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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

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. For the 2014 calendar year, or tax year beginning 7/1/2014 , and ending 6/30/2015 MUSLIM COMMUNITY CENTER D Employer identification number C Name of organization Check if applicable: Doing business as Address change Number and street (or P.O. box if mall is not delivered to street address) Room/suite 23-7060038 Name change 4380 NORTH ELSTON AVENUE E Telephone number State ZIP code Initial return City or town (773) 725-9047 60641 CHICAGO Final return/terminated Foreign postal code Foreign province/state/county Foreign country name G Gross receipts \$ 5,976,052 Amended return Yes X No F Name and address of principal officer: Application pending H(a) is this a group return for subordinates? H(b) Are all subordinates included? If "No." attach a list, (see instructions) 4947(a)(1) or 527 501(c)(3) 501(c) Tax-exempt status:) **(insert no.)** Website: ► N/A H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation 1969 M State of legal domicile: Part I Summary TEACHING AND RECITATION OF HOLY QUR'AN Briefly describe the organization's mission or most significant activities: Activities & Governance FULL TIME SCHOOL, DAILY AND FRIDAY CONGRIGATION, FUNERAL AND MARRIAGE SERVICES, ANDCHILDREN AND ADULT EDUCATION. Check this box | | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 24 3 Number of independent voting members of the governing body (Part VI, line 1b) 24 4 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 145 6 6 112 Total unrelated business revenue from Part VIII, column (C) line EVENUE SERVICE Net unrelated business taxable income from Form 1990-1, line 34ELD ASSISTANCE 9,226 7a 8,225 7b **Current Year** Contributions and grants (Part VIII, line 1h). . . 4,414,776 2,263,493 9 Program service revenue (Part VIII, line 2g) 91,090 3.447.854 Investment income (Part VIII, column (A), lines 3, 4, and 7d) NOV 1 6 2015 10 277,244 55,199 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e), 8,678 114,412 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A) line 12) 4.791.788 5,880,958 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 605.804 Benefits paid to or for members (Part IX, column (A), line 4) 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). . . 15 2.203.634 2,789,198 Professional fundraising fees (Part IX, column (A), line 11e) 16a b Total fundraising expenses (Part IX, column (D), line 25) ► 79,135 The state of the s 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,630,946 1,681,583 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 3,834,580 5,076,585 19 Revenue less expenses. Subtract line 18 from line 12 957,208 804.373 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 12,905,900 13,683,877 21 Total liabilities (Part X, line 26) 4,225,313 3,155,598 22 Net assets or fund balances. Subtract line 21 from line 20. 8,680,587 10,528,279 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge And belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer LCO Here MOHAMMAD S. NASIR **PRESIDENT** Type or print name and title Print/Type preparer's name Preparer's signature PTIN Check **Paid** MIRZAS BAIG 11/15/2015 self-employed **Preparer** Firm's name ► MIRZA BAIG & COMPANY Firm's EIN > 36-4211016 Use Only Firm's address ➤ 30 EAST ADAMS STREET, CHICAGO, IL 60603 Phone no. (312) 236-2077 May the IRS discuss this return with the preparer shown above? (see instructions) No

Form 990 (2014)

Form 9	90 (2014) MUSLIM COMMUNITY CENTER	23-7060038	Page 2
	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission: TEACHING AND RECITATION OF HOLY QUR'AN, FULL TIME SCHOOL, DAILY AND FRIDAY CONFUNERAL AND MARRIAGE SERVICES, ANDCHILDREN AND ADULT EDUCATION.	IGRGATION,	
		·	
2	Did the organization undertake any significant program services during the year which were not listed the prior Form 990 or 990-EZ?		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Tyes	X No
4	Describe the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants at the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 2,799,215 including grants of \$) (R	evenue \$)
	The MCC Educational Councils have two Full-Time Schools with a total of 579 students. These		
	curriculum of the school is in line with the standards proposed by the ISBE (Illinois State Board		
	of Education). In addition, we offer a curriculum of Islamic Studies which includes a comprehensive program aimed at the explanation and implementation of Islamic practices and		
	principles, as well as mastery of the Arabic language.		
4b	(Code:) (Expenses \$ 810,916 including grants of \$) (R	evenue \$	
70	PRAYER SERVICES provide five obligatory prayers in a day. It also provides a congregational		/
	that \$4 at the bald area. Folder after many is the place of 7 the Donger in addition it		
	holds Eid Prayers, also known as Salat al-Eldain which is the special prayer offered to		
	commemorate two festivals. The two festivals are 1) Eid al-Fitr which is celebrated on the day of		
	Shawwal, the 10th month of the Islamic calendar (the first day after Ramadan) 2) Eid al-Adha,		
	which is celebrated on the 10th day of Dhu al-Hajj, the 12th month of Islamic calendar.		

