orm	990
CULT	330

Department of the Treasury Internal Revenue Service **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)

OMB No. 1545-0047

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

2004 Open to Public Inspection

			2004 calendar year, or tax year beginning OCTOBER 01 , 2	004, an	d ending	SEPT	EMBER 30,2005				
		eck if plicable	Please C Name of organization		D	Emplo	oyer Identification number				
	Ad	dress c		OITA	NS B	6-10	45521				
	☐ Na	me cha	nge <b>print or</b> Number and street (or P.O. box if mail is not delivered to street address)			Telep	hone number				
	ln:	tıal retu	see 202 E. MCDOWELL RD, SUITE 165		(	602)	262-2247				
	Fir	nal retur	Specific City or town, state or country, and ZIP + 4		F	Acctg	. method: X Cash Accrual				
	An	nended					her (specify) ▶				
	ДАр	plicatio	pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt	H & I	are not a		ole to section 527 organizations				
			charitable trusts must attach a completed Schedule A (Form 990 or 990–EZ).	H(a)	Is this a gro	up retur	n for affiliates? Yes X No				
	<u>G W</u>	ebsite	: ▶ WWW.CAIRAZ.ORG	H(b)	If "Yes," en	ter numb	er of affiliates <b>&gt;</b>				
	J Or	ganiz	ation type (check only one) ► X 501(c)(3 )  (insert no.) 4947(a)(1) or 527	H(c)	Are all affili	ates incli	uded? . See instructions.) Yes No				
	K Ch	eck h	ere   if the organization's gross receipts are normally not more than				•				
	ֆ≥ red	5,000. ceived	The organization need not file a return with the IRS; but if the organization a Form 990 Package in the mail, it should file a return without financial data.	H(a)	is this a ser organization	parate ret n covere	arate return filed by an covered by a group ruling? Yes X No				
	Sc	me st	ates require a complete return.	ı	Group Ex	emptio	n Number ▶				
				м	Check ▶	· _ lf o	organization is not required to				
			ceipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 130, 054		attach Sc	h. B (Fo	orm 990, 990-EZ, or 990-PF).				
	Pa	rt I	Revenue, Expenses, and Changes in Net Assets or Fund B	Balanc	<b>es</b> (See i	nstructi	ons.)				
		1	Contributions, gifts, grants, and similar amounts received:								
		a	Direct public support	130	0,054						
		b	Indirect public support			7					
		C	Government contributions (grants)			7					
		d	Total (add lines 1a through 1c) (cash \$ 130,054 noncash \$		0 )	) 1d	130,054				
		2	Program service revenue including government fees and contracts (from Part V	II, line 9	3)	2					
		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								
		b	Less: rental expenses			┪.					
		С	Net rental income or (loss) (subtract line 6b from line 6a)			6c					
	R	7	Other investment income (describe ▶		)	) 7					
	REVEN	8a	Gross amount from sales of assets other (A) Securities	(B) O	ther						
	N	ļ	than inventory 8a								
سي	<del>-   </del>		8b	·		7					
	网	10	tank 4 bss) (at ach schedule)			7					
		ď	Net gain or (combine line 8c, columns (A) and (B))			8d					
467		_9	Special everticand activities (attach schedule), if any amount is from gaming, or	check h	ere ▶ 🗍						
4	TE	B 2	contributions reported on line 1a)								
			contributions reported on line 1a)								
	0	GDI	s: diect expenses other than fundraising expenses 9b			7					
		C.	the two days on the college and sign arrange (arribation at line of the college o			9c					
		10a	Gross sales of inventory, less returns and allowances 10a								
		b	Less: cost of goods sald			7					
		С	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b	from lir	ne 10a)	10c					
,		11	Other revenue (from Fat VI), line 103)			11					
1	Г	12	Other revenue (6 on Fat VI), line 103)			12	130,054				
•	4	<b>13</b> .	Program services (1 an Ine 44, column (B))			13	35,908				
	A£	4	Management and general (from line 44, column (C))			14	43,843				
	134	5	in a alung from line			15	18,285				
	正田 乙の田の	6	Payments to attillates (attach/schedule)	16							
	S	17 C	(add lines 16 and 44, column (A))			17	119,771				
`\.`	Ž.	18	*Excess or (deficit) for the year (subtract line 17 from line 12)			18	10,283				
	MS.	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	13,161				
	NS EE T	20	Other changes in net assets or fund balances (attach explanation)			20					
	s	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	23,444				
Ī	or P	rlvacv	Act and Paperwork Reduction Act Notice, see the separate instructions.			1	Form <b>990</b> (2004)				

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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 instructions.)

