Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public

Inte	mal Rever	tine treasury nue Service	▶ Informa	tion about	Form 990 a	nd its instruction	ns is at	www.irs.o	ov/form99	0.	Inspecti	on		
A	For the	2016 cale	ndar year, or tax year					nd ending		MBER 31	, 20 16			
В	Check if	applicable:	C Name of organization	ASSEMBL'	Y OF MUSL	M JURISTS OF	AMERIC	CA		D Employe	er identification nu	mber		
		change	Doing business as	· ···········							75-2994817			
\Box	Name c	•	Number and street (or f	O. box if m	all is not deliv	ered to street addre	ss)	Room/suite	,	E Telephone number				
	initial re	•	P.O Box 7132				Ţ	i			1-916-290-7601			
\Box		m/terminated	City or town, state or pi	rovince, coul	ntry, and ZIP o	or foreign postal cod	le							
$\bar{\Box}$	Amended return FOLSOM, CA 95763									G Gross re	ceipts \$	330871		
									H(a) is this a o			No		
			•	·					1		s included? Yes			
ī	Tax-exe	mpt status:	☑ 501(c)(3)	501(c) () ∢ (ir	sert no.) 4947(a	1)(1) or	527			list. (see instruction			
J											p exemption number			
K	Form of		Corporation Trust	Associa	tion Othe	r >	L Yea	r of formatio			of legal domicile:			
P	art l	Summ				·								
	1			ion's miss	ion or mos	t significant act	ivities:	CLARIF	CATION O	FISLAMIC	RULINGS AND	ISSUES		
ä					*	·								
Activities & Governance	2	Check th	is box ▶☐ if the org	anization	discontinu	ed its operation	s or dis	sposed of	more than	25% of	its net assets.			
Š	3		of voting members o					•		1 - 1		6		
જ	4		of independent votin							4				
es	5		nber of individuals e							5				
ķ	6		nber of volunteers (e							6				
Act	7a		elated business reve							7a		C		
M	h		ated business taxab							7b				
O	Prior										Current Yea			
\$.	8	Contribut	tions and grants (Par	t VIII. line	1h)					342129		330871		
CANNED	9		service revenue (Par					· -	 					
	10	_	nt income (Part VIII,					<u></u>						
~~ E	11		renue (Part VIII, colur				 -							
AUG	12		enue—add lines 8 thr	342129		330871								
	13		nd similar amounts p											
16 57	14		paid to or for member											
• •	15		other compensation,							44310		45380		
∠012 Expenses	16a		nal fundraising fees		•	٠,		· -				5750		
≅	b		draising expenses (P			•		29678						
ũ	17		penses (Part IX, colu							207723		198853		
	18		enses. Add lines 13-	-		•		,		252033		249983		
	19		less expenses. Subt							90096		80888		
× 8						HEUL	WE		ginning of Ci		End of Yea	ır		
ets o	20	Total ass	ets (Part X, line 16)			o		- ISI		284065		371452		
et Assets or	21		ilities (Part X, line 26	} .	у.	5 . 1111 - 2	 -201	, 18H		(14096)		(12596)		
ž	22		ts or fund balances.		ine 21 from	Nine 20	4.501	7. 9		298161		384048		
Р	art II		ure Block		1	**************************************								
			ry, I declare that I have ex	amined this	return includii	no accompanyors	hodule	and statem	ents and to t	he hest of n	ny knowledge, and i	helief it is		
tn	e, correc	t, and compl	ete. Declaration of prepare	er (other than	officer) is bas	ed on all informatio	n of whic	h preparer h	as any know	ledge.	ny mioritago and i	ochol, it is		
			1-1-0							7/10	12017			
Sig	าก	Sign	ature of office	STA	(3°	 			Da	ite	t with			
He	_	1' A												
		Type	or print name and title	·[]/	1-21/17 A	· 								
_	4.1		pe preparer's name		Preparer's sa	gnature		Date		1	PTIN			
Pa		1				•				Check L	j #			
	epare		arno b		L				7_		,			
Us	se On									n's EIN ▶				
NAG	v the II		ddress >	DECDOYCE	chown abo	vo2 (coo inct-	******		Pho	ne no.	□ Van			

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2016)

) (Revenue \$

(Expenses \$

Total program service expenses ▶

including grants of \$

189241

Part	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	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		-	,
_		4		-
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	:	v
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		v
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		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	10		
а		11a	,	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
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		,
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		V
		11f		~
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		~
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		,
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		~
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		~
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		,
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		~

Part	Checklist of Required Schedules (continued)			rage -
	Dille de la constant		Yes	No
_	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		~
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a	Ì	~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		-
	to defease any tax-exempt bonds?	04-		-
d		24c		~
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		-
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	05-		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		~
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I			,
oc		25b	ļ	ļ <u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1	İ	
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	1		
		26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1		ŀ
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		•	
28		27		~
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			٠,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		· · · ·	
	Schedule L, Part IV	28b	1	1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	==		
	conservation contributions? If "Yes," complete Schedule M	30		/
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		,
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	 -		
	complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			<u> </u>
	or IV, and Part V, line 1	34		/
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	 	7
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	-		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	-		<u> </u>
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		J
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	3/		Ť
J.	19? Note. All Form 990 filers are required to complete Schedule O.	20	/	
		38	_	ı

