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990

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ 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. 2013

OMB No 1545-0047

Open to Public Inspection

| Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990. | | | | | | inspection | | | |
|---|-----------------------------|------------|------------------|--|--------------|---------------|--|---------------|---------------------------------------|
| Α | For | the | 2013 calend | ar year, or tax year beginning 07-01, 2013, a | and endi | ng | 06 | -30 ,20 | 14 |
| В | Chec | ck if ap | plicable | C Name of organization MUSLIM ASSOCIATION CLEVELAND EAST | | | | D Employer | Identification no. |
| | Addr | ress ch | ange | Doing Business As | _ | | | 31-156 | 6191 |
| ñ | | e char | - | Number and street (or P O box if mail is not delivered to street address) | R | oom/suite | 1 | E Telephone | number |
| Ĭ. | | d return | _ | 9991 LITTLE MOUNTAIN ROAD | | | | | 52-4956 |
| Ħ | | ninated | | City or town, state or province, country, and ZIP or foreign postal code | | | | | 39,503 |
| H | | nded r | | MENTOR, OH 44060-8037 | | | | G Gross reco | |
| \exists | | | | | | | | _ 3,000 1001 | |
| ш | Appl | ication | pending | F Name and address of principal officer | | H(a) Is this | a group re | turn for | Yes X No |
| _ | _ | | | 501(c)(3) | | | | toe includede | |
| <u></u> | | | | 501(c)(3) | | H(b) Are all | attach a l | tes included? | ctions) |
| <u>1</u> | | | ► N/A | . □ . ₩ □ . | 100 | | exemption | | OH |
| K | | | ganization | Corporation ☐ Trust ☒ Association ☐ Other ▶ ☐ L Year of format | ion 199 | O M S | state of leg | al domicile | OH |
| P | Part I Summary | | | | | | | _ | |
| | | 1 | Briefly descr | be the organization's mission or most significant activities: TO PRESERVE | RELIG | IOUS HE | RITAG | E | |
| ø | | | | | | | | | |
| 3nc | | | | | | | | | |
| ĭ | | | | | | | | | |
| Governance | | 2 | Check this b | xxx ► ☐ if the organization discontinued its operations or disposed of more than | 25% of it | s net asset | s. | | |
| Ğ | | 3 | Number of v | oting members of the governing body (Part VI, line 1a) | | | . 3 | | 5 |
| Activities & | | | | ndependent voting members of the governing body (Part VI, line 1b) | | | . 4 | | 0 |
| įŧ | | | | er of individuals employed in calenda <u>r yea</u> r 2013 (Part V, line 2a) | | | . 5 | | 0 |
| ŧ | | | | | | | . 6 | | |
| Ă | | 7 <i>a</i> | Total unrelat | ted business revenue from Part VIII, column Co. Hrie 12 VED | | . <i></i> | 7a | | 0 |
| | | | | d business taxable income from Fgrm 990-T, line 34 | | | . 7b | | 0 |
| _ | + | | . 10. Ginerale | | <u> </u> | Prior Ye | | | rent Year |
| | | 8 | Contribution | s and grants (Part VIII, line 1h) | | | 69,68 | + | 689,503 |
| ب | | | | , | 1 | 009,303 | | | |
| ž | | | • | rvice revenue (Part VIII, line 2g) | ⊢ | | 26,84 | 7) | 0 |
| Revenue | | | | income (Part VIII, column (A), lines 3, 4, and 70) | ∵ | | 20,04 | ' | |
| Œ | Į. | | | ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | 142 22 | 0 | 690 503 |
| _ | - | | | ue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 4 | 42,83 | 0 | 689,503 |
| | | | | similar amounts paid (Part IX, column (A), lines 1-3) | | | | | |
| | | | • | | - | 0 | | | |
| ģ | | | | ner compensation, employee benefits (Part IX, column (A), lines 5-10) | •• | | | | 0 |
| nse | | | | I fundraising fees (Part IX, column (A), line 11e) | •• | | | <u> </u> | 0 |
| Expenses | | | | ising expenses (Part IX, column (D), line 25) ▶1,656 | [| | | | |
| Щ | | | • | nses (Part IX, column (A), lines 11a-11d, 11f-24e) | · · | | 69,24 | _+ | 125,720 |
| | | 18 | Total expen | ses Add lines 13-17 (must equal Part IX, column (A), line 25) | • • | | 69,24 | _ | 125,720 |
| | | 19 | Revenue les | ss expenses. Subtract line 18 from line 12 | | | 73,59 | 5 | 563,783 |
| 6 | Fund Balances | | | | Be | ginning of Cu | rrent Year | En | d of Year |
| sets | alan | 20 | Total assets | s (Part X, line 16) | | 1,2 | 289,82 | 2 | 1,820,274 |
| Asy | , g | 21 | Total liabiliti | es (Part X, line 26) | | | 41,66 | 7 | 8,334 |
| 2 | 3 | 22 | | or fund balances. Subtract line 21 from line 20 | $ abla$ | 1,2 | 248,15 | | 1,811,940 |
| P | ari | H | Signati | ure Block | | | | | |
| ستسا Und | ler pe | nalties | of perjury, I de | clare that I have manned this return, including accompanying schedules and statements, and to the be- | st of my kno | wledge and b | elief, it is | | · · · · · · · · · · · · · · · · · · · |
| Strue | , corr | ect, ar | nd complete De | clare that I have stammed this return, including accompanying schedules and statements, and to the bescharation of preparer (other than officer) is based on all information of which preparer has any knowledge | | | | | |
| 7 | | | L | (Ma)// | | | 1 | _ | |
| _Si | Sign Signature of olicer Da | | | | | | te of | -/15/ | |
| _ | | | | | | | 7// | ///9 | |
| Here AHMAD BANNA, PRESIDENT Type or print name and title | | | | | | | ' | | |
| | | | | | | | | | |
| <u>۾</u> | .: -4 | | | reparer's name | 014 | Check | _ | PTIN | 3034 |
| | | | | eth A Baitt Zhyubur a Cautt ' 199-10-2 | · · · · | | nployed | P0056 | 3934 |
| | | arer | | Associates CPAs Inc | | Firm's EIN ▶ | | | |
| র্⊍ঃ | se (| Only | Firm's addre | | | Phone no | | | _ |
| ပ္က | | | | Painesville OH 44077 | | | | 352-056 | |
| May the IRS discuss this return with the preparer shown above? (see instructions) | | | | | | <u></u> | Yes 🗌 No | | |