Оо по	t include amounts reported on line 8b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program	(C) Management and general	(D) Fundraising				
22	Grants and allocations (attach schedule)									
	(cash \$ noncash \$)	22								
23	Specific assistance to individuals (attach schedule)	23								
24	Benefits paid to or for members (attach schedule)	24								
25	Compensation of officers, directors, etc	25	29,248	16,569	12,679					
26	Other salaries and wages	26	21,735							
27	Pension plan contributions	27								
28	Other employee benefits	28	2,500		2,500					
29	Payroll taxes	29	5,088		5,088					
30	Professional fundraising fees	30								
31	Accounting fees	750								
32	Legal fees	32								
33	Supplies									
34	Telephone	1,249								
35	Postage and shipping	35	2,903 172	1,654	172					
36	Occupancy	36	7,680		7,680					
37	Equipment rental and maintenance	37	·							
88	Printing and publications	38	4,342	4,342						
39	Travel	39	2,345	2,345						
10	Conferences, conventions, and meetings	40	235	235						
11	Interest	41								
12	Depreciation, depletion, etc. (attach schedule)	42								
13	Other expenses not covered above (itemize)  a Training	43a	78	78						
b	Pogram Expenses	43b	6,824	6,824						
С	Internet Connection	43c	751	751						
d	Banquet/Fund Raising	43d	17,785			17,785				
	See attachment 2	43e	9,907	3,110	6,297	500				
	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D),		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	carry these totals to lines 13-15	44	119,771	35,908	43,843	18,285				
olnt	Costs. Check ▶ If you are following SOP 98-2.	·			·	<u> </u>				
re a	ny joint costs from a combined educational campaign a	nd fun	draising solicitation i	eported in (B) Progr	am services? ►	Yes X No				
"Ye	s," enter (I) aggregate amount of these joint costs \$		; (II) the a	mount allocated to P	rogram services \$	;				
	e amount allocated to Management and general \$			) the amount allocat		•				
Par	III Statement of Program Service According	mplis								
		<del></del>			ights & Ed	Program Service				
Il or	ianizations must describe their exempt purpose achievi	ements	s in a clear and conc	ise manner. State the	e number of clients	for E01/a/(2) P (4) area				
erve 947(	d, publications issued, etc. Discuss achievements that a a)(1) nonexempt charitable trusts must also enter the al	are not mount	measurable. (Section of grants and allocated)	n 501(c)(3) and (4) ( tions to others.)	organizations and	& 4947(a)(1) trusts, but optional for others.)				
<b>a</b> (	uest Speaker/Diversity/ Sen	sit	ivity Train	ning-70 oc	curances,					
	ttendees from 10-50 with pu				· · ·					
	ledia meetings/intervies & p									
	ndividual?organization inte				)	10,054				
_	oial issues/Social Justice/				urances,					
_	ttendees 1-50 with publicat									
_	olitical and Law enforcemen				curances-					
_	0-50 attendees. Muslim Comm				)	11,123				
	viversity Events/Programs-23				tendees					
	ith minor publication distr									
_	vents outside of Mericopa C			rances-200	attendee					
_	ith publication distributio				1	8,432				
	ivil Rights Cases, Incident				Referrals	<u> </u>				
_	Marie Control of the									
110 occurances with minor publication distribution Assistance to individual-25 occurances no publication distri										
e (	Other program services (attach schedule)	•			· · · · · · · · · · · · · · · · · · ·	6,299				
	e Other program services (attach schedule) (Grants and allocations \$ )  f Total of Program Service Expenses (should equal line 44, column (B), Program services)									

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Part IV Balance Sheets (See Specific Instructions.)

