

Return of Organization Exempt From Income Tax

2005

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2005 calendar year, or tax year beginning N/A, 2005, and ending N/A, 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: **COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA**
 Number and street (or P O box if mail is not delivered to street address): **3000 SCOTT BOULEVARD** Room/suite: **STE 212**
 City or town, state or country, and ZIP + 4: **SANTA CLARA CA 95054-3331**

D Employer identification number: **77 0411194**

E Telephone number: **(408) 986-9874**

F Accounting method: Cash Accrual
 Other (specify) ▶

G Website: ▶ **www.cair-net.org**

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check here ▶ 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 Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,704,883**

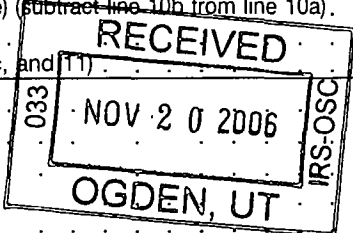
H and **I** are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶ **N/A**

M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

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

Revenue					
1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	1,575,849		
b	Indirect public support	1b	0		
c	Government contributions (grants)	1c	0		
d	Total (add lines 1a through 1c) (cash \$ 1,575,849 noncash \$ 0)	1d		1,575,849	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		19,994	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
5	Dividends and interest from securities	5			
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe ▶)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
b	Less: cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
8d					
9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
a	Gross revenue (not including \$ 314,706 of contributions reported on line 1a)	9a	109,040		
b	Less: direct expenses other than fundraising expenses	9b	165,332		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		(56,292)	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,539,551	
Expenses					
13	Program services (from line 44, column (B))	13		890,372	
14	Management and general (from line 44, column (C))	14		193,451	
15	Fundraising (from line 44, column (D))	15		0	
16	Payments to affiliates (attach schedule)	16		0	
17	Total expenses (add lines 13 and 14, column (A))	17		1,083,823	
Net Assets					
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		455,728	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		823,557	
20	Other changes in net assets or fund balances (attach explanation)	20		0	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,279,285	



SCANNED OCT 15 2005

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule) (cash \$ <u>23,035</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22	23,035	23,035		
23	Specific assistance to individuals (attach schedule)	23	3,600	3,600		
24	Benefits paid to or for members (attach schedule)	24				
25	Compensation of officers, directors, etc.	25	114,543	97,362	17,181	
26	Other salaries and wages	26	325,327	276,528	48,799	
27	Pension plan contributions	27				
28	Other employee benefits	28	33,983	28,886	5,097	
29	Payroll taxes	29	70,707	60,101	10,606	
30	Professional fundraising fees	30				
31	Accounting fees	31	1,000		1,000	
32	Legal fees	32	1,223		1,223	
33	Supplies	33	32,818	27,895	4,923	
34	Telephone	34	70,666	60,066	10,600	
35	Postage and shipping	35	13,666	11,616	2,050	
36	Occupancy	36	108,960	92,616	16,344	
37	Equipment rental and maintenance	37	2,513		2,513	
38	Printing and publications	38	46,005	46,005		
39	Travel	39	22,290	22,290		
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42	22,816		22,816	
43	Other expenses not covered above (itemize):					
a	MISCELLANEOUS	43a	23,981	9,149	14,832	
b	CIVIL RIGHTS PROGRAMS	43b	12,427	12,427		
c	MUSLIM YOUTH LEADERSHIP CONF.	43c	17,776	17,776		
d	GENERAL OUTREACH ACTIVITIES	43d	50,943	50,943		
e	EDUCATIONAL PROGRAMS	43e	23,682	23,682		
f	ADVERTISING AND PUBLIC RELATIONS	43f	26,395	26,395		
g	INSURANCE	43g	35,467		35,467	
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	1,083,823	890,372	193,451	0

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► Combating discrimination against Islam and Muslims	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<small>(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)</small>
<p>a Conducted 4 civil rights advocacy campaigns, assisting 402 Muslims who had suffered discrimination because of their religious practices. Made monetary grants to 26 organizations and causes, 7 awards for civic and religious activism, and a scholarship for a journalism student. Made emergency cash grants to several families unrelated to the organization who were in need of certain necessities of life.</p> <p>(Grants and allocations \$ 26,635) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	267,112
<p>b Conducted 147 community outreach events and 10 media outreach events to educate the public about Islam and discrimination against Muslims. Initiated and contributed to 234 print articles and broadcast media pieces.</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	507,512
<p>c Conducted 3 annual conferences throughout California, attended by 2,501 people, including public officials and law enforcement personnel, interfaith leaders, etc. The purpose was to update the public regarding the work of the organization, address civil rights concerns, and raise funds.</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	71,230
<p>d Conducted our annual leadership conference in which 27 high school students were sent to Sacramento, the state capital. It featured workshops on community organizing and advocacy, public speaking, and an opportunity to conduct a "mock legislature" session on the floor of the state Senate.</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	44,518
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	0
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►</p>	890,372

