#### TRUE ADVISORY GROUP

18 S GEORGE ST STE 610 York, PA 17401

info@trueadvisorygroup.com

Phone: (717)402-6200 | www.trueadvisorygroup.com

January 06, 2023

Rainbow Rose Center PO Box 1134 York, PA 17405

Rainbow Rose Center:

Enclosed is the 2022 federal return for a tax-exempt organization, prepared for Rainbow Rose Center from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-TE, IRS e-file Signature Authorization for an Exempt Organization.

The federal return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (717)402-6200.

Sincerely,

Greg Bianco, EA

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January 06, 2023

Rainbow Rose Center PO Box 1134 York, PA 17405

Subject: Preparation of 2022 Tax Returns

Rainbow Rose Center:

Thank you for choosing TRUE ADVISORY GROUP to assist with the 2022 taxes for Rainbow Rose Center. This letter confirms the terms of the engagement and outlines the nature and extent of the services we will provide.

We will prepare the 2022 federal and state income tax returns for Rainbow Rose Center. We will depend on management to provide the information we need to prepare complete and accurate returns. We may ask management to clarify some items but will not audit or otherwise verify the data submitted.

We will perform accounting services only as needed to prepare the tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for management to clarify some of the information submitted. We will inform management of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if there are any concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on the behalf of Rainbow Rose Center, the alternative selected by management.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return the original records to management at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If management has not selected to e-file the returns with our office, management will be solely responsible to file the returns with the appropriate taxing authorities. The tax matters representative should review all tax-return documents carefully before signing them. Our engagement to prepare the 2022 tax returns will conclude with the delivery of the completed returns to management, or with e-filed returns, with the tax matters representative's signature and our subsequent submittal of the tax return.

To affirm that this letter correctly summarizes the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. For further assistance with your tax return needs, contact our office at

(717)402-6200.	
Sincerely,	
Eng Bran	
Cong Bai	
Greg Bianco, EA TRUE ADVISORY GROUP	
Accepted By:	
Tesia Taliaferro (Jan 11, 2023 10:02 EST)  Officer	
Date	

## **Power of Attorney**

	NIB I	NO.	. 1	54	- <b>5</b> -(	) I	bu

For IRS Use Only and Declaration of Representative Received by: Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form2848 for instructions and the latest information. Name **Power of Attorney** Part I Telephone Caution: A separate Form 2848 must be completed for each taxpayer. Form 2848 will not be honored Function for any purpose other than representation before the IRS.

1 Taxpayer information. Taxpayer must sign and date this form on p	page 2, line 7.	Date / /		
Taxpayer name and address	Taxpayer identification number	r(s)		
RAINBOW ROSE CENTER				
PO BOX 1134	84-4860991			
YORK PA 17405	Daytime telephone number	Plan number (if applicable)		
	(717)746-8738			
hereby appoints the following representative(s) as attorney(s)-in-fact:				
2 Representative(s) must sign and date this form on page 2, Part II.	0.51			
Name and address		-58003r		
Greg Bianco, EA		77462		
18 S GEORGE ST STE 610	· · · · · · · · · · · · · · · · · · ·	)402-6200		
York PA 17401  Check if to be sent copies of notices and communications		) <b>757-9142</b> none No. Fax No.		
Check if to be sent copies of notices and communications X  Name and address	CHECK II New. Address Telepi	ione no Fax no		
Name and address	PTIN			
	Telephone No.			
	Fax No.			
Check if to be sent copies of notices and communications		none No. Fax No.		
Name and address	CAF No.	ione ito.		
	DTIN			
	Telephone No.			
	Fax No.			
(Note: IRS sends notices and communications to only two representative		none No. Fax No.		
Name and address	CAF No.			
	DTIN			
	Telephone No.			
	Fax No.			
(Note: IRS sends notices and communications to only two representative	s.) Check if new: Address Teleph	none No. Fax No.		
to represent the taxpayer before the Internal Revenue Service and perform				
3 Acts authorized (you are required to complete line 3). Except for inspect my confidential tax information and to perform acts I can perfor representative(s) shall have the authority to sign any agreements, con- representative to sign a return).	m with respect to the tax matters described	below. For example, my		
Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift	Tax Form Number	Voor(a) or Poriod(a) (if applicable)		
Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec.	(1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable)		
4980H Shared Responsibility Payment, etc.) (see instructions)	(1040, 941, 720, etc.) (II applicable)	(see instructions)		
ACCOUNT TRANSCRIPT	990	2021-2023		
4. On all a constant and a control of the Control o	(0.45) 1(1)	erit e constant de constant e con		
4 Specific use not recorded on the Centralized Authorization File CAF, check this box. See Line 4. Specific Use Not Recorded on Co.		_		
5a Additional acts authorized. In addition to the acts listed on line 3 a				
	records via an Intermediate Service Provid			
	d representative(s); Sign a return;	o.,		
	_ :			
Other acts authorized:				

