

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.
▶ *The organization may have to use a copy of this return to satisfy state reporting requirements*

Open to Public Inspection

A For the 2005 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CAIR - NGA		D Employer identification number 27-0012471
		Number and street (or P O box, if mail is not delivered to street address) Room/suite		E Telephone number (770) 220-0082
		P O BOX 942139 City, town, or country State ZIP + 4		F Group Exemption Number ▶
ATLANTA GA 31141-2139		G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶		
• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).				
I Website: ▶				
J Organization type (check only one)— <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
K Check <input type="checkbox"/> if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.				
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 25,408				

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 38 of the instructions.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received															23,102											
	2	Program service revenue including government fees and contracts																										
	3	Membership dues and assessments																										
	4	Investment income																										
	5a	Gross amount from sale of assets other than inventory															0											
	5b	Less: cost or other basis and sales expenses															0											
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)															0											
	6	Special events and activities (attach schedule) if any amount is from gaming, check here <input type="checkbox"/>																										
	6a	Gross revenue (not including \$ of contributions reported on line 1)															2,306											
	6b	Less: direct expenses other than fundraising expenses															7,434											
6c	Net income or (loss) from special events and activities (line 6a less line 6b)															-5,128												
7a	Gross sales of inventory, less returns and allowances																											
7b	Less: cost of goods sold																											
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)															0												
8	Other revenue (describe ▶)															0												
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) ▶															17,974												
Expenses	10	Grants and similar amounts paid (attach schedule)															0											
	11	Benefits paid to or for members															0											
	12	Salaries, other compensation, and employee benefits															26,334											
	13	Professional fees and other payments to independent contractors															1,480											
	14	Occupancy, rent, utilities, and maintenance															3,000											
	15	Printing, publications, postage, and shipping															607											
	16	Other expenses (describe ▶ See attached statement)															9,007											
17	Total expenses (add lines 10 through 16) ▶															40,428												
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)															-22,454											
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)															26,244											
	20	Other changes in net assets or fund balances (attach explanation)																										
	21	Net assets or fund balances at end of year (combine lines 18 through 20) ▶															3,790											

Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 41 of the instructions.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	25,744	3,290
23	Land and buildings		
24	Other assets (describe ▶ Computer & Printer)	500	500
25	Total assets	26,244	3,790
26	Total liabilities (describe ▶)	0	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	26,244	3,790

SCANNED OCT 16 2006

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Part III Statement of Program Service Accomplishments (See page 42 of the instructions.)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)	
What is the organization's primary exempt purpose? <u>Statement of Programs Cont'd</u>			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.			
28	Conducted "Know your Rights Seminar" with FBI, Atlanta Police and EEOC to Muslim Community, over 100 people attended. (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	\$390
29	Provided Community Awareness training to Gwinnett County District Attorney staff and Police Departments. 4 hour training session for 50 people (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	\$765
30	Community Dinner - Held free dinner for over 100 people to provide Community Awareness on various topics (Political Involvement, International Affairs, Foster Care Awareness, etc.) Sponsored September 11 Interfaith Prayer Service, where 200 people attended. (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	\$1,550
31	Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	\$1,443
32	Total program service expenses (add lines 28a through 31a)	32	4,148

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 42 of the instructions.)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name Christopher Burke Str 948 Saybrook Circle City Lilburn ST GA ZIP 30047	Title President Hr/WK 6	0	0	0
Name Wael Doukma Str 240 Ashbrook Dr City Athens ST GA ZIP 30605	Title Vice President Hr/WK 2	0	0	0
Name Anthony Kerlew Str 1012 Rays Road City Stone Mountain ST GA ZIP 30083	Title Secretary Hr/WK 2	0	0	0
Name Kafi Niambi Ansari Str 4294 Rue St Germain City Stone Mountain ST GA ZIP 30083	Title Treasurer Hr/WK 3 (Resigned 2005)	0	0	0

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.)			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.	37a	\$0	
b	Did the organization file Form 1120-POL for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved.	38b		
39	501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9.	39a	N/A	
b	Gross receipts, included on line 9, for public use of club facilities.	39b	None	
40 a	501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> \$0 ; section 4912 <input type="checkbox"/> \$0 ; section 4955 <input type="checkbox"/> \$0			
b	501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation.	40b		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.			\$0
d	Enter amount of tax on line 40c reimbursed by the organization.			\$0

