



MEMORANDUM

Agenda Item No. 11(A)(12)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: September 4, 2012

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Resolution declaring one 2002 Dodge Stratus and one 2001 Chevy Blazer surplus; authorizing their donation to De Hostos Senior Center Inc., and authorizing the County Mayor to execute a community based organization agreement and exercise any and all other rights conferred therein

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Chairman Joe A. Martinez and Co-Sponsor Vice Chairwoman Audrey M. Edmonson.

R. A. Cuevas, Jr.
County Attorney

RAC/cp



MEMORANDUM

(Revised)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: September 4, 2012

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 11(A)(12)

Please note any items checked.

- "3-Day Rule" for committees applicable if raised**
- 6 weeks required between first reading and public hearing**
- 4 weeks notification to municipal officials required prior to public hearing**
- Decreases revenues or increases expenditures without balancing budget**
- Budget required**
- Statement of fiscal impact required**
- Ordinance creating a new board requires detailed County Manager's report for public hearing**
- No committee review**
- Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous ____) to approve**
- Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required**

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(12)

9-4-12

RESOLUTION NO. _____

RESOLUTION DECLARING ONE 2002 DODGE STRATUS AND ONE 2001 CHEVY BLAZER SURPLUS; AUTHORIZING THEIR DONATION TO DE HOSTOS SENIOR CENTER INC., AND AUTHORIZING THE COUNTY MAYOR OR THE MAYOR'S DESIGNEE TO EXECUTE A COMMUNITY BASED ORGANIZATION AGREEMENT AND EXERCISE ANY AND ALL OTHER RIGHTS CONFERRED THEREIN

WHEREAS, the vehicles described below are owned by Miami-Dade County; and

WHEREAS, the vehicles are obsolete, and their continued usage by Miami-Dade County is uneconomical and inefficient and the vehicles serve no useful purpose; and

WHEREAS, De Hostos Senior Center, Inc., (the "Donee") desires to use the vehicles only within Miami-Dade County to enhance its ability to provide services to its constituents; and

WHEREAS, the Donee is a private not-for-profit organization as defined in Section 273.01 (3) of the Florida Statutes, and is exempt from Federal Income Taxation by virtue of Section 501 of the Internal Revenue Code; and

WHEREAS, the Donee is an eligible community-based organization, as defined in Section 2-11.2.1 of the Code of Miami-Dade County; and

WHEREAS, Miami-Dade County Internal Services Department has complied with the requirements of Section 2-11.2.1, by offering the vehicles to other Miami-Dade County Agencies, none of which accepted the vehicles; and

WHEREAS, the vehicles are eligible for donation under Section 274.05 of the Florida Statutes, and Section 2-11.2.1 of the Code of Miami-Dade County,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that:

Section 1. This Board declares the following vehicles, with the listed residual value and other characteristics, to be surplus pursuant to Section 274.05 of the Florida Statutes, and Section 2-11.2.1 of the Code of Miami-Dade County:

<u>Item</u>	<u>I.D. No.</u>	<u>Condition</u>	<u>Mileage</u>	<u>Est. Value</u>
DC#26126 2002 Dodge Stratus	1B3EL36X32N278174	Fair	92,767	\$2,385
DC#24542 2001 Chevy Blazer	1GNCS13W91K225222	Fair	99,359	\$3,225

Section 2. This Board authorizes donation of the vehicles to the Donee, and authorizes the County Mayor or the Mayor's designee to execute a community based organization agreement and exercise any and all other rights conferred therein. The Donee shall take possession of the vehicles within sixty (60) days of the effective date of this resolution and shall promptly cause title to said vehicles to be transferred to Donee. Donee shall be responsible for any and all costs of transferring the vehicles. The County Mayor or Mayor's designee shall and is hereby authorized to take any and all actions necessary to effectuate the intent of this resolution.