1 011111 2	2040 (NEV. 01-2021) RAINBOW ROSE CENTER		04-4000991 1 age 2
b	Specific acts not authorized. My representative(s) is (are	e) not authorized to endo	rse or otherwise negotiate any check (including directing or
	accepting payment by any means, electronic or otherwise, in	nto an account owned or o	controlled by the representative(s) or any firm or other
	entity with whom the representative(s) is (are) associated) is	ssued by the government	in respect of a federal tax liability.
	List any other specific deletions to the acts otherwise authori	ized in this power of attor	ney (see instructions for line 5b):
6	Retention/revocation of prior power(s) of attorney. The	filing of this power of att	orney automatically revokes all earlier power(s) of
	attorney on file with the Internal Revenue Service for the sa	ame matters and years o	r periods covered by this form. If you <b>do not</b> want to
	revoke a prior power of attorney, check here		
	YOU MUST ATTACH A COPY OF ANY POWER OF	F ATTORNEY YOU V	VANT TO REMAIN IN EFFECT.
7	Taxpayer declaration and signature. If a tax matter conce	erns a year in which a jo	int return was filed, each spouse must file a separate power
	of attorney even if they are appointing the same representati	., .	
	partnership representative (or designated individual, if applic taxpayer, I certify I have the legal authority to execute this fo		
		•	•
	► IF NOT COMPLETED, SIGNED, AND DATED, II	HE IKS WILL RETUR	RN THIS POWER OF ATTORNEY TO THE TAXPAYER.
Tesla Talia	aferro (Jan 11, 2023 10:02 EST)		PRESIDENT
	Signature	Date	Title (if applicable)
resl.	A TALIAFERRO	RAINBOW ROSE	CENTER
	Print Name	Print n	ame of taxpayer from line 1 if other than individual
Part	t II Declaration of Representative		
Under	penalties of perjury, by my signature below I declare that:		
• I ar	m not currently suspended or disbarred from practice, or ineligi	ble for practice, before th	ne Internal Revenue Service;
• I ar	m subject to regulations in Circular 230 (31 CFR, Subtitle A, Pa	art 10), as amended, gov	verning practice before the Internal Revenue Service;
• I ar	m authorized to represent the taxpayer identified in Part I for th	ne matter(s) specified the	re; and
• I ar	m one of the following:		
а	Attorney - a member in good standing of the bar of the highes	st court of the jurisdiction s	shown below.
b	Certified Public Accountant - a holder of an active license to p	practice as a certified pul	olic accountant in the jurisdiction shown below.
С	Enrolled Agent - enrolled as an agent by the IRS per the requ	uirements of Circular 230	J.
d	Officer - a bona fide officer of the taxpayer organization.		
е	Full-Time Employee - a full-time employee of the taxpayer.		
f		ly (spouse, parent, child,	grandparent, grandchild, step-parent, step-child, brother, or sister)
g	Enrolled Actuary - enrolled as an actuary by the Joint Board t		• , • , • , • , • , • , • , • , • , • ,
Ū	the IRS is limited by section 10.3(d) of Circular 230).		
h	,	RS is limited. An unenr	olled return preparer may represent, provided the preparer (1)
	prepared and signed the return or claim for refund (or prepare		
		ŭ	Season Program Record of Completion(s). See Special Rules
	and Requirements for Unenrolled Return Preparers in th		
k	Qualifying Student or Law Graduate - receives permission to		
••	accounting student, or law graduate working in a LITC or STC		•
r	Enrolled Retirement Plan Agent - enrolled as a retirement plan		·
•	Emonos Nomoment lan Agent - emones as a remement pla	an agont and or the require	amond of official 200 (the authority to practice before the