No	ote: W	/here required, attached schedules and amounts volumn should be for end-of-year amounts only.		description	(A) Beginning of year		(B) End of year
	45	Cash non-interest-bearing			8,089	45	-240
	46	Savings and temporary cash investments				46	
	47a	Accounts receivable	47a	21,944			
	b	Less: allowance for doubtful accounts	47b			47c	21,944
							, , , , , , , , , , , , , , , , , , ,
	48a	Pledges receivable	48a				
	b	Less: allowance for doubtful accounts	48b		4,945	48c	
	49	Grants receivable			·	49	
	50	Receivables from officers, directors, trustees, and					
		(attach schedule)				50	
	51a	Other notes and loans receivable (attach		ĺ			
A S		schedule)	51a				
S	b	Less: allowance for doubtful accounts	51b			51c	
E	52	Inventories for sale or use				52	
s	53	Prepaid expenses and deferred charges			53		
	54	Investments securities (attach schedule)	Cost FMV		54		
	55a	Investments land, buildings, and					
		equipment: basis#.1	55a	2,034			
	b	Less: accumulated depreciation (attach					
		,	55b		2,034	55c	2,034
	56	investments other (attach schedule)			<del></del>	56	
	57a	Land, buildings, and equipment; basis	57a			l	
	b	Less: accumulated depreciation (attach					
	58	schedule)	57b			57c	
	36	assets (describe		)		58	
	59	Total assets (add lines 45 through 58) (must equ			15,068	59	23,738
_	60	Accounts payable and accrued expenses			1,907	60	2,953
L	61	Grants payable				61	
À	62	Deferred revenue		-		62	
В	63	Loans from officers, directors, trustees, and key e		` '			
Ĺ	04-	schedule)				63	
÷	64a	Tax-exempt bond liabilities (attach schedule)				64a	
Ĺ	65	Mortgages and other notes payable (attach sched		<del>-</del>		64b	
E S		liabilities (describe		······································		65	
•	66	Total ilabilities (add lines 60 through 65)			1,907	66	2,953
·			and o	complete lines 67			2,000
	J. 3	through 69 and lines 73 and 74.		, o			
N -	67	Unrestricted				67	
N F E U	68	Temporarily restricted		<b> -</b>		68	
T N	69	Permanently restricted		<u> </u>		69	
A D	Orga	nizations that do not follow SFAS 117, check he			· · · · · · · · · · · · · · · · · · ·		
SB	_	lines 70 through 74.		·			
A S B S A E L	70	Capital stock, trust principal, or current funds			13,161	70	20,785
T A	71	Paid-in or capital surplus, or land, building, and e		<u> </u>		71	· · · · · · · · · · · · · · · · · · ·
S N	72	Retained earnings, endowment, accumulated inco		ļ-		72	
OE	73		al net assets or fund balances (add lines 67 through 69 or lines				
RS		70 through 72;					
		column (A) must equal line 19; column (B) must			13,161	73	20,785
	74	Total liabilities and net assets / fund balances	15,068	74	23,738		

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.

