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Form. 990

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

2009

Open to Public All Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service 2009, and ending For the 2009 calendar year, or tax year beginning 20 Employer identification number Sarannah C Name of organization <u>Islamic</u> Inc Please B Check if applicable 58:- 2611127 Mohammad Masroor Address change label or print o Number and street (or P O box if mail is not delivered to street address) Telephone numbe Room/suite Name change type 1030 Dutchtown Road Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated Instruc GA tions Savannah Amended return Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Yes H(b) Are all affiliates included? Yes Tax-exempt status **X** 501(c) (**3**)**◄** (insert no.) 4947(a)(1) or ☐ 527 If "No," attach a list (see instructions) Website[,] ▶ H(c) Group exemption number Form of organization 🔀 Corporation 🗌 Trust 🔲 Association 🔲 Other 🕨 Year of formation 200 M State of legal domicile Summary Parta l Briefly describe the organization's mission or most significant activities Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more 3 Number of voting members of the governing body (Part VI, line 4 Number of independent voting members of the governing body Total number of employees (Part V, line 2a). 0 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (¢), b Net unrelated business taxable income from Form 990-T, line 3 Ò 339,922 49 732 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 086 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 086 6,836 Revenue less expenses. Subtract line 18 from line 12 585 End of Year ces Beginning of Current Year Total assets (Part X, line 16) . 38 Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 Signature Block 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 2010 Sign Signature of officer Date Here Type or print name and title Date Preparer's identifying number Preparer's (see instructions) signature employed ▶ ☐ Paid Preparer's Firm's name (or yours EIN Use Only if self-employed) Phone no ► t May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

) B

Form 990 (2009)

Cat No 11282Y

Form 990 (2009)

Pai	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission Develop Islamic Center + Masque for Community Services
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 28,147 including grants of \$) (Revenue \$) To have a facility to hold services + To meet the needs of Community members. To Edwarte the value of the religion of Islam, to homele an active, modulitive + modest community. To assist + support community members with their needs in social services, weddings coun selling, formily relations and funerals. To infinite the participate programs that help the needs and those with special needs in the community.
4b	(Code) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$
	Other program services. (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 28,147

Islamic Center of Sovannah, Inc. 58-2611127

Form 990 (2009)

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Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	•	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including casements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X _
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	×	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		×
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	!		
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	LX_

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Page 4 Part-IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X. In the United States on Part IX, column-(A), line 1? If "Yes," complete Schedule I,-Parts I and II. 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X_ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated $\boldsymbol{\chi}$ employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a X with a disqualified person during the year? If "Yes," complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or χ 25b 990-EZ? If "Yes," complete Schedule L, Part I . Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 X_ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member or to a person related to such an individual? 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). X 28a a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N. Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, X 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related X organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

19? Note. All Form 990 filers are required to complete Schedule O.

Islamic Center of Savannah Inc. 58-2611127

Form 990 (2009)

Form	990 (2009)		Р	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable			
	The die name of the first of the first applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	_		
	this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	·····	
4a	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)?	4a		X
b	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_X_
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b_		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes" indicate the number of Forms 8282 filed during the year.	7c		
d	in res, indicate the number of Forms 6202 med during the year.			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	:	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a h	Initiation fees and capital contributions included on Part VIII, line 12. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a		

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, Schedule O. See instructions.	7b b	elow	, and ges in
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			,
b	Enter the number of voting members that are independent			;
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7а	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following:			
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		_/\	
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9a		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-			
	enue Code.)	,,,,,,,		
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
••	form?	11	×	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		• -	-
	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	120		
~	rise to conflicts?	12b	X	
_		14.0		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13	×	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by		· · ·	ļ
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official .	15a	-	×
	Other officers or key employees of the organization	15b		×
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
.00	with a taxable entity during the year?	16a		X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			•
U	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure		··	
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	1(3)e	only)	
•	available for public inspection. Indicate how you make these available. Check all that apply	,,(0)3	Or my)	
	Own website Another's website W Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	nf inte	aract	
	policy, and financial statements available to the public	JI 11111	J1 531	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rde o	f tha	
	organization > Mohammad Masycor 912 - 598 - 0088	143 0	1110	
	1030 Dutch Town Road Sovennah, GA 31419			