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.) (Continued)

- 41** List the states with which a copy of this return is filed. ▶ GA
- 42 a** The books are in care of ▶ Name Christopher Burke Telephone no. ▶ (404) 542-1209
 Located at ▶ 948 Saybrook Circle City Lilburn ST GA ZIP + 4 ▶ 30047
- b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
 If "Yes," enter the name of the foreign country: ▶ _____
 See the instructions for exceptions and filing requirements for Form TD F 90-22.1.
- c** At any time during the calendar year, did the organization maintain an office outside of the U.S.?
 If "Yes," enter the name of the foreign country: ▶ _____
- 43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041— Check here ▶
 and enter the amount of tax-exempt interest received or accrued on:

	Yes	No
42b		X
42c		X

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including attachments, if any, and believe that it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Signature of officer: [Signature]

Type or print name and title: Christopher Burke

Paid Preparer's Use Only

Preparer's signature: [Signature] IQBAL PASHA CPA

Firm's name (or yours if self-employed), address, and ZIP + 4: PASHA AND ASSOCIATES INC CPA
880 INDIAN TRAIL CT, SUITE J, LILBURN, GA 30047

Line 1 (990-EZ) - Contributions, gifts, grants, and similar amounts received

1	Contributions	1	23,102
2	Non Cash Contributions	2	
3	Membership dues and assessments (contributions from the public)	3	
4	Government contributions (grants)	4	
5	Commercial co-venture	5	
6	Special events contributions (Line 6 - Special Events).	6	0
7	.....	7	
8	.....	8	
9	.....	9	
10	Total	10	23,102

Line 6 (990-EZ) - Special events and activities

	Event A	Event B	Event C	All others	Totals
1	Special event name	FUNDRAISING E	.....	.....	.....
1a	Number of special events	ONE	.....	.....	.....
2	Gross receipts	2,306	.....	.....	2,306
3	Less contributions		.....	.....	0
4	Gross revenue	2,306	0	0	2,306
5	Less direct expenses	7,434	.....	.....	7,434
6	Net income or (loss)	-5,128	0	0	-5,128

Line 16 (990-EZ) - Other expenses

1	Professional fundraising Speaker	1	810
2	Supplies	2	948
3	Telephone	3	1,219
4	Government Relations	4	611
5	Civil Rights Projects	5	390
6	Media Projects	6	488
7	Community Outreach Projects	7	1,894
8	Films at Fundraising	8	368
9	Staff Training	9	765
10	Web Site	10	1,514
11	Total other expenses	11	9,007

Line 24 (990-EZ) - Other assets

500

500

		Beginning	End
1	Computer & Printer	500	500
2			
3			
4			
5			
6			
7			
8			
9			
10			

Statement of Programs Cont'd

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- 31 Sponsored Muslim Media Conference to bring together various Muslim Professionals in the Media Industry to help them collaborate and talk to people about their projects. 150 people attended. Cost \$488
- 32 Helped Georgia area Muslims on 25 Civil Rights issues relating to work place discrimination and other issues. Cost \$611
- 33 Sent out press releases to Metro Atlanta Media on Major Islamic Holidays. Cost \$344
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List of Officers, Directors, Trustees and Key Employees

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- 5 Amira Wazeer - Board Member (Resigned office in 2005) 2 Hrs per week No Compensation or Contribution, No Expenses
3799 Cumberland Way, Lithonia, GA 30038
- 6 Y. Khalid Siddiq - Board Member 2Hrs per week. No Compensation or Contribution. No Expenses
7495 S. Spalding Lake Dr Atlanta, GA 30350
- 7 Amjad Taufique - Board Member 2 Hrs per week. No Compensation or Contribution. No Expenses
1352 Larson Ct., Marietta, GA 30064
- 8 Rashid Naim - Board Member 2Hrs per week. No Compensation or Contribution. No Expenses
55 Castaway Ct, Atlanta, GA 30341
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