Part IV-A Reconciliation of Re		ue per Audited	$\overline{}$	(1 TTTT )	nciliation of Expens	8A8	ner Audited
Financial Statement			-,-		cial Statements with		
Return (See Specific Ins				Retur			
a Total revenue, gains, and other support			а	Total expenses and	losses per audited		
per audited financial statements	▶ a	1	1			а	
<b>b</b> Amounts included on line <b>a</b> but not on			ь	Amounts included o	n line a but not		
line 12, Form 990:		<u> </u>		on line 17, Form 990	D:		
(1) Net unrealized gains	Î		(1)	Donated services			
on investments \$	į			& use of facilities	\$		
(2) Donated services	_ [	1	(2)	Prior year adjust-			
& use of facilities \$		1	` '	ments reported on			
(3) Recoveries of prior	_			line 20, Form 990	\$		
year grants \$			(3)	Losses reported on			
(4) Other (specify):	_ [	1		line 20, Form 990	\$		
	ļ		(4)	Other (specify):	<del></del>		
<b>\$</b>			` '	.,			
Add amounts on lines (1) through (4)	t	,			\$		
(,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	┌		1	Add amounts on line	es (1) through (4) >	b	
c Line a minus line b	▶   6	,	c			c	
d Amounts included on line 12,	<u> </u>		d	Amounts included o	n line 17.		
Form 990 but not on line a:			1	Form 990 but not or			
(1) Investment expenses			(1)	Investment expense	S		
not included on	-	1	` `	not included on			
line 6b, Form 990 \$		1			\$		
(2) Other (specify):	_	-	(2)	Other (specify):	<del></del>		
, , , ,	-	{	``	(, , , , , , , , , , , , , , , , , , ,			
<u> </u>	- {		1		\$		
Add amounts on lines (1) and (2)	<b>→</b> [ c	1		Add amounts on line	es (1) and (2)	d	
e Total revenue per line 12, Form 990			e	Total expenses per l			<del></del>
(line c plus line d)	▶Ìe	. 0		•	<u> •</u>	e	0
Part V List of Officers, Directo		rustees, and Key	/ En				d: see Specific
Instructions.)	,			(2.00)	· · · · · · · · · · · · · · · · · · ·		,
(A) Name and address	(B) T	itle and average hour	3 (0	C) Compensation (If	(D) Contributions to employee benefit plans & deferred comp.	(E	) Expense account
(A) Name and address	per w	eek devoted to position	n n	ot paid, enter -0)	& deferred comp.	an	d other allowances
Nure Elatari 10800 E.	Pro	g Director					
Cactus #14 Scottsdale	40			30,000			
Bushra Khan 10401 W.	þff	ice Manager	٠				
Roanoke, Avondale	40			24,000			
Mohamed El-Sharkawy	Cha	irman					
2510 Granite View, PHX				0			
Mannan MOhamed 1408 W.	Vic	e-Chairman					
Heather Ave, Gilbert				0			
Hani Rahal 202 E.	Sec	retary	П			ŀ	
McDowell, PHX				0			
Shadeh Atshan 202 E.	Tre	asurer					
McDowell, PHX				0			
Hassan El-Saad 368 W.	Воа	rd Member	T				
Verde Ln, Tempe			_	0		L	
Asim Ameer 202 E.	Воа	rd Member					
McDowell, PHX			_	0			
Ahsan Ahmad 202 E.	Boa	rd Member	$\top$				
McDowell, PHX				0		L	
Sekar Cortez 202 E.	Boa	rd Member	$\top$				
McDowell, PHX					I	t .	
				0			
75 Did any officer, director, trustee, or key			e cor		an \$100,000 from your		► Yes X No

If "Yes," attach schedule -- see Specific Instructions.

Forn	990 (2004) COUNCIL ON AMERICAN ISLAMI 86-1045521		Pa	age <b>5</b>
P	rt VI Other Information (See Specific Instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to IRS? If "Yes," attach detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
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		X
þ	If "Yes," enter the name of the organization ▶			
	and check whether it is exempt or nonexempt.			ŀ
81a	Enter direct and indirect political expenditures. See line 81 instructions			Ĺ
b	Did the organization file Form 1120-POL for this year?	81b		<u>X</u>
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at			L.
	substantially less than fair rental value?	82a		X
Þ	If "Yes," you may indicate the value of these items here. Do not include this amount			
00-	as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		77
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	,,,,,,	Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
0.5	tax deductible?	84b		X
85 L	501(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by members?	85a		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		<u>X</u>
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a			Ė
•	walver for proxy tax owed for the prior year.		i	Ė
c d	Dues, assessments, and similar amounts from members			
e				į
f	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			[
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		X
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its	osy		
••	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		X
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12   86a   N/A	0011		
b	Gross receipts, included on line 12, for public use of club facilities			ĺ
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders. 87a N/A			ŧ
b	Gross income from other sources. (Do not net amounts due or paid to other sources			į
-	against amounts due or received from them.)			i
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			į
	partnership, or an entity disregarded as separate from the organization under Regulations sections			į
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			<del>*********</del>
	section 4911 $\blacktriangleright$ N/A; section 4912 $\blacktriangleright$ N/A; section 4955 $\blacktriangleright$ N/A		1	
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		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	•	•	
	sections 4912, 4955, and 4958		N/A	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization.		N/A	
90a	List the states with which a copy of this return is filed ▶		N/A	
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)		N/A	
91	The books are in care of ▶Telephone no.▶			
	Located at ►ZIP + 4 ►			
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	1	A/R	

