Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning 01-01-2021 , and ending 12-31-2021

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
MUSLIM AID AMERICA

Doing business as
MUSLIM AID USA

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
1660 INTERNATIONAL DRIVE SUITE 600

City or town, state or province, country, and ZIP or foreign postal code
MCLEAN, VA 22102

D Employer identification number
46-2504422

E Telephone number
(866) 606-2897

G Gross receipts $ 16,966,673

F Name and address of principal officer:
ESHA MUGHAL
1660 INTERNATIONAL DRIVE SUITE 600
MCLEAN,VA 22102

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.MAUSA.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2013

M State of legal domicile: VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
PROVIDE HELP TO PEOPLE WHO ARE VICTIMS OF NATURAL DISASTERS OR CONFLICTS OR SUFFERING FROM POVERTY, HUNGER, DISEASE, ILLITERACY, DISCRIMINATION, HOMELESSNESS, DEBT, UNEMPLOYMENT, INJUSTICE, OR LACK OF SKILLS OR ECONOMIC OPPORTUNITY.

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	8
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	**5**	6
6	Total number of volunteers (estimate if necessary)	**6**	8
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	

			Prior Year	Current Year
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	10,237,599	16,960,648
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,025
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	33,878	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,271,477	16,966,673
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	7,933,712	12,209,042
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	388,955	560,707
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶402,873		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,239,801	2,042,679
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	9,562,468	14,812,428
	19	Revenue less expenses. Subtract line 18 from line 12	709,009	2,154,245
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	**20**	Total assets (Part X, line 16)	1,722,843	4,039,844
	21	Total liabilities (Part X, line 26)	527,911	671,148
	22	Net assets or fund balances. Subtract line 21 from line 20	1,194,932	3,368,696

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date 2022-11-11

▶ ESHA MUGHAL TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2022-11-11		P00293011

Firm's name ▶ ALTRUIC ADVISORS CPAS — Firm's EIN ▶ 46-1335331

Firm's address ▶ 4088 WASHTENAW AVE
ANN ARBOR, MI 48108 — Phone no. (888) 298-5297

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ **Yes** ☐ **No**

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission:

PROVIDE HELP TO PEOPLE WHO ARE VICTIMS OF NATURAL DISASTERS OR CONFLICTS OR SUFFERING FROM POVERTY, HUNGER, DISEASE, ILLITERACY, DISCRIMINATION, HOMELESSNESS, DEBT, UNEMPLOYMENT, INJUSTICE, OR LACK OF SKILLS OR ECONOMIC OPPORTUNITY.

2 Did the organization undertake any significant 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 on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 1,462,770 including grants of $ 699,376) (Revenue $)

RELIGIOUS DUES RELIGIOUS DUE IN THE ISLAMIC TRADITION IS CALLED ZAKAT, WHICH MUSLIMS GIVE EVERY YEAR; SADAQAH JARIYAH, A FORM OF CONTINUED GIVING; ZAKAT-UL-FITR, ANNUAL GIVING; FIDYA/KAFFARA, GIVEN WHEN FASTING IS MISSED; AND AQIQAH, A SACRIFICE OF AN ANIMAL ON A CHILD'S BIRTH. MAUSA HAS DISTRIBUTED FOOD AND NON-FOOD ITEMS TO THE NEEDIEST INDIVIDUALS IN AFGHANISTAN, YEMEN, LEBANON, KASHMIR, ETHIOPIA, UGANDA, TURKEY, AND BOSNIA.

4b (Code:) (Expenses $ 10,240,363 including grants of $ 9,774,145) (Revenue $)

