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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

AF	or the	2013 calendar year, or tax year beginning	and	ending			
Boa	heck if pplicable	C Name of organization			D Employe	r identificati	on number
	Addres change	Bosnian American Associat	cion, Inc.				
	Name change	Doing Business As			1	90-053	2371
]Initial retum	Number and street (or P 0. box if mail is not delivered	to street address)	Room/suite	E Telephon		
	∐Termin Lated ∏Amend	10 DOX 33223		-		804-93	1-5221
	return	City or town, state or province, country, and ZIP of	or foreign postal code		G Gross receip		140,246
	_tion pendin	RICHMONG, VA 23233	Cirkia		1	a group retur	
		F Name and address of principal officer:Nijaz same as C above	CILKIC			ordinates? .	Yes X No
	27.676		nsert no) 4947(a)(1)	or 527	1 ' '	bordinates includ	
		e: > www.dzematrichmond.org	113er(110) 4347(a)(1)	01 321	7	attach a list. exemption nu	(see instructions)
		organization X Corporation Trust Associat	tion Other ►	L Year			ate of legal domicile. V
	et l	Summary		12.00	or rollingtion -		ato or logal dollinoile.
0	1	Briefly describe the organization's mission or most signi	ficant activities: The	Bosnia	n Ameri	ican	
Activities & Governance		Association's primary purpos					faith
ern	2	Check this box 🕨 🔲 if the organization discontinue	ed its operations or dispos	sed of more	than 25% of	its net asset	S.
Š	3	Number of voting members of the governing body (Part	VI, line 1a)			3	4
જ જ	ı	Number of independent voting members of the governing				4	4
lies	l	Total number of individuals employed in calendar year 2	2013 (Part V, line 2a)			5	(
ξ	i	Total number of volunteers (estimate if necessary)				6	37
Ac	l	Total unrelated business revenue from Part VIII, column	• •			7a	0.
	ь	Net unrelated business taxable income from Form 990-	Г <u>, line 34</u>	· · ·		7b	0.
		Control of the contro			Prior Yea		Current Year
Revenue	l	Contributions and grants (Part VIII, line 1h)		-	220,	0.	140,234.
Ver	l	Program service revenue (Part VIII, line 2g)	7-1\	-		11.	12.
ב	l	nvestment income (Part VIII, column (A), lines 3, 4, and	•	·		0.	0.
	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, Fotal revenue - add lines 8 through 11 (must equal Part	•	 	226	954.	140,246
	ı	Grants and similar amounts paid (Part IX, column (A), lin				716.	7,585.
	l	Benefits paid to or for members (Part IX, column (A), line	•	-		0.	0.
e e	[Salaries, other compensation, employee benefits (Part I)	•	-		0.	0.
use u		Professional fundraising fees (Part IX, column (A), line 1	, ,			0.	0.
Expenses		Fotal fundraising expenses (Part IX, column (D), line 25)	· .	0.			***************************************
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-	24e)		21,	973.	32,472.
	18	Total expenses. Add lines 13-17 (must equal Part IX col	lumn (A), line 25)		32,	689.	40,057.
	13	Revenue less expenses. Subtract line 18 from line_12	-CEIVED.		194,	265.	100,189.
95 S		55	SC	Be	ginning of Curr		End of Year
Balances	20	Fotal assets (Part X, line 16)	RAPONA IOI		208,	668.	308,857.
σ,	21	Total liabilities (Part X, line 26)		.		0.	0.
Ē		Net assets or fund balances. Subtract line 21 from line 2	20) - 1 - 1 - 1	:	208,	668.	308,857.
	ert II	Signature Block	-211,01				
		ties of perjury, I declare that I have examined this return, include					owledge and belief, it is
	correc	and complete Declaration of preparer (other than officer) is b	pased on all information of wi	nich preparer	nas any knowle	edge.	
>i	_	Signiture of officer			Date	-UF19	
Sigr Her		Nijaz Cirkic, Director			Date		
ner	е	Type or print name and title					
		<u> </u>	aren's signature		Date	Check X	PTIN
aid		William C. Pilc	Julia Dom	_ .	3/25/14	1.4	P00292400
'rep	arer	Firm's name Pilc & Moseley, LLC	:		Firm		0-1826687
se	Only	Firm's address 7400 Beaufont Sprin		200	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u></u>	
_	Only	Richmond, VA 23225			Phor	ne no.804-	327-6827
		S discuss this return with the preparer shown above? (see instructions)		<u>.</u>		X Yes No
	01 10-2			ons.			Form 990 (2013)

