ATTACHMENT E TO FORM 1024

COPY

Form **990**

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

1995

This Form is Open to Public Inspection

A For the 1995 calendar year, OR tax year period beginning , 1995, and ending , 19

B Check if
- ☐ Change of address
- ☐ Initial return
- ☐ Final return
- ☐ Amended return (required also for State reporting)

Please use IRS label or print or type See Specific Instructions.

C Name of organization: COUNCIL ON AMERICAN-ISLAMIC RELATIONS, INC.

Number and street (or P.O. box if mail is not delivered to street address): 1511 K STREET, NW, | Room/suite: 807

City, town, or post office, state, and ZIP code: WASHINGTON, DC 20005

D Employer identification number: 52 1887951

E State registration number: 196087-001

F Check ▶ ☒ if exemption application is pending

G Type of organization: ▶ ☒ Exempt under section 501(c)(4) ◀ (insert number) OR ▶ ☐ section 4947(a)(1) nonexempt charitable trust

Note: *Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).*

H(a) [illegible] ☐ Yes ☒ No

(b) If "Yes," enter the number of affiliates for which this return is filed: ▶ NA

(c) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) ▶ NA

J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) ▶

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 it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: *Form 990-EZ may be used by organizations with gross receipts less than $100,000 and total assets less than $250,000 at end of year.*

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See instructions on pages 9-14.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:		
	a	Direct public support	1a 257588.	
	b	Indirect public support	1b	
	c	Government contributions (grants)	1c	
	d	Total (add lines 1a through 1c) (attach schedule of contributors) (cash $ 257588. noncash $)	1d	257588.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	
	3	Membership dues and assessments	3	15535.
	4	Interest on savings and temporary cash investments	4	1350.
	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 sale of assets other than inventory — (A) Securities / (B) Other	8a	
	b	Less: cost or other basis and sales expenses	8b	
	c	Gain or (loss) (attach schedule)	8c	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	
	9	Special events and activities (attach schedule)		
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a	
	b	Less: direct expenses other than fundraising expenses	9b	
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	
	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	274473.
Expenses	13	Program services (from line 44, column (B))	13	160840.
	14	Management and general (from line 44, column (C))	14	43759.
	15	Fundraising (from line 44, column (D))	15	13749.
	16	Payments to affiliates (attach schedule)	16	
	17	Total expenses (add lines 16 and 44, column (A))	17	218348.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	56125.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	16712.
	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	72837.

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 on page 14.)

	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 $ ____ 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	40000.	30000.	10000.	
26	Other salaries and wages	26	58971.	44228.	14743.	
27	Pension plan contributions	27				
28	Other employee benefits	28	8059.	6044.	2015.	
29	Payroll taxes	29	7609.	5707.	1902.	
30	Professional fundraising fees	30	13749.			13749.
31	Accounting fees	31	2800.	2100.	700.	
32	Legal fees	32	1750.		1750.	
33	Supplies	33	3023.	2267.	756.	
34	Telephone	34	16758.	12569.	4189.	
35	Postage and shipping	35	7317.	5488.	1829.	
36	Occupancy	36	14239.	10679.	3560.	
37	Equipment rental and maintenance	37	5129.	3847.	1282.	
38	Printing and publications	38	10105.	10105.		
39	Travel	39	8847.	8847.		
40	Conferences, conventions, and meetings	40	17042.	17042.		
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42				
43	Other expenses (itemize): a Auto Expens	43a	394.		394.	
b	Bank Service Charges	43b	387.	290.	97.	
c	Office Expenses	43c	1891.	1418.	473.	
d	DC Personal Property Tax	43d	178.	134.	44.	
e	DC Franchise Tax	43e	100.	75.	25.	
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	218348.	160840.	43759.	13749.

Reporting of Joint Costs.—Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $ NA; (ii) the amount allocated to Program services $ NA; (iii) the amount allocated to Management and general $ NA; and (iv) the amount allocated to Fundraising $ NA

Part III Statement of Program Service Accomplishments (See instructions on page 17.)

What is the organization's primary exempt purpose? ▶ TO PROMOTE BETTER UNDERSTANDING OF ISLAM & MUSLIMS IN AMERICA.

All organizations must describe their exempt purpose achievements. 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.)

		Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts; but optional for others.)
a	CAIR, INC. DEALT WITH MEDIA STEREOTYPES, MISCONCEPTIONS OF AMERICAN MUSLIMS & ARAB AMERICANS. CAIR, INC. WORKED TO SOLVE PROBLEMS ARISING DUE TO DISCRIMINATION IN THE WORK PLACE, SCHOOLS & THE PUBLIC ARENA (Grants and allocations $)	160840.
b	A VARIETY OF PUBLICATIONS ADDRESSING THE NEEDS OF AMERICAN MUSLIMS ARE OFFERED TO OPINION LEADERS AND THE PUBLIC. CAIR, INC. ALSO PUBLISH A QUARTERLY NEWSLETTER, CAIR NEWS.ALSO PRODUCED PRACTICAL HANDBKS (Grants and allocations $) ON HAJJ & RAMADAN.	incl in a.
c	CAIR ISSUES ACTION ALERTS TO LOCAL COMMUNITIES AS A MEANS OF PROMOTING LOCAL ACTIVISM AND GENERATING A GRASSROOTS RESPONSE ON IMPORTANT ISSUES. CAIR BELIEVE LOCAL RESPONSE IS A KEY FACTOR IN MAKING OUR VOICES HEARD (Grants and allocations $)	incl in a.
d	CAIR ORGANIZES CONFERENCES AND SEMINARS FOR MEDIA PROFESSIONALS, GOVERNMENT OFFICIALS AND THE ACADEMIC COMMUNITY. THESE EVENTS ARE DESIGNED TO PRESENT OTHERWISE UNAVAILABLE INFORMATION ABOUT ISLAM AND MUSLIMS. (Grants and allocations $)	incl in a.
e	Other program services (attach schedule) (Grants and allocations $)	0.
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	160840.

Part IV Balance Sheets (See instructions on pages 17-19.)

	Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.			(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing			12448.	45	24545.
	46 Savings and temporary cash investments			0.	46	40000.
	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)				54	
	55a Investments—land, buildings, and equipment: basis	55a				
	b Less: accumulated depreciation (attach schedule)	55b			55c	
	56 Investments—other (attach schedule)				56	
	57a Land, buildings, and equipment: basis	57a	9205.			
	b Less: accumulated depreciation (attach schedule)	57b	0.	5191.	57c	9205.
	58 Other assets (describe ► RENT DEPOSIT)			1664.	58	1664.
	59 **Total assets** (add lines 45 through 58) (must equal line 74)			19303.	59	75414.
Liabilities	60 Accounts payable and accrued expenses				60	
	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 ► PAYROLL TAXES PAYABLE)			2591.	65	2577.
	66 **Total liabilities** (add lines 60 through 65)			2591.	66	2577.
Net Assets or Fund Balances	**Organizations that follow SFAS 117, check here** ► ☐ 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 ► ☒ and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, bldg., and equipment fund				71	
	72 Retained earnings, accumulated income, endowment, or other funds			16712.	72	72837.
	73 **Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)			16712.	73	72837.
	74 **Total liabilities and net assets/fund balances** (add lines 66 and 73)			19303.	74	75414.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements ▶	a	NA
b	Amounts included on line a but not on line 12, Form 990:		
	(1) Net unrealized gains on investments $		
	(2) Donated services and use of facilities $		
	(3) Recoveries of prior year grants $		
	(4) Other (specify): $		
	Add amounts on lines (1) through (4) ▶	b	NA
c	Line a minus line b ▶	c	NA
d	Amounts included on line 1, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 $		
	(2) Other (specify): $		
	Add amounts on lines (1) and (2) ▶	d	NA
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	NA

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

a	Total expense and losses per audited financial statements ▶	a	NA
b	Amounts included on line a but not on line 17, Form 990:		
	(1) Donated services and use of facilities $		
	(2) Prior year adjustments reported on line 20, Form 990 $		
	(3) Losses reported on line 20, Form 990 $		
	(4) Other (specify): $		
	Add amounts on lines (1) through (4) ▶	b	NA
c	Line a minus line b ▶	c	NA
d	Amounts included on line 17, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 $		
	(2) Other (specify): $		
	Add amounts on lines (1) and (2) ▶	d	NA
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	NA