EMERGENCY IN 2021 MUSLIM AID USA RESPONDED TO VARIOUS EMERGENCIES, NATURAL AND MAN- MADE IN AFGHANISTAN, BOSNIA, PAKISTAN, ROHINGYA IN BANGLADESH, SOMALIA, SYRIAN REFUGEES IN TURKEY, LEBANON, PALESTINE, AND YEMEN. IN PALESTINE, MAUSA SUPPORTED AL-MAKASSED HOSPITAL AND THE PALESTINIAN RED CRESCENT SOCIETY TO RESPOND TO URGENT MEDICAL CASES AND EMERGENCIES THROUGH THE PROVISION OF LIFE-SAVING MEDICAL EQUIPMENT AND SUPPLIES AND ENHANCED ACCESS OF THE COMMUNITY MEMBERS TO EMERGENCY HEALTH SERVICES IN EAST JERUSALEM. MORE THAN FOUR HUNDRED THOUSAND INDIVIDUALS BENEFITED FROM THIS PROJECT. MAUSA SUPPORTED OXFAM USA TO IMPROVE ACCESS TO WASH SERVICES AND PROMOTE HEALTHIER SCHOOL ENVIRONMENTS IN 19 PUBLIC PRIMARY AND SECONDARY SCHOOLS ACROSS THE GAZA STRIP BY IMPROVING SAFE AND EQUITABLE ACCESS OF MALE AND FEMALE SCHOOL STUDENTS INCLUDING PEOPLE WITH DISABILITIES TO BASIC WASH SERVICES AND COVID-19 PRACTICES AND PROTOCOLS. MAUS SUPPORTED AMERICAN NEAR EAST REFUGEE AID TO IMPROVE THE OPERATIONAL STATUS OF COMMUNITY FACILITIES BY PRODUCING SAFE, FRESH, AND SUSTAINABLE SOURCES OF POTABLE WATER THROUGH THE INSTALLATION OF REVERSE OSMOSIS (RO) UNITS, TO INCREASE ACCESS TO SAFE AND CLEAN POTABLE WATER FOR OVER 22,370 BENEFICIARIES AND THE STAFF OF FOUR COMMUNITY FACILITIES. IN ROHINGYA, MAUSA CONSTRUCTED URGENT TRANSITIONAL SHELTERS FOR 115 FAMILIES TO IMPROVE THE LIVING CONDITIONS OF ROHINGYA FAMILIES LIVING IN REFUGEE CAMPS IN BANGLADESH AND PROVIDED HUMANITARIAN ASSISTANCE SUCH AS NUTRITIONAL NEEDS. MAUSA ALSO PROVIDED MORE THAN 1000 REFUGEE FAMILIES WITH ENSURED ACCESS TO CLEAN WATER. MAUSA PROVIDED EMERGENCY RELIEF TO MORE THAN 1000 PEOPLE IN INDIA, DELHI, HARYANA, UTTAR PRADESH, JAMMU & KASHMIR, WHO WERE AFFECTED BY THE COVID-19 PANDEMIC. THE BENEFICIARIES RECEIVED LIFE-SAVING MEDICAL HELP THROUGH THE PROVISION OF OXYGEN AND AMBULANCE SERVICES. THE PROJECT LIFTED THE BURDEN ON RELATIVES OF PEOPLE AFFECTED BY COVID WHO CANNOT ACCESS THESE SERVICES. EMERGENCY RELIEF WAS PROVIDED TO COVID-19 DIAGNOSED PATIENTS TO HELP SAVE LIVES AND REDUCE THE RISK OF HEALTH COMPLICATIONS. WARS BRING DEVASTATION AND DESPERATE NEED. THERE IS A SHORTAGE OF LIFE- SAVING MEDICATION, CLEAN FILTERED WATER, AND FOOD IN GAZA. MOST PEOPLE ARE ANXIOUS TO LEAVE THEIR HOMES TO GET FOOD AS THEY FEAR BEING BOMBED. IN GAZA-PALESTINE, MAUSA PROVIDED FOOD PARCELS TO 1200 ORPHANED CHILDREN, WIDOWS, AND AGGRIEVED FAMILIES WHO HAVE LOST THEIR HOMES, TO HELP THEM HAVE ACCESS TO BASIC NUTRITIONAL NEEDS.

4c (Code:) (Expenses $ 1,211,254 including grants of $ 893,287) (Revenue $)

FOOD SECURITY MUSLIM AID USA PROVIDED FOOD AND OTHER ESSENTIAL ITEMS TO IDPS, REFUGEES, AND OTHER POVERTY-STRICKEN FAMILIES IN SOMALIA, YEMEN, AFGHANISTAN, PAKISTAN, BOSNIA, SYRIAN REFUGEES IN (TURKEY, AND LEBANON) ROHINGYA REFUGEES IN BANGLADESH, AND THE UNITED STATES. WE ALSO IMPLEMENTED SEASONAL PROJECTS INCLUDING FEED THE FASTING, QURBANI, WINTERIZATION KITS AND AQIQAH. MAUSA DELIVERED FOOD PARCELS TO OVER 67,000 PEOPLE IN THE HOLY MONTH OF RAMADAN AND CHARITABLE GIVING FOR THIS MONTH, OBSERVED BY MUSLIMS. FEEDING THE MOST VULNERABLE FAMILIES IN YEMEN, AFGHANISTAN, ROHINGYA REFUGEES IN BANGLADESH, PALESTINE, BOSNIA, ETHIOPIA, SYRIAN REFUGEES IN TURKEY, SENEGAL, PAKISTAN, KASHMIR, AND IN THE USA. QURBANI IS A RELIGIOUS OBLIGATION FOR MUSLIMS TO SHARE THE HAPPINESS OF THE FEAST OF EID-AL-ADHA WITH POOR PEOPLE THROUGH THE DISTRIBUTION OF QURBANI MEAT TO SUPPORT POOR FAMILIES IN ACCESS TO NUTRITIOUS FOOD THROUGH THE DISTRIBUTION OF MEAT FOR EID AL ADHA. OVER 27,000 PEOPLE BENEFITED FROM THE QURBANI MEAT IN 2021 IN YEMEN, AFGHANISTAN, BANGLADESH, ETHIOPIA, BOSNIA, SYRIAN REFUGEES IN TURKEY, INDIA, KASHMIR, SOMALIA, PALESTINE, SIERRA LEONE, AND GAMBIA.