Form **990** (2016)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Officer if ochedule o contains a response of flote to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial]		
	account)?	4a		~
b	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		ŀ	
	(FBAR).			·
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			l
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	,		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с	L	~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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?	8	ļ	~
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		~
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		~
10	Section 501(c)(7) organizations. Enter:		l	
a	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			1
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	4	1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
40-	<u></u>		ļ	- -
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	~
. b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40	<u> </u>	1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	-
b	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			
D	the appearant is the property of the control of the			}
С	_	1	1	
		14-	 	
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	~

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedu	le O. Se	e ins	truct	ions.				
Secti	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	•					
	,			Yes	No				
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	6							
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			,					
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b	0							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship any other officer, director, trustee, or key employee?	with	2						
3	Did the organization delegate control over management duties customanly performed by or under the supervision of officers, directors, or trustees, or key employees to a management company or other person?	direct	3		,				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	,	4		1				
5									
6	Did the organization have members or stockholders?	`	<u>5</u>		~				
7a									
b	Are any governance decisions of the organization reserved to (or subject to approval by) mem stockholders, or persons other than the governing body?	bers,	7a						
8	Did the organization contemporaneously document the meetings held or written actions undertaken or	uring	7b		~				
	the year by the following:	ug							
а	The governing body?		8a		V				
b	Each committee with authority to act on behalf of the governing body?	.	8b		V				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach								
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9_	Ĺ <u>. </u>	1				
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal	Revenu	re C	ode.) Yes					
10a	Did the organization have local chapters, branches, or affiliates?	ſ	10a	res	No				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters.		iva		-				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purpose	_	10b]				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the fo		11a		~				
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		~				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to con	+	12b		ļ				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "describe in Schedule O how this was done	Yes,"	12c						
13	Did the organization have a written whistleblower policy?		13		~				
14	Did the organization have a written document retention and destruction policy?		14		~				
15	Did the process for determining compensation of the following persons include a review and approvindependent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		,		-				
а	The organization's CEO, Executive Director, or top management official		15a		~				
b	Other officers or key employees of the organization	-	15b		1				
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange			1 1-					
	with a taxable entity during the year?		16a		-				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalual participation in joint venture arrangements under applicable federal tax law, and take steps to safeguare	d the							
	organization's exempt status with respect to such arrangements?		16b	L	L				
	on C. Disclosure								
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501/	C)\3)~	control				
10	available for public inspection. Indicate how you made these available. Check all that apply.	ンモいいけ	JU 1 (U)(U)S	ority)				
40	Own website Another's website Upon request Other (explain in Schedule O)	ند سند عاسم اس	weel.	- دامه	احسسا				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, confliction financial statements available to the public during the tax year.				y, and				
20	State the name, address, and telephone number of the person who possesses the organization's books	and rec	ords	: >					

E	ስሰስ	(2016)

_	-
Page	•

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 no	r any relate	d orga	aniz	atic	n c	ompe	nsa	ated any currer	t officer, director	r, or trustee.
		(C)								
(A)	(B)	Ì			ition			(D)	(E)	(F)
Name and Title	Average			t check more than or nless person is both			Reportable	Reportable	Estimated	
	hours per	officer and a director/trustee)						compensation	compensation from	
	week (list any hours for	익호	3	Q	Ž	g ₹	7	from the	related organizations	other compensation
	related	물통	#	Officer	y e	콩	Former	organization	(W-2/1099-MISC)	from the
	organizations	cto	ğ	٦	Key employee	yee yee	4	(W-2/1099-MISC)	, i	organization
	below dotted	ੋੜ੍ਹ	直	l	ş	ă		ł		and related organizations
	,	Individual trustee or director	Institutional trustee		Ι Φ	ens		}		organization:
	·		8			Highest compensated employee	1			
	t		 	-	_	<u> </u>				
(1) DR. HUSSEIN HASSAN	0		ĺ	ĺ			i			
PRESIDENT	<u> </u>		~	ļ		ļ	ļ	0	0	0
(2) DR. ALIAS AL SALOOS	0			1			l			
VICE PRESIDENT			~	ļ	_	<u> </u>	 	0	0	0
(3) DR WAHBAH AL SUHAILY	0			ĺ		1			_	_
VICE PRESIDENT	<u> </u>		~	_	<u> </u>	<u> </u>	ļ	0	0	<u>_</u>
(4) DR. MOHAMMAD ABDELRAHIM	0			١,		ł				
SECRETARY (C) OR SYED ARREST HALEEN	0			~	-		-	36000	0	<u> </u>
(5) DR. SYED ABDELHALEEM SECRETARY				1	Í	}		}		
(6) SADEQ AL HASAN	0		-	 	-		├	0	0	
SECRETARY	 			,		1	l		o	
(7)	 		-	ř-	-		┢╌	 `	<u>-</u>	
					ĺ					
(8)	 		_	┢╾	-	 	┢			
	†									
(9)										
							ł			
(10)										
				L				<u> </u>		
(11)						-				
			L	L.,				<u> </u>		
(12)	<u></u>			1	Ì		1]	
				L			L			
(13)	ļ					1		-		
	ļ		<u> </u>	<u> </u>	<u> </u>	ļ	<u> </u>		ļ	
(14)	ļ			[1			