	<u> 1990 (2013) — Bosnian American Association, Inc. — — 90-0532-371 — Pa</u>	је- 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	\square
1	Briefly describe the organization's mission:	
	The Bosnian American Association's primary purpose is to promulgate	
	the Islamic faith according to the traditional teachings of the	
	original four schools of Islamic thought.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Nο
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Nο
Ŭ	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
•	Section 501(c)(3) and 501(c)(4) organizations 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 \$33,563 •including grants of \$\$ 7,585 •) (Revenue \$	
70	To promulgate the Islamic faith according to the traditional teachings	_ ′
	of the original four schools of Islamic thought.	
	of the original rour schools of Islamic thought.	
4b	(Code) (Expenses \$)
4c	(Code) (Expenses \$	
	/ Coperator / (Coperator / Coperator / Cop	— <i>'</i>
		
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ Including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ► 33,563.	
33200	Form 990 (2	013)

			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, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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_		Х
7	Did the organization receive or hold a conservation easement, including easements 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, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			l
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			l
	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, VIII, IX, or X			
	as applicable.	Ì		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		١,,	
	Part VI	11a	X	
Þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	١		_v
_	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 of its total			х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	ا مما		х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
f	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	11e		
•	the organization's separate or consolidated infancial 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			
120	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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		Х
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	19		Х
20a		20a		X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
		Form	990	2013

-	990 (2013)———Bosnian_American_Association,_Inc90-053	<u>2371</u>	P	age 4
Pa	The Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or 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		Х
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		Х
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 25a	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		_
C		04-		
د.	any tax-exempt bonds?	24c		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			X
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	^
D	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	l		
	Schedule L, Part I	25b	-	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			١
	complete Schedule L, Part II	26	ļ	X
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	1		
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	ļ	X
C	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		X
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1		
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
J	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<u> </u>
٠.	and that is treated as a partnership for federal income tax purposes? If "Ves " complete Schedule R. Part VI	37		x

Х Form **990** (2013)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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

Form 990 (2013)

14a

X

b Enter the amount of reserves the organization is required to maintain by the states in which the

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

13b

13c

•				
	<u> 1990 (2013) — </u>			age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No" r	espor	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			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 1a 4	:		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
ь	Enter the number of voting members included in line 1a, above, who are independent 1b	,		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		Х
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			<u> </u>
	more members of the governing body?	7a		Х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	· · ·		
_	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	/	 	 -
а	The governing body?	8a	х	
b	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	00	 	
,	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		L	
<u> </u>	tion b. 1 Onotes (mis dectain b requests information about policies not required by the internal nevertibe code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
•	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b		''	1	
12a		100	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X	
		120		\vdash
С	In Schedule O how this was done	40.	Х	
12	Did the organization have a written whistleblower policy?	12c	X	-
13 14		13	X	<u> </u>
	Did the organization have a written document retention and destruction policy?	14	_^	
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?		1	Х
a _	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		}	v
	taxable entity during the year?	16a		X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			1
	exempt status with respect to such arrangements?	16b	L	L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
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)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	ncıal	
	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 organiza	tion: 🕨		
	Maida Cirkic - 804-283-5618			
	8401 Three Chopt Road, Richmond, VA 23229		_	
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Form 990 ((2013)——	Bosnian	Americ	an-Associa	ation, I	ne	90 - 053 2371	Page
Part VII	Compensation	of Officers,	Directors	, Trustees, Key	Employees	s, Highest Cor	npensated	

Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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.
- 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.