(Code:) (Expenses $ 1,078,333 including grants of $ 842,234) (Revenue $)

EDUCATION AND LIVELIHOOD: IN 2021 MUSLIM AID USA SUPPORTED THE BUILDING OF 12 CLASSROOMS IN THREE SECONDARY SCHOOLS IN ETHIOPIA TO INCREASE ACCESS TO QUALITY PRIMARY EDUCATION FOR MARGINALIZED CHILDREN. MAUSA ALSO FUNDED A PROJECT TO CONSTRUCT A FIT-FOR-PURPOSE INFRASTRUCTURE FOR A SCHOOL IN PAKISTAN WHICH ALSO INCLUDED WASH FACILITIES. THIS PROJECT WILL ENABLE 250 STUDENTS AGED 4-11 TO RECEIVE A QUALITY EDUCATION IN A NEW CHILD-FRIENDLY, FULLY FUNCTIONAL, AND IN SEISMIC-COMPLIANT STRUCTURE. IN BOSNIA, MAUSA SUPPORTED THE INSTALLATION OF GREENHOUSES TO PRODUCE VEGETABLES YEAR-ROUND WHICH PROVIDED INCOME GENERATION FOR THE FARMERS. THIS PROJECT NOT ONLY INCREASED INCOMES BUT ALSO IMPROVED LIVING CONDITIONS AMONG RURAL MARGINALIZED HOUSEHOLDS. MAUSA ALSO SUPPORTED SIMILAR PROJECTS IN YEMEN, THROUGH INSTALLING GREENHOUSES, DISTRIBUTION OF SEEDLINGS, AND TRAINING ON GREENHOUSE FARMING. THIS PROJECT IS PROVIDING LONG-TERM SOLUTIONS FOR VULNERABLE HOUSEHOLDS IN IMPROVING THEIR INCOME AND FOOD SECURITY. ALSO, THIS INTERVENTION WILL SUPPORT FOOD PRODUCTION FOR THE LOCAL COMMUNITY. IN YEMEN 66 CLASSES IN 5 SCHOOLS HAD BEEN REHABILITATED AND UPGRADED. WASH FACILITIES (13 LATRINES) HAVE BEEN UPGRADED. 4129 STUDENTS BENEFITED FROM EQUITABLE ACCESS TO SAFE, INCLUSIVE, AND EQUIPPED LEARNING SPACES IN LEBANON MAUSA FUNDED SCHOOL IN A BUS. THIS PROJECT IS AN INNOVATIVE PROJECT THAT COVERS THE GAP IN EDUCATION FOR OUT-OF-SCHOOL CHILDREN. SINCE THEY ARE DEPRIVED OF THEIR RIGHT OF GOING TO SCHOOL DUE TO ECONOMIC REASONS. THE BUS COMES TO THEM TO PROVIDE THE BASICS OF THE ARABIC LANGUAGE, ENGLISH LANGUAGE, MATH, AND SCIENCE, ALONGSIDE AN ARRAY OF INTERACTIVE ACTIVITIES WHICH INCREASE CHILDREN'S ENGAGEMENT. THIS WILL INCREASE THE CHILDREN'S CHANCES OF INTEGRATING INTO MAINSTREAM EDUCATION. IN THE USA, MAUSA PROVIDED FINANCIAL SUPPORT TO SERVE THE UNDERSERVED FEMALE POPULATION (WOMEN EMPOWERMENT) IN LESS AFFLUENT NEIGHBORHOODS IN DIFFERENT STATES TO FACILITATE THEIR COLLEGE EDUCATION. THE PROGRAM WILL BE LAUNCHED IN PHASES, WITH EACH PHASE SERVING 