



**STATE OF HAWAII
DEPARTMENT OF THE ATTORNEY GENERAL
TAX & CHARITIES DIVISION
425 QUEEN STREET
HONOLULU, HAWAII 96813
808-586-1480 FAX 808-586-8116**

ANNUAL CHARITY TRANSMITTAL FORM

IRS Form 990-N Filers and Filers Not Required To File With The IRS

Period Covered: 1/1/2016 to 12/31/2016

Tax Year: 2016

EIN: 46-4691571

Organization Name: Rainbow Family 808 Com Inc

Address Line 1: 95 954 Makakilo Dr Unit 71

Address Line 2: _____

City, State Zip: Kapolei, HI, 96707

Email Address: Rainbowfamily808@gmail.com

Phone Number: 808-779-9078

Submitted By James Mateo

Title: Vice President

Date Signed: 3/25/2017

Email Address: peteandjim@hawaii.rr.com

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Revenue

1 Contributions, gifts, grants, and similar amounts	<u>\$17,004</u>
2 Program service revenue including government fees and contracts	<u>\$0</u>
3 Membership dues and assessments	<u>\$0</u>
4 Investment income	<u>\$0</u>
5a Gross amount from sale of assets other than inventory	<u>\$0</u>
b Less: cost or other basis and sales expenses	<u>\$0</u>
c Gain or (loss) from sale of assets other than inventory	<u>\$0</u>
6 Gaming and fundraising events	
a Gross income from gaming	<u>\$0</u>
b Gross income from fundraising	<u>\$631</u>
(not including <u>\$0</u> of contributions reported on line1)	
c Less: direct expenses from gaming and fundraising events	<u>\$0</u>
d Net income or (loss) from gaming and fundraising events	<u>\$631</u>
7a Gross sales of inventory, less returns and allowances	<u>\$0</u>
b Less: cost of goods sold	<u>\$0</u>
c Gross profit or (loss) from sales of inventory	<u>\$0</u>
8 Other income	<u>\$0</u>
9 Total revenue	<u>\$17,635</u>

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Expenses

10 Grants and similar amounts paid	<u>\$19,768</u>
11 Benefits paid to or for members	<u>\$0</u>
12 Salaries, other compensation, and employee benefits	<u>\$0</u>
13 Professional fees and other payments to independent contractors	<u>\$0</u>
14 Occupancy, rent, utilities, and maintenance	<u>\$0</u>
15 Printing, publications, postage, and shipping	<u>\$0</u>
16 Other expenses	<u>\$231</u>
17 Total expenses	<u>\$19,999</u>
Program service expenses	<u>\$19,999</u>
(Total of program service expenses included in lines 10-16)	

Net Assets

18 Excess or deficit for the year	<u>(\$2,364)</u>
19 Net assets or fund balances at beginning of year	<u>\$116,677</u>
20 Other changes in net assets or fund balances	<u>\$0</u>
21 Net assets or fund balances at end of year	<u>\$114,313</u>

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23) Salaries and Expense Allowance Statement

Five Highest Paid Employees

<u>Name</u>	<u>Title</u>	<u>Average hours per week</u>	<u>Compensation (W-2)</u>	<u>Expense account and other allowances</u>
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Officers

<u>Name</u>	<u>Title</u>	<u>Average hours per week</u>	<u>Compensation (W-2)</u>	<u>Expense account and other allowances</u>
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Carolyn Golojuch	President	15	\$0	\$0
James Mateo	Vice President	20	\$0	\$0
Michael Golojuch	Secretary	15	\$0	\$0
Peter Mateo	Treasurer	15	\$0	\$0
Michele Golojuch	Board Member	5	\$0	\$0
John Lazlo	Board Member	5	\$0	\$0