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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)

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service section 50 f(c), 527, or 4547(a)(1) or the internal nevenue Code (except private roundain

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public

<u> </u>	or the 2	2016 calend	lar year, or tax year begin	ning	07-0	1 , 2016, and en	aing	06-	30 ,2017		
В	Check if app	plicable	C Name of organization MUSL	IM ASSOCIATION CL	EVELAND E	AST		□□□	Employer identification no.		
] /	Address cha	ange	Doing business as					:	31-1566191		
] ,	Name chang	ge	Number and street (or P O box	r if mail is not delivered to street a	ddress)		Room/suite	E	Telephone number		
] ,	nitial return		9991 LITTLE MOU	INTAIN ROAD				_1	(440) 352-4956		
	inal return/	terminated	City or town, state or province,	country, and ZIP or foreign postal	code				244,060		
=	Amended re		MENTOR, OH 4406	= :				G	G Gross receipts\$		
=	Application		F Name and address of principal				H(a) Is this a group	return for	turn for subordinates? Yes X No		
	.,	• •					H(b) Are all subor				
-	ax-exempt	status X	501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 5	 27	If "No." a	ttach a l	ist (see instructions)		
	Vebsite: ▶		<u> </u>		_		H(c) Group exer				
	orm of orga		Corporation Trust X Ass	ociation Other ►		Year of formation 19	998 M State	of legal :	domicile OH		
	·····	Summar		<u> </u>				<u>*</u> _			
			ribe the organization's missi	on or most significant activ	nties: TO P	RESERVE RELI	GIOUS HERI	rage	·		
		one in the contract of		• · · · · · · · · · · · · · · · · · · ·							
ည	-						,				
Activities & Governance	-			<u>. </u>							
Ver	2 0	Check this b	xx ▶ ☐ if the organization	discontinued its operation	s or disposed o	f more than 25% of	f its net assets				
ဇ္ဗ			oting members of the gover					3	3 5		
oŏ O	l.		ndependent voting members	-				4	0		
iţi			er of individuals employed in				,	5	0		
¥			er of volunteers (estimate if	•	v,o La,			6	5		
¥			ted business revenue from	•	2			7a	0		
	1		ed business taxable income				• •	7b			
	D	vet uniterate	d business taxable income	101111 01111 990-1, line 04	KECEI	VED IL	Prior Year		Current Year		
		Contribution:	, 384	226,900							
Revenue		Program ser	, 50 -	0							
	1	nvestment i		416							
ě				710							
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			similar amounts paid (Part I		ווהיגיאווהצהלע		444	, 304	227,310		
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ens			I fundraising fees (Part IX, o		•						
Expenses			ising expenses (Part IX, co nses (Part IX, column (A), lii			——— <u> </u>	170	,240	242,672		
	1	•	ses. Add lines 13-17 (must		lino 25)	-		,240			
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-		nevenue les	ss expenses Subtract line	10 II OII III III 12	· · · · · · ·	•	Beginning of Current				
Net Assets or	20	Total accets	(Part Y line 16)			 	1,943		End of Year 1,928,301		
	20		s (Part X, line 16) es (Part X, line 26)	•	•		1,543	, 050	1,320,301		
Z 2	21 22 1		or fund balances. Subtract	line 21 from line 20	•	-	1,943	656	1,928,301		
_	rt II		re Block	me 21 nom me 20	• •	•	1,543	, 000	1,320,301		
			eclare that I have examined this et	um, including accompanying sche	dules and statemen	ts, and to the best of my	knowledge and belief	, it is			
true	, correct, ar	nd complete De	eclaration of preparer (wher than of	ficer) is based on all information of	which preparer has	any knowledge		T -			
: - \									9/26/17		
Sig	_{ın}	Signatu	ure of officer	<u> </u>				Date	1120111		
He	اا	•	AD BANNA, PRESIDEN	IΨ							
3	'E		r print name and title	-					· · · · · · · · · · · · · · · · · · ·		
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Pai	id	1	reparer's name	Figurature	Battle "	09-20-2017		' l	P00563934		
			eth A Baitt	es CPA Inc		D3-20-2017	self-employ	eu	100003734		
US	e Only	Firm's addre					Phone no	40-2	52-0562		
N 4	the IDC	diag 11		ille OH 44077	000)	<u>.</u>	4		🔀 Yes 🔲 No		
			s return with the preparer sl		uns) .	· · · · ·		 -			
ror	Maperw	ork Heduct	tion Act Notice, see the se	parate instructions.					Form 990 (2016)		

_		FION CLEVELAND EAST	31-1566191 Page
Par		m Service Accomplishments	
			<u> </u>
1	Briefly describe the organization's mis		
	TO PRESERVE RELIGIOUS HE	RITAGE	
2	Did the organization undertake any si	gnificant program services during the year which were not listed on the	
-	prior Form 990 or 990-EZ?		🗌 Yes 🕱 No
	If "Yes," describe these new services		
3	•	g, or make significant changes in how it conducts, any program	
-	services?		🗌 Yes 🔀 No
	If "Yes," describe these changes on S		
4	-	service accomplishments for each of its three largest program services, as	measured by
		(c)(4) organizations are required to report the amount of grants and allocation	
		y, for each program service reported.	,
4a	(Code:) (Expenses	\$ 183,605 including grants of \$) (Re	evenue \$ 226,900)
	PROVIDE FACILITY FOR PRA	AYERS & RELIGIOUS OBSERVANCES RELIGIOUS EDUCATION	ON GIFT TO EDUCATIONAL
	ENDOWMENT		
		<u> </u>	
4b	(Code:) (Expenses	\$ including grants of \$) (Re	evenue \$)
			
