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ORIGINATE of Organization Exempt From Income Tax OMB No 1545-0047 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung 2011 benefit trust or private foundation) Open to Public Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection. For the 2011 calendar year, or tax year beginning 2011, and ending 20 Check if applicable C Name of organization Fedderation of Zoroastrian Associations of NA Inc D Employer identification no Address change Doing Business As 36-3521343 Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number Initial return 5750 South Jackson Street Terminated City or town, state or country, and ZIP + 4 76,626 Amended return Hinsdale, IL 60521 G Gross receipts \$ Application pending F Name and address of principal officer Bomi Patel H(a) Is this a group return for affiliates? 4296 Mountaincastle Way, San Jose, CA 95136 Yes X No Tax-exempt status **又** 501(c)(3) 501(c) ( ) < (insert no ) 4947(a)(1) or Are all affiliates included? Y ► N/A Website Group exemption number Form of organization X Corporation Trust Association 1987 State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities. The organization is registered under the not-for-profit corporation laws of the State of Illinois exclusively for religious and charitable purposes. Its primary goals is to function as a co-ordinating various organization for Zarathushti Associations in North America. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . . . . . . . . 27 27 4 n Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) ..... 6 88,554 7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . . 0 7a b Net unrelated business taxable income from Form 990-T, line 34 . . . . . . . . . 0 Current Year 88,554 90,921 0 (14, 295)Investment income (Part-VIII, column (A), lines 3, 4, and 7d).......... 80,641 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)....... 11 0 169,195 76,626 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . . . . . . . . . . . . . . 0 0 Ε Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . . 0 ۵ b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 1/1f-24e) 149,544 126,556 17 Total expenses Add lines 13-17 (must equal Part IX column A) (me 25) (CD. 149,544 126,556 (49,930) Revenue less expenses Subtract line 18 from line 12, 19,651 Beginning of Current Year End of Year Net ഗ് Asset O 980,842 1,135,865 Total assets (Part X, line 16) . Fund 21 Total liabilities (Part X, line 26) . . . . Bal-980,842 1,135,865 22 Net assets or fund balances Subtract line 21 from line 20 № Part II 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 10 2012 ata Ratan Mistry Sign Signature of officer Ratan Mistry, Here Treasurer Type or print name and title Date Print/Type preparer's name Preparer's signature Check X if Paid Framroze K Patel Framroze K Pate 2012 selemployed P01460552 Framroze K Patel CPA Preparer Firm's name Firm's EIN 9 South Circle **Use Only** Firm's address 732-634-8585 Woodbridge NJ 07095 May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . Yes X No For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2011)

36-3521343

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**Checklist of Required Schedules** 

Part IV

•			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)?	2		<u>X</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	- 1		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	1	'	
	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 easements to preserve open space,	_ :		٠,,
	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		v
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	-		X
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		(A)	A 9960
••	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schedule D, Part VI.	11a	l 	Х
ь	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	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			1
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<u> </u>
	Schedule D, Parts XI, XII, and XIII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investmetnt, and program service activities outlide the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b	ļ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	45		1,7
46	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV	16		\ v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	-10		X
17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		V
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		<del> </del>	X
ŧΟ	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?	<del></del>	<del> </del>	┼^
. 3	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	X
b		20b		<del>                                     </del>

Part IV: Checklist of Required Schedules (continued)

	•	<u>.</u>	Yes	NO
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
22	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 27 If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	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			
	employees? If "Yes," complete Schedule J	23		<u>X</u>
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		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			·
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	_X_
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 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u>
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV,	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u> X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		İ	
	Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		1	1
	complete Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		ļ	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
252	IV, and V, line 1	34	<b></b>	X
35a		35a	├	X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26		350	<del> </del>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		\ v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	<del> </del>	X
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<del></del>	<del>                                     </del>	<del>  ^</del>
50	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
			1 42	

Form 990 (2011)