Section 3. If, for any reason, the donee fails to take possession of the vehicles within sixty (60) days of the effective date of this resolution and or fails to transfer title, then this resolution shall be null and void, and the ownership rights to the vehicles shall remain with the County.

The Prime Sponsor of the foregoing resolution is Chairman Joe A. Martinez and the Co-Sponsor is Vice Chairwoman Audrey M. Edmonson. It was offered by
Commissioner _____, who moved its adoption. The motion was seconded
by Commissioner _____ and upon being put to a vote, the vote was as follows:

Joe A. Martinez, Chairman
Audrey M. Edmonson, Vice Chairwoman
Bruno A. Barreiro
Esteban L. Bovo, Jr.
Sally A. Heyman
Jean Monestime
Rebeca Sosa
Xavier L. Suarez
Lynda Bell
Jose "Pepe" Diaz
Barbara J. Jordan
Dennis C. Moss
Sen. Javier D. Souto

The Chairperson thereupon declared the resolution duly passed and adopted this 4th day of September, 2012. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.



Jess M. McCarty

MIAMI-DADE COUNTY
SURPLUS PROPERTY ALLOCATION APPLICATION

COUNTY SURPLUS PROPERTY ALLOCATIONS REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Internal Services Department-Fixed Assets Manager
2225 N. W. 72 Ave
Miami, FL 33122

Phone: (305) 592-3762
Fax: (305) 592-3616

1. Full legal name of the requesting organization: DE HOSIOS SENIOR CENTER

2. Applicant Status: (Select one of the choices below)

- Not-For-Profit or Tax Exempt Local Government or Public Entity
 For-Profit
 Other (specify): _____

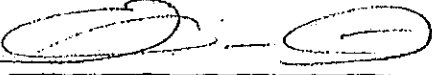
**If Not-For-Profit or Tax Exempt, please attach a copy of Internal Revenue Service 501C3 certification.

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): 2902 NW 2 AVE
MIAMI, FL 33127. PHONE (305)-573-6220 - FAX (305)-573-2193
NAME: ESTHER N COURTIER - EMAIL: estherc@courtier2001@yahoo.com

4. Specify the surplus property requested (quantify, if applicable): (2) TWO CARS -

5. Specify the purpose for which the surplus property will be used: The purpose of use is for pickup food
in food bank and the catering services, office works, disbursement to
clients at home and center.

I hereby certify that all the statements made in this application are true and correct.


Signature of Authorized Representative

04/23/12
Date

6



Apr. 9, 2012 11:55AM

DE HOSTOS SENIOR CENTER

No. 7657 P. 2

IRS

Department of the Treasury
Internal Revenue Service

P.O. Box 2508

Cincinnati OH 45201

In reply refer to: 0248421964

May 02, 2011 LTR 4168C EO

65-0343402 000000 00

00019023

BODC: TE

DE HOSTOS SENIOR CENTER INC

2902 NW 2ND AVE

MIAMI FL 33127-3905



119482

Employer Identification Number: 65-0343402
Person to Contact: MS. MITCHELL
Toll Free Telephone Number: 1-877-829-5500

Dear TAXPAYER:

This is in response to your Apr. 21, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in DECEMBER 1992.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

Apr. 9. 2012 11:55AM DE HOSTOS SENIOR CENTER

No. 7657 P. 3

0298421964
May 02 2011 LTR 4168C EQ
65-0343402 000000 00
00019024

DE HOSTOS SENIOR CENTER INC
2902 NW 2ND AVE
MIAMI FL 33127-3905

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



S. A. Martin, Operations Manager
Accounts Management Operations

06011 Mar. 22. 2012 11:25AM DE HOSTOS SENIOR CENTER No. 7617 P. 3



Consumer's Certificate of Exemption

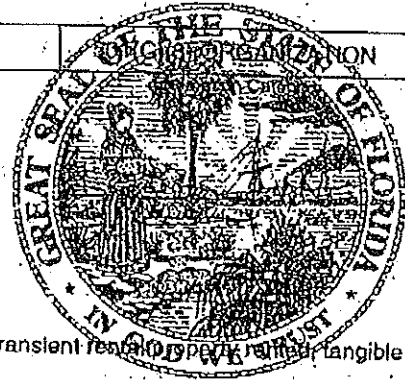
Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 04/05
08/30/08