JVA

Note: Ente	er gross amounts unless		ted business income		d by section 512, 513, or 514	(E)
otherwise	indicated.	(A) Business	(B)	(C)	(D)	Related or exempt
93 Progr	ram service revenue:	code	Amount	Excl. code	Amount	function income
a						
h						
c						
d						
e						
f Medic	care/Medicaid payments					
g Fees	& contracts from govt. agencies					
94 Memi	bership dues & assessments					
	st on savings and temporary cash investments					
	ends & interest from securities			1		
	ental income or (loss) from real estate:		<del></del>	1		
	-financed property	<u> </u>		<del></del>		
	ebt-financed property	-	<del></del>	+		
	ntal income or (loss) from personal property		<del> </del>	<del> </del>		
			<del></del>			
	r investment income		<del> </del>	<del></del>		
	r (loss) from sales of assets other than inventor	y	<del> </del>	+		
	ncome or (loss) from special events		<del> </del>	<del> </del>		<del></del>
	s profit/(loss) from sales of inventory	<u> </u>	-			
	r revenue: a			<del></del> -		<del></del>
b			<del> </del>			
c			<u> </u>			
d						
e						
	otal (add columns (B), (D), and (E))		0	<u> </u>	0	0
	(add line 104, columns (B), (D), and (E				<b>&gt;</b>	0
	105 plus line 1d, Part I, should equal th					
Part VIII	Relationship of Activities t	o the Acco	mplishment of Exe	empt Pu	rposes (See Specific	Instructions.)
Line No.	Explain how each activity for which in				outed importantly to the a	ccomplishment of the
	organization's exempt purposes (other	r than by prov	ding funds for such purp	ooses).		
	<u> </u>					
Part IX	Information Regarding Taxa	ble Subsidi	aries and Disrega	rded Er	<b>itities</b> (See Specific Ins	tructions.)
Namo	(A)	(B)	(C) Nature of activitie		( <b>D)</b> Total income	<b>(E)</b> End-of-year
part	address, and EIN of corporation, Finership, or disregarded entity	ercentage of wnership int.	Nature of activitie	15	Total income	assets
<u> </u>		%				
		%				
		%				
		%				
					Et Contracto (Co.	
Part X	Information Regarding Trans	fers Assoc	ciated with Person	al Bene	ini Contracts (See S	pecific Instructions.)
Part X	Information Regarding Trans					
(a) Did oi	rganization, during the year, receive an	funds, directi	y or indirectly, to pay pre	miums or	a personal benefit conti	act? Yes X No
(a) Did or (b) Did th	rganization, during the year, receive an	/ funds, directlemiums, direct	y or indirectly, to pay pre y or indirectly, on a pers	miums or	a personal benefit conti	ract? Yes X No
(a) Did or (b) Did th	rganization, during the year, receive any ne organization, during the year, pay pro Yes" to <b>(b),</b> file Form 8870 <b>and</b> Form 4	funds, directlemiums, directlemiums, directlemontry (see instru	y or indirectly, to pay pre y or indirectly, on a persoctions).	miums or onal bene	a personal benefit conti fit contract?	ract? Yes X No Yes X No
(a) Did or (b) Did th Note: if "	rganization, during the year, receive and ne organization, during the year, pay pro Yes" to <b>(b),</b> file Form 8870 <b>and</b> Form 4	funds, directlemiums, directlemiums, directlemontry (see instru	y or indirectly, to pay pre y or indirectly, on a persoctions).	miums or onal bene	a personal benefit conti fit contract?	ract? Yes X No Yes X No
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## 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 Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2004

Department of the Treasury

Supplementary Information -- (See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Internal Revenue Service Name of the organization **Employer Identification number** COUNCIL ON AMERICAN ISLAMIC RELATIONS 86-1045521 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See the instructions. List each one. If there are none, enter "None.") (e) Expense account and other allowances (d) Contributions to (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation empl. benefit plans & than \$50,000 per week devoted to position deferred compensation NONE Total number of other employees paid over \$50,000. Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See 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.....