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see instructions on page 19.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
NEHAD HAMMAD 5804 MERTON CT, ALEXANDRIA, VA 22311	EXEC-DIRECTOR 60 HOURS	40000.	0.	0.
RAFEEQ JABER 9748 S.MEADE,OAKLAWN,IL 60453	DIRECTOR	0.	0.	0.
OMAR AHMAD 3335 HOMESTEAD RD, UNIT 46 SANTA CLARA, CA 95051	DIRECTOR	0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☒ No

If "Yes," attach schedule—see instructions on page 20. NA

Part VI Other Information (See instructions on pages 20–23)

			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		X
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. NA	77		X
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**, Exempt Organization Business Income Tax Return, for this year? EXCLUDABLE UNDER IRC 512(a)(1), EXCLUSION CODE 01 SEE PART VII	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? COUNCIL ON AMERICAN-ISLAMIC	80a	X	
b	If "Yes," enter the name of the organization ▶ RELATIONS FOUNDATION, INC., FORMED IN WASHINGTON, DC and check whether it is [X] exempt OR ☐ nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 — 81a: 0.			
b	Did the organization file **Form 1120-POL**, U.S. Income Tax Return for Certain Political Organizations, for this year? NA	81b		X
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?	82a		X
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 for reporting in Part III.) — 82b: NA			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
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	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X	
85	*Section 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? 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		X
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 85c) — 85f:			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	NA	NA
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	NA	NA
86	*Section 501(c)(7) organizations.*—Enter:			
a	Initiation fees and capital contributions included on line 12 — 86a: NA			
b	Gross receipts, included on line 12, for public use of club facilities — 86b: NA			
87	*Section 501(c)(12) organizations.*—Enter: a Gross income from members or shareholders — 87a: NA			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) — 87b: NA			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX NA	88		X
89	*Public interest law firms.*—Attach information described in the instructions. NA			
90	List the states with which a copy of this return is filed ▶ DISTRICT OF COLUMBIA			
91	The books are in care of ▶ HENRY HASSAN, EA ACCOUNTING & TAX SERVICES Telephone no. ▶ (703) 536-7709 Located at ▶ 3231 APEX CIRCLE ZIP code ▶ 22044 FALLS CHURCH VA 22044 PHONE (703) 536-7709			
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041, U.S. Income Tax Return for Estates and Trusts.*—Check here ▶ ☐ NA and enter the amount of tax-exempt interest received or accrued during the tax year ▶ — 92:			NA

Part VII Analysis of Income-Producing Activities (See instructions on pages 23–24.)

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					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
94 Membership dues and assessments					15535.
95 Interest on savings and temporary cash investments			01	1350.	
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					
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))		0.		1350.	15535.
105 Total (add line 101, columns (B), (D), and (E))				▶	16885.

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

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). (See instructions on page 24.)
94	MEMBERSHIP DUES HELPED CAIR, INC. CREATE AN AWARENESS IN THE AMERICAN MUSLIM COMMUNITY THAT THEIR CONCERNS REGARDING NEGATIVE STEREOTYPES OF ISLAM AND MUSLIMS CAN BE BETTER ELIMINATED THROUGH JOINING EFFORTS. DUES ARE A DIRECT RESULT OF A POSITIVE RESPONSE FROM AMERICAN MUSLIM COMMUNITY WHICH BELIEVE CAIR IS STRIVING TO PROMOTE A POSITIVE IMAGE OF ISLAM AND MUSLIMS IN AMERICA THROUGH POLITICAL AND SOCIAL ACTIVISM.

Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on line 88 is checked.)

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
NOT APPLICABLE	0 %	NA	0.	0.
	%			
	%			
	%			

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. (See instructions, page 9)

Signature of officer | Date: 05-09-96 | Type or print name and title: NEHAD HAMMAD-EXEC DIRECTOR

Paid Preparer's Use Only

Preparer's signature: HASSAN | Date: 05-09-96 | Check if self-employed ▶ [X] | Preparer's social security no.: 228 21 2838

Firm's name (or yours if self-employed) and address: HENRY HASSAN, EA
ACCOUNTING & TAX SERVICES
3231 APEX CIRCLE
FALLS CHURCH VA 22044
PHONE (703) 536-7709

EIN ▶

ZIP code ▶ 22044