85-8012685244C-3	05/14/2008	05/31/2013	ORGANIZATION
Certificate Number	Effective Date	Expiration Date	

This certifies that

DE HOSTOS SENIOR CENTER INC
2902 NW 2ND AVE
MIAMI FL 33127-3905



is exempt from the payment of Florida sales and use tax on real property rented, transient rental property, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 04/05

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (FAC).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree felony. Any violation will necessitate the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Central Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.

Community Based Organization Donation Agreement

This agreement is entered into between Miami-Dade County (hereafter "County") and De Hostos Senior Center, Inc (hereafter "Donee") as follows:

For and in Consideration of the County donating one 2002 Dodge Stratus and one 2001 Chevy Blazer to Donee, and Donee agreeing to the use and as described herein:

DC#26126 2002 Dodge Stratus 1B3EL36X32N278174 and
DC#24542 2001 Chevy Blazer 1GNCS13W91K225222 AS IS,

Donee certifies that it is a not-for-profit agency, group, organization, society, association, corporation, partnership or individual that provides a community service designed to improve or enhance the well-being of the community of Miami-Dade County at large or to improve or enhance the well-being of certain individuals within this community that have special needs.

Donee agrees that it shall predominantly utilize the donated surplus property for the intended use specified in section no. 5 of the "Surplus Property Allocation Application", attached hereto. (Attachment A) Moreover, this Community Based Organization (CBO) shall not resell or otherwise dispose of or transfer such property without prior County approval for a period of not less than three (3) years from the date of receipt of the surplus property. This three (3) year requirement may be waived administratively by the Mayor or designee upon showing that it is in the best interest of Miami Dade County. Upon the disposal of such property, Donee agrees to notify Miami Dade County. Upon the failure of the Donee to use the property as set forth in the "Surplus Property Allocation Application", or upon the Donee's attempt to dispose of or transfer the property prior to the expiration of the three (3) year period set forth herein, title to the surplus property shall immediately revert to the County and Donee shall immediately return possession of the property to the County.

The Donee agrees that it shall indemnify and hold harmless Miami Dade County, and its officers, employees, agents and instrumentalities et.al. from any and all liability, losses or damages, including attorney's fees and costs of defense, which the County or its officers, employees, agents or instrumentalities may incur as a result of claims, demands, suits, causes of actions or proceedings of any kind or nature arising out of, relating to or resulting from the transfer of ownership, maintenance or use of the donated property or by subsequent acts by the Donee, its agents, employees, et.al., and/or the performance of this Agreement by the Donee or its employees, agents, servants, partners, principals. The Donee shall pay all claims and losses in connection therewith, and shall investigate and defend all claims, suits or actions of any kind or nature in the name of the County, where applicable, including appellate proceedings, and shall pay all costs, judgments, and attorney's fees which may issue thereon.

Community Based Organization Donation Agreement

De Hostes Senior Center

Name of CBO

By: 

Date: 4-19-2012

Esther N. Couveter
Printed Name

Executive Director
Title

Miami-Dade County

By: _____

Date: _____



Category: General Human Services

DE HOSTOS SENIOR CENTER INC

[Donate Now](#)



Miami, FL

GUIDESTAR QUICK VIEW *Everything you need to know...*

[Print Report](#)

Like

Tweet

DE HOSTOS SENIOR CENTER INC

Physical Address: Miami, FL 33127

EIN: 65-0343402



GuideStar Seal

Organization does not have a GuideStar Exchange Seal



Registered with IRS

Legitimacy information is available



Financial Data

Annual Revenue and Expense data reported



Forms 990

2010, 2009, and 2009 Forms 990 filed with the IRS



Mission Objectives

Mission Statement is available



Impact Statement

Impact Statement is *not* available



No Personal Reviews available

Legitimacy Information

This organization is registered with the IRS.