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

-1a-Complete this table-for all persons-required to be-listed Report-compensation-for-the-calendar-year-ending with-or within-the-organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee,"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any current officer, director, or trustee (C) (E) (F) Name and Title Average Position (check all that apply) Reportable Reportable Estimated hours per compensation compensation amount of Key Highest Individual trustee Institutional trustee from related week from other the compensation organizations employee organization (W-2/1099-MISC) from the compensated (W-2/1099-MISC) organization and related organizations Mohammad A Mastoor M.D. X 0 Chairman 0 Ø Masood Ahmed MD vice chairman 0 0 sagd Hammid MD χ easurer (Fill 2009 0 0 Zainul Kidwai 0 0 Treasurer (current

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Pa	Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loy	ees,	an	d Hıg	hest	t Compensate	Employees (co	intinued)
	(A)	(B) (C)							(D)	(E)	(F)
	Name and title	Average hours per week			Officer		that ap	oly) Former	Reportable compensation from	Reportable compensation from related	Estimated amount of other
			Individual trustee or director	nstitutional trustee	Icer	Key employee	Highest compensated employee	mer	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
			ļ 1		j						
									·		
					_						
1b	Total and the second se				1 4.			>	0	O	<u> </u>
2	Total number of individuals (including but reportable compensation from the organization)		to the	ose	IISTE	ea a	above) wr	no receivea ma	ore than \$100,0	UU IN
											Yes No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S	chedule J	for su	ich .	ındı	vidu	ıal .			•	3 X
4	For any individual listed on line 1a, is the sthe organization and related organizations individual										4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp olete	oens S <i>ch</i>	satio edu	on 1 Je J	rom :	any <i>uch</i>	unrelated org	anization for	5 X
Sec	ction B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization	ompensate	d ind	epe	nde	nt c	contra	ictoi	rs that receive	d more than \$1	00,000 of
	(A) Name and business add	iress							(B) Description of s	ervices	(C) Compensation
_											
2	Total number of independent contractors (i					to	those	liste	ed above) who	received	

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Part	t VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ributions, gifts, grants other similar amounts	ь с	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d				
Contributions, gifts, grants and other similar amounts	f g	Government grants (contributions). All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f	149 732			
	2a	Business Code	111,1,10			
Program Service Revenue	b c d		·			
Program		All other program service revenue . Total. Add lines 2a–2f				
	3 4 5	Investment income (including dividends, interest, and other similar amounts)	•			
	6a b c	Royalties		4 A A MINISTER CO.		v reconstruction of the contract of the contra
	7a	Gross amount from sales of assets other than inventory (i) Securities (ii) Other	-			
	С	Less cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss)	- Advances	- like	X	<u>.</u>
r Revenue	8a	Gross income from fundraising events (not including \$. 1.	.	
Other	С	Less: direct expenses			-	
		Gross income from gaming activities. See Part IV, line 19 a Less: direct expenses b	-		*	
	С	Net income or (loss) from gaming activities Gross sales of inventory, less				1
		returns and allowances a Less. cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
	11a b					
	е	All other revenue	149 732			
		Total revenue. Occ manuchons.	111111111111111111111111111111111111111	L		

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	· · · · · · · · · · · · · · · · · · ·	
Darf IV	Statement of Functional Expenses	
Fartia	Statement of Functional Expenses	

ΕĠ	Statement of Functional Expense			-111						
	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	- Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21									
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22									
3	Grants and other assistance to governments,									
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16									
4 5	Benefits paid to or for members Compensation of current officers, directors,									
	trustees, and key employees .									
6 7	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Other salaries and wages									
8	Pension plan contributions (include section 401(k)									
	and section 403(b) employer contributions) .									
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·					
10 11	Payroll taxes Fees for services (non-employees)									
	Management									
	Legal .									
С	Accounting									
d	Lobbying									
e	Professional fundraising services. See Part IV, line 17									
	Investment management fees .									
_	Other .	28,147	28,147							
12	Advertising and promotion .									
13	Office expenses									
14 15	Information technology .				.					
15 16	Royaltres									
17	Travel .									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings.									
20	Interest									
21	Payments to affiliates .									
22	Depreciation, depletion, and amortization.									
23	Insurance .									
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
а										
b										
C										
d										
e	All other evenesses		 							
f 25	All other expenses	28 147	28,147	Ø	σ					
26	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				<u> </u>					
	fundraising solicitation ,		1							