EEA

Form 990 (2013)

<u>31-156619</u>1

Part IV

Checklist of Required Schedules

| | | | Yes | No |
|-----|--|-----|--------------|----|
| 1 | is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 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) | | ľ | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 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 | | | |
| | 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, | | | |
| | 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 | | Х |
| 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? If "Yes," complete Schedule D, Part IV | 9 | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted | | | |
| | 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, | | | |
| | VII, VIII, IX, or X as applicable. | | | |
| | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | | | |
| | complete Schedule D, Part VI | 11a | Х | |
| | b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more | | <u> </u> | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more | | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 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 | | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| | e 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 | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | X |
| 1 | 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 and XII 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 |
| 14 | | 14a | ļ | X |
| 1 | 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 | | | l |
| | 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 other assistance to or | | | 1 |
| | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | ļ | X |
| 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 | <u> </u> | 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 (see instructions) | 17 | <u> </u> | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | 1 | |
| | Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II | 18 | ļ | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20 | | 20a | + | X |
| | h. If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | 1 | 1 |

Part IV

Checklist of Required Schedules (continued)

No Yes 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 Scheudle 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 X on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 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 24a Χ Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Ь Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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 25a Х with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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? Χ 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or Χ disqualified persons? If so, complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ 27 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions). 28a Χ A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) С Χ 28c was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Х 34 Х Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a X controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38

| | | | Yes | No |
|--------|--|-------------|-------|---------------------------------|
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | 1 | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | X | |
| 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 0 | - | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X | |
| | 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? | 3a | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? | 4a | ····· | _X_ |
| b | If "Yes," enter the name of the foreign country | | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | _X_ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | <u>X</u> |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). |] | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | 1 | | |
| | and services provided to the payor? | 7a | | _X_ |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | _ | | |
| | required to file Form 8282? | 7c | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | _ | | 3.5 |
| e e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | $\frac{x}{x}$ |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | $\frac{x}{X}$ |
| g h | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g 7h | | $\frac{\mathbf{x}}{\mathbf{X}}$ |
| 8 | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | <u>/n</u> . | | |
| • | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring | | | |
| | | 8 | 1 | Х |
| 9 | organization, have excess business holdings at any time during the year? | • | | |
| а | Did the organization make any taxable distributions under section 4966? | 9a | | х |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | $\frac{\mathbf{x}}{\mathbf{x}}$ |
| 10 | Section 501(c)(7) organizations. Enter: | 30 | | |
| a | 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 | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | 1 | | |
| | 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? | 12a | Í | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. |] | 1 | |
| а | In the comment of the control of the | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | } | | |
| | the organization is licensed to issue qualified health plans | 1 | ı | |
| C | Enter the amount of reserves on hand | 1 | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |
| | ······································ | | | |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 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 the Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 5 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 Enter the number of voting members included in line 1a, above, who are independent 1b 0 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ any other officer, director, trustee, or key employee? 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 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, b Χ stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? X Х Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Χ the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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 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 Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a Χ with a taxable entity during the year? b 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 exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **▶** OH 17 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 made these available. Check all that apply. Other (explain in Schedule O) Own website Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 20 ▶AHMAD BANNA (440)352-4956, 9991 LITTLE MOUNTAIN ROAD, MENTOR, OH 44060-8037

