## IRS *e-file* Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning	7/1	, 2019, and ending	6/30	, 20 <b>20</b>
Do not send to the IRS. Keep for your records.				

2019

Department of the Treasury Internal Revenue Service
Name of exempt organization

► Go to www.irs.gov/Form8879EO for the latest information.

Pikes Peak	School	of Expeditionary	learning

Employer identification number

84-1499949

Name and the of onicer	
Donald Knapp	Principal
Part I Type of Return and Return Information (Whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicate If you check the box on line <b>1a</b> , <b>2a</b> , <b>3a</b> , <b>4a</b> , or <b>5a</b> , below, and the amount on that line for the ret form was blank, then leave line <b>1b</b> , <b>2b</b> , <b>3b</b> , <b>4b</b> , or <b>5b</b> , whichever is applicable, blank (do not en -0- on the return, then enter -0- on the applicable line below. <b>Do not</b> complete more than one li	urn being filed with this ter -0-). But, if you entered
1a Form 990 check here ► X b Total revenue, if any (Form 990, Part VIII, column (A	
2a Form 990-EZ check here <b>b Total revenue,</b> if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here <b>b</b> Total tax (Form 1120-POL, line 22).	
4a Form 990-PF check here ► <b>b</b> Tax based on investment income (Form 990-PF	
5a Form 8868 check here ► <b>b Balance Due</b> (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 exami organization's 2019 electronic return and accompanying schedules and statements and to the best of m are true, correct, and complete. I further declare that the amount in Part I above is the amount shown or organization's electronic return. I consent to allow my intermediate service provider, transmitter, or elect to send the organization's return to the IRS and to receive from the IRS ( <b>a</b> ) an acknowledgement of receive the transmission, ( <b>b</b> ) the reason for any delay in processing the return or refund, and ( <b>c</b> ) the date of any authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal financial institution account indicated in the tax preparation software for payment of the organization's fereturn, and the financial institution to debit the entry to this account. To revoke a payment, I must contact Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also autinvolved in the processing of the electronic payment of taxes to receive confidential information necessar resolve issues related to the payment. I have selected a personal identification number (PIN) as my signelectronic return and, if applicable, the organization's consent to electronic funds withdrawal.	y knowledge and belief, they the copy of the ronic return originator (ERO) sipt or reason for rejection of refund. If applicable, I (direct debit) entry to the deral taxes owed on this t the U.S. Treasury Financial thorize the financial institutions ry to answer inquiries and
Officer's PIN: check one box only	
I authorize Starr Tax & Accounting Services to enter my ERO firm name	PIN 80831 as my signature Enter five numbers, but do not enter all zeros
on the organization's tax year 2019 electronically filed return. If I have indicated within is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State aforementioned ERO to enter my PIN on the return's disclosure consent screen.	
X As an officer of the organization, I will enter my PIN as my signature on the organizat filed return. If I have indicated within this return that a copy of the return is being filed charities as part of the IRS Fed/State program, I will enter my PIN on the return's disc	with a state agency(ies) regulating
Officer's signature Date	11/13/2020
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.	84554180129
I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronical indicated above. I confirm that I am submitting this return in accordance with the requirements (MeF) Information for Authorized IRS <i>e-file</i> Providers for Business Returns.	of <b>Pub. 4163</b> , Modernized e-File
ERO's signature Date	F

## ERO Must Retain This Form—See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

Form <b>E</b>	879	-EO
Form C	)0/Y	-EU

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84-1499949

Name and title of officer		
Donald Knapp	Principal	
Part I Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank -0- on the return, then enter -0- on the applicable line below. Do not complete more	he applicable amount, if any for the return being filed wi (do not enter -0-). But, if yo	ith this
1aForm 990 check here►bTotal revenue, if any (Form 990, Part VIII,2aForm 990-EZ check here►bTotal revenue, if any (Form 990-EZ, lin3aForm 1120-POL check here►bTotal tax (Form 1120-POL, line 22).4aForm 990-PF check here►bTax based on investment income (For5aForm 8868 check hereXbBalance Due (Form 8868, line 3c).	rm 990-PF, Part VI, line 5)	. 2b . 3b 4b
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Officer's PIN: check one box only		
I authorize <u>Starr Tax &amp; Accounting Services</u> to ERO firm name	enter my PIN Enter five nu do not enter	,
on the organization's tax year 2019 electronically filed return. If I have indic is being filed with a state agency(ies) regulating charities as part of the IRS aforementioned ERO to enter my PIN on the return's disclosure consent so As an officer of the organization, I will enter my PIN as my signature on the	S Fed/State program, I also creen.	authorize the
filed return. If I have indicated within this return that a copy of the return is I charities as part of the IRS Fed/State program, I will enter my PIN on the re	being filed with a state age eturn's disclosure consent s	ncy(ies) regulating
Officer's signature	Date 🕨	
Part III Certification and Authentication		
<b>ERO's EFIN/PIN.</b> Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	do n	845541 ot enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2019 e indicated above. I confirm that I am submitting this return in accordance with the requ (MeF) Information for Authorized IRS <i>e-file</i> Providers for Business Returns.		
ERO's signature 🕨 Don Knapp	Date ►	11/13/2020
ERO Must Retain This Form—See In Do Not Submit This Form to the IRS Unless F		