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	Other program services (Describe in		

· 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	<u> </u>		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	<u> </u>		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	ļ	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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>	ļ.——	
٠	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	İ	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	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,"	<u> </u>	 	
٠	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	<u> </u>		
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	ļ	ļ	l
	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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			1
••	VII, VIII, IX, or X as applicable		ļ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		1	1
u	complete Schedule D, Part VI	11a	X	
b	Data Data Villa 40 that a 50 and and	<u> </u>		
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more		<u> </u>	
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		Х
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	and the second s			
	Schedule D, Parts XI and XII	12a		X
b				
_	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	ł	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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		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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	_18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	<u> </u>	Х
		Eorn	000	(2016)

Part IV Checklist of Required Schedules (continued) No 20a 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20b **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Χ domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Х Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х employees? If "Yes," complete Schedule J . . . 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 Х 24a through 24d and complete Schedule K If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Χ 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 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 26 Χ 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 X 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). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Х Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 28c was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Χ 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 Χ Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38

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

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and 1 c 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Χ 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? За X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O **3**b 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 4a X If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b C If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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? Χ 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or Ь gifts were not tax deductible? **6**b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . Х _ _ If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Χ 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h X g Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Χ Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Χ ь Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter. Gross income from members or shareholders 11a а ь Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which b the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand C 13c Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O b

Form 990 (2016) MUSLIM ASSOCIATION CLEVELAND EAST Page 6 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 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 0 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ any other officer, director, trustee, or key employee? . . 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Яa The governing body? Χ 8b Each committee with authority to act on behalf of the governing body? 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) 10a Χ 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done . . . 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 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 X with a taxable entity during the year? 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 ▶ Ohio 17 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

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financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records:

AHMAD BANNA (440)352-4956, 9991 LITTLE MOUNTAIN ROAD, MENTOR, OH 44060-8037

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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

Oncor this box in holino, the organization not any related					C)			,		
(A) Name and Title	(B) Average hours per week (list any hours for	Position (do not check more than one box, unless person is both a officer and a director/trustee						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) AHMAD BANNA PRESIDENT	4.00			Х					0	0
(2) MOHAMMED FAHMY VICE PRESIDEN				Х					0	0
(3) TARIQ HAQQI TREASURER				Х				,	0	0
(4) SHAZIA GORAYA GENERAL SECRETARY				Х					0 0	0
(5) MASROOR MALIK JOINT EDUCATION SECRETARY		i		Х					0	0
(6)										
<u>(7)</u>										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

(A) (B) (B) Position (do not check more than one box, unless person is both an hours per Officer and a director/trustee) (C) (do not check more than one box, unless person is both an compensation compensation from	(F)
Name and title Average Avera	(F)
box, unless person is bout all	
nous per officer and a director/trustee) Compensation Compensation non	Estimated amount of
week (list any from related	other
hours for related organizations below dotted line) Total trustee Total tr	compensation
hours for related organizations below dotted to the control of the	from the
organizations 한 호 이 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기	organization and related
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hours for related organizations below dotted line) hours for related organizations below dotted line) hours for related organizations below dotted line) Officer of line litrustiee Officer of litrustiee	
15)	
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(25)	
1b Sub-total	
c Total from continuation sheets to Part VII, Section A	
	0 (
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	•
reportable compensation from the organization	0 Yes N
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated	103 1
employee on line 1a? If "Yes," complete Schedule J for such individual	3 X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	
ındıvıdual	4 X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual	
for services rendered to the organization? If "Yes," complete Schedule J for such person	5 3
Section B. Independent Contractors	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of	
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.	
(A) (B)	(C)
Name and business address Description of services	Compensation
Total number of independent contractors (including but not limited to those listed above) who	
received more than \$100,000 of compensation from the organization ►	Form 990 (2016

٠		Check if Schedule O contail	· · · · · · · · · · · · · · · · · · ·		, 	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats ts	1a	Federated campaigns .		1a			I	-	
	ь	Membership dues		1b	226,900		1		
S, G A T	С	Fundraising events		1c			1		
GIF Har	d	Related organizations		1d			1		
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributi	ions)	1e			1		
를	f	All other contributions, gifts, gi	rants,				1	-	
들 울		and similar amounts not include	ded above	1f				:	
and a	g	Noncash contributions include	ed in lines 1a-	1f \$			I		
0	h	Total. Add lines 1a-1f	<u></u>		▶	226,900			
					Business Code				
Program Service Revenue	2a								
	ь								
8	С								
ξ	d			_					
S	e								
928	f	All other program service rever	nue .	<u> </u>					
Ē.	1			,					
	3	Investment income (including of and other similar amounts)	•			160	160		
		Income from investment of tax-	exempt bond	l proce	node b	109			
		Royalties	-exempt bond	proce	eus -			 -	
	5	noyalles	(ı) Real	•	(II) Personal				
	6.	Cross conto	(i) Hear		(II) Personal	1			
	1	Gross rents				-			
	1	Less: rental expenses	-			- 1			
	1	Rental income or (loss)					1		1
		Net rental income or (loss)		_	>				
	7a	Gross amount from sales of	(i) Secuntie		(II) Other	ŧ 1	1		
		assets other than inventory	17	,000		-			
	b	Less: cost or other basis	1 10	744		-			
		and sales expenses	16	,744		 			
	l .	Gain or (loss)		256			5-4		
•	1	Net gain or (loss)		•	<u> </u>	256	256		
nue	8a	Gross income from fundraising	9						
Other Reven		events (not including \$		_		[
Æ		of contributions reported on line]			
ţ.		See Part IV, line 18		a		-			
0		Less direct expenses		b	<u></u>	!			
		Net income or (loss) from fund	_	s.	· · · •	-			
	9a	Gross income from gaming ac							
		See Part IV, line 19				1			
	1	Less direct expenses		b		1			
	C	Net income or (loss) from gam	ing activities		<u> </u>	ļ			
	10a	Gross sales of inventory, less returns and allowances .		a					
	b	Less cost of goods sold		b] 1			
	С	Net income or (loss) from sales of inventory							
		Miscellaneous Revenue	B		Business Code]			
	11a								
	b								
	C	•							
	d	All other revenue							
	e	Total. Add lines 11a-11d			•				
	12	Total revenue. See instruction	ns			227,316	416		d