4c	(Code:) (Expenses \$ 95,914 including grants of \$) (R MCC Part Time School (PTS) system caters Sunday schools, one at the MCC location and the other MEC; two Saturday schools also at both locations; and two Dar-ul-Uloom schools at both MCC and)
	MEC. There is also a weekend evening school at the MCC location. Saturday and Sunday schools		
	typically run from 10AM to 2PM, whereas Darul-ul-Uloom schools run Monday through Friday 5PM		
	through 7PM. Each school is run by dedicated volunteers and teachers. In Saturday and Sunday		
	schools we have standard curriculum. Dar-ul-Uloom schools have developing standardized curriculu		
	as well. Each school teaches Quran, recitation with rules and regulations, Akhlaq, Agaid and		
	Ibadaat along with Islamic history and narratives of Prophets.		
	·		
4d	Other program services. (Describe in Schedule O.)		
-	/Expenses \$ 37.694 including grants of \$ 0.1/Revenue \$	0.)	

3,743,739

4e Total program service expenses

Part	V Checklist of Required Schedules	 7	V 1	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	$\overline{}$	Yes	No
•	complete Schedule A	11	×	
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			1
	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		_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,	1 1	- 1	
	Part III	5		х
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,"	_		х
9	complete Schedule D, Part III	8		-
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt	1 1		
	negotiation services? 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 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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.			
а		l I		ĺ
_	Schedule D, Part VI	11a	<u>X</u>	
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110		^
Ī	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		_
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	44.8		
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, Independent audited financial statements for the tax year? If "Yes," complete	11f	-	X
124	Schedule D, Parts XI and XII	12a	х	1
b	Was the organization included in consolidated, Independent audited financial statements for the tax year? If "Yes,"	1	- ^	
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	ŀ	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	_
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1	1	
	fundraising, business, investment, and program service activities outside the United States, or aggregate	 	}	,
46	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	ļ. —	-×
15	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	13	 	-^
	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 (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		J	
	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	 -	Ϋ́
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	├	X
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Form !	990 (2014) MUSLIM COMMUNITY CENTER 23	-7060038	Р	age 4
Par	t IV 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	i		ĺ
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21	<u>_x</u> _	ļ
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		١	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	l l	1	
	organization's current and former officers, directors, trustees, key employees, and highest compensated		l	
	employees? If "Yes," complete Schedule J	23	 	_×_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	- 1	ł	}
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1	ł	١.,
	24b through 24d and complete Schedule K. If "No," go to line 25a	. 24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b	 	X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1	[١.,
	to defease any tax-exempt bonds?	· 24c	}	X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d	 	X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		1	
	transaction with a 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	l	1	ł
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	051	ł	
00	990-EZ? If "Yes," complete 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	i	i	ł
	current or former officers, directors, trustees, key employees, highest compensated employees, or	. 26	l	
27	disqualified persons? If "Yes," complete Schedule L, Part II	. 20	├	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1	1	1
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	. 27	}	x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		3.75	
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	\$ \(\frac{1}{2} \)	1 1 m	1
_	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	. 28a	أستنفد	X
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	. <u>20a</u>	├	 ^-
	Schedule L, Part IV	28b	1	×
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1 200	╁──	 ^
Ŭ	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	. 28c	İ	_x_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		 	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	1	x
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N</i> ,	· **	1	 ``
•	Part I	. 31	}	X
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	1	_x_
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	1	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,		1	\Box
	III, or IV, and Part V, line 1	. 34	1	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a	T	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b	·	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		T	Γ^{-}
	organization? If "Yes," complete Schedule R, Part V, line 2	. 36	L	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	l	1	ł
	W	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		1	1
	19? Note. All Form 990 filers are required to complete Schedule O	38	l x	1