Islamic Center of Savannah Inc

Form 990 (2009)

Page 11

Lair V	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	15,822	1	6,343
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net .		3	
4 .	Accounts receivable, net		4	
	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
2 7	Notes and loans receivable, net		7	
Assets 8 8	Inventories for sale or use		8	
₹ g	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or 10a other basis. Complete Part VI of Schedule D			
b	Less accumulated depreciation 10b		10c	
11	Investments—publicly traded securities .		11	
12	Investments—other securities. See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
	Other assets See Part IV, line 11	1,257,513	15	1.432.748
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,257,513	16	1,439,091
17	Accounts payable and accrued expenses .		17	
1	Grants payable		18	
1	Deferred revenue .		19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Tabilita 22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			-
	persons Complete Part II of Schedule L		22	
	Secured mortgages and notes payable to unrelated third parties		23	704
	Unsecured notes and loans payable to unrelated third parties		24	380,000
	Other liabilities Complete Part X of Schedule D Total liabilities. Add lines 17 through 25		25 26	380,000
S	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.		20	3803000
~	Unrestricted net assets		27	
ra i	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
Ž	Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
_	Capital stock or trust principal, or current funds	1,257,513	30	1,439,091
χ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
X 32	Retained earnings, endowment, accumulated income, or other funds		32	
-	Total net assets or fund balances		33	1,059,091
	Total liabilities and net assets/fund balances		34	1.439.091

Ра	Financial Statements and Reporting			3- ·
			Yes	No
1	Accounting method used to prepare the Form 990 🔀 Cash 🗌 Accrual 🗌 Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	ļ		_
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u> ×</u>
b	Were the organization's financial statements audited by an independent accountant?	2b	L	X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			İ
	Schedule O			Ì
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		 	ر . ا
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Islamic Center of Savannah Inc

Employer identification number 58 - 2611127

Pa	rt I	Reason	for Public Ch	narity Status (All or	ganızatı	ons mus	t compl	ete this	part) Se	e instru	ctions.
The	orga			ndation because it is							
1				rches, or association							
2		A school de	scribed in <mark>sectio</mark>	on 170(b)(1)(A)(ii). (Att	tach Sch	edule E.)					
3		A hospital of	r a cooperative l	hospital service organ	nization d	lescribed	in section	n 170(b)	(1)(A)(iii).		
4		A medical re	esearch organiza	rch organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the							
	_		ame, city, and st				·				
5	IJ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d in sect	ion 170(l	b)(1)(A)(v)		
7		An organization described in	tion that normally section 170(b)	y receives a substantia (1)(A)(vi). (Complete F	al part of Part II)	its suppo	ort from a	governm	nental uni	t or from	the general public
8				d in section 170(b)(1)		Complete	Part II.)				
9	×	receipts from	n activities relate n gross investm	y receives (1) more that ed to its exempt func- ent income and unre a after June 30, 1975	tions—su lated bu	ibject to d siness ta:	certain e xable inc	ceptions	s, and (2) s section	no more	than 331/3 % of its
10		An organizat	tion organized a	nd operated exclusive	ely to tes	t for publ	ic safety	. See sec	tion 509	(a)(4).	
11		An organiza	tion organized a	and operated exclusiv	ely for the	he benefi	t of, to j	perform t	he functi	ons of a	or to carry out the
				blicly supported organ							
				at describes the type						s 11e th	rough 11h.
	_	a 🗌 Type		• •		e III–Fun	•	_			Type III-Other
е		persons other		tify that the organization managers and othe							
f				a written determinati	on from	the IRS	that it is	a Type	I Type II	or Type	III supporting
			, check this box		1011 110111		inat it is	а турс	і, турс іі	or type	
g		•	st 17, 2006, has	the organization acce	epted any	gift or c	ontributio	on from a	any of the		
			•	r indirectly controls, e		-		th persor	ns describ	ed in (ii)	Yes No
			=	erson described in (i) a	-	J			•		11g(iı)
				of a person described		(ii) above	2		•	•	11g(in)
h				ation about the suppo							\
(1)		e of supported janization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	rou notify nization in of your port?	organizat	zed in the	(vii) Amount of support
					Yes	No	Yes	No	Yes	No	
											
