Department of the Treasury

IRS e-file Signature Authorization for an Exempt Organization

101 dill =x0111pc	8	
or calendar year 2018, or fiscal year beginning	. 2018, and ending	. 20

Do not send to the IRS. Keep for your records.

▶ Go to www irs gov/Form8879FO for the letest information.

OMB No. 1545-1878

Part Type of Return and Return Information (Whole Dollars Only)	Internal Revenue Service	Go to www.irs.gov/Fori	m88/9EO for the latest information.	
Name and tile of officer Part Type of Return and Return Information (Whole Dollars Only) Type of Return and Return Information (Whole Dollars Only) Type of Return and Return Information (Whole Dollars Only) Type of Return and Return Information (Whole Dollars Only) Type of Return and Return Information (Whole Dollars Only) Type of Return and Return Information (Whole Dollars Only) Type of Return and Return Information (Whole Dollars Only) Type of Return Information (Whole Dollars Only) Type Only) Type of Return Information (Whole Dollars Only) Type Only) Typ	Name of exempt organizati	on	Emplo	yer identification number
Part II Type of Return and Return Information (Whole Dollars Only) Check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, the leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here D D Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b		ation Co	82-1	1005159
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If heck the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, it leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- the applicable line below. Do not complete more than one line in Part I. 1a Form 990 blockeck here ▶ b Total revenue, if any (Form 990-Part VIII, column (A), line 12) . 1b 2a Form 990-PC check here ▶ b Total revenue, if any (Form 990-PE, line 9) . 2b 31,13! 3a Form 1120-POL check here ▶ b Total tax (Form 1120-POL, line 9) . 2b 31,13! 4a Form 990-PF check here ▶ b Total based on investment income (Form 990-PF, Part VI, line 5) . 4b 5a Form 8888 check here ▶ b Balance Due (Form 8888, line 3c) . 5b Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's celtornic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (EFNO to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial in	Name and title of officer			
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If heck the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, it leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- the applicable line below. Do not complete more than one line in Part I. 1a Form 990 beck here ▶				
check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, the leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter −0-). But, if you entered −0- on the return, then enter −0- the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here ▶ □ b Total revenue, if any (Form 990, Part VIII, column (A), line 12)		Ţ	• ,	
leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0-the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here ▶				
the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here ▶ □ b Total revenue, if any (Form 990, Part VIII, column (A), line 12) b 2a Form 990-EZ check here ▶ □ b Total revenue, if any (Form 990-EZ, line 9) 2b 31, 131 3a Form 1120-POL check here ▶ □ b Total tax (Form 1120-POL, line 22) 3b 4a Form 990-PF check here ▶ □ b Total tax (Form 1120-POL, line 22) 3b 5a Form 3868 check here ▶ □ b Total tax (Form 1120-POL, line 22) 3b 5a Form 3868 check here ▶ □ b Balance Due (Form 3868, line 3c) 5b Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send the organization's electronic return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdraus (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the Infinancial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date.				
ta Form 990 check here ▶ □ b Total revenue, if any (Form 990, Part VIII, column (A), line 12)				u- on the return, then enter -u- on
2a Form 990-EZ check here ▶ ■ b Total revenue, if any (Form 990-EZ, line 9). 3a Form 1120-POL check here ▶ □ b Total tax (Form 1120-POL, line 22). 3b da Form 990-PF check here ▶ □ b Total tax (Form 1120-POL, line 22). 4a Form 990-PF check here ▶ □ b Balance Due (Form 8868, line 3c). 5b □ ■ Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (FRO to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission. (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, it altorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution occount indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize	* *			
3a Form 1120-POL check here ▶ □ b Total tax (Form 1120-POL, line 22) . 3b 4a Form 990-PF check here ▶ □ b Tax based on investment income (Form 990-PF, Part VI, line 5) . 4b 5a Form 8868 check here ▶ □ b Balance Due (Form 8868, line 3c) . 5b Part III				
4a Form 990-PF check here ▶ □ b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b 5a Form 8868 check here ▶ □ b Balance Due (Form 8868, line 3c)				
Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4557 no later than 2 business days prior to the payment, I must contact the U.S. Treasury Financial resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name Tender five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforemention ERO to enter my PIN on the return's disclosure consen		•		
Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.				
Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services FRO firm name FRO firm name FRO firm name FRO firm name The provided with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions being filed with a state agency (es) regulating charities as part of the IRS Fed/State program, I	5a Form 8868 check	nere b Balance Due (Form 8868	, iine 3c)	50
Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services FRO firm name FRO firm name FRO firm name FRO firm name The provided with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions being filed with a state agency (es) regulating charities as part of the IRS Fed/State program, I	Part II Declara	ition and Signature Authorization o	f Officer	
organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, the are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmiter, or electronic return originator (ERO to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize bole Accounting Services to enter my PIN ERO firm name ERO firm have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforemention of the IRS Fed/State program, I will enter my PIN on the return is being filed with a state agency(ies) regulating charities		<u>-</u>		mined a copy of the
organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services to enter my PIN to enter my PIN on the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return for the RS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Certification and Authentication ERO's ERIN/PIN. Enter your six-digit electronic filing identification number (ERIN) followed by your five-digit self-selected PIN. Do no	organization's 2018 e	lectronic return and accompanying sched	dules and statements and to the best o	of my knowledge and belief, they