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

Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

13b

Part VI

Sect	on A. Governing Body and Management	 			
	Production in the second secon	-	, S	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 7		. 3.	
	If there are material differences in voting rights among members of the governing body, or	:		1 (1)	
	if the governing body delegated broad authority to an executive committee or similar		13.36	, i	
L	committee, explain in Schedule O.	46 7	, , , , , , , , , , , , , , , , , , ,		11.57
b		1b 7	-		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations		and the same of th		السفسا
_	any other officer, director, trustee, or key employee?		2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		_		\
5	Did the organization become aware during the year of a significant diversion of the organization's		5	~	 ^- -
6	Did the organization have members or stockholders?		6_	X	├
7a	Did the organization have members, stockholders, or other persons who had the power to elect or			\ \ \	i
	one or more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members		 		ł
_	stockholders, or persons other than the governing body?		7b	X	-
8	Did the organization contemporaneously document the meetings held or written actions undertake	n during	ST PS		
	the year by the following:			نسلسلىلىك:	
а	The governing body?		8a	X_	
b	Each committee with authority to act on behalf of the governing body?		8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				,
	at the organization's mailing address? If "Yes," provide the names and addresses In Schedule O.		9	<u> </u>	X
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue	Code.		1
	Dilli		40-	Yes	No_
10a	Did the organization have local chapters, branches, or affiliates?		10a	├	 ^-
þ	If "Yes," did the organization have written policies and procedures governing the activities of such		10ь		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purely has the organization provided a complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization or the organization of the organi		11a	X	├
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ore ming the forms.	l la	1.0320	, Augur , S
b	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	1
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12b	Ŷ	-
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If		120	^	
·	describe in Schedule O how this was done		12c	x	1
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	x	
15	Did the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining compensation of the following persons include a review and approximately the process for determining the process f		\$	ر المعا	37,5
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation	•		Par.	1.77
a	The organization's CEO, Executive Director, or top management official		15a	X	التنسسط ا
, h	Other officers or key employees of the organization		15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		10D	- 9 1	1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements.	nement		1 6	. ^^:
Iou	with a taxable entity during the year?	gomoni	16a	 	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to eval	uote ite	1.65	ñ.	35/5
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	the organization's exempt status with respect to such arrangements?		16b		لنشمست
Sect	ion C. Disclosure		100		
17	List the states with which a copy of this Form 990 is required to be filed				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501(c)(3)s onl	v)	
	available for public inspection. Indicate how you made these available. Check all that apply.	((-)((,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,	
		xplaın in Schedule O)	1		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents,			nd	
=	financial statements available to the public during the tax year.	po			
20	State the name, address, and telephone number of the person who possesses the organization's	books and records:	•		
	MOHAMMED BASHEERUDDIN	(770) 70E 004	7		
	4380N, ELSTON AVE., CHICAGO, IL 60641				

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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

1		(C)								
(A) Name and Title	(B) Average hours per	box,	unles	neck ss pe d a d	rson	than o is both or/truste	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) MOHAMMAD S. NASIR	5.00	ł								
PRESIDENT	 	X	 _	<u> </u>	_			0	0	0
(2) ATEEQ ANSWARI	5.00	۱	l	ł	l	ľ		_	<u> </u>	_
VICE PRESIDENT II		X	├—	<u> </u>	 			0	0	0
(3) MOHAMMED BASHEERUDDIN	10.00		1	{	{	•	[_	_	_
TREASURER	 	X	├	-	 		 -	<u> </u>	0	0
(4) MASOOD BEJAPURI	5.00		١	1]	})		,	
SECRETARY		X	├-	├-		 	├		0	0
(5) ALI QUADRI	2.00		}	Ì	}			}	1	
ASST. SECRETARY	5.00	X	├	├	├	 	├	0	0	0
(6) KASHIF PUTHAWALA	5.00	4		}	1		1	1 .		
ASST. TREASURER	0.00	X	├	├-	┼─	 		0	0	0
(7) MOHAMMED ALEEMUDDIN	0.00	x			İ	1	1	,	0	o
EX OFFICIO	 	-^-	┢	├	╌		├─	0	 	
(8)	{					1			}	
(9)			\vdash				-			
(10)				-						
(11)										
(12)										
(13)										
(14)										

