

**e-Postcard for Tax-Exempt Organizations (990-N)**

For the 2017 calendar year, or tax year beginning 7/1/2017, and ending 6/30/2018

**Organization**

Name ROTARY INTERNATIONAL		Federal EIN 75-2511897
Doing Business As FORT WORTH SOUTHWEST TEXAS USA CLUB		Website Address
Street 1227 W MAGNOLIA ST STE		Room/Suite 520
City FORT WORTH	State TX	Zip Code 76104
Foreign Country	Foreign Province	Foreign Zip

**Principal Officer of Organization**

Name JOE A GONZALEZ JR	Check here if Officer is a business <input type="checkbox"/>	SSN or EIN
Street 1227 W MAGNOLIA ST		Room/Suite 520
City FORT WORTH	State TX	Zip Code 76104
Foreign Country		

Organization's annual gross receipts are still normally \$50,000 or less

If applicable, organization is terminating (going out of business)

Electronic Filings Only

# Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2017, or tax year beginning 7/1, 2017, and ending 6/30, 20 18

# 2017

Department of the Treasury  
Internal Revenue Service

**For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868**

Name of exempt organization

ROTARY INTERNATIONAL

Employer identification number

75-2511897

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). 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 type="checkbox"/>	▶		b	Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . . .		1b	0
2a Form 990-EZ check here <input type="checkbox"/>	▶		b	Total revenue, if any (Form 990-EZ, line 9) . . . . .		2b	0
3a Form 1120-POL check here <input type="checkbox"/>	▶		b	Total tax (Form 1120-POL, line 22) . . . . .		3b	0
4a Form 990-PF check here <input type="checkbox"/>	▶		b	Tax based on investment income (Form 990-PF, Part VI, line 5) . . . . .		4b	0
5a Form 8868 check here <input type="checkbox"/>	▶		b	Balance due (Form 8868, line 3c) . . . . .		5b	0

## Part II Declaration of Officer

- 6  I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) 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 1-888-353-4537 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.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2017 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 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.

**Sign Here** \_\_\_\_\_ 8/20/2018 \_\_\_\_\_  
 Signature of officer Date Title

## Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

<b>ERO's Use Only</b>	ERO's signature <span style="margin-left: 20px;">▶</span> Joe A Gonzalez	Date 8/20/2018	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN P00962037
	Firm's name (or yours if self-employed), address, and ZIP code ▶ JAG CPA, PLLC 1227 W Magnolia Ave, Ste 520 Fort Worth TX 76104				EIN 14-2013773 Phone no. (817) 349-7330

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

<b>Paid Preparer Use Only</b>	Print/Type preparer's name Joe A Gonzalez	Preparer's signature Joe A Gonzalez	Date 8/20/2018	Check if self-employed <input type="checkbox"/>	PTIN P00962037
	Firm's name ▶ JAG CPA, PLLC				Firm's EIN ▶ 14-2013773
	Firm's address ▶ 1227 W Magnolia Ave, Ste 520 Fort Worth TX 76104				Phone no. (817) 349-7330