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing	337,490	45	791,254
	46 Savings and temporary cash investments		46	
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments—securities (attach schedule)	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55a Investments—land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
56 Investments—other (attach schedule)		325,000	56	325,000
57a Land, buildings, and equipment: basis	57a	206,699		
b Less: accumulated depreciation (attach schedule)	57b	68,448	57c	138,251
58 Other assets (describe ► RECONCILING FIGURE)		0	58	24,780
59 Total assets (must equal line 74). Add lines 45 through 58.		823,557	59	1,279,285
Liabilities	60 Accounts payable and accrued expenses	0	60	0
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ►)		65	
66 Total liabilities. Add lines 60 through 65		0	66	0
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		823,557	72
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		823,557	73	1,279,285
74 Total liabilities and net assets/fund balances. Add lines 66 and 73.		823,557	74	1,279,285

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	N/A
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	N/A
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See 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 plans	(E) Expense account and other allowances
FOUAD KHATIB 4797 Calais Court, San Jose CA 95124-4747	CHAIR/As needed	0	0	0
DR. HAMZA NAKHAL 1005 San Tomas Street, Davis CA 95618-4941	VICE CHAIR/ "	0	0	0
SHAFATH SYED 1543 Kennewick Drive, Sunnyvale CA 94087-4159	TREASURER/ "	0	0	0
TAHRA GORAYA 235 N Holliston Ave #6, Pasadena CA 91106-1558	SECRETARY/ "	0	0	0
HUSSAM AYLOUSH 2994 McDonald Lane, Corona CA 92881-8212	Board Member & Exec Dir/ So Calif 60 hours/week	70,033	1,303	0
OMAR AHMED 2713 Gentry Court, Santa Clara CA 95051-1746	Board Mem/As needed	0	0	0
RASHID AHMED 3636 Kingsport Way, Sacramento CA 95826-5248	Board Mem/As needed	0	0	0
DR. ASHRAF IBRAHIM 8192 Andora Drive, La Mirada CA 90638-6108	Board Mem/As needed	0	0	0
HYDER ALI 2110 223rd Place NE, Sammamish WA 98074-4096	Board Mem/As needed	0	0	0
BASSIM ELKARRA 9228 Cerrolinda Circle, Elk Grove CA 95758-5449	Exec Dir/ Sacramento 50 hours/week	44,510	2,132	0

Part V-A Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>	Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 9		
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	<input checked="" type="checkbox"/>
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations. If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.	75c	<input checked="" type="checkbox"/>
d Does the organization have a written conflict of interest policy?	75d	<input checked="" type="checkbox"/>

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

Part VI Other Information <i>(See the instructions.)</i>	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	<input checked="" type="checkbox"/>
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	<input checked="" type="checkbox"/>
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	<input checked="" type="checkbox"/>
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	<input checked="" type="checkbox"/>
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	<input checked="" type="checkbox"/>
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	<input checked="" type="checkbox"/>
b If "Yes," enter the name of the organization ▶ CAIR CALIFORNIA TITLE HOLDING CORPORATION and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a Enter direct and indirect political expenditures. (See line 81 instructions) 81a 00		
b Did the organization file Form 1120-POL for this year?	81b	<input checked="" type="checkbox"/>

Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		<input checked="" type="checkbox"/>
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<input checked="" type="checkbox"/>	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	85b		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
	86b		
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	<input checked="" type="checkbox"/>
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ <u>00</u> ; section 4912 ▶ <u>00</u> ; section 4955 ▶ <u>00</u>		
b	501(c)(3) and 501(c)(4) orgs. 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 a statement explaining each transaction	89b	<input checked="" type="checkbox"/>
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<u>00</u>
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		<u>00</u>
90a	List the states with which a copy of this return is filed ▶ <u>CALIFORNIA</u>		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	<u>13</u>
91a	The books are in care of ▶ <u>EMAD ABDELMAKSOU, CPA</u> Telephone no ▶ <u>(. 714 .) 254-0098</u> Located at ▶ <u>800 SOUTH BROOKHURST ST, STE 3-B, ANAHEIM CA</u> ZIP + 4 ▶ <u>92804-4301</u>		
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 , Report of Foreign Bank and Financial Accounts.	91b	<input checked="" type="checkbox"/>
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ _____	91c	<input checked="" type="checkbox"/>
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 <input type="checkbox"/>		