Pa	rt VII Section A. Officers, Directors, Tru	stees, Key Em	ploye	es,	and	1 Hi	ghes	t Co	ompensated En	ployees (continu	ued)		
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle: er an	ss per	ition more rson i	ha both Highest compensated e is of employee	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportal compense from rela organizati (W-2/1099-l	ation ited ions	am comp fro orga and	(F) timated nount of other pensation the anization i related	f on on d
(15)					-		-							
(16)					-	-		-	<u> </u>					
(17)			-	-	-	 -	<u> </u>	-						
(18)				-	-	-	 	-						
(19)			-	-	 	-		-	 					
(20)			-	-	\vdash	-		-						
			-			-		-						
			-	\vdash	-	-	-	-		[-	
(23)			_	\vdash	-	-	-	-						
(24)			-	\vdash	-	-	-	\vdash						
(25)			_	\vdash	├		-	┝	 					
1b c d	Sub-total	ection A	 	 <u></u>	/e) '		·	>	0		0 0			0
3	Did the organization list any former officer, directly employee on line 1a? If "Yes," complete Sched	ector, or trustee,											Yes	
4	For any individual listed on line 1a, is the sum of the organization and related organizations greated individual	of reportable cor ater than \$150,0	npen	sati	on a	and	other	COI	mpensation from		•	4		X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "Y										,	<u>.</u> 5	4	
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest compe compensation from the organization. Report co year.											tax		
	(A) Name and business add	fress							(B) Description of se	rvices	,	(C) Compen		
								1						
						_		┼			 -			
								╁			<u> </u>			
								†			 			0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the		ited to	o the	ose	liste	ed ab) who received					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

	_	. – .								
Part VIII	S	tat	er	ne	ıní	t o	f	Re	venu	e

		Check if Schedule O contains	a response or n	ote to any line 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
92 90	1a	Federated campaigns	<u>1a</u>	825,672				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	<u>1b</u>	87,625		The same of the sa		
ع ق	C	Fundraising events	<u>1c</u>	297,058				
GIRS,	đ	Related organizations	1d	0				
, E	е	Government grants (contributions) 1e	0		and the		
to to	f	All other contributions, gifts, grant	s, and					
릗쵥		similar amounts not included above	ve 1f	1,053,138		CARDEN BY		
Contributions, and Other Sim	g	Noncash contributions included in lir	nes 1a-1f: \$	0			2021374-12	
O #	h	Total. Add lines 1a-1f	<u> </u>	. ▶	2,263,493	是認為實際	的一个一个	情况的。YNLXE
9				Business Code				The Charles of the Charles
Service Revenue	2a	TUITION AND FEES		611710	3,151,113	3,151,113		
§	b	STUDENTS ACTIVITY		611710	134,722	134,722		
5	C	PROGRAM INCOME		900099	162,019	162,019		
Se	d				0	<u> </u>		
	e				0			
Program	f	All other program service revenue	3		0			
ă	g	Total. Add lines 2a-2f			3,447,854	できるとはいればか		125 - 175 - 185 -
	3	Investment income (including divi	dends, interest,	and				
	I	other similar amounts)			55,199	<u> </u>	<u></u>	55,199
	4	Income from investment of tax-ex	empt bond prod	ceeds 🕨	0			
	5	Royalties	<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	0			
		į.	(ı) Real	(ii) Personal				
	6a	Gross rents	35,075			15. Good 15. 15.5	HERMAN MARK	
1	b	Less: rental expenses	27,328				422 Mins	
	C	Rental income or (loss)	7,747	0				
	d	Net rental income or (loss)	<u></u>	<u>, , , , , , , , , , , , , , , , , , , </u>	7,747		7,747	
	7a	Gross amount from sales of	(i) Securities	(ii) Other		Property and the second		PER LUM
		assets other than inventory	0	0			ALU ANIX	
	b	Less: cost or other basis		İ				
		and sales expenses	0			[1] 图 [1] [1]	140年4月14日	28 S. S. S. S. S. S.
	С	Gain or (loss)	0			7 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	d	Net gain or (loss)		<u> ▶</u>	0			
				1			Market British	25/25/3/3
eune	8a	Gross income from fundraising			The state of the s			
len '		events (not including \$	0		(大小大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大			
Re		of contributions reported on line 1		J	State Contract		STATE TO A STATE OF	R. B. Franking Cont.
erl		See Part IV, line 18		0	4194 76740 367 367 38			
Other Re	b	Less: direct expenses		0		The second	-	
٠	С	Net income or (loss) from fundral			<u> </u>	Talle the rain to the last the	1	<u> </u>
	9a	Gross income from gaming activi		1 .	POSTURES.			DENKE JAK
		See Part IV, line 19		1	THE REST OF SHEET			
	b	Less: direct expenses		0			200 200 200	
	C	Net income or (loss) from gaming	activities	<u>, ▶</u>	<u> </u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	10a							· 1000 ·
		returns and allowances		69,245	T - 10 1 - 10 1 2 2 2 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		[28]建筑深	以言法法律的
	b	Less: cost of goods sold		67,766	4	لمندندة القندة	Carrie a Carrie	136-47-36-36-36-36-36-36-36-36-36-36-36-36-36-
	<u> </u>	Net income or (loss) from sales o	f inventory	,	1,479		1,479	
	 	Miscellaneous Revenue	 	Business Code			of Marketter and Allahamian Advantage	
	11a	Bake food		900099	47,738			
	b	other income		900099	57,448	58,131		
	С				 	 		
	d	All other revenue		L	 	<u> </u>	 	
	е	Total. Add lines 11a-11d				- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14.40 (1.10) 1 (1.10)	
	12	Total revenue. See Instructions.	<u> </u>	🟲	5,880,958	3,553,723	9,226	55,199