| orm | 990 | (201 | 3) |
|-----|-----|------|----|
| | | | |

MUSLIM ASSOCIATION CLEVELAND EAST

31-1566191

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) **(B)** (C) (E) (F) Name and Title Average Position Reportable Reportable Estimated hours per compensation compensation from amount of (do not check more than one week (list any from related other box, unless person is both an organizations hours for the compensation (W-2/1099-MISC) related organization from the officer and a director/trustee) (W-2/1099-MISC) organizations organization Highest Individual below dotted and related line) employee organizations compensated l trustee (1) AHMAD BANNA 4.00 PRESIDENT X 0 O (2) MOHAMMED FAHMY X VICE PRESIDEN 0 (3) NAFIS UDDIN TREASURER X 0 (4) HUMIRA KHAN X SECRETARY O n 0 (5) Masroor Malik X 0 0 0 (6) (9) (10) (11) (12)(13) (14)_

| - Part | (A) Name and title | (B) Average hours per week (list any hours for related | (do no box, i office | ot che unless r and | Posi eck me s pers direct | tion ore th on is tor/tru | an one both an | | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |
|--------------|--|---|--------------------------------|---------------------------|------------------------------------|------------------------------------|------------------------------|-----------------------|---|---|---|
| | | organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | | organization and related organizations |
| <u>(15)</u> | · | | | | | | | | | | |
| (16) | | | | | | | | | | | |
| (17) | | | | | | | | | | | |
| (18) | | | | | | | | | | | |
| (19) | | | | | | | | | | | |
| (20) | | | | | | | | | | | |
| (21) | | | | | | | | | | | |
| (22) | | | | | | | | | | | |
| (23) | | | | | | | | | | | |
| (24) | | | | | | | | | | | |
| (25) | | | | | | | | | | | _ |
| 1b c d | Sub-total | ion A . | | | | | | > > > | C | 0 | 0 |
| 2 | Total number of individuals (including but not limited reportable compensation from the organization | d to those list | ed abo | ove) | who | rec | eived r | nore | than \$100,000 of | 0 | |
| 3 | Did the organization list any former officer, director employee on line 1a? If "Yes," complete Schedule | | | | | | | | pensated | | Yes No |
| 4 | For any individual listed on line 1a, is the sum of re organization and related organizations greater than | portable com s150,000? I | pensat f "Yes, | tion a " coi | and o | othe te S | r comp chedu | oens le J | ation from the for such | | |
| 5 | Individual Did any person listed on line 1a receive or accrue of services rendered to the organization? If "Yes," | compensation | n from | any | unre | late | d orga | nıza | tion or individual | · · · · · · · · · · · · · · · · · · · | 5 X |
| Secti 1 | on B. Independent Contractors Complete this table for your five highest compensa | ited independ | ent co | ntrad | ctors | tha | t recei | ved | more than \$100.00 | 00 of | |
| | compensation from the organization Report compeyear. | | | | | | | | | | |
| | (A) Name and business address | s | | | | | | | Description of | | (C) Compensation |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | h.d4!! | ad 4 = 11 | | lı t | ا۔ اس | 201.51 | l | | | |
| 2 | Total number of independent contractors (including received more than \$100,000 of compensation from | | | :∪SE ▶ | uste | au al | we) (| WIO | | | |

| | | Check if Schedule O contains a response or r | ote to any line in thi | | | | |
|--|----------|--|--|----------------------|--|---|---|
| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| ats t | 1a | Federated campaigns 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | Ь | Membership dues 1b | 689,503 | | | | |
| ų. Ω Ē | С | Fundraising events 1c | | | | 1 | |
| ar / | d | Related organizations 1d | | | | | |
| S.E | е | Government grants (contributions) 1e | | | | 1 | |
| ë r | f | All other contributions, gifts, grants, | | | | | |
| žĘ. | | and similar amounts not included above 1f | | | | ŧ | |
| 뎚 | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| ੂੰ ਵ | h | Total. Add lines 1a-1f | <u></u> ▶ | 689,503 | | <u> </u> | |
| | | | Business Code | | | 1 | |
| ane. | 2a | | | | | | |
| Revo | b | | | | | | |
| 8 | С | | · | | | | |
| Sen | d | | | | | | |
| E | е | | | | | | |
| Program Service Revenue | 1 | All other program service revenue | | | | | |
| | 9 | Total. Add lines 2a-2f | | | | , | |
| | 3 | Investment income (including dividends, interest, | | | | | 1 |
| | | and other similar amounts) | | | | | |
| | 4 | Income from investment of tax-exempt bond produced | eeds► | | | | _ |
| | 5 | Royalties | <u></u> | | | | |
| | | (ı) Real | (II) Personal | | | ŧ | |
| | 6a | Gross rents | | <u> </u> | | 1 | |
| | 1 | Less: rental expenses | | | | } | |
| | 1 | Rental income or (loss) | | | | } | |
| | d | Net rental income or (loss) | <u></u> | | | | |
| | 7a | Gross amount from sales of (i) Securities | (II) Other | | | | |
| | | assets other than inventory | | ļ | | 1 | |
| | Ь | Less: cost or other basis | | | | 1 | |
| | | and sales expenses | | F | | 1 | |
| | | Gain or (loss) | | | | - | |
| | 1 | Net gain or (loss) | <u> ▶</u> | | | | |
| nue | 8a | Gross income from fundraising | | İ | | 1 | |
| Š | 1 | events (not including \$ | | | | | |
| Other Reve | | of contributions reported on line 1c) | | | | | |
| Ħ | | See Part IV, line 18 a | | | | ‡ | |
| Ò | | Less: direct expenses b | | _ | | 1 | |
| | 1 | - | · <u>- · · · · · · · · · · · · · · · · · ·</u> | | | | |
| | 9a | Gross income from gaming activities. | | | | ‡ | |
| | | See Part IV, line 19 a | | Į | | 1 | |
| | | Less: direct expenses b | | | | 1 | |
| | C | Net income or (loss) from gaming activities | . <u> </u> | | ļ | | |
| | 10a | Gross sales of inventory, less | | | | 1 | |
| | | returns and allowances a | | | | | |
| | | Less: cost of goods sold b | | - | | | |
| | <u> </u> | Net income or (loss) from sales of inventory . | - | | | <u> </u> | ļ |
| | | Miscellaneous Revenue | Business Code | - | | 1 | |
| | 11a | | - | - | | | |
| | b | | | | | | - |
| | C | | | | 1 | - | |
| | | All other revenue | | | | - | - |
| | 1 | Total. Add lines 11a-11d | | | | _ | |
| | 12 | Total revenue. See instructions | 🕨 | 689,503 | SL | 0 | 0 0 |