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a SALES OF RELATED PUBLICATIONS					12,274
b ADVERTISING	511110	7,720			
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					(56,292)
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		7,720			(44,018)
105 Total (add line 104, columns (B), (D), and (E))					(36,298)

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	Distributed educational books and videos, as well as expressive T-shirts, all containing information that furthered the organization's educational messages and objectives.
101	Special events featured educational speakers addressing issues related to the exempt purposes of the organization and included solicitations of voluntary donations and pledges from those in attendance.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, from a personal benefit contract?
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, from a personal benefit contract?
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, and belief, it is true, correct, and complete Declaration of preparer (other than the taxpayer) is based on all the information provided to the preparer with respect to this return.

Please Sign Here
 Signature of officer: *Fouad Khatib*
 FOUAD KHATIB, CHAIRMAN
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature: *Josh Wagner*
 Firm's name (or yours if self-employed), address, and ZIP + 4: JOSH WAGNER -- PLANRIGHT, 375 Western Drive, Suite K, Sa

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2005

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA	Employer identification number 77 : 0411194
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 . ▶				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services . ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services . ▶		

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>745</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	✓	
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)</p>		
<p>a Sale, exchange, or leasing of property?</p>		✓
<p>b Lending of money or other extension of credit?</p>		✓
<p>c Furnishing of goods, services, or facilities?</p>		✓
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 990, Part V-A</p>	✓	
<p>e Transfer of any part of its income or assets?</p>		✓
<p>3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)</p>	✓	
<p>b Do you have a section 403(b) annuity plan for your employees?</p>		✓
<p>c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?</p>		✓
<p>4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p>		✓
<p>b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?</p>		✓

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A)
- 12** An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,184,797	1,137,876	1,135,095	1,311,105	4,768,873
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	129,210	112,250	88,000	36,000	365,460
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	102,401	36,132	138,533
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	1,314,007	1,250,126	1,325,496	1,383,237	5,272,866
24 Line 23 minus line 17	1,184,797	1,137,876	1,237,496	1,347,237	4,907,406
25 Enter 1% of line 23	13,140	12,501	13,255	13,832	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	▶	26a	98,148
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	▶	26b	324,428
c Total support for section 509(a)(1) test: Enter line 24, column (e)	▶	26c	4,907,406
d Add: Amounts from column (e) for lines: 18 <u>138,533</u> 19 <u>0</u> 22 <u>0</u> 26b <u>324,428</u>	▶	26d	462,961
e Public support (line 26c minus line 26d total)	▶	26e	4,444,445
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶	26f	90.57 %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.

(2004) (2003) (2002) (2001)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

(2004) (2003) (2002) (2001)

c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶	27c	
d Add: Line 27a total, _____ and line 27b total, _____	▶	27d	
e Public support (line 27c total minus line 27d total)	▶	27e	
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)	▶	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions.) **THIS PAGE NOT APPLICABLE**
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)	31	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
(The term "expenditures" means amounts paid or incurred.)															
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	345												
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	400												
38	Total lobbying expenditures (add lines 36 and 37)	38	745												
39	Other exempt purpose expenditures	39	889,627												
40	Total exempt purpose expenditures (add lines 38 and 39)	40	890,372												
41	Lobbying nontaxable amount. Enter the amount from the following table— <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">If the amount on line 40 is—</td> <td style="width: 50%;">The lobbying nontaxable amount is—</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	If the amount on line 40 is—	The lobbying nontaxable amount is—	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41	158,556
If the amount on line 40 is—	The lobbying nontaxable amount is—														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42	39,639												
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	0												
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	0												

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount	158,556	176,818	146,104		481,478
46 Lobbying ceiling amount (150% of line 45(e))					722,217
47 Total lobbying expenditures	400	1,122	834	0	2,356
48 Grassroots nontaxable amount	39,639	44,205	36,526		120,370
49 Grassroots ceiling amount (150% of line 48(e))					180,555
50 Grassroots lobbying expenditures	345	542	500	0	1,387

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:		
(i) Cash		✓
(ii) Other assets		✓
b Other transactions:		
(i) Sales or exchanges of assets with a noncharitable exempt organization		✓
(ii) Purchases of assets from a noncharitable exempt organization		✓
(iii) Rental of facilities, equipment, or other assets		✓
(iv) Reimbursement arrangements		✓
(v) Loans or loan guarantees		✓
(vi) Performance of services or membership or fundraising solicitations		✓
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		✓

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA EIN: 77-0411194

Form 990 - Part I - Revenue, Expenses, etc.