(A) Name and Title	(B) Average hours per	(do not che box, unless			(C) Position ot check more than one unless person is both an er and a director/trustee)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stae or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Nijaz Cirkic	5.00									
Director								0.	0.	0
(2) Sead Hodzic	5.00	1						_	_	_
Director		<u> </u>	_					0.	0.	0
(3) Huso Dzamdzic	5.00									_
Director	F 00		<u> </u>	_		-		0.	0.	0
(4) Harris Vehab	5.00	-	1					0.	0.	0
Director		-	-	-				0.	0.	U
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	_	Check if Schedule O cont		nse or note to any l	ine in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1 a	3	Federated campaigns	1a					
t	b	Membership dues	1b					
	C	Fundraising events .	1c		_			
(d	Related organizations .	. <u>1d</u>					
	е	Government grants (contribut	tions) 1e		_[
1	f	All other contributions, gifts, gran	its, and		:			
		similar amounts not included abo	ve 1f	140,234	•			
1	_	Noncash contributions included in lines	1a-1f \$		140 004			
	h_	Total. Add lines 1a-1f		Pusita and Oad	140,234.			
١.,	_			Business Cod	e			
2 6	b			_				
;	C						-	
`	d							
2 6	- -							
1	i	All other program service reve	enue	_				
,		Total. Add lines 2a-2f						
3		Investment income (including	dividends, in	terest, and				
		other similar amounts)		>	12.			12.
4		Income from investment of ta	x-exempt bor	nd proceeds				
5		Royalties		<u> </u>	2 1000 1000 1000 1000 1000 1000 1000 10			<u>, , , , , , , , , , , , , , , , , , , </u>
			(i) Real	(ii) Personal	4			
6 6	а	Gross rents			4			
'		Less: rental expenses			4			
1		Rental income or (loss)			4			
		Net rental income or (loss)		_				
7 6	а	Gross amount from sales of	(i) Securition	es (II) Other	4			
l .		assets other than inventory			4			
'	b	Less: cost or other basis						
		and sales expenses			4			
1		Gain or (loss)			-}			
		Net gain or (loss)		<u> </u>				
8 6		Gross income from fundraisin including \$	•					
		contributions reported on line						
		Part IV, line 18	10). See					
١.,	.	Less: direct expenses		a b	1			
		Net income or (loss) from fun-	draising even		†			
		Gross income from gaming a						
	_	Part IV, line 19		а				
1	ь	Less: direct expenses		b	1			
1		Net income or (loss) from gan	ning activities	•	1			
1		Gross sales of inventory, less						
		and allowances		a				
(b	Less: cost of goods sold		ь	7			
<u></u>	С	Net income or (loss) from sale	es of inventor	y >				
		Miscellaneous Revent	16	Business Cod	e			
11 :	а			_				
1	b							
'	С			_	<u> </u>			
'		All other revenue					,	
1	е	Total. Add lines 11a-11d		•	140 246			10
12 09		Total revenue. See instructions			140,246.	0.	0.	12. Form 990 (2013)

Section 501(c)(3) and 501(c)(4) organizations must complete all	columns. All other organizations mus	st complete column (A).

	Check if Schedule O contains a responsion include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		,		4
	organizations in the United States See Part IV, line 21	7,585.	7,585.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members .				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits .				
0	Payroll taxes				
1	Fees for services (non-employees):				
а	Management				
b	Legal				
c	Accounting	761.	609.	152.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
2	Advertising and promotion				
3	Office expenses	11,185.	8,948.	2,237.	
4	Information technology _				
5	Royalties _	2 100			
6	Occupancy	9,128.	7,302.	1,826.	
7	Travel	2,275.	1,820.	455.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				<u>-</u>
0	Interest				
1	Payments to affiliates	F 00F	4 704	1 101	
2	Depreciation, depletion, and amortization	5,905.	4,724.	1,181.	
3	Insurance	3,051.	2,441.	610.	
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Bank Service Charges	142.	114.	28.	
b	Registration Fees	25.	20.	5.	
С					
d					
е	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	40,057.	33,563.	6,494.	0
:6	Joint costs. Complete this line only if the 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)				