Page 10

Part IX Statement of Functional Expenses

| Section | on 501(c)(3) and 501(c)(4) organizations must complete all co | lumns All other organiz | zations must complete o | column (A) | |
|----------|---|-------------------------|-------------------------|------------------------------------|--|
| | Check if Schedule O contains a response or note to ar | ny line in this Part IX | | | |
| Do no | ot include amounts reported on lines 6b, 7b, | (A) | (B) Program service | (C) Management and | (D) Fundraising |
| | o, and 10b of Part VIII. | Total expenses | expenses | management and general expenses | expenses |
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the United States. See Part IV, line 21 . | | | | |
| 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 | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees): | | | | |
| a | Management | | | | |
| b | Legal | | | 600 | |
| C | Accounting | 600 | | 600 | - |
| d | Lobbying | | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | _ | | - |
| 9 | Other (If line 11g amount exceeds 10% of line 25, column | | | | |
| 10 | (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion | 1,656 | | · | 1,656 |
| 12 13 | Office expenses | 839 | | 839 | 1,030 |
| 14 | Information technology | | _ | | |
| 15 | Royalties | | _ | | |
| 16 | Occupancy | 14,251 | - | 14,251 | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | - | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 4,294 | 4,294 | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 49,085 | | 49,085 | |
| 23 | Insurance | 4,904 | 4,904 | | |
| 24 | Other expenses. Itemize expenses not covered | | | Ī | |
| | above (List miscellaneous expenses in line 24e. If | | | 1 | |
| | line 24e amount exceeds 10% of line 25, column | | | ‡ | |
| | (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | BOOKS AND SUPPLIES | 3,275 | 3,275 | | |
| b | TEACHERS | 16,860 | 16,860 | | <u> </u> |
| С | DONATIONS TO OTHERS | 100 | 100 | | |
| d | PERMITS AND FEES | 3,025 | 3,025 | | ļ <u> </u> |
| е | All other expenses | 26,831 | 26,831 | | 1 |
| 25 | Total functional expenses. Add lines 1 through 24e . | 125,720 | 59,289 | 64,775 | 1,656 |
| 26 | 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) | | L | <u> </u> | _L |

31-1566191

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 754,299 1 40,450 1 2 2 3 3 Pledges and grants receivable, net 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 7 53,333 7 23,333 8 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 1,812,283 Less: accumulated depreciation | 10b | 65,792 472,190 10c 1,746,491 b 10,000 10,000 11 11 12 12 Investments - other securities. See Part IV, line 11 13 13 14 14 15 15 1,289,822 16 1,820,274 16 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 41,667 8,334 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 41,667 26 8,334 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here | | | | and Net Assets of Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 Temporarily restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🔀 and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 1,248,155 1,811,940 32 Retained earnings, endowment, accumulated income, or other funds 1,248,155 33 1,811,940 33 Total liabilities and net assets/fund balances 1,289,822 34 1,820,274 34

2c

Χ

Form 990 (2013)

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

Schedule O.