					1						
					-	ļ					
		· · · · · · · · · · · · · · · · · · ·				-					
									-		
		_									
			I	t	i	1	l	I	1		I

Total

Islamic Center of Savannah Inc. 58-2611127

Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part 1.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 . 11 12 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 331/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization .▶ □ . . . b 33%% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33%% or more, check this box and stop here. The organization qualifies as a publicly supported organization **▶** □ 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

▶ □

Schedule A (Form 990 or 990-EZ) 2009

	(Complete only if you checke	ed the box or	n line 9 of Pa	rt I.)				
	tion A. Public Support							
Ca	lendar year (or fiscal year beginning in) -	- (a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	-
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	139,724	569,896	468,435	339,922	149,732	1,667,	709
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	139,724	569,896	468,435	339,922	149,732	1,667,70	9
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b ,							
8	Public support (Subtract line 7c from line 6)						1,667,70	,9
	tion B. Total Support	(a) 7005	(b) 2006	(a) 2007	(4) 2008	(-) 2000	(O Total	
	llendar year (or fiscal year beginning in)	(a) 2005 139,724	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	9
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1215121	361,616	766,733	331,102	1-(1),100	1,647,1	• •
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for organization, check this box and stop	here		nd, third, fourtl	h, or fifth tax y	rear as a section	on 501(c)(3) ▶ □	
	tion C. Computation of Public Su						-4 (8)	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008	Schedule A, Pa	art III, line 15	ne 13, column	(f)) 	15 16	% % %	
	tion D. Computation of Investment					142	0:00 %	
17 18	Investment income percentage for 200 Investment income percentage from 20			-	olumn (f)) .	17	<u>O : 00 %</u>	
19a		anization did n	ot check the b	ox on line 14, a		nore than 331/3	%, and line	1 3
b	331/3 % support tests – 2008. If the organine 18 is not more than 331/3 %, check this	nization did not	check a box or	line 14 or line	19a, and line 1	6 is more than	331/3 %, and	

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions >

Schedule A (Fo	rm 990 or 990-EZ) 2009				Page 4
Part IV	Supplemental Information Part II, line 17a or 17b; and	. Complete this Part III, line 12	part to provide the Provide any other	e explanations required additional information.	by Part II, line 10.
				-	•
		•••••			
					•••••

			•••••		
	•				
	•		••••		
	***************************************			• • • • • • • • • • • • • • • • • • • •	

Schedule A (Form 990 or 990-EZ) 2009

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public inspection A

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then
• Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A if the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• :	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
Nar		ic Center of Savanr			58	r identification number
Par	til-A Complete if the	e organization is exempt unde	er section 501(c) or is a sect	ion 527	organization.
1 2 3	Provide a description of the Political expenditures Volunteer hours	ne organization's direct and indirect	et political campai	gn activities in	Part IV \$	
Pat	Complete if the	organization is exempt und	er section 501(c)(3).		
b	Enter the amount of any e If the organization incurred Was a correction made? If "Yes," describe in Part I	xcise tax incurred by the organizal xcise tax incurred by organization dia section 4955 tax, did it file For	managers under m 4720 for this ye	section 4955 . ear? .	* \$ *	☐ Yes ☐ No ☐ Yes ☐ No 01(c)(3).
-		expended by the filing organization				
2	activities Enter the amount of the fil 527 exempt function activities	ing organization's funds contribute	 ed to other organi	 zations for sect	▶ \$ tion ▶ \$	
3	line 17b	penditures Add lines 1 and 2. Er	•	Form 1120-PC)L, ▶ \$	
5	Enter the names, addresses were made. For each organic contributions received that v	file Form 1120-POL for this year? and employer identification numbe zation listed, enter the amount paid fivere promptly and directly delivered mmittee (PAC). If additional space is	r (EIN) of all section rom the filing organ to a separate polition.	ization's funds ical organization	Also ente	r the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiza funds If none, e	tion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sch	edule C (Form 990 or 990-EZ) 2009	nic cent	Fer of Savar	mah Inc 5	8-261112	-7 Page 2
R	it.II-A Complete if the organiza under section 501(h)).	tion is exem	pt under section	on 501(c)(3) and	filed Form 5768	(election
	Check ► ☐ if the filing organization Check ► ☐ if the filing organization				ons apply.	
	Limits on Lo (The term "expenditures"	bbying Expend means amoun		ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1a b c c e f	Total lobbying expenditures (add lines Other exempt purpose expenditures Total exempt purpose expenditures (a	ce a legislative and 1b)	e body (direct lobb id 1d)	oying) .		
	If the amount on line 1e, column (a) or (b) is Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$17,000,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	20% of the a \$100,000 plu \$175,000 plu	g nontaxable amount on line 1e is 15% of the excess 10% of the excess 5% of the excess 5% of the excess 15% of the exces	s over \$500,000 s over \$1,000,000		
g t i	` 	or less, enter -0 r less, enter -0)- - or line 11, did the (_	rm 4720 reporting	☐ Yes ☐ No
	(Some organizations that m	ade a section	g Period Under S 501(h) election or ructions for lines	ection 501(h) do not have to co 2a through 2f on	mplete all of the f page 4.)	ive
	Lobbyir	g Expenditure	es During 4-Year	Averaging Period	i	
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
	: Total lobbying expenditures					
C	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009