	(A) Name and title	(B) Average hours per week (list any hours for	Position (do not check more than o box, unless person is both officer and a director/trust) Officer and a director/trust				one an ee)	(D) Reportable compensation from the	(E) Reportable compensation related organizatio	e from	other compensation			
		related organizations below dotted line)		Institutional trustee	cer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-M	MISC) from the organization and related organizations			d t
(15)														
(16)					-									
(17)												····		
(18)								-						
(19)	\			_				-						
(20)								_						
								_						
(21)	***************************************													
(22)														
(23)							-						,	
(24)														
(25)						-		_			-			
1b	Sub-total			L'				_	0		0			0
c d	Total from continuation sheets to Part			•			•	>	36000 36000	L	0	· · ·		0
2	Total (add lines 1b and 1c)	not limited					above	e) w	<u> </u>	<u> </u>		of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5	ficer, direc						emp	ployee, or high	est comper	nsated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	portal	ble d	con	per	nsatio					4		
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or ind	 ıvıdual 	5	-	
	on B. Independent Contractors			_									<u>'</u>	
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) compens		
								<u> </u>						
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who	 ,		, 51,	

Part	VIII	Statement of Reve			P !- 46-!-	D - + 1 (III		<u></u>
,		Check if Schedule C	contains a re	sponse or note to	O any line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	s 1a				_	
Grants	ь	Membership dues .	1b					
	C	Fundraising events .	<u>1c</u>	: 1				,
Giff	d	Related organizations						,
ons, Giff Similar	e	Government grants (cor			<u> </u>			*
rtion er S	f	All other contributions, g	1				I	
tributio Other		and similar amounts not inc			[-	
Contributions, Gifts, and Other Similar Ar	g	Noncash contributions inclu-						
	h	Total. Add lines 1a-1	<u>f</u>		284121			
Program Service Revenue				Business Code			····	
9/6	2a	IMAM CONFERENCE		ļ	36375			
E	Ь	MAWSU'A TRANSLAT	ION	 	10375	L	· · · · · · · · · · · · · · · · · · ·	
Ŋ	C						 	
နှ	d			 				
Lan	e	All athor are gross and		<u> </u>				
Log	f	All other program ser Total. Add lines 2a-2			46750		L	
	3	Investment income			46750			
		and other similar amo			ا ا	o	o	0
	4	Income from investmen	•		0			0
	5	Royalties	•		<u>°</u>		 	0
		rioyamoo	(i) Real	(ii) Personal			 	
	6a	Gross rents					ĺ	ı
	b	Less: rental expenses		 	[4		
	C	Rental income or (loss)		 				٠.,
	d	Net rental income or	(loss)	•	O	0	0	0
	7a	Gross amount from sales of	(i) Securities	(ii) Other	-		······································	
		assets other than inventory			,			
	b	Less: cost or other basis			1		,	,
		and sales expenses .	•					
	С	Gain or (loss)						
	d	Net gain or (loss) .			0	0	0	0
nue	8a	Gross income from fu	ındraising		. ,	:	3.0	1
Other Rever		events (not including \$ of contributions reports	ed on line 1c).			,		
Jer F				a	•	* **	,	
8	b	Less: direct expenses		b[
		Net income or (loss) f			0		0	0
	9a	Gross income from ga				*	٠٠ ، ٠٠ .	/s.
				a	'	•		
	b	Less: direct expenses		b				· · · · · · · · · · · · · · · · · · ·
	С	Net income or (loss) f			0	0	0	0
	10a	Gross sales of in	•	I	ŀ			
		returns and allowance		~~ 				
	Ь	Less: cost of goods s		b[· · · · · · · · · · · · · · · · · · ·
	С	Net income or (loss) 1			0	0	0	0
		Miscellaneous F	(evenue	Business Code) 	
	11a			ļ				
	b				 			
	٥	A31 _46 ~~ ~~~			ļ		ļ <u> </u>	
	d	Ail other revenue .		<u> </u>			 	
	40	Total Add lines 11a-			0		<u> </u>	ļ