EEA

31-1566191

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

(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.)

| Sec | tion A. Public Support | | | | | | |
|------|---|----------------------|----------------------|------------------------|----------------------|----------|---------------|
| 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 | 58,222 | 71,751 | 459,066 | 460 695 | 689,503 | 1 749 227 |
| 2 | received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 56,222 | 71,751 | 459,000 | 469,685 | 669,503 | 1,748,227 |
| 3 | Gross receipts from activities that are not an unrelated trade or bus under sec 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | 58,222 | 71,751 | 459,066 | 469,685 | 689,503 | 1,748,227 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | , | | |
| 8 | Public support (Subtract line 7c from line 6) | = | | | | | 1,748,227 |
| Sec | ction B. Total Support | | | | | | |
| Cale | endar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 9 | Amounts from line 6 | 58,222 | 71,751 | 459,066 | 469,685 | 689,503 | 1,748,227 |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | <u></u> |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| C | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12) | 58,222 | 71,751 | 459,066 | 469,685 | 689,503 | 1,748,227 |
| 14 | First five years. If the Form 990 is for the or organization, check this box and stop here | | <u> </u> | | s a section 501(c)(3 | | <u>></u> 🔲 |
| Se | ction C. Computation of Public S | upport Percer | ntage | | | | |
| 15 | Public support percentage for 2013 (line 8, c | olumn (f) divided by | y line 13, column (f |)) | | 15 | 100.00 9 |
| 16 | Public support percentage from 2012 Sched | | | | | 16 | 100.00 % |
| Se | ction D. Computation of Investme | | | | | TT | |
| 17 | Investment income percentage for 2013 (line | | | | • • • • • • • • | 17 | 0.00 9 |
| 18 | Investment income percentage from 2012 Se | | | • • • • • • • • • | | 18 | 9 |
| | 133 1/3% support tests - 2013. If the organiz 17 is not more than 33 1/3%, check this box | and stop here. Th | e organization qua | lifies as a publicly s | supported organiza | tion | ▶ 🏻 |
| | 33 1/3% support tests - 2012. If the organize line 18 is not more than 33 1/3%, check this | box and stop here | . The organization | qualifies as a publi | icly supported orga | nization | |
| 20 | Private foundation. If the organization did r | iot check a box on | iine 14, 19a, or 19b | o, check this box a | na see instructions | | _ , ▶ 📙 |

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 501(c)(4), (5), or (6) organizations | Complete Part III. | | | | |
|--|---|--|--|----------------|-----------------|---|
| | ne of organization | | | | | dentification number |
| | JSLIM ASSOCIATION CLEVELAND | EAST | | | 31-1566 | |
| Pa | | zation is exempt under section | | s a section | <u>527 orga</u> | nization. |
| 1 | Provide a description of the organization's | | | | | |
| 2 | Political expenditures | | | | | |
| 3 | Volunteer hours | | | | · · | <u> </u> |
| | | | | | | |
| Pa | | ization is exempt under section | | | | |
| 1 | Enter the amount of any excise tax incurre | | | | | |
| 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ | | | | | | |
| 3 | If the organization incurred a section 4955 | | | | | |
| 4a | Was a correction made? | | | | | . 🗌 Yes 🔲 No |
| b | | | | - Vil. 1.11 | | |
| Pa | | ization is exempt under secti | | ept sectio | n 501(c)(3 | 3). |
| 1 | Enter the amount directly expended by the | | | | | |
| | activities | | | | . ▶ \$ | |
| 2 | Enter the amount of the filing organization | | | | | |
| | 527 exempt function activities | | | | . ▶ \$ | |
| 3 | Total exempt function expenditures. Add le | | | | | |
| | line 17b | | | | | |
| 4 | Did the filing organization file Form 1120- | POL for this year? | | | | . 🗌 Yes 🗌 No |
| 5 | Enter the names, addresses and employe | | | | | |
| | organization made payments For each or | | | | | |
| | the amount of political contributions receive | | | | | |
| | as a separate segregated fund or a politic | al action committee (PAC). If additional | space is needed, p | rovide informa | tion in Part I | V . |
| | (a) Name | (b) Address | (c) EIN | (d) Amount | | (e) Amount of political |
| | | | | filing orgai | | contributions received and |
| | ! | | | funds If none | e, enter -u- | promptly and directly delivered to a separate |
| | | | | | | political organization If |
| | | | | | _ | none, enter -0- |
| (1) | | | | | | |
| | | | <u>. </u> | | | |
| (2) | | | | | | |
| | | | | | | |
| (3) | | | | | | |
| | | | | | | |
| (4) | | | | | | |
| ('' / | | | | | | |
| (E) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
| (0) | | | l | | | 1 |