[Summary](#)

[Financials](#)

[Forms 990 & Docs](#)

[People](#)



Division of Consumer Services

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
 1-800-HELP-FLA (435-7352) • 1-800-FL-AYUDA (352-9832) • (850) 410-3800



Adam H. Putnam, Commissioner - Tom A. Steckler, Director



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- [File a Complaint](#)
- [A-Z Resource Guide](#)
- [Gift Givers' Guide](#)
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Select Language | ▼



Florida Charities GIFT GIVERS' GUIDE

Know how your money is being spent

The Gift Givers' Guide is a resource that provides the financial information reported to us from charitable organizations. The information in the Gift Givers' Guide is provided as a public service. The charities listed are currently registered with the Department; Inactive or expired registrations will not display. To search an organization, type in the organization's complete or partial name in the text box below and click the "Search" button.

[Download Gift Giver's Guide in full](#)
 (Format :PDF, as of October 1)

Business Name:

License/Registration Number: [Advanced Search](#)

Search Results

Expand All (show solicitors, branches, fundraisers and statement of purpose) or select them individually

Sort By: Name : A to Z Display per page: 5

1
<p><input checked="" type="checkbox"/> De Hostos Senior Center, Inc., Miami, FL</p> <p>Registration Number :CH21078 Expiration Date : 11/27/2012</p> <p>Revenue Source : DCS Statement of Support/Revenue (09/30/2010)</p> <p>Total Revenue : \$294,396.00 Program Services Expenses : \$198,740.00 64%</p> <p>Total Expenses : \$308,623.00 Administrative Expenses : \$109,883.00 36%</p> <p>Surplus/Deficit : -\$14,227.00 Fund-Raising Expenses : \$.00 0%</p>
1

Application for Extension of Time To File an Exempt Organization Return

(Rev. January 2012)

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	DE HOSTOS SENIOR CENTER INC.	<input type="checkbox"/> 65-0343402
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	2902 NW 2ND AVE.	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Miami, Florida 33127	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ ESTHER COUVERTIER, CEO 2902 NW 2ND AVE. MIAMI, FL 33127

Telephone No. ▶ 305-573-6220 FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until MAY 15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year 20 ____ or

▶ tax year beginning October 1, 20 10, and ending September 30, 20 11.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of exempt organization or other filer, see instructions. DE HOSTOS SENIOR CENTER INC.	Employer identification number (EIN) or <input type="checkbox"/> 65-0343402
	Number, street, and room or suite no. If a P.O. box, see instructions. 2902 NW 2ND AVE.	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Miami, Florida 33127	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **ESTHER COUVERTIER, CEO 2902 NW 2ND AVE. MIAMI, FL 33127**
Telephone No. **305-573-6220** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **08/15/12**, 20__.
- For calendar year _____, or other tax year beginning **October 1**, 20__ **10**, and ending **September 30**, 20__ **11**.
- If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period
- State in detail why you need the extension **All information necessary for filing a complete and accurate return is not yet available**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *Emil Stoly* Title *CRA* Date *5/13/12*
Form 8868 (Rev. 1-2012)



Department of the Treasury
Internal Revenue Service
Ogden UT 84201

For assistance, call:
1-877-829-5500

Notice Number: CP211A
Date: June 25, 2012

Taxpayer Identification Number:
65-0343402
Tax Form: 990
Tax Period: September 30, 2011

053881.980274.0177.004 1 27 0.374 373



DE HOSTOS SENIOR CENTER INC
2902 NW 2ND AVE
MIAMI FL 33127-3905

053881

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **August 15, 2012**.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

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