	dule C (Form 990 or 990-EZ) 2009 Islamic Center of Savannah Inc 58-	26 1	112	Pa	age
Ra	Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT f	iled F	orm 5768	
		(2	a)	(b)	
	<u> </u>	Yes	No	Amount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .		L	-	
С	Media advertisements?	<u> </u>			
d	Mailings to members, legislators, or the public?				
е	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?	L			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	• • • • • • • • • • • • • • • • • • • •				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pā	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)((5), o	r section	
			i.	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	·		3	
Pā	Complete if the organization is exempt under section 501(c)(4), section 5		(5), o	r section	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II "Yes."	I-A, li	ine 3	is answere	÷d
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poliexpenses for which the section 527(f) tax was paid).	itical	:		
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion c excess does the organization agree to carryover to the reasonable estimate of nondeductible lobil				
	and political expenditure next year?	, ,	4		
5	Taxable amount of lobbying and political expenditures (see instructions) .		5		
Pä	*W Supplemental Information				
	nplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, i, complete this part for any additional information		••••		11

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.



Internal Revenue Service Name of the organization Employer identification number Islamic Savannah Inc 58-2611127 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Parkill Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) . 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No . . Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year **.** Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X \$

Sched	dule D (Forr	n 990) 2009 Islamic (<u>LenTo</u>	r of So	avanı	nah Ir	c. 5	S	261112	7	Pi	age 2
Эπ	WIII)	Organizations Maintaini	ing Col	lections	of Art, H	listorica	l Treasure	es, or C	ther Similar	Assets (
3	Using the	ie organization's acquisition, in items (check all that appl	, access y).	sion, and o	other reco	ords, che	ck any of t	he follov	ving that are a	significa	nt use o	of its
a b		blic exhibition holarly research	-	-	d e		oan or exc	-	rograms	-	-	
С	Pre	eservation for future generat	ions									••
4	Provide Part XIV	a description of the organiz	ation's	collections	s and exp	olaın how	they furth	er the o	rganization's e	exempt p	ırpose	ın
5	During the assets to	ne year, did the organization so be sold to raise funds rather	solicit or r than to	receive do	onations o	of art, his	torical treas organization	ures, or on's coll	other similar ection?		Yes 🗌] No
Pai	tiv	Escrow and Custodial A IV, line 9, or reported an	rrange amount	ments. C	omplete 990, Pa	ıf the or rt X, lıne	ganızatıon 21.	answe	red "Yes" to I	Form 990	ı, Part	
	included	rganization an agent, trustee I on Form 990, Part X?				•		itions or	other assets		Yes 🗌] No
b	If "Yes,'	explain the arrangement in	Part XI	V and con	nplete the	e followir	ıg table	<u></u>				
	_							4.		Amount		
	-	ng balance						1c				
		s during the year		•	•			<u>1d</u>				
		tions during the year	•			•		<u>1e</u>				
_ f							•	1f	<u> </u>			
b	If "Yes,"	organization include an amo explain the arrangement in	Part XIV	٧							Yes L	No
Haj	W	Endowment Funds. Co			1	* *						
			(a) Cur	rrent year	(b) Pri	or year	(c) Two yea	irs back	(d) Three years b	ack (e) Fo	ur years t	back
1a	Beginnir	ng of year balance .										
	Contribu											
С	Net inve	estment earnings, gains, ses						_ ,				<u> </u>
d	Grants of	or scholarships							· · · · · · · · · · · · · · · · · · ·			
е	Other e	expenditures for facilities grams										
		trative expenses rear balance										
2	Provide	the estimated percentage o	f the ve	ar end ba	lance hel	d as				•		
		esignated or quasi-endowm										
		ent endowment >										
		dowment ▶ %										
		e endowment funds not in the		ssion of th	ie organiz	ation tha	t are held a	and adm	inistered for th	ne	Yes	No
	-	lated organizations .								3a(i		
		ed organizations			•	•	•	•	•	3a(ı	i)	
b 4	If "Yes"	to 3a(ii), are the related orga e in Part XIV the intended us								3b		
Par	t.VI	Investments-Land, Bu						Part X.	line 10.			
		Description of investment		a) Cost or ot (investm	her basis	(b) Co:	st or other s (other)	(c) A	Accumulated epreciation	(d) Bo	ook value	
12	Land											
	Buildings		.									