following SOP 98-2 (ASC 958-720)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service (C) Management and 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments, See Part IV, line 21 . . . Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 Other salaries and wages 45380 34035 6807 4538 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 Other employee benefits 0 0 10 3471 3471 0 0 Payroll taxes 11 Fees for services (non-employees): Management 0 а Legal 500 n 500 0 b Accounting 0 0 Lobbying 0 Professional fundraising services. See Part IV, line 17 5750 5750 e Investment management fees 0 0 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 49559 49559 0 1277 12 Advertising and promotion . . . 8514 6386 851 13 Office expenses 3133 2350 470 313 14 Information technology 3191 3191 ٥ 0 15 0 0 0 16 5600 5600 0 17 Travel . . . 13661 4098 1366 8197 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 70697 14139 19 Conferences, conventions, and meetings . 94262 9426 20 0 Payments to affiliates 21 0 0 0 0 Depreciation, depletion, and amortization 22 0 0 0 23 0 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.) **BANK CHARGES** 12 12 0 0 TELEPHONE 6032 4524 905 603 h **MERCHANT FEES** 6584 6584 0 0 C d All other expenses REIMBURSEMENTS 4334 4334 ٥ Total functional expenses. Add lines 1 through 24e 249983 189241 31064 29678 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

	artx	Charles One de la Constitución d			
		Check if Schedule O contains a response or note to any line in this Par		· · · ·	
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	236161	1	320052
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		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		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
	ĺ	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	- 4 6		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
\$		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	50000	7	48497
Ä	8	Inventories for sale or use [8	
	9	Prepaid expenses and deferred charges [9	
	10a	Land, buildings, and equipment: cost or			*
		other basis. Complete Part VI of Schedule D 1977			
	b	Less: accumulated depreciation 10b 1483	494	10c	494
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2409	15	2409
	16	Total assets. Add lines 1 through 15 (must equal line 34)	289064	16	371452
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
es	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
ap		disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	_ 	25	
	26	Total liabilities. Add lines 17 through 25	(14096)	26	(12596)
Ś		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	•		
ž		· · · · · · · · · · · · · · · · · · ·	····		
튵	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets	303160	-	384048
2	29	Permanently restricted net assets	······································	29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			,
ş	30	Capital stock or trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·	30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
ě	33	Total net assets or fund balances	303160	33	384048
_	34	Total liabilities and net assets/fund balances	289064	34	371452
					Form 990 (2016)

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or

Consolidated basis Both consolidated and separate basis

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a

☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

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

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.

Were the organization's financial statements audited by an independent accountant?

reviewed on a separate basis, consolidated basis, or both:

separate basis, consolidated basis, or both:

Separate basis

Separate basis

Schedule O.

Form 990 (2016)

2b

2c

За

3b

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization **Employer identification number** ASSEMBLY OF MUSLIM JURISTS OF AMERICA 75-2994817 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (II) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetan (vi) Amount of (described on lines 1-10 sted in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Part	Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)									
	(Complete only if you checked the						alify under			
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)				
	on A. Public Support	-				,				
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total			
1	Gifts, grants, contributions, and			,	l	}				
	membership fees received. (Do not include any "unusual grants.")									
•						ļ				
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	l				 				
•	furnished by a governmental unit to the			ļ .		1				
	organization without charge			İ		ŀ				
4	Total. Add lines 1 through 3			Ì						
5	The portion of total contributions by	,			*					
•	each person (other than a		•	, ,		' '				
	governmental unit or publicly					1				
	supported organization) included on				•	1				
	line 1 that exceeds 2% of the amount	,			-					
_	shown on line 11, column (f)				ļ					
6 Coot	Public support. Subtract line 5 from line 4	<u> </u>	l			L				
	on B. Total Support dar year (or fiscal year beginning in)	(=) 0010	(h) 0010	(-) 0014	(d) 0015	(-) 0016	/0 T-+-l			
Calen 7	Amounts from line 4	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total			
8						 				
•	Gross income from interest, dividends, payments received on securities loans,	!		!		}				
	rents, royalties and income from similar]		1				
	sources			ļ		,				
9	Net income from unrelated business				· · · · · · · · · · · · · · · · · · ·		·			
	activities, whether or not the business	i								
	is regularly carned on					<u> </u>				
10	Other income. Do not include gain or					1				
	loss from the sale of capital assets			1	u	1				
	(Explain in Part VI.)									
11	Total support. Add lines 7 through 10	(aaa jaata jati		<u> </u>		ļ				
12 13	Gross receipts from related activities, etc. First five years. If the Form 990 is for the				or fifth toy w	12	n 501(a)(3)			
10	organization, check this box and stop he									
Secti	on C. Computation of Public Suppor									
14	Public support percentage for 2016 (line 6			1. column (f))		14	%			
15	Public support percentage from 2015 Sch		-			15	%			
16a	331/3% support test-2016. If the organi									
	box and stop here. The organization qua	lifies as a publ	icly supported	organization			🕨 📋			
b	331/3% support test-2015. If the organi									
	this box and stop here. The organization	qualifies as a	publicly suppo	orted organizati	on		▶ 🗆			
17a										
	10% or more, and if the organization me									
	Part VI how the organization meets the "									
_	organization									
b	10%-facts-and-circumstances test—20									
	15 is 10% or more, and if the organization in Part VI how the organization in									
	supported organization									
18	Private foundation. If the organization di						_			
	instructions			, ,	.,		▶□			