Part IX Statement of Functional Expenses

<u>Dc =</u>	Check if Schedule O contains a response or note to a not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	
	b), and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic			-	
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. 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):				
а	Management			-	
b	Legal				
С	Accounting	575	575		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees .				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion .				
13	Office expenses	91	91		
14	Information technology				
15	Royalties				
16	Occupancy	33,112	33,112		
17	Travel	852	852		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	59,067		59,067	
23	Insurance	2,997	2,997		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				•••••
а	BOOKS AND SUPPLIES	2,136	2,136		
b	TEACHERS	57,639	57,639		
С	DONATIONS TO OTHERS	24,567	24,567		
d	PERMITS AND FEES	2,477	2,477		
e	All other expenses	59,159	59,159		
25	Total functional expenses. Add lines 1 through 24e .	242,672	183,605	59,067	0
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 l			

31-1566191

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 192,118 148,822 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net . . . 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . Loans and other receivables from other disqualified persons (as defined under section 6 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 organizations (see instructions) Complete Part II of Schedule L . . . 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use . . 9 Prepaid expenses and deferred charges . . 10a Land, buildings, and equipment cost or 1,967,378 other basis. Complete Part VI of Schedule D . . . 10a 1,725,767 1,784,834 Less accumulated depreciation . 10,000 10,416 11 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 15 Other assets See Part IV, line 11 . 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,943,656 16 1,928,301 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue . . 20 20 Tax-exempt bond liabilities . . 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 of Schedule D 0 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here

and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here 🕒 🗓 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 1,928,301 1,943,656 32 32 Retained earnings, endowment, accumulated income, or other funds 1,928,301 33 1,943,656

> 1,928,301 Form **990** (2016)

1,943,656

Total liabilities and net assets/fund balances

Form	990 (2016) MUSLIM ASSOCIATION CLEVELAND EAST	31-156	6191	P	age 12
Pai	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		<u>. X</u> _
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		227,	316
2	Total expenses (must equal Part IX, column (A), line 25)	2		242,	672
3	Revenue less expenses. Subtract line 2 from line 1	3		(15,	356)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	<u>,943</u>	656
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			1
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1	,928,	, 301
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	•	•		<u>. 🗀 </u>
				Yes	No
1	Accounting method used to prepare the Form 990 🔯 Cash 🔲 Accrual 🔲 Other		ļ	1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			Ī	
	Schedule O.			1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		28	١	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			1	
	reviewed on a separate basis, consolidated basis, or both			1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1	
b	Were the organization's financial statements audited by an independent accountant?		. 2	<u> </u>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.			ŧ	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			ŧ	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			1	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	•	20	;	
	If the organization changed either its oversight process or selection process during the tax year, explain in			ŧ	
	Schedule O.			1	
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?		. 3	1	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		31	<u> </u>	
EEA			Fo	rm 990	(2016)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

• Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

MUS	LIM	ASSOCIATION CLEVELAND EA	AST				31-15661	<u> </u>			
Pa	rt I	Reason for Public Charity	Status (All or	ganizations must co	omplete	this part	.) See instruction	ns.			
The	orgar	ization is not a private foundation beca	use it is (For lines	1 through 12, check only	one box)						
1		A church, convention of churches, or a	association of churc	ches described in sectio i	n 170(b)(1)(A)(i).					
2	$\bar{\Box}$	A school described in section 170(b)(
3	\Box	A hospital or a cooperative hospital se				ii).					
4	_	A medical research organization opera					(A)(iii). Enter the				
7	ш	hospital's name, city, and state.				(, (,	(, (,				
5	\Box	An organization operated for the benef	it of a college or ur	niversity owned or operat	ed by a go	vernmenta	l unit described in				
3	LJ	section 170(b)(1)(A)(iv). (Complete P	art II.)								
6		A federal, state, or local government o	r governmental uni	t described in section 17	70(b)(1)(A)	(v).					
7		An organization that normally receives	a substantial part	of its support from a gove	ernmental	unit or fron	n the general public				
		described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	П	7									
9	$\overline{\sqcap}$	An agricultural research organization of	described in sectio	n 170(b)(1)(A)(ix) opera	ted in conji	unction wit	h a land-grant college	•			
		or university or a non-land-grant colleg									
		university.	,	•		•	_				
10	X	An organization that normally receives	: (1) more than 33	1/3% of its support from	contributio	ns. membe	ership fees, and gros	s			
		receipts from activities related to its ex									
		support from gross investment income									
		acquired by the organization after June					o 500				
11		An organization organized and operate									
	님	An organization organized and operate					carry out the numer	oe.			
12	Ш	of one or more publicly supported orga									
		Check the box in lines 12a through 12									
	а	Type I. A supporting organization						g			
		the supported organization(s) the			y of the air	ectors or t	rustees of the				
		supporting organization You mus	-								
	b	☐ Type II. A supporting organization									
		control or management of the sup	porting organizatio	n vested in the same per	sons that o	control or r	nanage the supported	i			
		organization(s). You must compl	ete Part IV, Section	ons A and C.							
	C	Type III functionally integrated.	A supporting orgai	nization operated in conn	ection with	, and func	tionally integrated wit	h,			
		its supported organization(s) (see	instructions). You	must complete Part IV,	, Sections	A, D, and	E.				
	d	Type III non-functionally integra	ated. A supporting	organization operated in	connection	with its s	upported organization	n(s)			
		that is not functionally integrated	The organization g	enerally must satisfy a di	istribution i	equiremen	nt and an attentivenes	SS			
		requirement (see instructions). Yo	ou must complete	Part IV, Sections A and	D, and P	art V.					
	е	☐ Check this box if the organization	received a written	determination from the IF	RS that it is	a Type I,	Type II, Type III				
		functionally integrated, or Type III	non-functionally in	tegrated supporting orga	nızatıon						
	f	Enter the number of supported organi	zations .								
	g	Provide the following information about	it the supported or	ganization(s)							
_	- () Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of			
		· · ·		(described on lines 1-10		ır governing	support (see	other support (see			
				above (see instructions))	docum	ent?	instructions)	instructions)			
					Yes	No	1				
_											
(A)											
/D)											
(B)											
(C)											
					<u> </u>						
(D)	D)										
						 	-				
(E)											
_				 	 	<u> </u>					
Tot	al			‡	!						

31-1566191 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u>Sec</u>	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") .						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by				1		
	each person (other than a		[1		
	governmental unit or publicly		1		1		
	supported organization) included on		!		1		
	line 1 that exceeds 2% of the amount		1		1		
	shown on line 11, column (f) .				-		1
6	Public support. Subtract line 5 from line 4				<u> </u>		<u> 1</u>
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
valer 7	Amounts from line 4	(a) 2012	(b) 2013	(0) 2014	(u) 2013	(6) 2010	(i) Iolai
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10 .						
12	Gross receipts from related activities, etc. (s	see instructions)			• • • • •	. 12	
13	First five years. If the Form 990 is for the organization, check this box and stop here	<u> </u>	<u>.</u>			c)(3) 	▶□
Sec	tion C. Computation of Public S				· <u> </u>	T T	
14	Public support percentage for 2016 (line 6,			· (f))			<u> </u>
15	Public support percentage from 2015 Sched			0	1/00/	. 15	
16a							▶ □
ь	box and stop here. The organization qualifi 33 1/3% support test - 2015. If the organiz						🗾
U	this box and stop here. The organization qu						▶ □
17a	10%-facts-and-circumstances test - 2016						. , .
,,,,	10% or more, and if the organization meets	_					
	Part VI how the organization meets the "fac						
	organization						▶ □
b	10%-facts-and-circumstances test - 2015				, 16b, or 17a, and	fine	_
	15 is 10% or more, and if the organization in	•		•			
	Explain in Part VI how the organization mee					olicly	
	supported organization						▶ □
18	Private foundation. If the organization did	not check a box o	on line 13, 16a, 16b	, 17a, or 17b, chec	k this box and see	•	
_	instructions	<u> </u>		<u></u>	<u></u>	<u> </u>	▶ 🗍

31-1566191

Schedule A (Form 990 or 990-EZ) 2016

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

(Complete only if you checked the box on line 10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	469,685	689,503	232,197	242,384	224,877	1,858,646
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			303,			
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	469,685	689,503	232,197	242,384	224,877	1,858,646
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						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						1,858,646
	ction B. Total Support	T			() 22/5	() 0040	(O.T.) . 1
_	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016 224,877	(f) Total 1,858,646
9	Amounts from line 6	469,685	689,503	232,197	242,384	224,0//	1,636,040
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	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 VI)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	469,685	689,503	232,197	242,384	224,877	1,858,646
14	First five years. If the Form 990 is for the or organization, check this box and stop here			, or fifth tax year as	a section 501(c)(3	3) 	▶ 🛚
Se	ction C. Computation of Public S						
15	Public support percentage for 2016 (line 8, c)) .		15	100.00 %
16	Public support percentage from 2015 Sched			· · · ·	<u> </u>	16	100.00 %
_	ction D. Computation of Investme Investment income percentage for 2016 (line			olumn (f))		17	0.00 %
17 18	Investment income percentage for 2015 (line investment income percentage from 2015 Sc					18	0.00 %
	a 33 1/3% support tests - 2016. If the organiz 17 is not more than 33 1/3%, check this box	zation did not check	the box on line 14	, and line 15 is mor lifies as a publicly s	e than 33 1/3%, ar upported organiza	nd line	▶ 🏻
ŧ	33 1/3% support tests - 2015. If the organize line 18 is not more than 33 1/3%, check this	zation did not check	a box on line 14 o	r line 19a, and line	16 is more than 33	1/3%, and	▶□
	Drivers for and story (fisher accounts and a						▶ □