13 STUDENTS FROM AN UNDERSERVED COMMUNITY. THE GOAL IS TO BUILD SPECIFIC PATHWAYS THAT LEAD TO EMPLOYMENT. HEALTH CARE: MUSLIM AID USA SUPPORTED VARIOUS HEALTH, NUTRITIONAL, MEDICAL COMMODITIES, AND PHARMACEUTICALS. IN GAZA, PROVIDED PREVENTION, PROTECTION, AND RESPONSE TO COVID-19 AMONG THE MOST VULNERABLE PALESTINIAN COMMUNITY. IN SOMALIA, SUPPORTED A ONE-STOP GBV REFERRAL CENTER TO ENSURE 200 SURVIVORS HAVE ACCESS TO LIFESAVING GBV INTERVENTIONS, INCLUDING MEDICAL TREATMENT, LEGAL AID, PSYCHOSOCIAL COUNSELING, COMMUNITY AWARENESS, AND DELIVERY OF DIGNITY KITS. IN ETHIOPIA, MAUSA FUNDED A PROJECT THAT CONSISTED OF 12 HEALTH CENTERS IN ETHIOPIA, FOR THE PURPOSE OF SCREENING AND TREATING PATIENTS WITH CATARACTS. IN TOTAL 1,500 BENEFICIARIES UNDERWENT SURGERY IN 4 HOSPITALS. ALL PATIENTS RECEIVED POSTOPERATIVE TREATMENT THE FOLLOWING DAY AS WELL AS TWO TYPES OF NECESSARY EYE DROPLETS FOR THE DURATION OF ONE MONTH, AT NO COST TO THEM. ORPHAN SUPPORT: ORPHAN SPONSORSHIP IS A VITAL LIFELINE FOR MANY VULNERABLE YOUNG CHILDREN. ALL OVER THE WORLD, THERE ARE CHILDREN WHO DO NOT HAVE THE LOVING SUPPORT OF A FAMILY. CHILDREN WHOSE ONLY SHELTER IS A PIECE OF PLASTIC SHEETING OR A CARDBOARD BOX, LIVING DAY TO DAY WITH THE RISK OF ABUSE, NEGLECT, AND EXPLOITATION. MUSLIM AID USA SUPPORTERS SPONSORED 869 ORPHANS IN 2021 IN AFGHANISTAN, BANGLADESH, BOSNIA, GAMBIA, INDIA, PAKISTAN, PALESTINE, SIERRA LEONE, SOMALIA, AND SRI LANKA. OTHER PROJECTS INCLUDED SEASONAL BACK-TO- SCHOOL, HOUSE RECONSTRUCTIONS FOR ORPHANS, AND RELIGIOUS DUES LIKE EID GIFTS. WASH: MAUSA HAS VARIOUS PROJECTS TO PROVIDE ACCESS TO SAFE WATER FOR DRINKING AND OTHER PURPOSES; DEEP WATER WELLS WITH SOLAR AND/OR HAND PUMPS, THE PROJECT ALSO SECURES LABORATORY TESTING OF WATER FROM THE DRILLED WELL, TO ENSURE THAT THE WATER IS SAFE FOR DRINKING. IN 2021 MUSLIM AID USA SUPPORTED WASH PROJECTS IN DIFFERENT COUNTRIES: MEGA WATER WELLS AND WASH ASSISTANCE FOR THE ROHINGYA REFUGEES IN BANGLADESH; COMMUNITY SAFE WATER WELLS IN CAMBODIA, SCHOOL, AND COMMUNITY WATER WELL IN ETHIOPIA, PERSONAL WATER WELLS FOR POOR RURAL COMMUNITIES IN PAKISTAN AND YEMEN.