31-1566191

Schedule C (Form 990 or 990-EZ) 2013

MUSLIM ASSOCIATION CLEVELAND EAST

Schedule C (Form 990 or 990-EZ) 2013

Grassroots lobbying expenditures

EEA

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)) Part II-B

| | 1 | a) | (b) | |
|---|----------|-------|-------------|--|
| for each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed | | | | |
| escription of the lobbying activity. | Yes | No | Amount | |
| During the year, did the filing organization attempt to influence foreign, national, state or local | | | | |
| legislation, including any attempt to influence public opinion on a legislative matter or | | | | |
| referendum, through the use of | | | | |
| a Volunteers? | | X | į | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | X | į | |
| c Media advertisements? | | Χ | | |
| d Mailings to members, legislators, or the public? | | Х | | |
| e Publications, or published or broadcast statements? | | X | | |
| f Grants to other organizations for lobbying purposes? | | Х | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | Х | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | Х | | |
| i Other activities? | | Χ | | |
| j Total. Add lines 1c through 1i | | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | X | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | • | | <u> </u> | |
| c 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? | | | I | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) | c)(5), | or se | ection | |
| 501(c)(6). | | | | |
| | | | Yes I | |
| 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 | |
| Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) | | | 3 | |
| answered "Yes." Dues, assessments and similar amounts from members | | 1 | | |
| 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 Carryover from last year | | 2b | | |
| c Total | | 2c | | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | • • | 3 | | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the | | | | |
| excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying | | | | |
| and political expenditure next year? | • • | 4 | | |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | • • | 5 | <u> </u> | |
| Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, I Part II-B, line 1. Also, complete this part for any additional information. | ine 2, a | and | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE D (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.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2013

Open to Public

Inspection Employer Identification number Name of the organization 31-1566191 MUSLIM ASSOCIATION CLEVELAND EAST Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements** Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements b Number of conservation easements on a certified historic structure included in (a) c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ,,..., Yes 🗌 No (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1

| | Complete if the organization answered Tes to Form coo, Fart TV, line Tra: ecc Form coo, Fart X, line To: | | | | | | | | |
|------|--|--------------------------------------|------------------------------------|------------------------------|----------------|--|--|--|--|
| | Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value | | | | |
| 1a | Land | 20,000 | | | 20,000 | | | | |
| b | Buildings | 1,493,046 | | 46,931 | 1,446,115 | | | | |
| С | Leasehold improvements | 294,069 | | 17,907 | 276,162 | | | | |
| d | Equipment | | 5,168 | 954 | 4,214 | | | | |
| _е | Other | | | | | | | | |
| Tota | I. Add lines 1a through 1e (Column (d) must equal For | m 990, Part X, column (E | s), line 10(c)) | | 1,746,491 | | | | |

| Schedule D (Form | 990) 2013 • MUSLIM ASSOCIAT | ION CLEVELAND EAST | 31-156 | 56191 Page 3 |
|------------------|--|---------------------------------------|--|--------------------------|
| Part VII | Investments - Other Securities | | | |
| | Complete if the organization answered | I "Yes" to Form 990, Pa | rt IV, line 11b. See Form 990, | Part X, line 12. |
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation Cost or end-of-year market | |
| (1) Financial d | lerivatives | | | |
| (2) Closely-he | eld equity interests [| | | |
| (3) Other | | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | _ | |
| (D) | | · | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| Part VIII | inust equal Form 990, Part X, col (B) line 12) Investments - Program Related. | | | |
| FAIL VIII | Complete if the organization answered | "Yes" to Form 990, Pa | rt IV, line 11c. See Form 990, | Part X, line 13. |
| | (a) Description of investment | (b) Book value | (c) Method of valuation Cost or end-of-year market | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | - | | | |
| (6) | | ··· | | |
| (7) | | | | |
| | | | | |
| (9) | | | | |
| | o) must equal Form 990, Part X, col (B) line 13) Other Assets. | | | alaada gaa lagalada 1999 |
| Part IX | Complete if the organization answered | d "Yes" to Form 990. Pa | rt IV line 11d See Form 990 | Part X line 15 |
| | | escription | Terry line 11d. Goot Gill Goo, | (b) Book value |
| (1) | (8) | | | (b) Book value |
| (2) | | | | , |
| (3) | | | - | |
| (4) | | | | |
| (5) | · - · · · · · · · · · · · · · · · · · · · | | | , |
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| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| | nn (b) must equal Form 990, Part X, col. (B) line 15.) | | <u> </u> | |
| Part X | Other Liabilities. Complete if the organization answered line 25. | d "Yes" to Form 990, Pa | rt IV, line 11e or 11f. See For | m 990, Part X, |
| 1. | (a) Description of liability | (b) Book value | | |
| | income taxes | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | · · · · · · · · · · · · · · · · · · · | | |
| (7) | | | _ | |
| (8) | | | _ | |
| (9) | | | _ | |
| | o) must equal Form 990, Part X, col (B) line 25) | | | |
| | r uncertain tax positions. In Part XIII, provide the tex | | | |
| organization's | s liability for uncertain tax positions under FIN 48 (A | SC 740). Check here if the text | t of the footnote has been provided in I | Part XIII |

| Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II, line 18.) Supplemental Information vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line | Total revenue, gains, and other support per audited financial statements | |
|--|---|--|
| Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments Donated services and use of facilities Recoveries of prior year grants Cither (Describe in Part XIII.) Add lines 2a through 2d Subtract tine 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) Add lines 4a and 4b Total evenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Total expenses and use of facilities Donated services and use of facilities Prior year adjustments Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II, line 18.) **Extill Supplemental Information vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line | • | 1 1 |
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| | Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. | |
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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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization Employer identification number MUSLIM ASSOCIATION CLEVELAND EAST 31-1566191 01. Form 990 governing body review (Part VI, line 11) COPY OF FORM 990 WAS PROVIDED TO THE PRESIDENT PRIOR TO FILING 02. Governing documents, etc, available to public (Part VI, line 19) AVAILABLE UPON REQUEST TO THE PRESIDENT 03. General explanation attachment Rounding