Par				
	Check if Schedule O contains a response to any question in this Part V	• • •	<u>. ,                                   </u>	Ц_
		Ye	s	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	· [] -		- ` ]
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	:-   . ,	1.	3
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	-	<u>.</u>	أديت
	reportable gaming (gambling) winnings to prize winners?	C _	_	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?2	b >		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		_ _	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	a	$\perp$	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	b 📗		
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) <sup>2</sup>	a 📗		_X
b	If "Yes," enter the name of the foreign country			1.3
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	ــــــــــــــــــــــــــــــــــــــ	_ _	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	а		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	С		
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?	a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	ь	- {	
7	Organizations that may receive deductible contributions under section 170(c).		,	. T
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			. 4
	and services provided to the payor?	a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	c	1	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	·   -	٠,	]
е	<del> </del>	e		X
f	handari da	f	十	X
g	production in the contract of	'g		X
h	— · · · · · · · · · · · · · · · · · · ·	'n	_	X
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		. }.	
		8		
9	Sponsoring organizations maintaining donor advised funds.	-   -	-	- ,= }
а	<u>                                     </u>	a		X
b	<del> </del>	b		X
10	Section 501(c)(7) organizations. Enter		, <u>.</u>	,-' ¥
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		}.	~
11	Section 501(c)(12) organizations. Enter	34	~ ·	ر تا
а	Gross income from members or shareholders		",.] <sup>^</sup>	, , , , , , , , , , , , , , , , , , ,
b	Gross income from other sources (Do not net amounts due or paid to other sources	.   -		
	against amounts due or received from them )	.  .	-'	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	2a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			· - s
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-	, til	
а	<u> </u>	3a	_	
	Note. See the instructions for additional information the organization must report on Schedule O	, 31 (	<u>-</u>	1 9
b	Enter the amount of reserves the organization is required to maintain by the states in which		, f	ر . و ، ب
	the organization is licensed to issue qualified health plans	- , ]		ا - ا
С	Enter the amount of reserves on hand		- }	ۆ در
14a	<u> </u>	4a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	4b		

Par	T:VI- Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"		<del></del>
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruction			
	Check if Schedule O contains a response to any question in this Part VI			$\mathbf{X}$
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1 1 1	· , # -	· ¥ * 2
	If there are material differences in voting rights among members of the governing body, or	1		1
	If the governing body delegated broad authority to an executive committee or similar		- T	FEL SA
	committee, explain in Schedule O	14.63.5		3
b	Enter the number of voting members included in line 1a, above, who are independent	劉	蘇	\$ 3
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			التديد
-	any other officer, director, trustee, or key employee?	2		v
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		X
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		v
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5		5		
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	<del></del>		X
	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	<u>-</u>		١.,
_	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	_,		
_	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	*		13
	the year by the following	المنتقب ا		
а	The governing body?	8a	<u>X</u>	
ь	Each committee with authority to act on behalf of the governing body?	8b	<u>X</u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	\ \		Ì
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	<u>X</u>	<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	- 3× 4.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			I
	describe in Schedule O how this was done	12c		<u></u>
13	Did the organization have a written whistleblower policy?	13		X
14	Did 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			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	37.		
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.)	4		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	Augusta.		1
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1, E		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	عند ا		
	organization's exempt status with respect to such arrangements?	16b		X
Sec	ction C. Disclosure		-	<u> </u>
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 (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
•	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Ratan Mistry (408) 421-1911 1258 Water Lily Way San Jose, CA 95	129		

Form	990	(201)	1)
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Section A.

Fedderation of Zoroastrian Associations of NA Inc

36-3521343

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				. ago
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees, Highest	Compensated Employees	, and
•	Independent Contractors	_	•	

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.