P	Statements About Activities (See the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any	T		
	attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1		
	or incurred in connection with the lobbying activities <b>&gt;</b> \$ (Must equal amounts on line 38,			
	Part VI-A, or line I of Part VI-B)	1		X
	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.	Į		Į
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	<u> </u>		1
	beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
		1		
а	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
С	Furnishing of goods, services, or facilities?	2¢		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
е	Transfer of any part of its income or assets?	2e		X
3 <b>a</b>	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	1		
	you determine that recipients qualify to receive payments.)	3a		X
b	Do you have a section 403(b) annuity plan for your employees?	3b		X
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?	4a		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X
Pa	Reason for Non-Private Foundation Status (See 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 i	ame, c	ity,	
	and state ▶		-	
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1	70(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 put	lic.		
	Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
11b	A community trust. Section 170(b)(1)(A)(vi) (Also complete the <b>Support Schedule</b> 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 a	quired	by the	9
	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 organ	ızatıons	3	
	described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).	(See		
	section 509(a)(3).)			
	Provide the following information about the supported organizations. (See the instructions.)			
	(a) Name(s) of supported organization(s)  (b) Line nu from at			
	nom at	- VVB	_	
	NONE			
			_	
14	An organization organized and operated to test for public safety. Section 509(a)(4). (See the instructions )			

Note	: You may use the worksheet in	the instruc	CHOTIS TOT C	onverting t	rom the ac	crual to the cash	method of acco	unting.		N/A	<u> </u>
Calen	dar year (or fiscal year beginning in)	(a) (	2003	(b)	2002	(c) 200	1 (d	2000		(e) Total	
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)										
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			-			ļ				
18	Gross income from interest,										
	dividends, amounts received from payments on securities loans										
	(section 512(a)(5)), rents, royalties, and unrelated business					Ì					
	taxable income (less section 511 taxes) from businesses acquired					Ì					
	by the organization after June 30, 1975										
19	Net income from unrelated			<del>                                     </del>							
	line 18			1		1			1		
20	Tax revenues levied for the			+							
	organization's benefit and either			1							
	paid to it or expended on its behalf			-							
21	The value of services or facilities					<del>                                     </del>					
£ 1	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			ŀ							
	furnished to the public without charge					Ì					
22	Other income. Attach a schedule.			ļ		<del> </del>					
	Do not include gain or (loss) from										
23	Sale of capital assets			<del> </del>		<del> </del>		-	<del>-  -</del>		
24						<del>                                     </del>					
25	Line 23 minus line 17,				<del>-</del>	<del>                                      </del>					
26	Organizations described on II	nee 10 or	111 :	Enter 29	/ of amour	ot in column (a)	line 24		26a	N/A	
	Prepare a list for your records to					• • •			200		
	governmental unit or publicly st						-	۵			
	amount shown in line 26a. Do		-	-	_	_			26b	A/N	
c	Total support for section 509(a)			-					26c	N/A	
d											**********
_	Add: Amounts from column (e)		10 –			_ 19			26d	/-	
									12001	N/A	
A	Public support (line 26c minus	line 26d to	tal)			_ 260				N/A N/A	-
e f	Public support (line 26c minus	line 26d to	tal)			,		🕨	26e	N/A	%
f	Public support (line 26c minus   Public support percentage (line 2	line 26d to: <b>ne 26e (nu</b>	tal) ı <b>merator)</b> (	divided by	Ilne 26c (	 denominator)),  ,		▶	26e 26f	N/A N/A	%
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t b c d e f	Public support (line 26c minus Public support percentage (line Organizations described on il person," prepare a list for your Do not file this list with your in (2003)  N/A  For any amount included in line show the name of, and amount (Include in the list organizations computing the difference betweexcess amounts) for each year: (2003)  N/A  Add: Amounts from column (e)  17  Add: Line 27a total  Public support (line 27c total minus Total support for section 509(a)	line 26d to: ne 26e (nu line 12: records to return. Ent (2002) e 17 that wit t received f s described een the am : (2002) for lines: .	a For show the ser the sum  as received for each year in lines 5 iount received a receiv	amounts in ame of, a of such a of su	Ilne 26c (or ncluded in nd total armounts for (20 h person (or is more that it, as well are larger armounts) total	denominator)) lines 15, 16, and ounts received reach year:  001) other than "disquent the larger of se individuals.) Decount described  001)  16 21	i 17 that were ren each year from allified persons") (1) the amount co not file this list in (1) or (2), ent	ceived in, each (2000) , preparent line 2 st with the strength (2000)	26e 26f rom a "d "disqualif re a list fo 5 for the your retu um of the 27c 27d 27e	N/A N/A isqualified fied person."  or your record year or (2) \$ irn. After ese difference	5,000.
t	Public support (line 26c minus Public support percentage (line Organizations described on II person," prepare a list for your Do not file this list with your if (2003)  N/A  For any amount included in line show the name of, and amount (Include in the list organizations computing the difference betweexcess amounts) for each year: (2003)  N/A  Add: Amounts from column (e)  17  Add: Line 27a total	line 26d to: ne 26e (nu line 12: records to return. Ent (2002) 9 17 that wit received f s described een the am (2002) for lines: unus line 27 (2) test: Er ne 27e (nu	as received for each year to total)	amounts in ame of, a of such and from each ar, that was through 1 ved and the and line 27 but from line adjivided by	Ilne 26c (or ncluded in not total ammounts for (2c) h person (c) is more that it, as well a e larger am (2c) or total	denominator)). lines 15, 16, and ounts received reach year:  001) other than "disquent the larger of se individuals.) Drount described  001)  16 21  1 (e)   271	i 17 that were reneath year from each year.  (1) the amount of o not file this list in (1) or (2), ent	ceived for the second (2000)  , preparent (2000)  ceived for the second (2000)	26e 26f from a "d "disqualifite a list for the your return of the 27c 27d	N/A N/A isqualified fied person."  or your record year or (2) \$ irn. After ese difference	ds to 5,000. es (the