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organization	ons	ation	aniza	raa	0	na	rt	po	di	Su	S	l۱	A	Α.	n	ioi	ect	S
--	-----	-------	-------	-----	---	----	----	----	----	----	---	----	---	----	---	-----	-----	---

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501 (c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
		-	
	3a		
	3b		
	3с		
	4-		
	4a		
	4b		
			_
ĺ	4c		
			_
	_		
	5a		
	5b		
	5¢		
	- 50		-
	6		
	_7		
	۰		
	8		
	9a	:	
	9b		
	9c		
	l '	•	
	10a		<u> </u>
	101		
	10b		ET\ 6-
- 1.Γ	orm 990	, 0. 220	-EZ) 201

Pai	tt IV Supporting Organizations (continued)			
	,	\Box	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	ŧ		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	ŧ		
	below, the governing body of a supported organization?	11a		
	Little Marie Common of the person described in the the person describe	11b		
	The following of the policy of the following of the follo	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	I		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	I		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1		
	controlled the organization's activities. If the organization had more than one supported organization,	I		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	ا م	1	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
•	Did the assessment as exects for the honefit of any supported organization other than the supported	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	Ī		
		2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
360	tion 6. Type ii Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1		
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
	the supported organization(s).	1	ĺ	
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	-		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		-,
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	ĺĺĺ	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
_	supported organizations played in this regard.	3		
	ction E. Type III Functionally-Integrated Supporting Organizations			<u> </u>
1	• • • • • • • • • • • • • • • • • • • •	กรเกเ	icuoi	15).
	The organization satisfied the Activities Test. Complete line 2 below.			
	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	(000	ınetri	ictione
2	Activities Test. Answer (a) and (b) below.	(300	Yes	No
2	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			110
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		l	
	how the organization was responsive to those supported organizations, and how the organization determined		1	
	that these activities constituted substantially all of its activities.	2a	1	
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		<u> </u>	
L.	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		ŧ	
	reasons for the organization's position that its supported organization(s) would have engaged in these		Ī	
	activities but for the organization's involvement.	2b	Ī	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
g a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		‡	
•	trustees of each of the supported organizations? Provide details in Part VI.	3a	1	Ì
Н	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-	 	
•	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	[

Page 6

	n-Functionally Integrated 509(a)(3) Supporting Org			
	organization satisfied the Integral Part Test as a qualifying			
instructions. All	other Type III non-functionally integrated supporting organization	zatio	ns must complete Sections	
Section A - Adjusted Net	Income		(A) Prior Year	(B) Current Year
Section A - Aujusteu Net			(//////////////////////////////////////	(optional)
 Net short-term capita 		1		
Recoveries of prior-year	ear distributions	2		
3 Other gross income (3		
4 Add lines 1 through 3		4		
5 Depreciation and dep		5		
	expenses paid or incurred for production or			
	e or for management, conservation, or			
maintenance of property	held for production of income (see instructions)	6		<u></u>
7 Other expenses (see	instructions)	7		<u> </u>
8 Adjusted Net Incom	e (subtract lines 5, 6 and 7 from line 4)	8		<u> </u>
Section B - Minimum Ass	set Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair marke	t value of all non-exempt-use assets (see	[-
instructions for short tax	year or assets held for part of year):	<u> </u>		
a Average monthly value	ie of securities	1a		
b Average monthly cas	h balances	1b		
c Fair market value of	other non-exempt-use assets	1c		
d Total (add lines 1a, 1	b, and 1c)	1d		
e Discount claimed for	blockage or other			1
factors (explain in detail	ın Part VI).	ļ		
2 Acquisition indebtedr	ess applicable to non-exempt-use assets	2		
3 Subtract line 2 from I		3		
4 Cash deemed held for	or exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).		4		
5 Net value of non-exe	mpt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .03	5	6		
7 Recoveries of prior-y	ear distributions	7		
8 Minimum Asset Am	ount (add line 7 to line 6)	8		
Section C - Distributable	Amount			Current Year
1 Adjusted net income	for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1		2		
3 Minimum asset amo	unt for prior year (from Section B, line 8, Column A)	3	4	
4 Enter greater of line		4		
5 Income tax imposed		5		
6 Distributable Amou	nt. Subtract line 5 from line 4, unless subject to			
emergency temporary re	eduction (see instructions)	6		1
7 Check here if the	current year is the organization's first as a non-functionally	/-inte	egrated Type III support	ting organization (see
instructions).				

Pan		(3) Supporting Organi	Zations (continued)	
	tion Q - Distributions			Current Year
	Amounts paid to supported organizations to accomplish ex-			
	Amounts paid to perform activity that directly furthers exem	npt purposes of supported		
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purpos	ses of supported organiza	tions	
	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
	Distributions to attentive supported organizations to which	the organization is respon	sive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
		LACESS DISTINUTIONS	Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				<u> </u>
b				
С	From 2013 .			
	From 2014			
	From 2015			÷
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			:
4	Distributions for 2016 from	i i		-
•	Section D, line 7: \$			-
a	Applied to underdistributions of prior years	100		
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2016, if			
•	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h	W 1 W 1		
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:		<u> </u>	
a	5.00.00 m 5 m		 	:
	Excess from 2013		<u> </u>	
	Excess from 2014		· · · · · · · · · · · · · · · · · · ·	- Herling
	Excess from 2015		<u> </u>	
	Excess from 2016			-
-		7	4	A

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

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form

▶ Attach to Form 990 or Form 990-EZ.