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

(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.)

on A. Public Support						
dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
Gifts, grants, contributions, and membership fees						
received. (Do not include any "unusual grants.")	208467	131692	280838	342129	330871	1293997
Gross receipts from admissions, merchandise						
		ĺ				
organization's tax-exempt purpose	o	o	o	o	o	0
Gross receipts from activities that are not an						
unrelated trade or business under section 513	o	o	o	o	o	0
Tax revenues levied for the						
organization's benefit and either paid	i					
to or expended on its behalf	o	o	o	o	o	0
The value of services or facilities						
furnished by a governmental unit to the	1		ĺ			
organization without charge	0	o	o	o	o	0
Total. Add lines 1 through 5	208467	131692	280838	342129	330871	1293997
Amounts included on lines 1, 2, and 3						
received from disqualified persons .		o	0	0	o	0
Amounts included on lines 2 and 3						
received from other than disqualified						
persons that exceed the greater of \$5,000					İ	
or 1% of the amount on line 13 for the year	o	0	o	0	0	0
Add lines 7a and 7b	0	0	0	0	0	0
		- re		,	, , ,	
						1293997
	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
Amounts from line 6	208467	131692	280838	342129	330871	1293997
	' I					
		}			Ì	
royalties and income from similar sources .	0	0	0	0	0	0
Unrelated business taxable income (less	' i					
	1				1	
acquired after June 30, 1975	0	0	0	0	0	0
Add lines 10a and 10b	0	0	0	0	0	0
	. 1				į	
	0	0	0	0	0	0
	Į Į	į	Į	Į		
•	i	,				
• •	0	0	0	0	0	0
• • • • • • • • • • • • • • • • • • • •	ľ		ĺ			
*		131692		342129	330871	1293997
						n 501(c)(3)
organization, check this box and stop ne			<u> </u>	· · · · · ·		· · • U
					TT	
Public support percentage for 2016 (line 8	3, column (f) div	vided by line 1	• • • • • • • • • • • • • • • • • • • •		15	100 %
Public support percentage for 2016 (line 8 Public support percentage from 2015 Sch	3, column (f) div nedule A, Part I	vided by line 1: II, line 15 .	3, column (f))	· · · · ·	15 16	100 % 100 %
Public support percentage for 2016 (line 8 Public support percentage from 2015 Schon D. Computation of Investment Inc.	3, column (f) div nedule A, Part I come Perce r	vided by line 13 II, line 15 . ntage			16	100 %
Public support percentage for 2016 (line 8 Public support percentage from 2015 Schon D. Computation of Investment Information Investment income percentage for 2016 (3, column (f) div nedule A, Part I come Percer line 10c, colum	vided by line 13 II, line 15 . Itage In (f) divided by	/ line 13, colur	nn (f))	16	100 %
Public support percentage for 2016 (line 8 Public support percentage from 2015 Schon D. Computation of Investment Inc. Investment income percentage for 2016 (Investment income percentage from 2015)	3, column (f) divinedule A, Part I come Percer line 10c, column Schedule A, F	vided by line 13 II, line 15 . ntage In (f) divided by Part III, line 17	/ line 13, colur	nn (f))	16 17 18 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 % 0 %
Public support percentage for 2016 (line 8 Public support percentage from 2015 Schon D. Computation of Investment Includes Investment income percentage for 2016 (Investment income percentage from 2015 331/3% support tests—2016. If the organ	B, column (f) divided to the column of the c	vided by line 13 II, line 15 ntage In (f) divided by Part III, line 17 check the box	/ line 13, colur on line 14, ar	nn (f)) nd line 15 is m	16 17 18 ore than 331/39	100 % 0 % 0 % 6, and line
Public support percentage for 2016 (line 8 Public support percentage from 2015 Schon D. Computation of Investment Incomposition Investment income percentage from 2016 (Investment income percentage from 2015 331/3% support tests—2016. If the organ 17 is not more than 331/3%, check this box	B, column (f) divided le A, Part I come Percer line 10c, colum B Schedule A, Fization did not and stop here.	vided by line 13 II, line 15 ntage In (f) divided by Part III, line 17 check the box The organization	/ line 13, colur · on line 14, ar on qualifies as a	nn (f))	16 17 18 ore than 331/39 orted organization	100 % 0 % 0 % 6, and line on .
Public support percentage for 2016 (line 8 Public support percentage from 2015 Schon D. Computation of Investment Includes Investment income percentage for 2016 (Investment income percentage from 2015 331/3% support tests—2016. If the organ	B, column (f) divided le A, Part I come Percer line 10c, column Schedule A, Fization did not chand stop here. ation did not chand stop hore.	vided by line 13 II, line 15 . ntage In (f) divided by Part III, line 17 check the box The organizationeck a box on line	/ line 13, colun on line 14, ar on qualifies as a ine 14 or line 1	nn (f))	16 17 18 ore than 331/s9 orted organization is more than 3	0 % 0 % 6, and line on . ▶ ✓ 31/3%, and
	dar year (or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the organization's tax-exempt purpose. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 5. Amounts included on lines 1, 2, and 3 received from disqualified persons. 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 Add lines 7a and 7b. Public support. (Subtract line 7c from line 6.)	dar year (or fiscal year beginning in) ► (a) 2012 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	diffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandises sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. Gross receipts from advises that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 5. Amounts included on lines 1, 2, and 3 received from other than disqualified persons. 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 Add lines 7 a and 7 b. Public support. (Subtract line 7c from line 6.). On B. Total Support dar year (or fiscal year beginning in) Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10 a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). Total support. (First five years. If the Form 990 is for the organization's first, second, third, fourth organization, check this box and stop here	der year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any inusual grants.*) Gross receipts from admissions, merchandises fournished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf Total. Add lines 1 through 5 Amounts included on lines 1, 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 (Subtract line 7c from line 6) On B. Total Support dar year (or fiscal year beginning in) Amounts from line 6 Amounts from line 6 Amounts from line 6 Amounts from line 6 Amounts included on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax ye organization, check this box and stop here	Calification Cali

. Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on 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.)

			Yes	No
1	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		٠, ٠	, ,
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		<u> </u>
2	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			. 3 '
20	organization was described in section 509(a)(1) or (2).	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.	3a		
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.		, , ,	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	3b		 .
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	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.	4a		
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.	4b	, 4 , 5 , 6 , 7	/
С	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.	4c		*;
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).	5a	3.7	" ' ' '
b	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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	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 .	6	i, %,	*
7	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).			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7		, 41
_	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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.	9a		
b	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 .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	1	- ,	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
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.	16-		
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a	<u> </u>	
	determine whether the organization had excess business holdings.)	10b		

10b

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	Ì	لنــــــا
ь	A family member of a person described in (a) above?	11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
	on B. Type I Supporting Organizations	1	·	l,
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		17	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or]	•	
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			ļ
_		1		ļ
2	Did the organization operate for the benefit of any supported organization other than the supported		١.	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			· }
	supervised, or controlled the supporting organization.		<u> </u>	
Section	on C. Type II Supporting Organizations	2	<u> </u>	L
OCCLI	on of Type it 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	Γ.	, , ,	-8
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	13.	"	
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on 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	,		,
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		r. ;	
	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?	<u> </u>	<u>'</u>	
_		1	ļ	ļ.,
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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			اـــــا
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		-
•	significant voice in the organization's investment policies and in directing the use of the organization's			J. 1:
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	* * * * * * * * * * * * * * * * * * *		10
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations	<u> </u>	<u>. </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	netru	ction	<u> </u>
		115U U	CEIOII	3).
a b	☐ 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.			
C	The organization is the parent of each of its supported organizations. Complete line's below.	eee in	etaict	legai
_	The digularization supported a governmental only, becomes my are printing adaptoriou a government charge	000		
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1	
	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,		}	
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
L	•	2a	 -	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1 '	l '	
	reasons for the organization's position that its supported organization(s) would have engaged in these		}	1
	activities but for the organization's involvement.	2b	<u> </u>	[[']
3	Parent of Supported Organizations. Answer (a) and (b) below.	1	 	-
а	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		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		1	ν.,
-	of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard.	3h		1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of pnor-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):	,	ء في	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (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 amount for prior year (from Section B, line 8, Column A)	3	· ,	1
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	egrated Type III supporti	ng organization (see

	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sect	on D - Distributions			Current Year		
1_	Amounts paid to supported organizations to accomplish					
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	orted				
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions. Add lines 1 through 6.		· · · · · · · · · · · · · · · · · · ·			
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	h the organization is res	sponsive			
9	Distributable amount for 2016 from Section C, line 6	······································				
10	Line 8 amount divided by Line 9 amount					
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable 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:			a t		
a		,	,	, T (r) }		
ь	the second of the second of	1, , ,	*	الربيات المام المراجع المام المام المام المام المام المام المام المام المام المام المام المام المام المام المام		
C	From 2013	·	,	, i		
d	From 2014	he h h				
е	From 2015	ų				
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2016 distributable amount					
i_	Carryover from 2011 not applied (see instructions)		, , , , , , , , , , , , , , , , , , ,			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		1			
4	Distributions for 2016 from Section D, line 7: \$			- ,		
а	Applied to underdistributions of prior years					
b	Applied to 2016 distributable amount					
c	Remainder. Subtract lines 4a and 4b from 4.		, ,			
5	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 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.		, , , <u>, , , , , , , , , , , , , , , , </u>			
8	Breakdown of line 7:		<u> </u>			
<u>a</u>	<u> </u>					
<u>b</u>	Excess from 2013		· · · · · · · · · · · · · · · · · · ·			
C	Excess from 2014					
<u>d</u>	Excess from 2015			·		
<u>e</u>	Excess from 2016		,	t,		