332010 10-29-13

Pal	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		29,433.	1	13,395.	
	2	Savings and temporary cash investments	_		146,985.	2	
	3	Pledges and grants receivable, net		Γ	7,250.	3	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and for	, , , , , , , , , , , , , , , , , , ,				
		trustees, key employees, and highest compensations	ated emr	olovees, Complete			
		Part II of Schedule L	•	, , , , , , , , , , , , , , , , , , , ,		5	
	6	Loans and other receivables from other disquale	fied pers	ons (as defined under	······································		······································
		section 4958(f)(1)), persons described in section		'			
		employers and sponsoring organizations of sec					
s.		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
ĕ	8	Inventories for sale or use		• -	-·	8	
	9	Prepaid expenses and deferred charges	•	·		9	
	10a		1 1	·		Ť	
		basis. Complete Part VI of Schedule D	10a	301,367.			
	ь	Less: accumulated depreciation	10b	301,367. 5,905.	25,000.	10c	295,462.
	11	Investments - publicly traded securities		•		11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equ	208,668.	16	308,857.		
	17	Accounts payable and accrued expenses		17			
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV of	f Schedule D		21	
S	22	Loans and other payables to current and former	rofficers	, directors, trustees,			
Liabilities		key employees, highest compensated employee	es, and d	squalified persons.			
iab		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ated third	l parties		23	
	24	Unsecured notes and loans payable to unrelate	d third pa	arties		24	
	25	Other liabilities (including federal income tax, pa	yables to	related third			
		parties, and other liabilities not included on lines	17-24).	Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check	here ▶ X and			
es		complete lines 27 through 29, and lines 33 and	id 34.				
auc	27	Unrestricted net assets		<u> </u>	208,668.	27	308,857.
Bal	28	Temporanly restricted net assets		-		28	
פַ	29	Permanently restricted net assets				29	
Š		Organizations that do not follow SFAS 117 (A	SC 958)	, check here			
ō		and complete lines 30 through 34.		i			
set	30	Capital stock or trust principal, or current funds		30			
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or	other funds	000 660	32	
_	33	Total net assets or fund balances	•	<u> </u>	208,668.	33	308,857.
	34	Total liabilities and net assets/fund balances			208,668.	34	308,857.

Form **990** (2013)

Form	990 (2013) Bosnian American Association, Inc.	_90 - 05€	32 <i>37</i> -1	—Pa	ae 12
	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			46.
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>57.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			89.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	208	3,6	68.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	308	3 <u>,8</u>	<u>57.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	••		<u> </u>	<u>Ш</u>
			·	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	s no b			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?		. 2b		_ X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e 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 Sch	edule O.			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle 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	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2013)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Bosnian American Association, Inc. 90-0532 Part I 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.) 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 service and taken.		
The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1	l's nar	ne,
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.) 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	i's nar	ne,
city, and state: 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.)		
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross reactivities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June is See section 509(a)(2). (Complete Part III.)	ceipts inves	from tment
An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box describes the type of supporting organization and complete lines 11e through 11h. a Type I	that ly intener that e(a)(2).	egrated an
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		†
h Provide the following information about the supported organization(s).		
. /decembed on lines 4 0 In Col (i) listed in your organization in col Viganization in Col	(vii) Amount of monet support	
Yes No Yes No Yes No		
Total LHA For Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 9)	90-E7	2012

Schedule A (Form 990 or 990-EZ) 2013

Form 990 or 990-EZ.

Cab.	, oduka A (Farra 000 av 000 F7) 2012						
	edule A-(Form 990 or 990-EZ) 2013— PT II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(v	Page 2
L	(Complete only if you checke						
	fails to qualify under the tests						J
Se	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and	, ,			1.		
	membership fees received. (Do not						;
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						<u> </u>
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	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)		,1 111111 1111 · · · · · · · · · · ·	<u></u>			
<u> </u>	Public support. Subtract line 5 from line 4 ction B. Total Support			<u> </u>	<u></u>		
		(-) 2000	/b) 2010	(-) 2011	(-0.0010	(-) 0012	49 Tabal
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
8	Gross income from interest,					-	
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)		_				
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thu	d, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
	organization, check this box and sto						▶
	ction C. Computation of Publ						
	Public support percentage for 2013 (•	column (f))	•	14	9
	Public support percentage from 2012					15	. 9
16a	33 1/3% support test - 2013. If the				14 is 33 1/3% or	more, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orτed organization	1			▶∟

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 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) 2013

b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box

17a 10% -facts-and-circumstances test - 2013. 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

b 10% -facts-and-circumstances test - 2012. 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

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

and stop here. The organization qualifies as a publicly supported organization

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	olott, please com,	oroto i care ini			······································	
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")			32,474.	226,943.	140,234.	399,651.
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						,
	ization's benefit and either paid to						
	or expended on its behalf		<u> </u>				
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5			32,474.	226,943.	140,234.	399,651.
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
Ł	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						0.
(Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6)				•	·	399,651.
_	ction B. Total Support			•			•
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6			32,474.	226,943.	140,234.	399,651.
10a	Gross income from interest,						_
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources				11.	12.	23.
t	Unrelated business taxable income						_
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			_			
(Add lines 10a and 10b				11.	12.	23.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carned on			1			
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)			32,474.	226,954.	140,246.	399,674.
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here	<u> </u>			<u>. </u>		► X
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2013 (line 8, column (f) d	livided by line 13,	column (f))		15	%
16	Public support percentage from 2012	2 Schedule A, Part	III, line 15		•	16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage	1			
17	Investment income percentage for 20	013 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2012 Schedule A,	Part III, line 17		-	18	%
19a	33 1/3% support tests - 2013. If the			on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a						▶□
t	33 1/3% support tests - 2012. If the						and
	line 18 is not more than 33 1/3%, cho						
20			-	•		-	•
3320	23 09-25-13	-				edule A (Form 99	0 or 990-EZ) 2013

