

Sandra Matrone Mack
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***CERTIFIED MAIL -
RETURN RECEIPT REQUESTED***

February 18, 2009

Internal Revenue Service Center
Ogden Campus
Ogden, UT 84201

Re: Town of Bristol \$12,210,000 General Obligation Bonds dated February 15, 2009 and \$2,000,000 General Obligation Bond Anticipation Note dated February 18, 2009 (the "Bonds and Note")

Dear Sir or Madam:

Enclosed herein is the Information Return for Tax-Exempt Governmental Obligations (Form 8038-G) for the above-referenced Bonds and Note.

Kindly file this document and acknowledge receipt of this letter and the enclosed form on the enclosed copy of this letter, and return it to my attention in the self-addressed stamped envelope.

Thank you for your attention to this matter.

Sincerely,



Sandra Matrone Mack

SMM:cjl
Enclosures

Part I Reporting Authority		If Amended Return, check here <input type="checkbox"/>	
1 Issuer's name Town of Bristol, Rhode Island	2 Issuer's employer identification number 05 6000040	3 Number and street (or P.O. box if mail is not delivered to street address) 10 Court Street	4 Report number 3 01-09
5 City, town, or post office, state, and ZIP code Bristol, RI 02809	6 Date of issue February 15, 2009	7 Name of issue Town of Bristol, Rhode Island \$12,210,000 GO Bonds & \$2,000,000 GO Notes	8 CUSIP number 110169 QY8 / 110169 RU5
9 Name and title of officer or legal representative whom the IRS may call for more information John M. Day, Treasurer	10 Telephone number of officer or legal representative (401) 253-7000		

Part II Type of Issue (check applicable box(es) and enter the issue price) See instructions and attach schedule	
11 <input checked="" type="checkbox"/> Education	11 2,071,038.37
12 <input type="checkbox"/> Health and hospital	12
13 <input type="checkbox"/> Transportation	13
14 <input checked="" type="checkbox"/> Public safety	14 3,283,353.51
15 <input type="checkbox"/> Environment (including sewage bonds)	15
16 <input type="checkbox"/> Housing	16
17 <input type="checkbox"/> Utilities	17
18 <input checked="" type="checkbox"/> Other. Describe ► Library, Public Burial Grounds, Roads, Open Space, Municipal Property	18 9,001,439.93
19 If obligations are TANs or RANs, check box <input type="checkbox"/> If obligations are BANs, check box <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 February 15, 2029	\$ 14,355,831.80	\$ 14,120,000	10.358 years	3.6637272 %

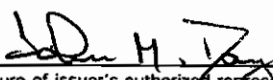
Part IV Uses of Proceeds of Bond Issue (including underwriters' discount)				
22 Proceeds used for accrued interest	22 3,539.02			
23 Issue price of entire issue (enter amount from line 21, column (b))	23 14,355,831.80			
24 Proceeds used for bond issuance costs (including underwriters' discount)	24 0			
25 Proceeds used for credit enhancement	25 0			
26 Proceeds allocated to reasonably required reserve or replacement fund	26 0			
27 Proceeds used to currently refund prior issues	27 9,935,000			
28 Proceeds used to advance refund prior issues	28 0			
29 Total (add lines 24 through 28)	29 9,935,000.00			
30 Nonrefunding proceeds of the issue (subtract line 29 from line 23 and enter amount here)	30 4,420,831.80			

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 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	February 18, 2009
34 Enter the date(s) the refunded bonds were issued	February 19, 2008

Part VI Miscellaneous	
35 Enter the amount of the state volume cap allocated to the issue under section 141(b)(5)	35 0
36a Enter the amount of gross proceeds invested or to be invested in a guaranteed investment contract (see instructions)	36a 0
b Enter the final maturity date of the guaranteed investment contract	_____
37 Pooled financings: a Proceeds of this issue that are to be used to make loans to other governmental units	37a 0
b If this issue is a loan made from the proceeds of another tax-exempt issue, check box <input type="checkbox"/> and enter the name of the issuer	_____ and the date of the issue
38 If the issuer has designated the issue under section 265(b)(3)(B)(i)(III) (small issuer exception), check box	<input type="checkbox"/>
39 If the issuer has elected to pay a penalty in lieu of arbitrage rebate, check box	<input type="checkbox"/>
40 If the issuer has identified a hedge, check box	<input type="checkbox"/>

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.

Sign Here


Signature of issuer's authorized representative

2/18/2009
Date

John M. Day, Treasurer
Type or print name and title



044E 0442 4000 2510 0004 2440 3440

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE (10/2009)

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	549
Total Postage & Fees	\$



Sent To **Internal Revenue Service Center**

Street, Apt. No.,
or PO Box No. **Ogden Campus**

City, State, ZIP+4 **Ogden, UT 84201**

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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 Campus
Ogden, UT 84201**

2. Article Number

(Transfer from service label)

7004 2510 0004 2440 3440

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

Is delivery address different from item 1? Yes

If Yes, enter delivery address below: No

Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

OGDEN UT 84201

RECEIVED
FEB 24 2004