Part V Private School Questionnaire (See the instructions.)

	(To be completed ONLY by schools that checked the box on line 6 in Part IV) PAGE	N/A		
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other		Yes	No
30	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	- 55	,	
	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?	31	•	:
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
~~				
32	Does the organization maintain the following:	220		
a b	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
	basis?	32b		
С	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:			
а	Students' rights or privileges?	33a	ì	
_	Charles figure of privilegeon (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
	Educational and accept	00-		
е	Educational policies?	33e		
f	Use of facilities?	33f		
•	OSO OF Idollidos F			
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.)			
			1	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	İ	
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
		<b></b>		
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		

	(To be	ring Expenditures becompleted ONLY by an	by Electing Public eligible organization th	Charities (See at filed Form 5768)	the ins	structions)		N/A
<u>Ch</u>	neck ▶ a   If the org	janization belongs to an a	affiliated group. Che	eck <b>▶ b</b> If yo	ou che	ecked "a" and "	limited (	control" provisions appl
	(The t	Limits on Lobbyin	•	rred.)		(a) Affiliated gro totals	up	(b) To be completed for ALL electing
36		litures to influence public			36			organizations
37		litures to influence a legis			37			
38		litures (add lines 36 and 3			38	····		
39		e expenditures			39			
40		expenditures (add lines			40		<del>-</del>	
41		amount Enter the amoun	,					
	If the amount on line		e lobbying nontaxable	F				
	Not over \$500,000	20	% of the amount on line	40				
	Over \$500,000 but no		0,000 plus 15% of the exces	J L				
	Over \$1,000,000 but r	ot over \$1,500,000 \$17	'5,000 plus 10% of the exces	ss over \$1,000,000	41			
	Over \$1,500,000 but r	ot over \$17,000,000 \$22	5,000 plus 5% of the excess	over \$1,500,000			,	
	Over \$17,000,000	\$1,	,000,000					
		e amount (enter 25% of lin			42			
43		ine 36. Enter -0- if line 42		1_	43			
44	Subtract line 41 from I	ine 38. Enter -0- if line 41	I is more than line 38 .		44			
				[				
_	Caution: If there is an	amount on either line 43						
			Averaging Period			` '		
	(Some o	organizations that made a				all of the five co	lumns b	pelow.
		<del></del>	See the instructions for	lines 45 through 50	).)			
			Lobbying Expen	ditures During 4-Y	ear A	veraging Period	I	
	alendar year (or fiscal ar beginning in) ▶	<b>(a)</b> 2004	<b>(b)</b> 2003	(c) 2002		<b>(d)</b> 2001		(e) Total
45	Lobbying							
	nontaxable amount							
46	Lobbying ceiling amount (150%		,					, ,,,
	of line 45(e))							
47	Totai lobbying			-				
	expenditures							
48	Grassroots	i						
	nontaxable amount							
49 	Grassroots celling amount (150% of line 48(e))					·		
50	Grassroots lobbying							
<del></del>	expenditures							
P	art VI-B Lobby	ing Activity by Non	electing Public Ci	harities				
		orting only by organization						
		ganization attempt to influ		_	uding	any Yes	No	Amount
	•	opinion on a legislative n	•	•				
a	Volunteers		• • • • • • • • • • • • • • • • • • • •				$oxed{oxed}$	
b	-	ment (Include compensa					<b>↓</b>	
C		ts					$\vdash$	
đ		, legislators, or the public					1	
e	Granto to other access	ished or broadcast statem	ients,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •			$\vdash$	
f		nizations for lobbying purp						
g h		gislators, their staffs, gove					<del>                                     </del>	
_ <u>n</u>  -		ns, seminars, conventions					<del>ا</del>	
•		iditures (Add lines <b>c</b> throu above, also attach a state						
13.74		above, also allacii a state		description of the K	nobyir	y activities.		