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 2016 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ASSEMBLY OF MUSLIM JURISTS OF AMERICA

Employer identification number

ASSE	MBLY OF MUSLIM JURISTS OF AMERICA		75-2994817
Par			
	Complete if the organization answered		
		(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)		<u> </u>
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to the		
•			
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene		
		int of the dollor of dollor advisor, or	· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements.		· · · · · · · · · · · · · · · · · · ·
	Complete if the organization answered	"Yes" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the		•
•	Preservation of land for public use (e.g., recrea		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contributi	on in the form of a conservation
	easement on the last day of the tax year.	•	Held at the End of the Tax Year
а	Total number of conservation easements	·	2a
b	Total acreage restricted by conservation easemen	ts ,	2b
C	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a
	historic structure listed in the National Register .		- · 2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or ten	minated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		
_	violations, and enforcement of the conservation ea		— —
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspectin	ng, handling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line	2(d) above esticks the requirements of	f control 170/h)(4)/P)(i)
0	and section 170(h)(4)(B)(ii)?		
0			· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme		nariciai statements that describes the
Par			r Other Similar Assets
	Complete if the organization answered	· · · · · · · · · · · · · · · · · · ·	
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f		
ь	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its	revenue statement and balance shee
_	works of art, historical treasures, or other similar		
	public service, provide the following amounts relat	•	,
	•	· ·	▶ \$
	(ii) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art	, historical treasures, or other simila	r assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1 .		> \$
	Assets included in Form 900 Part V		

Par	III Organizations Maintaining Co	llections of Art,	Historical 7	reasures	, or Otl	ner Similar A	ssets (con	tinued)
3	Using the organization's acquisition, acceleration items (check all that apply):	ession, and other i	ecords, chec	k any of th	e follow	ing that are a	significant i	use of its
а	☐ Public exhibition		d 🗌 Loan	or exchang	ge progr	ams		
b	☐ Scholarly research		e 🗌 Othe	r				
C	☐ Preservation for future generations							
4	Provide a description of the organization' XIII.	's collections and e	explain how t	hey further	the orga	anization's exe	mpt purpos	e in Part
5	During the year, did the organization soli assets to be sold to raise funds rather that	n to be maintained						. □ No
Par	IV Escrow and Custodial Arrange							
	Complete if the organization ans	swered "Yes" on	Form 990, 1	Part IV, line	e 9, or ı	reported an a	mount on	Form
	990, Part X, line 21.	 						
1a	Is the organization an agent, trustee, cus							
	included on Form 990, Part X?						∐ Yes	: 🗌 No
b	If "Yes," explain the arrangement in Part X	(III and complete the	ne following t	able:	r		Amount	
_	Designate halance				-		Amount	
C	Beginning balance				1c			
d	Additions during the year				1d			
e f	Distributions during the year				1e	 	· · · · · · · · · · · · · · · · · · ·	
2a	Did the organization include an amount or			· · · ·		account liabilit	v2 □ V oc	, D No
	If "Yes," explain the arrangement in Part X							
	t V Endowment Funds.	dit. Officer field if d	ie explanatio	ii iias Deeii	provide	donran Am.		_ <u></u>
	Complete if the organization ans	swered "Yes" on	Form 990.	Part IV. line	e 10.			
			b) Prior year	(c) Two yea		(d) Three years bad	k (e) Four y	ears back
1a	Beginning of year balance	· · · · · · · · · · · · · · · · · · ·		t			1	
ь	Contributions							
c	Net investment earnings, gains, and losses							
d	Grants or scholarships			 				
e	Other expenditures for facilities and			 	+		 	
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the c	current year end ba	lance (line 1g	, column (a)) held a	ıs:		
а	Board designated or quasi-endowment	%		•				
b	Permanent endowment ▶ 9	%						
C	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c s	should equal 100%						
3a	Are there endowment funds not in the po	essession of the or	ganization th	at are held	and adr	ninistered for t	he _	
	organization by:						\	es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ						3b	
4	Describe in Part XIII the intended uses of		endowment f	unds.				
Par								
	Complete if the organization ans				e 11a. S	See Form 990	, Part X, lii	ne 10.
	Description of property	(a) Cost or other ba (investment)	1 ' '	or other basis other)		occumulated preciation	(d) Book	value
1a	Land							
þ	Buildings							
C	Leasehold improvements							
d	Equipment			1977		1483		494
e	Other				<u> </u>			
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990, F	Part X, columi	n (B), line 10	Oc.)	▶		494