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, II Also complete this part for any additional information. (See instructions).	371 _{Pag}
Also complete this part for any additional information. (See instructions).	l, line 12.
	· · ·

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Bosnian American Association

Employer identification number 90...0522271

Pa	rt I Organizations Maintaining Donor Advise		Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised for	unds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa	THE Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part I	
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the org	anization during the tax
	year ►		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(h)(4))(B)(i)
	and section 170(h)(4)(B)(ii)?		└─ Yes └─ No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the d	organization's accounting for
D-	conservation easements.	(A 4 11 1 A 2 1 T A 2 1	<u> </u>
Pal	Organizations Maintaining Collections or		r Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ext		of public service, provide, in Part XIII,
_	the text of the footnote to its financial statements that descri		
Þ	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public s	service, provide the following amounts
	relating to these items:		. .
	(i) Revenues included in Form 990, Part VIII, line 1		. 5 \$
•	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre-		n, provide
_	the following amounts required to be reported under SFAS 1	10 (ASC 958) relating to these items:	> 0
a	Revenues included in Form 990, Part VIII, line 1	·· ··	. 5
b	Assets included in Form 990, Part X	• ••	- \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

	dule D (Form 990) 2013——Bosnian								
Par	t脚 Organizations Maintaining C	ollections of Ar	t, Historic	al Treasures, c	or Othe	r Simil	ar Asse	ts (continu	red)
3	Using the organization's acquisition, accessi	on, and other records	s, check any	of the following tha	t are a siç	nificant	use of its	collection	items
	(check all that apply):								
а	Public exhibition	đ	Loan	or exchange progra	ams				
b	Scholarly research	e	U Other						
C	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they fu	ther the organization	on's exen	npt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations o	f art, historic	al treasures, or oth	er sımılar	assets		_	
	to be sold to raise funds rather than to be ma					-		Yes	No_
Par	Escrow and Custodial Arran		te if the orgai	nization answered '	"Yes" to F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	ian or other intermed	ary for contri	butions or other as	sets not i	ncluded		-	
	on Form 990, Part X?			•			<u> </u>	」Yes	∟_ No
Ь	b If "Yes," explain the arrangement in Part XIII and complete the following table:								
	_							Amount	
	Beginning balance					1c			
	Additions during the year				•	1d			
e	Distributions during the year		•	•		1e			
1	Ending balance			•		1f		7	
	2a Did the organization include an amount on Form 990, Part X, line 21?								⊢ No
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.								
Fel	Endowment Funds. Complete				T			4.55.	
4.	D	(a) Current year	(b) Prior ye	ear (c) Two year	rs dack (d) Inree y	ears back	(e) Foury	ears back
1a	Beginning of year balance		-						
b	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships	-							
е	Other expenditures for facilities								
4	and programs								-
-	Administrative expenses								
g	End of year balance		. /i 1!					<u> </u>	
2	Provide the estimated percentage of the cur	rent year end balance	· . ·	ımn (a)) nelo as:					
	Board designated or quasi-endowment ▶ Permanent endowment ▶	%	_%						
	Temporarily restricted endowment	⁷⁶							
C	The percentages in lines 2a, 2b, and 2c shou								
3-3	Are there endowment funds not in the posse	•	tion that are	hold and administa	rad for th	o oroon!	zotion		
Ja		ssion of the organiza	mon mat are	neid and administe	rea for th	e organi	zation	T.	es No
	by: (i) unrelated organizations							3a(i)	es 140
	(ii) related organizations							3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	e lietad se raquirad oi	n Schadula B					3b	
4	Describe in Part XIII the intended uses of the	· · · · · · · · · · · · · · · · · · ·						30	
	t VI Land, Buildings, and Equipm		milioni iunus						
L	Complete if the organization answere		Part IV. line	11a. See Form 990	. Part X. II	ne 10.			
	Description of property	(a) Cost or ot		Cost or other		cumulate	ed	(d) Book	value
	Decemplication of property	basis (investm		basis (other)	• •	reciation	I	, -, 5000	
1a	Land			25,000.	***************************************			25	,000.
	Buildings			276,367.		5,9	05.		,462.
c	Leasehold improvements			,				<u> </u>	
d	_		_						
	Other .			-					
	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X. column (B)	line 10(c))			•	295	,462.

