MM/DD/YYYY)	10/03/2011	

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 <input type="checkbox"/> 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			<input type="checkbox"/>
40	If the issuer has elected to pay a penalty in lieu of arbitrage rebate, check box			<input type="checkbox"/>
41a	If the issuer has identified a hedge, check here <input type="checkbox"/> 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			<input type="checkbox"/>
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			<input type="checkbox"/>
44	If the issuer has established written procedures to monitor the requirements of section 148, check box			<input type="checkbox"/>
45a	If some portion of the proceeds was used to reimburse expenditures, check here <input type="checkbox"/> 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.			
		8/1/14	Kevin F. Fry, Chairman	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Type or print name and title
	Ramiro M. Carbonell		7/30/2014	Check <input type="checkbox"/> if self-employed PTIN P01076512
	Firm's name ▶ Stevens & Lee, P.C.	Firm's EIN ▶ 23-1886296		
	Firm's address ▶ 111 North Sixth Street, Reading, PA 19601	Phone no. 610-478-2000		