4d Other program services (Describe in Schedule O.)

(Expenses $ 1,078,333 including grants of $ 842,234) (Revenue $)

4e **Total program service expenses** ▶ 13,992,720

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	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions.	2	Yes	
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		No
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		No
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 Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
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		No
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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	Yes	
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	Yes	
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
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	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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		No
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	Yes	
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		No
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 to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
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? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
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		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

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
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	16		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			

Part V **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

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** 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	**3a**		No
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**		No
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 (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		No
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 organization solicit any contributions that were not tax deductible as charitable contributions? . . .	**6a**		No
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).**			
a	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**		No
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?	**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		No
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**		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	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:			
a	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**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	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**		
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.**			
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . **Note.** See the instructions for additional information the organization must report on Schedule O.	**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?	**15**		No
16	Is the organization subject to section 4968 excise tax on net investment income? . . If "Yes," complete Form 4720, Schedule N.	**16**		No
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . If "Yes," complete Form 6069.	**17**		

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. 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.	1a	8		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6			No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on 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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ _____

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, 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.

☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
▶ESHA MUGHAL 1660 INTERNATIONAL DRIVE SUITE 600 MCLEAN,VA 22102 (866) 606-2897

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) MANSOOR SAKHIY EXECUTIVE DI	40.00			X				123,531	0	27,192
(2) ESHA MUGHAL TREASURER	2.00	X		X				0	0	0
(3) LARRY BISNO BOARD MEMBER	2.00	X						0	0	0
(4) MONEM SALAM CHAIR & PRES	2.00	X		X				0	0	0
(5) BASIT KHAN BOARD MEMBER	2.00	X						0	0	0
(6) HUD WILLIAMS BOARD MEMBER	2.00	X						0	0	0
(7) FRANK MESINA BOARD MEMBER	2.00	X						0	0	0
(8) SADAF HAQ BOARD MEMBER	2.00	X						0	0	0
(9) ASIM MOHAMMAD BOARD MEMBER	2.00	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								123,531		27,192

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 ▶ 1

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
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 individual*	**4**	Yes	
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**		No

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) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts	1a Federated campaigns . .	1a			
	b Membership dues . .	1b			
	c Fundraising events . .	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	16,960,648		
	g Noncash contributions included in lines 1a - 1f:$	1g	7,973,161		
	h **Total.** Add lines 1a-1f . . . . . ▶		16,960,648		

Program Service Revenue	Business Code				
2a					
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f. . . . . ▶					

Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts)		6,025			6,025
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties . . . . . ▶					

		(i) Real	(ii) Personal				
6a Gross rents	6a						
b Less: rental expenses	6b						
c Rental income or (loss)	6c						
d Net rental income or (loss) . . . . . ▶							

		(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a						
b Less: cost or other basis and sales expenses	7b						
c Gain or (loss)	7c						
d Net gain or (loss) . . . . . ▶							

8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
b Less: direct expenses	8b				
c Net income or (loss) from fundraising events . . ▶					
9a Gross income from gaming activities. See Part IV, line 19 . . .	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities . . ▶					
10a Gross sales of inventory, less returns and allowances . .	10a				
b Less: cost of goods sold . .	10b				
c Net income or (loss) from sales of inventory . . ▶					

Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d . . . . . ▶					
12 **Total revenue.** See instructions . . . . . ▶		16,966,673			6,025

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, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	199,735	199,735		
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.	12,009,307	12,009,307		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	123,531	80,295	12,353	30,883
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	333,357	130,102	61,526	141,729
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,000	2,763	970	2,267
9 Other employee benefits	63,049	29,034	10,195	23,820
10 Payroll taxes	34,770	16,012	5,622	13,136
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	13,312		13,312	
d Lobbying				
e 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)	155,401	147,675	7,726	
12 Advertising and promotion	811,582	605,620	30,786	175,176
13 Office expenses	160,735	110,510	34,363	15,862
14 Information technology	2,206		2,206	
15 Royalties				
16 Occupancy	30,351	28,139	2,212	
17 Travel	28,644	133	28,511	
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	1,118		1,118	
23 Insurance	2,470		2,470	
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.)				
a HANDLING COSTS	631,281	631,281		
b BANK FEES	159,038	1,939	157,099	
c BAD DEBT	26,624		26,624	
d LICENSES AND DUES	13,284		13,284	
e All other expenses	6,633	175	6,458	
25 **Total functional expenses.** Add lines 1 through 24e	14,812,428	13,992,720	416,835	402,873
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).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		1,621,312	1	3,746,386
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		78,938	4	98,097
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	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	10a 5,879			
	b	Less: accumulated depreciation	10b 2,733	3,466	10c	3,146
	11	Investments—publicly traded securities		19,127	11	192,215
	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			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		1,722,843	16	4,039,844
Liabilities	17	Accounts payable and accrued expenses		54,100	17	22,401
	18	Grants payable		473,811	18	648,747
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			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		527,911	26	671,148
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		-150,905	27	-165,928
	28	Net assets with donor restrictions		1,345,837	28	3,534,624
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		1,194,932	32	3,368,696
	33	Total liabilities and net assets/fund balances		1,722,843	33	4,039,844

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,966,673
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,812,428
3	Revenue less expenses. Subtract line 2 from line 1	3	2,154,245
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,194,932
5	Net unrealized gains (losses) on investments	5	19,519
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	3,368,696

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	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: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
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.	3b		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A
(Form 990)

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.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
MUSLIM AID AMERICA

Employer identification number
46-2504422

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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:

5 ☐ 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.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ 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.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **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 33 1/3% 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 33 1/3% 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.)