to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutio involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name ERO firm name Therefive numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. Officer's signature As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by				
the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name to enter my PIN on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Officer's signature Officer's signature Organization and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filling identification number (EFIN) followed by your five-digit s				
authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name ERO firm name ERO firm name The provides a part of the IRS Fed/State program, I also authorize the aforementions being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Nuclette Assetic Date • 08/27/2019 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the org				
financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-437 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution to love in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name The enter my PIN on the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Officer's signature Nicolette Asselin Date Officer's signature				•
return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name The enter my PIN The enter five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. To not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.				
Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name ERO firm name ERO firm name There five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ➤ Viculation Authentication Date ➤ 08/27/2019 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. To not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Me Information for Authorized IRS e-file Provider's for Business Returns.				
resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only authorize Dole Accounting Services Services To enter my PIN To enter my PI				
electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name ERO firm name The Enter five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ➤ Wicolette Asselin Date ➤ 08/27/2019 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filling identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeInformation for Authorized IRS e-file Providers for Business Returns.				
Officer's PIN: check one box only I authorize Dole Accounting Services ERO firm name Enter five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filled with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ► Nicolate Asselin Date ► 08/27/2019 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeInformation for Authorized IRS e-file Providers for Business Returns.				gnature for the organization's
To enter my PIN Dole Accounting Services ERO firm name The ERO firm name ERO for enter my PIN Do not enter all zeros The ERO for enter my PIN on the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. The ERO for enter my PIN on the return's disclosure consent screen. The ERO for enter my PIN on the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. The ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. The ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. The ERO is 1 5 9 as my signature in the return is being filed within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. The ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. The ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. The ERO is 1 5 9 as my signature in the IRS Fed/State program, I also authorize the aforement in the IRS Fed/State program, I also authorize the aforement in the IRS Fed/State program, I also authorize the aforement in the IRS Fed/State program, I also authorize the aforement in the IRS Fed/State program, I also authorize the aforement in the IRS Fed/State program, I also authorize the aforement in the IRS Fed/State program, I also authorize the afor			to electronic funds withdrawal.	
ERO firm name Enter five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. □ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ➤		-		-1,1,5,1,5,1
on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementions ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ► Nicolette Asselin Date ►08/27/2019 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.	✓ I authorize Do		to enter my PIN U	as my signature
on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. □ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ►		ERO firm name		•
being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementione ERO to enter my PIN on the return's disclosure consent screen. □ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ► **Nicolette** Asselin** Date ► 08/27/2019 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.	on the organiza	tion's tax year 2018 algotropically filed ret		
ERO to enter my PIN on the return's disclosure consent screen. ☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return the IRS red/State program, I will enter my PIN on the return is being filed with a state agency(ies) regulating charities as part of the IRS red/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ➤ **\frac{\text{Vicolette Asselin}}{\text{Vicolette Asselin}} \text{Date} \text{\$\text{Date}\$ \$\text{\$				
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return if I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ►				
If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ▶				
If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ▶	As an officer of	the organization, I will enter my PIN as my	y signature on the organization's tax ye	ear 2018 electronically filed return.
Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Solution Part III Certification and Authentication				
Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.			urn's disclosure consent screen.	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 5 5 0 5 4 7 5 2 1 2 3 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.	Officer's signature ▶ ✓	Vicolette Asselin	Date ► 08/27	//2019
number (EFIN) followed by your five-digit self-selected PIN. 5 5 0 5 4 7 5 2 1 2 3				
Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.				0 5 4 7 5 2 1 2 3
I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Me Information for Authorized IRS e-file Providers for Business Returns.	number (EFIN) follow	ed by your five-digit self-selected PIN.		
indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Me Information for Authorized IRS <i>e-file</i> Providers for Business Returns.				Do not enter all zeros
indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Me Information for Authorized IRS <i>e-file</i> Providers for Business Returns.	Legrify that the above	e numeric entry is my PIN which is my si	gnature on the 2018 electronically filed	I return for the organization
Information for Authorized IRS e-file Providers for Business Returns.				
ERO's signature ► Kimberley Dole Date ► 08/27/2019	Information for Author	rized IRS e-file Providers for Business Re	·	. ,
	ERO's signature ▶	imberley Dole	Date ► 08/2	27/2019
		<u> </u>		
ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So				n So