Part VII	Investments—Other Securities		000 Dort IV I	ing 11h Con For	m 000 Port V line 12
	Complete if the organization answard (a) Description of security or category		(b) Book value	····· ·	In 990, Part A, title 12.
	(including name of security)		(b) book value		nd-of-year market value
(1) Financial	derivatives				
	neld equity interests				
(3) Other					. <u>.</u>
(A)					
(B) (C)				_	
(D)					
(E)					
(F)				- 	
(G)				·	
(H)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶				4 4 4
Part VIII	Investments-Program Related	i.			
	Complete if the organization ansi	wered "Yes" on Fo	m 990, Part IV, I	ine 11c. See For	m 990, Part X, line 13.
	(a) Description of investment		(b) Book value		fethod of valuation
				Cost or e	nd-of-year market value
(1)					
(2)	·_ 				
(3)					
(4)					
(5)					,
<u>(6)</u> (7)				_ 	
(8)		12-		 	
(9)		<u>,</u>			
	b) must equal Form 990, Part X, col (B) line 13.)				
Part IX	Other Assets.		· · · · · · · · ·		
	Complete if the organization answ	wered "Yes" on Fo	m 990, Part IV, I	ine 11d. See For	m 990, Part X, line 15.
	(8) Description			(b) Book value
(1)				····	
(2)				 	
(3)					
(4)					
(5)		 .			<u> </u>
(6)				· ·	
(8)					
(9)		· · · · · · · · · · · · · · · · · · ·			
	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)			>
Part X	Other Liabilities.	 			
	Complete if the organization ansi	wered "Yes" on Fo	m 990, Part IV, I	line 11e or 11f. S	iee Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book value		, ,	•
(1) Federal ır	ncome taxes		• •		, , , , , , , , , , , , , , , , , , ,
(2)					
(3)					•
(4)					
(5)				,	
(6)					
(8)	· · · · · · · · · · · · · · · · · · ·	<u> </u>		,	\$
(9)					•
	b) must equal Form 990, Part X, col. (B) line 25.)	<u> </u>			
	runcertain tax positions. In Part XIII, provi	de the text of the footn	ote to the organizat	ion's financial state	ments that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

art XI	orm 990) 2016 Reconciliation of Revenue per Audited Financial Stateme	nte \	With Revenue ner	Retur	
	Complete if the organization answered "Yes" on Form 990, F	Part I\	/ line 12a	Hetui	•
Tot	al revenue, gains, and other support per audited financial statements			11	
	punts included on line 1 but not on Form 990, Part VIII, line 12:	• •		 	
	unrealized gains (losses) on investments	2a		1 1	
	nated services and use of facilities	2b		⊣	
	overies of prior year grants	2c		┤	
		2d		1	
	I lines 2a through 2d ,			2e	
	tract line 2e from line 1			3	
	bunts included on Form 990, Part VIII, line 12, but not on line 1:	i .		131	
	estment expenses not included on Form 990, Part VIII, line 7b	40		1 1	
	er (Describe in Part XIII.)	4a 4b		-	
					
	I lines 4a and 4b			4c	
				5	
rt XII		ents	with Expenses p	er Het	um.
	Complete if the organization answered "Yes" on Form 990, F				
	al expenses and losses per audited financial statements	• •		1	
	punts included on line 1 but not on Form 990, Part IX, line 25:	1 . i	l	1	
	ated services and use of facilities	2a		4	
	r year adjustments	2b		4	
	er losses	2c		4 1	
d Oth	er (Describe in Part XIII.)	2d		انسا	
	I lines 2a through 2d			2e	
Sub	tract line 2e from line 1	. · .		3	
Am	ounts included on Form 990, Part IX, line 25, but not on line 1:				
a Inve	estment expenses not included on Form 990, Part VIII, line 7b	4a]	
b Oth	er (Describe in Part XIII.)	4b		7	
c Add	l lines 4a and 4b			4c	
Tot	al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	
rt XIII	Supplemental Information.				
	e descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and ines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t				

Schedule D (Fo		Page 5
Part XIII	Supplemental Information (continued)	
		·

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.

20**16**

Department of the Treasury Internal Revenue Service Name of the organization ► 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

Employer identification number

ASSEMBLY OF MUSLIM JURISTS OF AMERICA	75-2994817
FORM 990, PART VI LINE 11B - REVIEW PROCESS	
No review was or will be conducted	
FORM 990, PART VI LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE	
No other documents available to the public	
FORM 990, PART IX LINE 11G - OTHER	
Jamal Zarabozo \$12,390 - Fatwa Management	
Mohamed A Elshinaway \$5,201 - Fatwa Management	
Main Alqudah \$9,000 - Fatwa Management	
Ebeid Mohamed \$9448 - Fatwa Management	
Roots and Sprout LLC - \$7,520 - Fatwa Management	
Media Training world wide \$6,000 - Imam Training	
·	

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number

······································	

·	