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all Check if Schedule O contains a response or note				
	not include amounts reported on lines 6b, 7b, 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 domestic organizations				2012/2017/8
	domestic governments. See Part IV, line 21	132,250	132,250		Mary Carlotte Silver
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	473,554	473,554	23-116-98-94.3	
3	Grants and other assistance to foreign	ł			grant ground and
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			1889 W. W. 1983 C. 1983
4	Benefits paid to or for members	<u>'</u>		is Soproce Branders (12 agree)	man All Later Act of Training of the
5	Compensation of current officers, directors,	اه			
•	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)	اه			
7	Other salaries and wages	2,487,422	2,338,154	149,268	0
8	Pension plan accruals and contributions (include	2,407,422	2,000,104	143,200	<u>_</u>
0	section 401(k) and 403(b) employer contributions)	اه			
9	Other employee benefits	114,876	98,139	16,737	0
10	Payroll taxes	186,900	175,468	11,432	
11	Fees for services (non-employees):	100,500	1,0,400	11,402	
''	Management	41,362	41,362	o.	0
b	Legal	71,502	47,002		
c	Accounting	3,775	0	3,775	0
d	Lobbying	0,7.10	<u>_</u>	0,170	
9	Professional fundraising services. See Part IV, line 17		W.W. W. W. W. W. C.	140 C 400 C 400 C	
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)	0		1	ļ
12	Advertising and promotion	6,541	5,191	1,350	
13	Office expenses	89,194	80,294		
14	Information technology	0			
15	Royalties	0			
16	Occupancy	172,895	152,775	20,120	C
17	Travel	8,747	8,747	0	C
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0		<u> </u>	<u></u>
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	288,308	288,308		
23	Insurance	44,803	41,886		ļC
24	Other expenses. Itemize expenses not covered	The second secon		A SAUL PARTY TOWARD	
	above (List miscellaneous expenses in line 24e. If	BEFFE SIN			
	line 24e amount exceeds 10% of line 25, column		4.68 3.48		
	(A) amount, list line 24e expenses on Schedule O.)	3, 3, 1, 1, 7, 1, 7, 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	The state of the s	Fill Warder to	The State of the S
a	Security and Safety	69,035	69,035		
b	Books, Subscriptions and Refeence	111,938	111,938		
C	Classroom equipment	3,456	3,456		
d	Curriculum development	9,665	9,665		
e 25	All other expenses See detail schedule	831,864			
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	5,076,585	4,743,739	253,711	79,135
20	organization reported in column (B) joint costs				1
	from a combined educational campaign and			[
	fundraising solicitation. Check here			ĺ	1
	following SOP 98-2 (ASC 958-720)			į .	ł
	TOWNSHING OUT OUT INDU BOUT IZU			L	