0-EZ. (

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

Open to Public Inspection

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organizations.	Complete Part III			
	e of organization			Employer	identification number
MU	SLIM ASSOCIATION CLEVELAND	EAST		31-156	6191
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or i	s a section 527 org	anization.
1	Provide a description of the organization's				
	definition of "political campaign activities")				
2	Political campaign activity expenditures (s			. ▶\$	
3	Volunteer hours for political campaign act				
Pa		ization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excise tax incurre			▶ \$	
2	Enter the amount of any excise tax incurre			▶ \$	
3	If the organization incurred a section 4955				
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organ	ization is exempt under sect	on 501(c), exc	ept section 501(c)(3).
1	Enter the amount directly expended by the				
	activities			▶ \$	
2	Enter the amount of the filing organization	's funds contributed to other organization	ns for section		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures. Add I	ines 1 and 2 Enter here and on Form 1	120-POL,		
	line 17b			▶ \$	_
4	Did the filing organization file Form 1120-	POL for this year?			. 🗌 Yes 🔲 No
5	Enter the names, addresses and employe	er identification number (EIN) of all section	on 527 political org	anizations to which the filir	ng
	organization made payments. For each or	rganization listed, enter the amount paid	from the filing orga	anization's funds. Also ente	er
	the amount of political contributions received	ved that were promptly and directly deliv	ered to a separate	political organization, suc	h
	as a separate segregated fund or a politic	al action committee (PAC) If additional	space is needed, p	provide information in Part	<u>IV.</u>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					

	Dulle C (Form 990 or 990-EZ) 2016 MUSLIM ASSOCIA				31-1300	
Pa	rt II-A Complete if the organization	is exempt u	nder section 50	1(c)(3) and filed	Form 5768 (elec	ction under
	section 501(h)).					
•	Check ▶ ☐ if the filing organization belongs to an			_	mber's	
	name, address, EIN, expenses, and					
3	Check ▶ ☐ if the filing organization checked box			_		
	Limits on Lobbyi				(a) Filing organization's totals	(b) Affiliated group totals
	(The term "expenditures" mea				organization's totals	group totals
1a	Total lobbying expenditures to influence public opini			•		
b	Total lobbying expenditures to influence a legislative	e body (direct lob	bying) .		_	
C	Total lobbying expenditures (add lines 1a and 1b)		•			
đ	Other exempt purpose expenditures			• •		
e	Total exempt purpose expenditures (add lines 1c ar			• •		
f	Lobbying nontaxable amount Enter the amount from	n the following ta	ble in both			
	columns					
	If the amount on line 1e, column (a) or (b) is:	<u> </u>	nontaxable amount	t is:		
	Not over \$500,000		ount on line 1e	4		
	Over \$500,000 but not over \$1,000,000		15% of the excess of		· •	
	Over \$1,000,000 but not over \$1,500,000	 	10% of the excess of		1	
	Over \$1,500,000 but not over \$17,000,000	 	5% of the excess ov	er \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of line 1		• •			
h	Subtract line 1g from line 1a. If zero or less, enter -0					
i	Subtract line 1f from line 1c. If zero or less, enter -0					
j	If there is an amount other than zero on either line 1	h or line 1i, did ti	ne organization file Fo	orm 4720		
	reporting section 4911 tax for this year?				<u></u>	∐ Yes ☐ No
		•	ing Period Under		- 4-4 4	
	(Some organizations that made a sec			_		ins below.
	See t	he separate ir	nstructions for lir	nes 2a through 2f)	
		. F	D - 1 4 V 4			
	Lobbyin	g Expenditures	During 4-Year Aver	aging Period		
	Calendar year (or fiscal year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
	beginning in)					
			-	 		
2a	Lobbying nontaxable amount					
Ь	,3 3		-	1	<u> </u>	
	(150% of line 2a, column (e))			†	[
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					
			 	<u> </u>	<u> </u>	 -
е	Grassroots ceiling amount (150% of line 2d, column (e))		!	1	1	
	(10076 OF IME 20, COIDING (E/)		†	1	 	
f	Grassroots lobbying expenditures					