- 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, if any 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)			(C	>)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule	officer  I t d  n r t  d u r  I s e  v t c  I e t  d e o  u r	and:	person	on is b ctor/tn K e y e m	on one ooth an ustee) H c e i g m p h p i e e o s n y t s e a e t e d	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Bomi Patel										
President	10.00			X				ı	0	0
(2) Katyun Kapadia										
Vice President	10.00			X						
(3) Nahid Dashtaki										
Secretary	5.00			X						
(4) Ratan Mistry		ŀ								
Treasurer	10.00	<u> </u>		X						
(5) Shiraz Italia										
Assistant Secretary	7.00	ļ		<u> </u>	Ш				ļ	
(6)										
(7)										
(8)										
(9)										
(10)									-	
(11)										
(12)										
(13)										
(14)										
			L	L	II			I .		Form 990 (2011)

Form 990 (2										36-3521	343 Page 8
	Section A. Officers, Directors, Trustees (A)	, Key Empio	oyees,	and		gne: C)	st Con	nper	(D)	s (continued) (E)	(F)
•	Name and Title	Average			Pos	ition			Reportable	Reportable	Estimated
			(do not check mor box, unless perso						compensation	compensation from	amount of
		week (describe	1				ustee)		from the	related organizations	other compensation
		hours for	I t d	l t	O	ĸ	Нсе	F	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
		related organizations	nrı dur ıse	n r s u	f	y	gmp	r m	(VV-2/1099-WIISC)		organization and related
		in Schedule O)	V I C		\ c	e m	h p l e e o s n y	e r		1	organizations
		0,	deo			P	t s e	ľ			
			a o	ı		y	l B				
				n a I		e	d				
(15)											,
(16)			1								<del> </del>
(17)		<del>                                     </del>	<del>                                     </del>	-	_	-	-	-			+
(18)			-	-							<u> </u>
(19)		-	-	-	-	-				<del> </del>	
(20)			<b> </b>		-	_	-	-			
				ļ	<u> </u>			<u> </u>			
(21)											
(22)											
(23)		<del> </del>	<del>                                     </del>	<del>                                     </del>							
(24)		<del> </del>	<del> </del>	┼┈		-	<u> </u>	-			
(25)			_	+	+-		<del> </del>	-			<u> </u>
1b Sub-to	otal	<u> </u>			<u> </u>	<u> </u>		Ļ			
	from continuation sheets to Part VII, Section	n A		• •	• •	• •	• • •				
	(add lines 1b and 1c)			• •	• •				}	d o	0
	number of individuals (including but not limited							nore	than \$100,000 in	<del></del>	
reporta	able compensation from the organization									0	
3 Did the	e organization list any former officer, director o	or trustee, ke	ev emp	love	e. o	r hic	nest c	ome	ensated		Yes No
	yee on line 1a? If "Yes," complete Schedule J			-		-					3 X
4 For an	y individual listed on line 1a, is the sum of repo	ortable comp	pensat	ion a	and (	othe	er com	oens	ation from the		· 高文學學
	zation and related organizations greater than \$										المستحدد المستحد المستحدد
individ	lual			• •	• •		· · ·	• •		• • • • • • •	4 X
	ny person listed on line 1a receive or accrue co rvices rendered to the organization? If "Yes," c										5 X
	B. Independent Contractors	omplete Sch	ledule	3 101	Suc	эн р	erson	•	<u> </u>	• • • • • • •	
	lete this table for your five highest compensate	ed independe	ent cor	ntrac	tors	tha	t recer	ved	more than \$100.0	00 of	
	ensation from the organization. Report comper										
year									· · · · · · · · · · · · · · · · · · ·		
	(A)								(B)		(C)
	Name and business address	,			•••••				Description of	301 VICE3	Compensation
2 Total	number of independent contractors (including t	out not limite	d to th	ose	liste	ed a	bove)	who			4 B (13 2 B) - 2 B
receiv	red more than \$100,000 of compensation from	the organiza	ation I	<b>&gt;</b>							