Pa	art X	Balance Sheet				
		Check if Schedule O contains a response of	r note to any line in this Par	rt X		
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		. 1,833,779	1	1,491,158
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	208,878
	4	Accounts receivable, net			4	17,977
	5	Loans and other receivables from current and f		September 1985 And September 1985	38-13c;	J-45333230 2.1.5132 9
		trustees, key employees, and highest compens Complete Part II of Schedule L		5		
		Loans and other receivables from other disqualified pers	· *** ** ****** **** * *** * * * * * *	27/k 77.5	\$ 1 m 106 415 m - h 0 2	
	6	4958(f)(1)), persons described in section 4958(c)(3)(B),			ATTENTON	
to.]	sponsoring organizations of section 501(c)(9) voluntary		**************************************	6	200000
Assets] _	organizations (see instructions). Complete Part II of Sch			+	50,000
Ass	7	Notes and loans receivable, net			+	
•	8	Inventories for sale or use			_	12,841
	9	Prepaid expenses and deferred charges	1 1			69,144
	10a	Land, buildings, and equipment: cost or	140 1 40 000	795	The state of	
	١.	other basis. Complete Part VI of Schedule D	10a 13,963,7	95	تشقا	
	ь	Less: accumulated depreciation	4,101,0	22 3, 149,010	100	9,771,873
	11	Investments—publicly traded securities				662,851
	12	Investments—other securities. See Part IV, line				0
	13	Investments—program-related. See Part IV, lin			+	0
	14	Intangible assets				0
	15	Other assets. See Part IV, line 11				1,399,155
	16	Total assets. Add lines 1 through 15 (must equ				13,683,877
	17	Accounts payable and accrued expenses				522,561
	18	Grants payable			18	
	19	Deferred revenue		19	211,725	
	20	Tax-exempt bond liabilities		20	 	
	21	Escrow or custodial account liability. Complete		* - ***	21	
Liabilities	22	Loans and other payables to current and forme				
¥	ļ	trustees, key employees, highest compensated		**************************************		# 146.8148 1389 2011 15 Parcis 1
<u>18</u>		disqualified persons. Complete Part II of Scheo			22	1 007 700
_	23	Secured mortgages and notes payable to unre				1,397,782
	24	Unsecured notes and loans payable to unrelate		. 536,250	24	685,875
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on line			ļ	
		•		. 2,098,246	25	337,655
	26	Part X of Schedule D		4,225,313		3,155,598
	20				3.34.3	N. Para Talia You to Land Control
8	ł	Organizations that follow SFAS 117 (ASC 95 complete lines 27 through 29, and lines 33 a		nd American		
an	27	Unrestricted net assets		. 8,387,78	27	9,515.009
Ba	28	Temporarily restricted net assets		. 292,806	28	928,553
2	29	Permanently restricted net assets		(29	84,717
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958 complete lines 30 through 34.), check here $ ightharpoonup$ ar	nd Van die German		Market Market Strategy and Strategy
ă	30	Capital stock or trust principal, or current funds	.		30	h Mattain de La comité de la comité designe de la comité des la comité destruite de la comité de la comité de la comité de la comité de la comité de la comité de la comité de la comité de la comité de la comité de la comité de la comité de la comité de
88	31	Paid-in or capital surplus, or land, building, or			31	
Ϋ́	32	Retained earnings, endowment, accumulated i			32	
ž	33	Total net assets or fund balances				10,528,279
	34	Total liabilities and net assets/fund balances		12 905 906		

Form 9	990 (2014) MUSLIM COMMUNITY CENTER	23	<u>-7060038</u>	Pag	<u>e 12</u>
Part	XI 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	5	,880	,958
2	Total expenses (must equal Part IX, column (A), line 25)	2	5	,076	,585
3	Revenue less expenses. Subtract line 2 from line 1	3		804	,373
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8	,680	,587
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	1	,043	,319
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	10	<u>,528</u>	,279
Part					_
	Check if Schedule O contains a response or note to any line in this Part XII	• •		<u>. </u>	<u></u>
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			X.	امران جائزة الم المستان
	Schedule O.			44	
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			(S)	
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Donsolidated basis Both consolidated and separate basis		9:33A		
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	·
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		, 58 10 m	14%	79
	separate basis, consolidated basis, or both:		Žį, Ž	300 P	
	X Separate basis		3.8		100
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				ersula.
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		(2013)	×4 11	د د د د د د د د د د د د د د د د د د د
	Schedule O.			33,000	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		Зъ		
			Form	990 ((2014)