Schedule D (Form 990) 2013

Complete if the organization answered "Yes" a) Description of security or category (including name of security)	(b) Book value	(c) Meth	nod of valuation: Cost o	r end-of-year market value
Financial derivatives				
Closely-held equity interests				
Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)			· · · · · · · · · · · · · · · · · · ·	
al. (Col (b) must equal Form 990, Part X, col (B) line 12)	L			
art VIII Investments - Program Related.	4 - F 000 - D 10		000 D 1 V 1 10	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Meth	m 990, Part X, line 13.	r end-of-year market value
(1)	(b) Book Value	(c) Met	100 Of Valuation: 003t O	end-or-year market value
(2)				.
(3)		-		
(4)	-	- · ·		
(5)				•
(6)				
(7)				•
(8)				
(9)				
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
art IX Other Assets.				
Complete if the organization answered "Yes"		, line 11d. See Fori	m 990, Part X, line 15.	
	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)		-		
(6)				
(7) (8)				
(9)				
tal. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)		· · · · · · · · · · · · · · · · · · ·	D
art X Other Liabilities.	0 101/			
Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11e or 11f. S	ee Form 990, Part X, line	∍ 25.
(a) Description of liability		(b) Book valu		·
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
tal. (Column (b) must equal Form 990, Part X, col. (B) lin		l <u> </u>		
Liability for uncertain tax positions. In Part XIII, provide	e the text of the footr	note to the organiza	ation's financial stateme	nts that reports the

hedule D (Form 990) 2013 BOSNIAN AMERICAN ASSOCI		90-053237	⊥—Pag
art XI Reconciliation of Revenue per Audited Financial Sta		ue per Return.	
Complete if the organization answered "Yes" to Form 990, Part IV, Iir	e 12a.		
Total revenue, gains, and other support per audited financial statements	•	1	
Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1.1		
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	. 2d		
e Add lines 2a through 2d		2e	
Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3	
Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	. 401	4c	
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	}	5	
art XII Reconciliation of Expenses per Audited Financial St			
Complete if the organization answered "Yes" to Form 990, Part IV, lir	-	ioco poi riotarrii	
Total expenses and losses per audited financial statements	10 /La.	1	
Amounts included on line 1 but not on Form 990, Part IX, line 25:	•	1	
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	
Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)	5	
es 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional information.		
		<u> </u>	

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

2013 Open to Public Inspection

OMB No. 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Bosnian A	Bosnian American Associat	ssociation,	Inc.				Employer identification number 90-0532371
Part f General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	
criteria used to award the grants or assistance?	istance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use	ocedures for moni	toring the use of grant	of grant funds in the United States.	d States.			
	Governments an	d Organizations in the	e United States. C	complete if the org	anization answered "\	res to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated	\$5,000. Part II car		if additional space is needed	Jed.			
1 (a) Name and address of organization or government	(e)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Islamic Community of North							
American Bosniaks - PO Box 37287 -							
Phoenix, AZ 85069	90-0132981	501(c)3	7,585.	0.	0.Book (cash)	N/A	General purposes
	and government or	ganizations listed in th	ed in the line 1 table				
_	s listed in the line		3				•
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

332101 10-29-13

Page 2 Schedule I (Form 990) (2013) (f) Description of non-cash assistance 90-0532371 (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Explanation: The use of grant funds is monitored by the Board of Directors. Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance Bosnian American Association, Inc. (c) Amount of cash grant 23 (b) Number of recipients (a) Type of grant or assistance Part I, Line 2: Schedule I (Form 990) (2013) 332102 10-29-13 Part III

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

Bosnian American Association, Inc.	90-0532371
Form 990, Part I, Line 1, Description of Organization Mis	ssion:
according to the traditional teachings of the original fo	our schools of
Islamic thought.	
Form 990, Part VI, Section A, line 8b:	
Explanation: The Board of Directors does nnot have separa	ate committees.
Form 990, Part VI, Section B, line 11:	
Explanation: The Board of Directors reviews Form 990 price	or to filing with
the Internal Revenue Service.	
Form 990, Part VI, Section B, Line 12c:	
Explanation: The Association annually monitors and enforce	ces compliance with
its conflict of interest policy.	
Form 990, Part VI, Section C, Line 18:	
Explanation: Form 990 is available to the public upon rec	quest and at
Guidestar.com.	
Form 990, Part VI, Section C, Line 19:	
Explanation: The Association makes its governing document	s available to the
public upon request.	