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2013

| Internal | nent of the Treasury Revenue Service (99) | ► See separate | instructions. | | | our tax return | | | Attachment Sequence No. 179 Identifying number |
|------------|--|--|--|---------------|------------------|-----------------|---|------------|--|
| | s) shown on return | | | | • | | | | ' * |
| | LIM ASSOCIATION C | | | | м 990 | <u> </u> | | | 31-1566191 |
| Par | | | | | | | | | |
| | Note: If you have any liste | ed property, compl | ete Part V bet | ore you co | mplete Part | <u>.</u> | | | |
| 1 | Maximum amount (see instructions | =" | | | | | | 1 | |
| 2 | Total cost of section 179 property p | placed in service (s | see instruction | ns) | | | | 2 | |
| 3 | Threshold cost of section 179 prop | erty before reduct | ion in limitatioi | n (see instr | uctions) | | | 3 | |
| 4 | Reduction in limitation. Subtract line | e 3 from line 2 If z | ero or less, e | nter -0- | | | | 4 | |
| 5 | Dollar limitation for tax year. Subtra | ct line 4 from line | 1. If zero or le | ss, enter -(| O If married | filing | | | |
| | separately, see instructions | <u> </u> | <u> </u> | | <u> </u> | | · <u>· · </u> | 5 | |
| 6 | (a) Description of p | roperty | | (b) Cost (but | siness use only) | (c) Elec | cted cost | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property. Enter the amount f | rom line 29 | | | 7 | | | | |
| 8 | Total elected cost of section 179 pi | | ınts ın column | (c), lines 6 | and 7 | | | 8 | |
| 9 | Tentative deduction Enter the sma | | | | | | | 9 | |
| 10 | Carryover of disallowed deduction | from line 13 of vol | ır 2012 Form | 4562 . | | | | 10 | |
| 11 | Business income limitation. Enter t | | | | an zero) or lu | ne 5 (see instr | uctions) | 11 | |
| 12 | Section 179 expense deduction. A | | | | | | | 12 | |
| 13 | Carryover of disallowed deduction | | | | ▶ 13 | | | | |
| | Do not use Part II or Part III below | | | | | | | | L |
| Par | | | | | iation (De | not include lis | eted pro | porty) | (See instructions.) |
| | Special depreciation allowance for | | | | | | sted proj | Jerty , | (Oce manachona.) |
| 14 | • | | | | - | | | 14 | |
| | during the tax year (see instruction | | | | | | | | |
| 15 | Property subject to section 168(f)(| | | | | | | 15 | |
| 16 | Other depreciation (including ACR | | | | | | | 16 | <u> </u> |
| Par | * III MACRS Depreciati | On (Do not inci | | - | e instructions | 5.) | | | · |
| | | <u> </u> | | ection A | 0040 | | | 4- | 12 022 |
| 17 | MACRS deductions for assets place | | | - | | • • • • • • • | | 17 | 12,023 |
| 18 | If you are electing to group any ass | | | | | | | | |
| | | | | | | | | l <u>.</u> | |
| | Section B - Asset | 1 | | | ar Using the | General Depr | eciation | Syst | em |
| | (a) Classification of property | (b) Month and year placed in | (c) Basis for dep (business/investi | | (d) Recovery | (e) Convention | (f) Met | nod | (g) Depreciation deduction |
| | ta diacomeanist of property | service | only-see instru | ictions) | period | | ., | | 3 , |
| <u>19a</u> | 3-year property | _[| | | | | | | |
| b | 5-year property Statement | -1 · · · · · · · · · · · · · · · · · · · | | | | | | | 3,067 |
| C | 7-year property Statement | #51 | - <u></u> - | | | | | | 1,945 |
| d | 10-year property |] | | | | | | | |
| е | 15-year property | _} [| 9 | ,650 | 15 | HY | 150 | DB | 483 |
| f | 20-year property |] 1 | | _ | | | | | |
| g | 25-year property | | | | 25 yrs. | | S | L | |
| h | Residential rental | | | | 27.5 yrs. | ММ | S | 'L | |
| | property | | | | 27.5 yrs. | MM | S | ′L | |
| | Nonresidential real | 07-2013 | 1,284 | ,790 | 39 yrs | ММ | S | ′L | 31,567 |
| | property | | • | <u> </u> | | ММ | S | 'L | |
| | Section C - Assets | Placed in Service | e Durina 201 | 3 Tax Yea | r Usina the | | | | rstem |
| 20a | Class life | | | | | | S | | |
| <u>20a</u> | 12-year | † 1 | | | 12 yrs. | | S. | | |
| | | | | | 40 yrs. | ММ | S | | |
| C | | 1 | | | יסוא אר ו | MIM | | | <u> </u> |
| D- | 40-year | intions) | | | | | | | |
| <u> </u> | t IV Summary (See instru | | | | | | | 24 | <u> </u> |
| 21 | Summary (See Instruction Listed property Enter amount from | m line 28 | 7 lean 40 = == | 100 m and | | | • • • | 21 | |
| <u> </u> | t IV Summary (See instru | n line 28 ines 14 through 17 | | | | | • • • • | 21 | 49,085 |