Internal Revenue Service is limited by section 10.3(e)).

#### ▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THE POWER OF ATTORNEY. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN PART I, LINE 2.

**Note:** For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column.

Designation - Insert above letter (a-r).	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date
C	IRS	00148759-EA		

Form 2848 (Rev. 1-2021) EEA

#### Eorm 8879-TE

Department of the Treasury Internal Revenue Service

### IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning

07-01 , 2022, and ending 12-31 , 2022

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

2022

OMB No. 1545-0047

Name of filer **EIN or SSN** RAINBOW ROSE CENTER 84-4860991 Name and title of officer or person subject to tax TESLA TALIAFERRO, PRESIDENT Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a 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, 7b, 8b, 9b, or 10b, 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. **b Total revenue**, if any (Form 990, Part VIII, column (A), line 12)..... Form 990 check here . . . . . Form 990-EZ check here . . . x 38,635 Form 1120-POL check here. . Form 990-PF check here . . . **b** Tax based on investment income (Form 990-PF, Part V, line 5). . . . 4a Form 8868 check here . . . . 6a Form 990-T check here . . . . 6b 7a Form 4720 check here . . . . 8b Form 5227 check here . . . . **b** FMV of assets at end of tax year (Form 5227, Item D) . . . . . . . . 8a Form 5330 check here . . . . 10a Form 8038-CP check here . . b Amount of credit payment requested (Form 8038-CP, Part III, line 22) . 10b Declaration and Signature Authorization of Officer or Person Subject to Tax A I am an officer of the above entity or Under penalties of perjury, I declare that 9 I am a person subject to tax with respect to (name and that I have examined a copy of the of entity) 2021-2023 , (EIN) INCOME TAX 2022 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 x I authorize TRUE ADVISORY GROUP 60991 to enter my PIN as my signature **ERO firm name** Enter five numbers, but do not enter all zeros on the tax year 2022 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 entity, I will enter my PIN as my signature on the tax year 2022 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 01-09-2023 **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 245632 02046 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 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. 01-06-2023 Date **ERO Must Retain This Form - See Instructions** 

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

# SIGNATURE NEEDED: 2022 Business Tax Documents

Final Audit Report 2023-01-11

Created: 2023-01-10

By: Greg Bianco (gbianco@trueadvisorygroup.com)

Status: Signed

Transaction ID: CBJCHBCAABAAJaLegHTdUuzCqh9Q4BIB6WcX6t1j-MR8

## "SIGNATURE NEEDED: 2022 Business Tax Documents" Histor

У

- Document created by Greg Bianco (gbianco@trueadvisorygroup.com) 2023-01-10 3:48:47 PM GMT- IP address: 3.88.216.166
- Waiting for Signature by Tesla Taliaferro (president@rainbowrosecenter.org) 2023-01-10 3:53:06 PM GMT
- Tesla Taliaferro (president@rainbowrosecenter.org) verified identity with knowledge based authentication performed by LexisNexis. Authentication token 31019936850055
  2023-01-11 3:01:50 PM GMT
- Document e-signed by Tesla Taliaferro (president@rainbowrosecenter.org)

  E-signature hosted by Greg Bianco (gbianco@trueadvisorygroup.com)

  Signature Date: 2023-01-11 3:02:57 PM GMT Time Source: server- IP address: 71.113.153.179
- Agreement completed. 2023-01-11 - 3:02:57 PM GMT