4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990 (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

2013

Attachment Sequence No 179

OMB No. 1545-0172-

Name(s) shown on return

Business or activity to which this form relates

Identifying number

	nian American Asso						age 10		90-0532371
	Election To Expense Certain Prope	erty Under Section 1	79 Note: If you	have any lis	ted prope	rty, c	omplete Part	1	
1 Ma	ximum amount (see instructions)							1	500,000.
2 To	tal cost of section 179 property plac	ed in service (see	instructions)				•	2	
3 Th	reshold cost of section 179 property	before reduction	ın limitation	•				3	2,000,000.
4 Re	duction in limitation. Subtract line 3	from line 2. If zero	or less, enter	-0-				4	
5 Dol	ar limitation for tax year Subtract line 4 from line	e 1 If zero or less, enter	0- If married filing	separately, see	e instructions	<u>., </u>	•	5	
6	(a) Description of pr	roperty		(b) Cost (busin	ess use only)		(c) Elected	cost	
						\perp			
]
7 Lis	ted property. Enter the amount from	n line 29			7				
8 To	tal elected cost of section 179 prope	erty. Add amounts	s ın column (c),	lines 6 and	7		_	8	1
	ntative deduction. Enter the smaller	-						9	
10 Ca	rryover of disallowed deduction from	n line 13 of your 2	012 Form 4562	2				10	
11 Bu	siness income limitation. Enter the s	maller of busines	s income (not le	ess than ze	ro) or line (5	-	11	
	ction 179 expense deduction. Add I		•		•			12	
	rryover of disallowed deduction to 2				▶ 1:	3			
	Do not use Part II or Part III below fo								<u> </u>
Part	Market 1 and				de listed d	rope	rtv.)		
	ecial depreciation allowance for qua								
	e tax year	unica property (ot	ner man isted	property) pr	aced III Se	i VICE	during	14	
	operty subject to section 168(f)(1) ele	action							
	ner depreciation (including ACRS)	ection					•	15	5,905.
Part		nt include listed n	roperty) (See II	netructione	1			. 10	5,905.
X 444 K	HAD TO DEPLECIATION (DO IN	ot include listed p		tion A	·)				
	ACRS deductions for assets placed ou are electing to group any assets placed in ser Section B - Assets (a) Classification of property	vice during the tax year	into one or more ge	neral asset acc Tax Year lepreciation	Using the	Gene	eral Deprecia		(g) Depreciation deduction
10-		in service	only - see in		peno		(5) 551115115	(i) Mobiled	(g) Coproduction
19a	3-year property								
ь	5-year property	┥							
<u> </u>	7-year property	_					 		
<u>d</u>	10-year property	-					-		<u></u>
<u>е</u>	15-year property	-					_		
f	20-year property	_							
g	25-year property				25 yr			S/L	
h	Residential rental property			·	27.5 y		MM	S/L	
					27.5 y	rs.	MM	S/L	
i	Nonresidential real property	/			39 yr	s.	MM	S/L	
		/	<u>_</u>		<u> </u>		MM	S/L	<u> </u>
	Section C - Assets I	Placed in Service	During 2013	Tax Year U	sing the A	ltern	ative Deprec	iation Sy	stem
20a	Class life							S/L	
b	12-year			_	12 yr	s.		S/L	
С	40-year	1			40 yr	s.	MM	S/L	
Part	N Summary (See instructions.)								
21 LIS	ted property. Enter amount from line	e 28						. 21	
	tal. Add amounts from line 12, lines		nes 19 and 20 i	n column (a), and line	21.			
	ter here and on the appropriate lines							. 22	5,905.
	r assets shown above and placed in						· · ·		
	rtion of the basis attributable to sec	-			2	3			
316251 12-19-13	LUA For Denominals Bodinstin		separate inst	ructions.	1=				Form 4562 (2013)