EEA

Schedule C (Form 990 or 990-EZ) 2016

	Horacon to Poss de Abrasont de La Company to the Co	(4	a)	(t	o)
	" response to lines 1a through 1ı below, provide in Part IV a detailed the lobbying activity.	Yes	No	Amo	unt
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				
referendur	n, through the use of				
Volunteers	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		X		
Paid staff	or management (include compensation in expenses reported on lines 1c through 1i)?		X		
Media adv	ertisements?		Х		_
Mailings to	members, legislators, or the public?		Х		
Publication	ns, or published or broadcast statements?		X		
	other organizations for lobbying purposes?		X		
	tact with legislators, their staffs, government officials, or a legislative body?		X		
	monstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
Other acti			Х		
	lines 1c through 1i] }		
	trivities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	nter the amount of any tax incurred under section 4912		}		
	nter the amount of any tax incurred by organization managers under section 4912		}		
	organization incurred a section 4912 tax, did it file Form 4720 for this year?	\/E\		-Ai	
t III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)	;)(3),	or se	ction	
	501(c)(6).			1	· T
		_ ,			es
	stantially all (90% or more) dues received nondeductible by members?			1	es
Did the or	stantially all (90% or more) dues received nondeductible by members?			1 2	es
Did the or	stantially all (90% or more) dues received nondeductible by members?	:)(5).	 	1 2 3	es
Did the or	stantially all (90% or more) dues received nondeductible by members?			1 2 3	
Did the or	stantially all (90% or more) dues received nondeductible by members?			1 2 3	
Did the or	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Complete if the organization is exempt under section 501(c)(6).			1 2 3	
Did the ordinate Did th	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes." essments and similar amounts from members) Part	1 2 3	
Did the ordinate of the ordina	stantially all (90% or more) dues received nondeductible by members?) Part	1 2 3	
Did the ordinate of the ordina	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes." essments and similar amounts from members 62(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).) Part	1 2 3	
Did the order till-B Dues, ass Section 16 political 6 Current years	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Conswered "Yes." essments and similar amounts from members 62(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).) Part	1 2 3	
Did the order till-B Dues, ass Section 16 political 6 Current years	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes." essments and similar amounts from members 62(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).		1 2a	1 2 3	
Dues, ass Section 16 political 6 Current ye Carryover Total .	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Consumered "Yes." essments and similar amounts from members 62(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). ear from last year		1 2a 2b	1 2 3	
Dues, ass Section 16 political e Current ye Carryover Total . Aggregate	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Conswered "Yes." essments and similar amounts from members 62(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).		1 2a 2b 2c	1 2 3	
Dues, ass Section 16 political e Current ye Carryover Total . Aggregate If notices	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Conswered "Yes." essments and similar amounts from members size(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). ear from last year amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		1 2a 2b 2c	1 2 3	
Dues, ass Section 16 political of Current ye Carryover Total . Aggregate If notices excess do	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Conserved "Yes." essments and similar amounts from members \$2(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Form last year \$2(e) amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		1 2a 2b 2c	1 2 3	
Dues, ass Section 16 political of Current year Carryover Total . Aggregate If notices excess do and political	stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Conswered "Yes." essments and similar amounts from members 62(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). ear from last year e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues were sent and the amount on line 2c exceeds the amount on line 3, what portion of the less the organization agree to carryover to the reasonable estimate of nondeductible lobbying		2a 2b 2c 3	1 2 3	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,

▶ Attach to Form 990.

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

Department of the Treasury

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Open to Public Inspection

OMB No 1545-0047

2016

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" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 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 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 ☐ Yes ☐ No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes ☐ No and section 170(h)(4)(B)(ii)? 9 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" on 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 b 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) Revenue included on 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 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. Revenue included on Form 990, Part VIII, line 1 . . . Assets included in Form 990, Part X

	ule D (Form 990) 2016 MUSLIM ASSOCIAT					31-156		Page 2
Pai	t III Organizations Maintaining C						ssets (conti	nued)
3	Using the organization's acquisition, accession, a	and other records, o	check any of the	following that are	a significa	ant use of its		
	collection items (check all that apply)							
а	Public exhibition	_	an or exchange	programs				
b	Scholarly research	e 🗌 Oth	ner					
C	Preservation for future generations							
4	Provide a description of the organization's collect	tions and explain h	ow they further 1	the organization's e	xempt pu	irpose in Part		
_	XIII,							
5	During the year, did the organization solicit or rec				nılar			п.,
.	assets to be sold to raise funds rather than to be		of the organiza	tion's collection?	· ·		. L Yes	_ ∐ No
rai	Escrow and Custodial Arrang		Fa 000	D-4 IV II 0				_
	Complete if the organization and 990, Part X, line 21.	swered "Yes" c	on Form 990,	, Part IV, line 9,	, or rep	orted an amo	ount on Form	n
1a	Is the organization an agent, trustee, custodian of	r other intermedian	v for contribution	ns or other assets r	not		_	
	included on Form 990, Part X?	" other intermedian	y 101 0011111001101	io or ourier accord			. TYes	☐ No
h	If "Yes," explain the arrangement in Part XIII and	complete the follow	vina table			•	. 🗀 100	
•	ir res, explain the arrangement ir rait Am and	complete the lone	Ting table			Δ.	—————— mount	_
С	Beginning balance				1c		THOUSE THE STATE OF THE STATE O	_
4	Additions during the year				1d	+		-
e	Distributions during the year			• • • •	10 1e	 	<u> </u>	
f	Ending balance	•			1f			
	Did the organization include an amount on Form	990 Part Y line 21	for occrow or	custodial account li		<u></u>	. Yes	No
	If "Yes," explain the arrangement in Part XIII. Che					• •	. 🗀 163	
	t V Endowment Funds.	eck fiele ii tile expi	anation has bee	eri piovided on l'ait	<u> </u>	· · · · · · ·	_ .	<u>· [_]</u>
I ÇX	Complete if the organization and	ewored "Vec" c	n Form 990	Part IV line 1	n			
	Complete if the organization and					(d) Three years back	k (e) Four yea	ro book
10	Recursing of year balance	(a) Current year	(b) Prior yea	ar (c) iwo years	SUACK	(d) Three years bac	(e) Four year	IS DACK
1a	Beginning of year balance							
b	''							_
C	Net investment earnings, gains, and				ľ			
	Grants or scholarships						_	
u	Other expenditures for facilities and							
e	,							
	programs		1					
'-	Administrative expenses						_	
g	End of year balance	user and belongs (lan 1a polyma	(a)) hold as		_ 		
2		year end balance (%	ine 19, column	(a)) lielu as				
a	Board designated or quasi-endowment Permanent endowment %							
	Temporarily restricted endowment	%						
С	The percentages in lines 2a, 2b, and 2c should e							
3a	Are there endowment funds not in the possession	•	n that are hold	and administered fo	er tha			
Ja	organization by.	in or the organization	on triat are rielu	and administered to	n uie		\vec{v}	es No
	(i) unrelated organizations						. 3a(i)	55 110
	(ii) related organizations	• • • •					. 3a(ii)	
_	3		Cabadula D2		•		3b	
b	If "Yes" on 3a(ii), are the related organizations lis	-		• • •	•		. 30	
D.	Describe in Part XIII the intended uses of the org		ment junas.	-				
7 6	Land, Buildings, and Equipm Complete if the organization an		n Form 990	Part IV line 1	1a Se	e Form 990 I	Part X line	10
	Description of property	(a) Cost or o		Cost or other basis		Accumulated	(d) Book va	
	pescription or property	(a) Cost or of		(other)	1	epreciation	(u) DUUK VE	
	Land		20,000			·	2	0,000
b	Buildings	1 1	581,198			168,463		2,735
	Leasehold improvements		361,012			69,067		2,735 1,945
C	Loadenoid improvements	·	101,012		<u> </u>	09,007		1,743