Line 9 - Schedule of Special Events

The organization's special events consisted of 3 evenings of dinner and educational speakers, 2 in Northern California (701 guests @ retail value \$40 = \$28,040) and 1 in Southern California (1,800 guests @ retail value \$45 = \$81,000).

DESCRIPTION	NOR CALIF	SO CALIF	TOTALS
Gross Receipts	\$138,408	\$285,338	\$423,746
Less Contributions	\$110,368	\$204,338	\$314,706
Gross Revenue	\$28,040	\$81,000	\$109,040
Less Direct Expenses	\$60,942	\$104,390	\$165,332
Net Income	(\$32,902)	(\$23,390)	(\$56,292)

Part II - Statement of Expenses - Line 22 - Grants and Allocations

NOTE: The following awards were made to individuals unrelated to the organization in any way.

Grantee	Address	Purpose	Amount
Emam Karaman	3700 Carlyle Close #889 Mobile AL 36609	Journalism scholarship	\$2,500
Saqib Keval	9336 Crowell Drive Elk Grove CA 95624	To sponsor a leadership trip	\$250
TOTAL			\$2,750

COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA EIN: 77-0411194

 Part II - Statement of Expenses - Line 22 - Grants and Allocations,
 continued

The organization made cash grants to the following organizations:

Grantee	Address	Purpose	Amount
Islamic Relief	6131 Orangethorpe Av #450 Buena Park CA 90620	Program support	\$50
Day One	175 N Euclid Pasadena CA 91101	Program support	\$300
First Amendment Foundation	3321 12 th St NE Washington DC 20017	Program support	\$100
Indo-Chinese Muslim Refugee Association	1001 E Grant Ste 2B Santa Ana CA 92703	Program support	\$5,000
Interfaith Airport Chapels of Chicago	PO Box 66353 Chicago IL 60666	Program support	\$25
Civic Worldwide	1630 Connecticut NW #500 Washington DC 20009	Program support	\$250
TOTAL			\$5,725

The organization made cash grants to the following organizations to
 provide assistance to the victims of the October 2005 earthquake in
 Pakistan:

Grantee	Address	Amount
Islamic Circle of North America (ICNA) Relief	166-26 89 th Ave Jamaica NY 11432	\$1,000
The Zakat Foundation of America	PO Box 639 Worth IL 60482	\$1,500
Islamic Relief	6131 Orangethorpe Av #450 Buena Park CA 90620	\$1,500
Hidaya Foundation	PO Box 5481 Santa Clara CA 95056	\$1,000
Council of Pakistan American Affairs	1458 Manhattan Ave Fullerton CA 92831	\$1,000
TOTAL		\$6,000

TOTAL THIS PAGE

\$11,725

COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA EIN: 77-0411194

Part II - Statement of Expenses - Line 22 - Grants and Allocations,
continuedThe organization made cash grants to the following organizations:

Grantee	Address	Purpose	Amount
Center for Human Rights Law and Advocacy	1112 I St, Ste 250 Sacramento CA 95814	ML King, Jr, Sponsorship	\$1,000
Asian Pacific State Employees Assoc Fndation	PO Box 22188 Sacramento CA 95822	Annual dinner	\$60
Japanese-Amer Citizen's League, Florin Chapter	PO Box 292634 Sacramento CA 95829	Multi-racial forum	\$100
Org of Chinese-Amer, Greater Sac'to Chapter	PO Box 904 Sacramento CA 95812	Annual dinner	\$500
Asian Pacific Islander Amer Pub Affairs Assoc	7315 Stockton Blvd. Sacramento CA 95823	Internship banquet	\$250
Capitol Foundation	5665 Freeport Blvd Ste 2 Sacramento CA 95822	Annual banquet	\$750
Women in Black	4750 Lincoln Blvd #237 Marina Del Rey CA 90292	Event sponsorship	\$200
Muslim Sports and Entertainment Foundation	PO Box 1176 Garden Grove CA 92842	Program support	\$350
Council on Amer-Islamic Relations, Washington DC	453 New Jersey Ave SE Washington DC 20003	Internship prog. support	\$4,000
Interfaith Com. United for Justice & Peace	PO Box 483 Pasadena CA 91102	Crawford TX delegate	\$100
National Coalition for Redress/Reparations	231 E 3 rd St, G104 Los Angeles CA 90013	Event sponsorship	\$100
Muslim American Society	PO Box 15240 Anaheim CA 92083	Sponsorship	\$150
Coalition to Preserve Human Dignity	PO Box 93789 Pasadena CA 91109	Humanitarian Day donation	\$250
Interfaith Workers' Justice	1020 W Bryn Mawr 4 th Fl Chicago IL 60660	Program support	\$500
University Muslim Medical Assoc Clinic	PO Box 44-A52 Los Angeles CA 90044	Program support	\$250
TOTAL			\$8,560
Sub-total page 1			\$2,750
Sub-total page 2			\$11,725
GRAND TOTAL LINE 22			\$23,035

COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA EIN: 77-0411194

Form 990 - Part II - Statement of Functional Expenses
Line 23 - Specific Assistance to Individuals

The organization made a cash grant of \$3,600.00 to families unrelated to the organization. The families were in need of certain basic necessities of life.

Part II, Line 42 Depreciation AND
Part IV, Line 57b Accumulated Depreciation

Asset	Year Acqd.	Cost or Basis	Method	Life	Current Deprec.
Building Improvements	2001	\$120,078	S/L	39	
Leasehold Improvements	2001	\$4,300	S/L	15	
Computers & Software	2001	\$18,027	S/L	5.0	
Furniture/Office Equipment	1998	\$64,294	S/L	7.0	
TOTALS		\$206,699			\$68,448

Form 990 - Part IV - Balance Sheet
Line 56 - Other Investments

The organization invested funds with the North American Islamic Trust, an investment fund that makes conservative investments on behalf of Islamic organizations.

Form 990 - Part V-A - Officers and Directors
Line 75d - Conflict of Interest Policy Statement

It should be noted that the Board of Directors is currently considering adopting a Conflict of Interest Policy Statement that follows IRS guidelines.

COUNCIL ON AMERICAN-ISLAMIC RELATIONS, CALIFORNIA EIN: 77-0411194

Form 990 - Schedule A - Part III

Line 3a - Eligibility of Scholarship Recipients

Eligibility for scholarships was based on financial need, academic merit, and community involvement. Financial need was evaluated based on applicants' written statements. Academic merit was based on reviews of the applicants' school transcripts. And a certain minimum number of community services hours was also required.

Recipients of journalism scholarships must be pursuing an education in journalism.

- 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—Must File Original and One Copy.

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization COUNCIL ON AMERICAN-ISLAMIC RELATIONS CALIFORNIA	Employer identification number 77 : 0411194
	Number, street, and room or suite no. If a P.O. box, see instructions 3000 SCOTT BOULEVARD SUITE 212	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SANTA CLARA CA 95054-3331	

Check type of return to be filed (File a separate application for each return):

- Form 990
- Form 990 BL
- Form 990 EZ
- Form 990 PF
- Form 990 T (sec. 401(a) or 408(a) trust)
- Form 990 T (trust other than above)
- Form 1041 A
- Form 4720
- Form 5227
- Form 6069
- Form 8870

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 **E ABDELMAKSOU, 800 S BROOKHURST #3B, ANAHEIM CA 92804**
Telephone No. **(714) 254-0098** 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.

4 I request an additional 3 month extension of time until NOVEMBER 15, 2006.

5 For calendar year 2005, or other tax year beginning _____, 20____, and ending _____, 20____.

6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension _____
TAXPAYER NEEDS ADDITIONAL TIME TO RECONCILE ITS CHARTS OF ACCOUNTS IN ORDER TO GENERATE AN ACCURATE RETURN.

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 \$ 0

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 \$ 0

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ 0

Signature and Verification

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 [Signature] Title **TAX PREPARER** Date **08/14/2006**

Notice to Applicant—To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10 day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10 day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested
- Other _____

Director _____ By _____ Date _____

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3 month extension returned to an address different than the one entered above.

Type or print	Name JOSH WAGNER -- PLANRIGHT	EXTENSION APPROVED AUG 29 2006 FIELD DIRECTOR SUBMISSION PROCESSING CENTER
	Number and street (include suite, room, or apt. no.) or a P.O. box number 375 WESTERN DR STE K	
	City or town, province or state, and country (including postal or ZIP code) SANTA CRUZ CA 95060-6813	