11 ☐ 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **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.**

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.**

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.**

d ☐ **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.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

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 box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	44,238	1,553,620	2,177,010	10,237,599	16,960,648	30,973,115
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	44,238	1,553,620	2,177,010	10,237,599	16,960,648	30,973,115
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						
6 **Public support.** Subtract line 5 from line 4.						30,973,115

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4. .	44,238	1,553,620	2,177,010	10,237,599	16,960,648	30,973,115
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .					6,025	6,025
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						30,979,140

12 Gross receipts from related activities, etc. (see instructions) **12** 59,080

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f)) . . . . . **14** 99.980 %

15 Public support percentage for 2020 Schedule A, Part II, line 14 . . . . . **15** 100.000 %

16a **33 1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☑

b **33 1/3% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

17a **10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶☐

b **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶☐

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
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						
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						
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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
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.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on 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.). .						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15
16	Public support percentage from 2020 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2021** (line 10c, column (f) divided by line 13, column (f))	17
18	Investment income percentage from **2020** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

b **33 1/3% support tests—2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			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 class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
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 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 lines 3b and 3c 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.*	3b		
c	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.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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		
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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c 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		
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		
c	**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		
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) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	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 on 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		
c	Did a disqualified person (as defined on 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.***	9c		
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 line 10b below.*	10a		
b	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).*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to 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 organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	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 VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. 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 or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section 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 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? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in line 2 above, 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		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

a ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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.*	2a		
b	Did the activities described on line 2a, above 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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
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? *If "Yes" or "No", provide details in* ***Part VI.***	3a		
b	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		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 *(explain in **Part VI**)*. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-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):	1		
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***):			
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 0.015 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 0.035	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		
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-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (*prior IRS approval required - provide details in* ***Part VI***)	**5**	
6 Other distributions (*describe in* ***Part VI***). See instructions	**6**	
7 **Total annual distributions.** Add lines 1 through 6.	**7**	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions	**8**	
9 Distributable amount for 2021 from Section C, line 6	**9**	
10 Line 8 amount divided by Line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2021**	**(iii) Distributable Amount for 2021**
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-- *explain in* ***Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2021:			
a From 2016.			
b From 2017.			
c From 2018.			
d From 2019.			
e From 2020.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
7 **Excess distributions carryover to 2022.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017.			
b Excess from 2018.			
c Excess from 2019.			
d Excess from 2020.			
e Excess from 2021.			

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).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
MUSLIM AID AMERICA

Employer identification number
46-2504422

Part I 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)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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? ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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 an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	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 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB 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 FASB 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 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other .....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. . . ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	**1c**	
d Additions during the year	**1d**	
e Distributions during the year	**1e**	
f Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b 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 current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ .....

b Permanent endowment ▶ .....

c Term endowment ▶ .....

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations	**3a(i)**	
(ii) Related organizations	**3a(ii)**	
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	**3b**	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		5,879	2,733	3,146
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				3,146

Part VII **Investments - Other Securities.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3)Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII **Investments - Program Related.**
Complete if the organization answered '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)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 13.)* ▶		

Part IX **Other Assets.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	

Part X **Other Liabilities.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements 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 ☐

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per 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	16,986,192
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	19,519		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	19,519
3	Subtract line **2e** from line **1**			3	16,966,673
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	16,966,673

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	14,812,428
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	14,812,428
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	14,812,428