4,081 1,087 **d** Equipment 5,168 e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c) ▶ 1,725,767

	(a) Description of security or category	(b) Book value	IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation
•	(including name of security)	(b) Book value	Cost or end-of-year market value
) Financial d		•	
	eld equity interests		
(A)		_	
(B)		_	
(C)			
(D)			
(E)			
(F) (G)			
(H)			
****	must equal Form 990, Part X, col (B) line 12)	•	
Part VIII	Investments - Program Related	vered "Yes" on Form 990, Part	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 value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
		<u>i</u>	
(8)			
(9)	1		
(9) Total. (Column (b)	must equal Form 990, Part X, col (B) line 13)	•	
(9)	Other Assets.		IV line 11d. See Form 990. Part X. line 15.
(9) fotal. (Column (b)	Other Assets.	vered "Yes" on Form 990, Part	IV, line 11d. See Form 990, Part X, line 15.
(9) Total. (Column (b) Part IX	Other Assets.		IV, line 11d. See Form 990, Part X, line 15.
(9) Total. (Column (b) Part IX (1)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2) (3)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2) (3) (4)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Fotal. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets.	vered "Yes" on Form 990, Part	
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answ	vered "Yes" on Form 990, Part (a) Description	
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answ on (b) must equal Form 990, Part X, col. (B) lin Other Liabilities.	wered "Yes" on Form 990, Part (a) Description ne 15.)	(b) Book value
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answ on (b) must equal Form 990, Part X, col. (B) Into Other Liabilities. Complete if the organization answ	wered "Yes" on Form 990, Part (a) Description ne 15.)	(b) Book value
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Assets. Complete if the organization answers (b) must equal Form 990, Part X, col. (B) lin Other Liabilities. Complete if the organization answers line 25.	wered "Yes" on Form 990, Part (a) Description me 15.) wered "Yes" on Form 990, Part	(b) Book value
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Assets. Complete if the organization answer (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answer (a) Description of liability	wered "Yes" on Form 990, Part (a) Description me 15.) wered "Yes" on Form 990, Part	(b) Book value
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal	Other Assets. Complete if the organization answer (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answer (a) Description of liability	wered "Yes" on Form 990, Part (a) Description me 15.) wered "Yes" on Form 990, Part	(b) Book value
(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2)	Other Assets. Complete if the organization answer (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answer (a) Description of liability	wered "Yes" on Form 990, Part (a) Description me 15.) wered "Yes" on Form 990, Part	(b) Book value
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(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4)	Other Assets. Complete if the organization answer (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answer (a) Description of liability	wered "Yes" on Form 990, Part (a) Description me 15.) wered "Yes" on Form 990, Part	(b) Book value
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(9) Total. (Column (b) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answer (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answer (a) Description of liability	wered "Yes" on Form 990, Part (a) Description me 15.) wered "Yes" on Form 990, Part	(b) Book value
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Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains (losses) on investments	」
þ	Donated services and use of facilities	_
C	Recoveries of prior year grants	-
d	Other (Describe in Part XIII.)	.
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4 1
b	Other (Describe in Part XIII)	- .
С	Add lines 4a and 4b	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 Dor Boturn
ra	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	per neturn.
1	Total expenses and losses per audited financial statements	1 1
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	<u> </u>
2	Donated services and use of facilities	
a		
b	no la constanta de la constant	+
c d		1
e		- 2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	
a		
b		
c		4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
	art XIII Supplemental Information.	
Prov	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; P	art X, line
	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information	

SCHEDULE O (Form 990 or 990-EZ)

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.

2016

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

Name of the organization Employer identification number 31-1566191 MUSLIM ASSOCIATION CLEVELAND EAST 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. Explanation of other changes in net assets or fund balances (Part XI, line 9) Rounding 04. List of other expenses (Part IX, line 24e) SEE OVERFLOW STATEMENT FOR LIST OF OTHER EXPENSES.