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

d Equipment e Other

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48

Sched	Jule D (Form 990) 2009 Islamic Center of Savannah Inc 58-	2611127 Page 4
Pā	Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tatements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the yearSubtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 through 8	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 Reconciliation of Revenue per Audited Financial Statements With Revenue	10
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized pains on investments	
a	The difference gains on investments	-
b	bonated services and use of facilities	-
C	Thousand of prior year grants	-
d		- _{2e}
e	Add lines 2a through 2d	3
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b. 4a	
a	integration expenses not included on Ferri 300, Fact Viii, Inte 75	-
b	Other (Describe in Part XIV) Add lines 4a and 4b	- 4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
	Reconciliation of Expenses per Audited Financial Statements With Expense	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities 23.	
b	Prior year adjustments	7
c	Other losses 2c	7
d	Other (Describe in Part XIV)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Par	t XIV Supplemental Information	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ai	nd 4. Part IV. lines 1b
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d a	
	part to provide any additional information	•

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

2009
Open to Publication

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization
Islamic Center of Savannah Inc

Employer identification number 58-26 11127

01	Members of stockholder classes and lights (Part VI, Line 6 Every Regular Member shall have one vote in the General Asse
02	. Governing body decisions (Part VI, line 76)
	Decisions of the board shall be made by a simple majorify of the board members
03,	Form 990 Gaverning body ren'ew (Part VI, 11)
	Form 990 Was given to the Founding members for reniew
	Governing documents, etc. available to public (Part VI, line 19) Available upon request

	Federal Supporting Statements	2009 PG01
Name as shown on-return ISLAMIC CENTER OF	SAVANNAH INC	FEIN 58-2611127

Form 99, Schedule D, Part VI, Line 1E

Investments - Other

Description of Investment	Cost/Basis (Investment)	Cost/Basis (Other)	DEPR	Book Value
Building for ISHAM Services	0	0	. 0	0
Cemetary	0	0	0	0
Total	0	0	0	0

990	Overflow Statement	2009	PG01
Name as shown on return	R OF SAVANNAH INC	- FEIN 5	11127

Other

Description	Amount \$
Functions	460
Professional Services	1000
Bldg. Maintenance	. 918
Charitable Contributions	12,125
Insurance	936
License and Fees	· 30
Rent .	4,739
Supplies	278
Utilities	7,661
Total	28,147

990

Tax Exempt Diagnostic Summary

2009

Name as shown on return

ISLAMIC CENTER OF SAVANNAH INC

FEIN 58-2611127

Demographics

Mailing Address:

1030 Dutchtown Rd Savannah, GA 31419-1704

Resident State: GA

Diagnostics:

Preparer: Zainul A. Kidwai

Date:04-19-2010

Return Information

Item on Return	2009 Federal	2008 Federal
Total Revenue	149,732	339,922
Total Expenses	28,147	23,086
Net Excess (Defecit)	121,585	316,836
Net Assets or Fund Balances	1,059,091	1,273,335