EEA

Part V	<u>/III  </u>	Statement of Revenue	3						
, ,					,*	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
<u> </u>		٠ او رخ آسوند		-			revenue		512, 513, or 514
l	1a	Federated campaigns		1a		· · · · · · · · · · · · · · · · · · ·			
Contn-	Ь	Membership dues		1b		3, **, 8		* ,	
butions,	С	Fundraising events		1c		, , , ,		*1	
Grits, Grants	d	Related organizations		1d		, #F	٠	, .,	
and	е	Government grants (contribute	ons)	1e		4: 1			4
Other	f	All other contributions, gifts, gr	ants,	1 1			ı	, i	
Similar Amounts		and similar amounts not include	led above	1f	90,921	,	-		
	g	Noncash contributions include	d ın lines 1	a-1f \$			7 -		1
	h	Total. Add lines 1a-1f				90,921		· .	
		<del></del>			Business Code				, ;
	2a			Ţ					
	ь			i					
Program Service	c				<del></del>				
Revenue	d		-	į.	***************************************				<del></del>
	e					· · · · · · · · · · · · · · · · · · ·			
	f	All other program service reven	ue	}			<del></del>		
		Total. Add lines 2a-2f							
		Investment income (including d					· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del></del>
	3	and other similar amounts)				245	245		
	4	Income from investment of tax-				(14,540	<del></del>	L	
	5	Royalties	•	-			, , , , , , ,	<u>'</u>	
			(ı) Rea		(ii) Personal	<del> </del>	1-	E 1 1 1 1 1	1 2 4 4 3 5
	6.	Gross rents	(1) 1100	<del>"</del>	(ii/ T ersonal	1,			
	1				<del></del>			1	
		Less rental expenses				-			
	1	Rental income or (loss)				<del> -1-1</del>			
	1	Net rental income or (loss)				<del> </del>	<del></del>		7.2
	7a	Gross amount from sales of	(i) Securi	lies	(ii) Other		1, 1, 1		
		assets other than inventory							
	b	Less cost or other basis					-	[; , , , , , , , , , , , , , , , , , , ,	
0		and sales expenses					1, 1, 1, 1, 1		
t		Gain or (loss)		]		ļ <u>.</u>	-		
n e	1	Net gain or (loss)		;		131	ļ		7 75 1 11 3
r	8a	Gross income from fundraising	I				* , "		, , ,
R		events (not including \$							Tartes to tare
e		of contributions reported on lin	•				۔ ر ' [.	14. 3.	
V		See Part IV, line 18					- ~ -		1
e n		Less direct expenses			L		- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
u	1	Net income or (loss) from fund	-	nts .	<u></u> ▶	ļ		ļ	<u></u>
е	9a	Gross income from gaming ac		'		1	- 4		
		See Part IV, line 19				<b></b>		٠	
		Less direct expenses			L		Jania Land	-	
	C	Net income or (loss) from gam	ing activitie	es	<u> </u>		<u> </u>		
	10a	Gross sales of inventory, less				1 - 2 2 1 1	1797		jm_
		returns and allowances				<b>-</b>		1.5	
		Less cost of goods sold			Ĺ. <u>.</u>	J	,	1	أسسنت أست
	С	Net income or (loss) from sale	s of invent	ory	🕨		ļ		
		Miscellaneous Revenue			Business Code		<u> </u>		
	11a								
	b	· · · · · · · · · · · · · · · · · · ·							
	С								
	d	All other revenue		• • •					
	е	Total. Add lines 11a-11d .					-		
	12	Total revenue. See instruction	ns		▶	76,62	6 (14,29	5)	d

# Part IX Statement of Functional Expenses

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)