111111	10 11 (1 01111 000 01 000 EZ)	2001	COOMCIE ON THIER	CCEPT OO THEFTE PERO	<b>–</b>		age t
Part	VII Information R Exempt Organ	legarding Tr	ansfers To and Transaction the instructions.)	ons and Relationships With Non-	charita	ble	
51 D				ng with any other organization described in	section	501(c	 ) of
			nizations) or in section 527, relating		000	00.(0	,
			a noncharitable exempt organizati	•		Yes	No
	=	=			51a(l)		Х
(1				***********	a(II)		X
	ther transactions:						<b>†</b>
(	i) Sales or exchanges of	assets with a no	ncharitable exempt organization	***************************************	b(I)		x
	I) Purchases of assets fro	m a noncharitat	ole exempt organization		b(II)		X
(ii					b(iii)		Х
(1)					b(iv)		X
•				• • • • • • • • • • • • • • • • • • • •	b(v)		X
					b(vl)		Х
					С		X
				olumn (b) should always show the fair mark			
go	ods, other assets, or servi	ices given by the	e reporting organization. If the orga	ınızation received less than fair market valu	e ın any	transa	action
or	sharing arrangement, sho	w ın column (d)	the value of the goods, other asse	ets, or services received:			
(a)	(b)		(c)	(d)			
Line no			ncharitable exempt organization	Description of transfers, transactions, & sh	arıng ar	range	ments
		SECTION	N/A				
		-				<u> </u>	
			*******				
				71			<del></del>
		L.,					
				tax-exempt organizations described in		_	3
			on 501(c)(3)) or in section 527?		Yes	X	No
b If	"Yes," complete the followi	ing schedule:					
	(a)		(b)	(c)			
T COM	Name of organization	on	Type of organization	Description of relationsh	ııp		
BECT.	ION N/A						
	·	• • • • • • • • • • • • • • • • • • • •					<del></del>
					_		
				<u> </u>			

## SCHEDULE OF OTHER EXPENSES

Attachment 2: page 1 - 990 Page 2, Part II, Line 43 Open to Public inspection For calendar year 2004 or tax period beginning 10-01-2004, and ending 09-30-2005. Name of Organization **Employer Identification Number** COUNCIL ON AMERICAN ISLAMIC RELATIONS 86-1045521 (B) Program (C) Management Other Expenses (A) Total (D) Fundraising Services and General Office Expenses 2,223 2,223 Merchant Service Fees 758 758 Micellaneous 202 202 Insurance 3,783 3,783 Dues & Subscriptions 417 417 Contributions 415 415 Bank Service Charges 250 250 Automobile Expenses 41 41 Advertisement 1,818 1,318 500

Page Total	9,907	3,110	6,297	500
Total	9,907	3,110	6,297	500

## SCHEDULE OF INVESTMENT - LAND, BUILDING & EQUIPMENT

Attachment 1: page 1 - 990 Page 3, Part IV, Line 55a-c Open to Public Inspection For calendar year 2004 or tax period beginning 10 - 01 - 2004, and ending 09-30-2005. Name of Organization **Employer Identification Number** COUNCIL ON AMERICAN ISLAMIC RELATIONS 86-1045521 Cost or Accumulated Fair Market Value Description of Property Book Value Other Basis Depreciation (Form 990-PF only) 2,034 2,034