| • | |
|-----------------------------------|------------------|
| Federal Supporting Statements | 2013 PG01 |
| Name(s) as shown on return | FEIN |
| MUSLIM ASSOCIATION CLEVELAND EAST | 31-1566191 |

FORM 4562 - LINE 19B

Statement #50

| BASIS | <u>RP</u> | <u>CV</u> | METHOD | DEDUCTION |
|--------------|-----------|-----------|---------------|-----------|
| 2,129 | 5 | HY | 200 DB | 426 |
| 11,572 | 5 | HY | 200 DB | 2,314 |
| 1,633 | 5 | HY | 200 DB | 327_ |
| TOTAL | | | | 3,067 |

PG01 Statement #51

FORM 4562 - LINE 19C

| BASIS | RP | CV | METHOD | DEDUCTION |
|--------|----|----|--------|-----------|
| 12,205 | 7 | HY | 200 DB | 1,744 |
| 856 | 7 | HY | 200 DB | 122 |
| 550 | 7 | ΗY | 200 DB | 79 |
| TOTAL | | | | 1,945 |

| 990 | Overflow Statement | 2013 Page 1 |
|----------------------------|--------------------|-----------------------|
| Name(s) as shown on return | | FEIN |
| MUSLIM ASSOCIATION | CLEVELAND EAST | 31-1566191 |

OTHER EXPENSES

| Description | 1 | Amount |
|-------------------------------|----|--------|
| catering | \$ | 6,608 |
| office | | 174 |
| Awards | | 829 |
| Summer Camp | | 600 |
| Security | | 1,200 |
| Testing Services | | 4,553 |
| Auto Expense | | 800 |
| Bank Service Charge | | 215 |
| Dues & Subs | | 55 |
| Evangelism and Special Events | | 184 |
| Landscaping Expenses | | 3,970 |
| Outside Services | | 290 |
| Professional Fees | | 349 |
| Property Tax | | 3,757 |
| Supplies | | 3,247 |
| Total: | \$ | 26,831 |
| | | |

| * Item was disposed of during current year. | | | | | Del | Depreciation Detail Listing Management & General For your records only | Det E & G ecords | tail Listi _{enera} l s only | <u>g</u> | | | *** | | 2013 PAGE 1 |
|---|---|---|------------------------|---|-----|--|------------------------|--|---|--|---|--------|---------------------------------------|---|
| Name(s) as shown on return MUSLIM ASSOCIATION CLEVELAND EAST | AND EAST | | | | | | | | | | | Social | Social security number/EiN 31-1566191 | |
| No Description | Date | Salvage | Business Percentage | ess Section | | Depreciation L Basis | Life | Method | Rate | Current | Accumulated Depreciation | Prior | Bonus | AMT |
| 1 NEW CONSTRUCTION 2 LAND 3 improvements 4 Furniture & Equipment 20 5 Improvements - Carpet 20 6 Improvements - Parkin 20 7 Improvements - Parkin 20 9 Furniture & Equipment 20 10 Furniture & Equipment 20 11 Furniture & Equipment 20 | 20110701 20110701 20120630 20120630 20140517 20130924 11,572 20130715 20130715 20130715 20140615 20140615 20140615 1,633 | 208,256 20,000 260,641 2,129 11,572 12,205 9,650 856 550 1,633 | | 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0 | | 208,256 39 0 0 260,641 39 2,129 5 11,572 5 12,205 7 9,650 15 1,284,790 39 1,633 5 1,633 5 | | SL SL SL SL SL SC SB HY 150 BB HY 200 BB HY 20 | 2.564 0 2.564 20 20 20 14.29 14.29 20 20 | 5,340 426 2,314 1,744 483 31,567 79 79 327 | 15,364 13,366 2,314 1,744 483 31,567 79 327 327 | | | 5,340 6,683 1,736 1,307 1,307 92 59 59 59 |
| Totals | 1,812,282 | 282 20,000 | 8 | | | 1,792,282 | | | | 49,085 | 65, 792 | | | 47,831 |
| Land Amount Net Depreciable Cost | 1,812,282 | 1 | | | 1 | | 1 | | | | | | ST ADJ: | |