Form 8879-EC

IRS e-file Signature Authorization for an Exempt Organization

OMB No.	1545-1878

2018

orm OO 1 3 LO					
um e e e e	For calendar year 2018, or fiscal year beginning	, 2018, and ending	, 20		
Department of the Treasury	Do not send to the IRS. Keep for your records.				
	Go to www.irs.gov/Form8879EO for the latest information.				
Name of avament organization	in .		Emple		

Department of the Treasury nternal Revenue Service	Go to ww	w.irs.gov/Form8879EO for the latest infor	mation.	
Name of exempt organization		N.	E	mployer identification number
BETTER BUSINE	SS BUREAU OF AF	KANSAS		45 2041152
EDUCATION FOU				45-3041152
Name and title of officer	***************************************			
JANET ROBB				
PRESIDENT / C	EO			
Part I Type of	Return and Return Info	ormation (Whole Dollars Only)		the return If you shock the box
	 a, below, and the amount on lank (do not enter -0-). But, if y 	s Form 8879-EO and enter the applicable am that line for the return being filed with this fo you entered -0- on the return, then enter -0- o	n the applicable I	line below. Do not complete more
1a Form 990 check here	▶ X b Total reven	ue, if any (Form 990, Part VIII, column (A), lin	e 12)	1b 54,566.
2a Form 990-EZ check he	ere b Total re	venue, if any (Form 990-EZ, line 9)		20
3a Form 1120-POL check	chere b Tota	al tax (Form 1120-POL, line 22)		3b
4a Form 990-PF check he	ere b Tax bas	ed on investment income (Form 990-PF, Pa	art VI, line 5)	4b
5a Form 8868 check here		e (Form 8868, line 3c)		5b
		6.055		
Part II Declara	tion and Signature Aut	of the above organization and that I have ex		f the organization's 2018
(a) an acknowledgement the date of any refund. If debit) entry to the financia return, and the financial ir 1-888-353-4537 no later the processing of the electron payment. I have selected organization's consent to	of receipt or reason for rejecti applicable, I authorize the U.S al institution account indicate institution to debit the entry to nan 2 business days prior to to nic payment of taxes to receive a personal identification num electronic funds withdrawal.	return originator (ERO) to send the organization of the transmission, (b) the reason for any Treasury and its designated Financial Agerd in the tax preparation software for paymenthis account. To revoke a payment, I must che payment (settlement) date. I also authorize confidential information necessary to answher (PIN) as my signature for the organization	nt to initiate an elector of the organization tact the U.S. The the financial invertinguished and of the organization of the financial invertinguished and of the organization of the orga	ectronic funds withdrawal (direct cion's federal taxes owed on this reasury Financial Agent at stitutions involved in the resolve issues related to the
Officer's PIN: check one		<u> </u>		o enter my PIN 12345
X I authorize EI	RWIN & COMPANY,			Enter five numbers, b
	2	ERO firm name		do not enter all zeros
is being filed w enter my PIN o As an officer of indicated within	ith a state agency(ies) regulat n the return's disclosure cons	ny PIN as my signature on the organization's e return is being filed with a state agency(ies) lisclosure consent screen.	s tax year 2018 el	lectronically filed return. If I have
Part III Certific	ation and Authenticati	on		
	our six-digit electronic filing io	lentification		
	by your five-digit self-selected	PIN. 712	88854321 ot enter all zeros	
I certify that the above no confirm that I am submit e-file Providers for Busin ERO's signature	ting this return in accordance	is my signature on the 2018 electronically files in the requirements of Pub. 4163 , Modern	nized e-File (MeF)	organization indicated above. I Information for Authorized IRS

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2018)