	Check if Schedule O contains a response to any que				
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D)</b> Fundraising
	b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
2	organizations in the United States See Part IV, line 21.  Grants and other assistance to individuals in			The Comment of the Comment	(本)
2			ţ		
2	the United States See Part IV, line 22			. TENSON - PER 7 6 3	11 ( )
3	Grants and other assistance to governments,				[BRY ] 第135]
	organizations, and individuals outside the				医多氯素质
4	United States See Part IV, lines 15 and 16	<del></del>	<del></del>	1	F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5	Benefits paid to or for members				* 1.4 * 1.5 * 5 * 1 * * 1
J	Compensation of current officers, directors,				
6	trustees, and key employees				
U	•				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages			<u> </u>	
8	Pension plan accruals and contributions (include				
0					
9	section 401(k) and 403(b) employer contributions) Other employee hanefits				<del></del>
	Other employee benefits				ļ
10 41	Payroll taxes				
11	Fees for services (non-employees)				1
a	Management		<u> </u>		
b	Legal				
Ç	Accounting	<u> </u>		<del> </del>	<del> </del>
d	Lobbying		F 75-51 C 18-91 W 1, 44-7	100 1 100 1 1 100 Tel 100 100	
e	Professional fundraising services See Part IV, line 17.	<del></del>	A CONTRACTOR OF STATE		-
f	Investment management fees	102 750	102 750		<del> </del>
g	Other	103,750	103,750		<del> </del>
12	Advertising and promotion	22.006	<del> </del>	20.000	<del> </del>
13	Office expenses	22,806	<del> </del>	22,806	ļ
14	Information technology				<del>                                     </del>
15	Royalties		<del> </del>		<del> </del>
16	Occupancy		<u> </u>		<del> </del>
17	Travel				
18	Payments of travel or entertainment expenses		1		
40	for any federal, state, or local public officials		-		-
19 20	Conferences, conventions, and meetings				
20 21	Interest				<del> </del>
21	Depreciation, depletion, and amortization				<del> </del>
23	Insurance		<del> </del>	<del> </del>	<del> </del> -
23 24	Other expenses Itemize expenses not covered	Jan 44 44 4 45	SANGEL PERSONAL	some frage to the city	The second second
44	above (List miscellaneous expenses in line 24e If			· · · · · · · · · · · · · · · · · · ·	<b>《李光》</b>
	line 24e amount exceeds 10% of line 25, column	10000000000000000000000000000000000000		15000000000000000000000000000000000000	F2数 4.2季(
	(A) amount, list line 24e expenses on Schedule O)	The state of the s		· 图 图 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· 操作。操作的
а	(A) amount, hat him 24c expenses on achievine O)		A CONTRACT NAMES	· · · · · · · · · · · · · · · · · · ·	1 - K - 14
a b			<del> </del>	<del> </del>	<del> </del>
C		<del></del>	<del> </del>	<del> </del>	<del> </del>
d			<u> </u>		
e	<del></del>	<del></del>	<del> </del>	<del> </del>	<del>                                     </del>
25	Total functional expenses. Add lines 1 through 24e	126,556	103,750	22,806	0
26	Joint costs. Complete this line only if the	1	1 202,130		<del> </del>
20	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here. ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 96,519 77,810 2 902,100 2 1,039,346 3 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing Α employers and sponsoring organizations of section 501(c)(9) voluntary s s 6 е 7 8 8 Prepaid expenses and deferred charges ........ 9 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . | 10a b Less accumulated depreciation. . . . . . . . . . . 10b 932 10c 11 11 12 12 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . . . . . . . . . . 980,842 1,135,865 16 16 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . . . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Secured mortgages and notes payable to unrelated third parties . . . . . . . . . 23 23 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 0 26 0 26 Organizations that follow SFAS 117, check here ▶ ☐ and complete NF lines 27 through 29, and lines 33 and 34. u 27 27 n 28 28 d 29 29 В s Organizations that do not follow SFAS 117, check here ▶ 🗓 and s е 1 complete lines 30 through 34. 30 30 Paid-in or capital surplus, or land, building, or equipment fund ...... 31 31 o е Retained earnings, endowment, accumulated income, or other funds . . . . . . . 980,842 32 1,135,865 32 980,842 1,135,865 33 33 Total liabilities and net assets/fund balances . . . 980,842 1,135,865 Form 990 (2011)