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
MUSLIM AID AMERICA

Employer identification number
46-2504422

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) SOUTH ASIA			PROGRAM SUPPORT	BANGLADESH EMERGENCY	297,897
(2) SOUTH ASIA			PROGRAM SUPPORT	GENERAL EMERGENCY	41,290
(3) SOUTH ASIA			PROGRAM SUPPORT	AFGHAN. EMERGENCY	16,553
(4) SOUTH ASIA			PROGRAM SUPPORT	CHILD SPONSORSHIP	3,050
(5) SOUTH ASIA			PROGRAM SUPPORT	COVID EMERGENCY	60,000
(6) SOUTH ASIA			PROGRAM SUPPORT	INDIA EMERGENCY	614,099
(7) SOUTH ASIA			PROGRAM SUPPORT	NEPAL EMERGENCY	93,025
(8) SOUTH ASIA			PROGRAM SUPPORT	SRI LANKA GENERAL	28,064
(9) SOUTH ASIA			PROGRAM SUPPORT	QURBANI	213,062
(10) SOUTH ASIA			PROGRAM SUPPORT	WINTERIZATION	63,410
(11) SOUTH ASIA			PROGRAM SUPPORT	ROHINGYA SHELTERS	120,052
(12) SOUTH ASIA			PROGRAM SUPPORT	SOLAR WATER PANEL	19,701
(13) SOUTH ASIA			PROGRAM SUPPORT	SUPPORTING IDPS	80,330
(14) SOUTH ASIA			PROGRAM SUPPORT	ZAKAT AL FITR	45,364
(15) SOUTH ASIA			PROGRAM SUPPORT	WATER WELLS	93,630
(16) SOUTH ASIA			PROGRAM SUPPORT	DIG A WELL	43,012
(17) SOUTH ASIA			PROGRAM SUPPORT	FEED THE NEEDY	169,244
(18) SOUTH ASIA			PROGRAM SUPPORT	ORPHAN SPONSORSHIP	223,516
(19) SOUTH ASIA			PROGRAM SUPPORT	PAKISTAN EMERGENCY	21,090
(20) SOUTH ASIA			PROGRAM SUPPORT	WINTER EMERGENCY	10,470
(21) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	PROJECT C.U.R.E.	600,000
(22) SUBSAHARAN AFRICA			PROGRAM SUPPORT	GLOBUS RELIEF	329,355
(23) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	CHAD EMERGENCY	84,806
(24) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	GENERAL EMERGENCY	949,602
(25) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	SOMALIA EMERGENCY	890,060
(26) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	SUDAN EMERGENCY	14,516
(27) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	ZAKAT AL FITR	10,803
(28) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	SCHOOL EXPANSION	170,960
(29) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	QURBANI	73,389
(30) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	ORPHAN SPONSORSHIP	113,410
(31) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	FEED THE NEEDY	119,316
(32) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	EYE CATARACT	111,639
(33) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	ETHIOPIA QURBANI	20,041
(34) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	EMERGENCY	5,000
(35) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	EDUCATIONAL SUPPORT	19,542
(36) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	DIG A WELL	80,811
(37) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	DEEP WELL PROJECT	106,504
(38) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	COVID EMERGENCY	3,500
(39) SUB-SAHARAN AFRICA			PROGRAM SUPPORT	AQIQAH	8,984
(40) EUROPE			PROGRAM SUPPORT	TURKEY EMERGENCY	203,226
(41) EUROPE			PROGRAM SUPPORT	QURBANI	43,685
(42) EUROPE			PROGRAM SUPPORT	WINTERIZATION	59,976
(43) EUROPE			PROGRAM SUPPORT	BOSNIA - LIVELIHOOD	21,246
(44) EUROPE			PROGRAM SUPPORT	EID GIFT	5,174
(45) EUROPE			PROGRAM SUPPORT	FEED THE NEEDY	47,067
(46) EUROPE			PROGRAM SUPPORT	ORPHAN SPONSORSHIP	82,569
(47) EUROPE			PROGRAM SUPPORT	HOUSE RECONSTRUCTION	35,666
(48) EUROPE			PROGRAM SUPPORT	ZAKAT AL FITR	20,193
(49) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	PROJECT C.U.R.E.	600,000
(50) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	GLOBUS RELIEF	433,907
(51) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	GENERAL EMERGENCY	203,226
(52) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	LEBANON EMERGENCY	439,158
(53) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	YEMEN EMERGENCY	939,854
(54) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	WATER WELLS	60,050
(55) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	SCHOOL BUS	61,277
(56) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	PALESTINE EMS	150,000
(57) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	ENHANCING EMERGENCY	150,000
(58) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	FEED THE NEEDY	124,111
(59) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	GREEN HOUSE	44,941
(60) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	ORPHAN SPONSORSHIP	100,302
(61) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	PALESTINE EMERGENCY	469,602
(62) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	PALESTINE REFUGEES	20,914
(63) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	QURBANI	197,146
(64) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	YEMEN WINTERIZATION	19,926
(65) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	ZAKAT AL FITR	22,660
(66) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	SCHOOL REHAB - YEMEN	200,058
(67) MIDDLE EAST AND NORTH AFRICA			PROGRAM SUPPORT	EID GIFT	10,000
(68) EAST ASIAN AND THE PACIFIC			PROGRAM SUPPORT	CAMBODIA GENERAL	228,387
(69) EAST ASIAN AND THE PACIFIC			PROGRAM SUPPORT	GENERAL EMERGENCY	92,250
(70) EAST ASIAN AND THE PACIFIC			PROGRAM SUPPORT	DIG A WELL	53,200
(71) EAST ASIAN AND THE PACIFIC			PROGRAM SUPPORT	FEED THE NEEDY	10,000
(72) CENTRAL AMERICA AND THE CARRIBEAN			PROGRAM SUPPORT	GENERAL EMERGENCY	478,089
(73) CENTRAL AMERICA AND THE CARRIBEAN			PROGRAM SUPPORT	HAITI EMERGENCY	412,350
3a Sub-total					2,001,783
b Total from continuation sheets to Part I . . .					10,007,524
c Totals (add lines 3a and 3b)					12,009,307

