

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

2020

For calendar year 2020, or fiscal year beginning _____, 2020, and ending _____, 20_____

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax

FEED MY PEOPLE

Taxpayer identification number

43-1264877

Name and title of officer or person subject to tax

**STEPHANIE BERBERICH
INTERIM DIRECTOR**

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 applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	4,610,614
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here ▶ <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here ▶ <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy of the 2020 electronic 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 the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **MARTZ & WILSON, LLP** to enter my PIN **18041** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2020 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 aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 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.

Signature of officer or person subject to tax ▶

Stephanie Berberich

Date ▶ **11/15/21**

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.

43083195989

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Christopher M. Hook

Date ▶ **11/15/21**

ERO Must Retain This Form — See Instructions

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

For Paperwork Reduction Act Notice, see back of form.

SIGNATURE CERTIFICATE

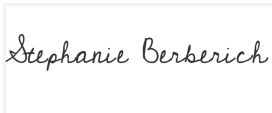


REFERENCE NUMBER

6353615D-DD2D-4BD4-9295-166AC2F8584E

TRANSACTION DETAILS	DOCUMENT DETAILS
<p>Reference Number 6353615D-DD2D-4BD4-9295-166AC2F8584E</p> <p>Transaction Type Signature Request</p> <p>Sent At 11/15/2021 16:34 EST</p> <p>Executed At 11/16/2021 12:13 EST</p> <p>Identity Method email</p> <p>Distribution Method email</p> <p>Signed Checksum 1efa8ae696698f9849ffad7849ffedcc83b8fc7a8130cc68a946fc61fe92619</p> <p>Signer Sequencing Disabled</p> <p>Document Passcode Disabled</p>	<p>Document Name 1804 Feed My People 2020 8879</p> <p>Filename 1804_feed_my_people_2020_8879.pdf</p> <p>Pages 1 page</p> <p>Content Type application/pdf</p> <p>File Size 674 KB</p> <p>Original Checksum fd52d6bfc925e1d1ac1584a194fc20b0bd2acd2d69516994411470e97c0e0539</p>

SIGNERS

SIGNER	E-SIGNATURE	EVENTS
<p>Name Stephanie Berberich</p> <p>Email stephanieb@fmpstl.org</p> <p>Components 1</p>	<p>Status signed</p> <p>Multi-factor Digital Fingerprint Checksum 3139ad73952273212cc0cebcad5536ce96f92faaff0b1e51d5cddd22d4204804</p> <p>IP Address 97.87.94.134</p> <p>Device Chrome via Windows</p> <p>Typed Signature </p> <p>Signature Reference ID C84864DF</p>	<p>Viewed At 11/16/2021 12:10 EST</p> <p>Identity Authenticated At 11/16/2021 12:13 EST</p> <p>Signed At 11/16/2021 12:13 EST</p>

AUDITS

TIMESTAMP	AUDIT
11/15/2021 16:34 EST	Katie Brown (brown@mwstlcpa.com) created document '1804_feed_my_people_2020_8879.pdf' on Chrome via Windows from 35.134.153.90.
11/15/2021 16:34 EST	Stephanie Berberich (stephanieb@fmpstl.org) was emailed a link to sign.
11/16/2021 12:01 EST	Stephanie Berberich (stephanieb@fmpstl.org) was emailed a reminder.
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