Form !	990 (2011) Fedderation of Zoroastrian Associations of NA Inc 36-3521	343	Pa	age 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	••••	• • •	X
1	Total revenue (must equal Part VIII, column (A), line 12)		76,	626
2	Total expenses (must equal Part IX, column (A), line 25)		26,	556
	Revenue less expenses Subtract line 2 from line 1		(49,	930)
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		80,	842
5	Other changes in net assets or fund balances (explain in Schedule O)		204,	953
	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	1,:	135,	865
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			. 🗆
			Yes	No
1	Accounting method used to prepare the Form 990 💢 Cash 📋 Accrual 🔲 Other		為	***
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O	130		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		X
b	Were the organization's financial statements audited by an independent accountant?	. 2b		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	İ	
	If the organization changed either its oversight process or selection process during the tax year, explain in	330	推路	77.79
	Schedule O			2.5
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	2.3	科學	200
	issued on a separate basis, consolidated basis, or both			1
	Separate basis Consolidated basis Both consolidated and separate basis		克拉	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	За		
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		
	EEA	Forn	990	(2011)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

### **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

\*\* Inspection

2011

Open to Public

Employer identification number Fedderation of Zoroastrian Associations of NA Inc 36-3521343 Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) R 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 exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c Type III-Functionally integrated d Type III-Other a Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the supported organization? 11g(i) 11g(ii) 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (II) EIN (III) Type of organization (IV) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section col (i) of your (i) organized in the governing document? support? US? (see instructions) ) Yes Yes No No Yes No (A) (B) (C) (D) (E)

# 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

Open to Public.

Department of the Treasury Internal Revenue Service

Internal Revenue Service

See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 50 f(c)(4), (5), or (6) organizations	Complete Part III			
Nam	e of organization			Employer	identification number
Fe	dderation of Zoroastrian Ass	sociations of NA		36-352	1343
Pài	t I-A Complete if the organi	zation is exempt under section	on 501(c) or is	a section 527 orga	nization.
1	Provide a description of the organization's	s direct and indirect political campaign	activities in Part I	V	
2	Political expenditures	. <b></b>		▶ \$	
3	Volunteer hours	. <b></b> .			
Pai		zation is exempt under section			
1	Enter the amount of any excise tax incurr				
2	Enter the amount of any excise tax incurs	red by organization managers under se	ection 4955	<i>.</i> ▶ s	
3	If the organization incurred a section 495	5 tax, did it file Form 4720 for this year	P		. 🗌 Yes 🔣 No
4a	Was a correction made?	. <b></b>			. 🗌 Yes 🔯 No
ь	If "Yes," describe in Part IV				
.Pa		zation is exempt under section		ept section 501(c)(3	)
1	Enter the amount directly expended by the				
	activities			▶ \$	
2	Enter the amount of the filing organization	n's funds contributed to other organiza	tions for section		
	527 exempt function activities			▶ s	
3	Total exempt function expenditures Add	lines 1 and 2 Enter here and on Form	1120-POL,		
	line 17b			<b>▶</b> \$	
4	Did the filing organization file Form 1120	POL for this year?			. Yes No
5	Enter the names, addresses and employ	er identification number (EIN) of all se	ction 527 political	organizations to which the	filing
	organization made payments. For each of	organization listed, enter the amount pa	aid from the filing o	organization's funds Also	enter
	the amount of political contributions rece	ived that were promptly and directly de	elivered to a separ	ate political organization, s	such
	as a separate segregated fund or a politi	cal action committee (PAC) If addition	nal space is neede	d, provide information in F	Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedu	ule C (Form 990 or 990-EZ) 2011 Fedderation o	f Zoroastrian	Associations	of NA Inc	36-3521	343 Page 2
Par	t II-A Complete if the organization	is exempt und	der section 501	(c)(3) and filed	Form 5768 (elec	tion under
	. section 501(h)).	-			·	
A C	heck 🕨 🔲 if the filing organization belongs to	an affiliated group	(and list in Part IV e	ach affiliated group	member's	
	name, address, EIN, expenses, ar	nd share of excess	lobbying expenditure	es).		
ВС	check 🕨 🔲 if the filing organization checked b	ox A and "limited co	ontrol" provisions ap	ply.		
	Limits on Lobb	ying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" n	neans amounts pa	id or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public of	pinion (grass roots	lobbying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lo	bbying)			
С	Total lobbying expenditures (add lines 1a and 18	o) <i></i>				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount	from the following t	able in both			
_	columns					
Ĺ	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is :		
	Not over \$500,000	20% of the am	ount on line 1e			
[	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	ver \$1,500,000	13/3 0	
[	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ie 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er -0				
i	Subtract line 1f from line 1c If zero or less, enter					
j	If there is an amount other than zero on either li	ne 1h or line 1i, did	the organization file	Form 4720		
	reporting section 4911 tax for this year?			<u> </u>		Yes No
	(Some organizations that	made a section 50		ot have to complet		
			tions for lines 2a th		4.)	
	Lobby	ying Expenditures	During 4-Year Ave	raging Period	T	1
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010 <sub>.</sub>	(d) 2011	(e) Total
2a	Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))		THE THE TANK	4	All the second	
_ c	Total lobbying expenditures					
d	Grassroots nontaxable amount	·····				
e 	Grassroots ceiling amount (150% of line 2d, column (e))				4- d	
f	Grassroots lobbying expenditures					

Par	t II-B · Complete if the organization is exempt under section 501(c)(3) and has NOT fil (election under section 501(h)).	ed F	orm :	5768		
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a) (b)				
	e lobbying activity.	Yes	No	A	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local	***			101	
	legislation, including any attempt to influence public opinion on a legislative matter or			1.3		5.2
	referendum, through the use of	4				
а	Volunteers?				學為深	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				2.5	44
C	Media advertisements?					
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?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i	3	36.5			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			W-1		
b	If "Yes," enter the amount of any tax incurred under section 4912		100			
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?			<b>起冷</b> 键	學學	EL.A.
	rt III-A. Complete if the organization is exempt under section 501(c)(4), section 501(c	)(5), <del>(</del>	or se	ction		
	501(c)(6).					
					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 carry over lobbying and political expenditures from the prior year?			3		
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes."	R (b)	Part		ne 3,	is
1	Dues, assessments and similar amounts from members		1 25 354	ļ		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).			-		
a	Current year	• •	2a	<b> </b>		
b	Carryover from last year	• •	2b			
C	Total		2c	<b></b> _		
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 of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
5	and political expenditure next year?		5	<del> </del>		
	rt IV Supplemental Information	•••	1-3-	L		
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, and F	Part II-I	B line			
	iso, complete this part for any additional information		J,			
		-				

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection Employer identification number

Fedderation of Zoroastrian Associations of NA Inc	36-3521343
01. Form 990 governing body review (Part VI, line 11)	
The public can make request in writting to review the documents.	
02. Governing documents, etc, available to public (Part VI, line 19)	
The public can demand to review in wtitting the documents.	
	· · ·
03. Explanation of other changes in net assets or fund balances (Part	XI, line 5)
Increassee in investments	
·	

990	Overflow Statement	<b>2011</b> Page 1
Name(s) as shown on return		FEIN
Fedderation c	f Zoroastrian Associations of NA Inc	36-3521343

Description		Amount		
		\$	88,554	
	Total:	\$	88,554	

Description		Amount
Contribution for Welfare and Critical Assistance	\$	24,165
Contribution for Scholarship and Infrastructure		3,667
Fezana Journal Subscription Revenue		19,318
Fezana Journal Advertisement Revenue		6,765
Other Revenue		1,271
membership Dues		6,540
Other Contribution from Members		29,195
Total	: \$	90,921

Description	Amount		
Program Service Expenses	\$	31,579	
FEZANA Journal Publication Expenses		28,338	
Critical Assistance Program: Welfare and Scholarship		43,833	
Total:	\$	103,750	