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			PROGRAM SUPPORT	4,036,146	WIRE, EFT	7,973,161	FOOD/SUPPLIES	FMV
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶

3 Enter total number of other organizations or entities . . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . . ☐ Yes ☑ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . . ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . . ☐ Yes ☑ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . ☐ Yes ☑ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . . ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* . . . . . ☐ Yes ☑ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

ReturnReference	Explanation
SCHEDULE F, PAGE 1, PART I, LINE 2	MUSLIM AID USA (MAUSA) REQUIRES A SIGNED GRANT PROPOSAL FROM ALL POTENTIAL GRANTEES. A DUE DILIGENCE PROCESS IS PERFORMED BEFORE GRANT PROPOSALS ARE CONSIDERED.
SCHEDULE F, PAGE 1, PART I, LINE 3	SOUTH ASIA 297,897 0 SOUTH ASIA 41,290 0 SOUTH ASIA 16,553 0 SOUTH ASIA 3,050 0 SOUTH ASIA 60,000 0 SOUTH ASIA 614,099 0 SOUTH ASIA 93,025 0 SOUTH ASIA 28,064 0 SOUTH ASIA 213,062 0 SOUTH ASIA 63,410 0 SOUTH ASIA 120,052 0 SOUTH ASIA 19,701 0 SOUTH ASIA 80,330 0 SOUTH ASIA 45,364 0 SOUTH ASIA 93,630 0 SOUTH ASIA 43,012 0 SOUTH ASIA 169,244 0 SOUTH ASIA 223,516 0 SOUTH ASIA 21,090 0 SOUTH ASIA 10,470 0 SUB-SAHARAN AFRICA 600,000 0 SUBSAHARAN AFRICA 329,355 0 SUB-SAHARAN AFRICA 84,806 0 SUB-SAHARAN AFRICA 949,602 0 SUB-SAHARAN AFRICA 890,060 0 SUB-SAHARAN AFRICA 14,516 0 SUB-SAHARAN AFRICA 10,803 0 SUB-SAHARAN AFRICA 170,960 0 SUB-SAHARAN AFRICA 73,389 0 SUB-SAHARAN AFRICA 113,410 0 SUB-SAHARAN AFRICA 119,316 0 SUB-SAHARAN AFRICA 111,639 0 SUB-SAHARAN AFRICA 20,041 0 SUB-SAHARAN AFRICA 5,000 0 SUB-SAHARAN AFRICA 19,542 0 SUB-SAHARAN AFRICA 80,811 0 SUB-SAHARAN AFRICA 106,504 0 SUB-SAHARAN AFRICA 3,500 0 SUB-SAHARAN AFRICA 8,984 0 EUROPE 203,226 0 EUROPE 43,685 0 EUROPE 59,976 0 EUROPE 21,246 0 EUROPE 5,174 0 EUROPE 47,067 0 EUROPE 82,569 0 EUROPE 35,666 0 EUROPE 20,193 0 MIDDLE EAST AND NORTH AFRICA 600,000 0 MIDDLE EAST AND NORTH AFRICA 433,907 0 MIDDLE EAST AND NORTH AFRICA 203,226 0 MIDDLE EAST AND NORTH AFRICA 439,158 0 MIDDLE EAST AND NORTH AFRICA 939,854 0 MIDDLE EAST AND NORTH AFRICA 60,050 0 MIDDLE EAST AND NORTH AFRICA 61,277 0 MIDDLE EAST AND NORTH AFRICA 150,000 0 MIDDLE EAST AND NORTH AFRICA 150,000 0 MIDDLE EAST AND NORTH AFRICA 124,111 0 MIDDLE EAST AND NORTH AFRICA 44,941 0 MIDDLE EAST AND NORTH AFRICA 100,302 0 MIDDLE EAST AND NORTH AFRICA 469,602 0 MIDDLE EAST AND NORTH AFRICA 20,914 0 MIDDLE EAST AND NORTH AFRICA 197,146 0 MIDDLE EAST AND NORTH AFRICA 19,926 0 MIDDLE EAST AND NORTH AFRICA 22,660 0 MIDDLE EAST AND NORTH AFRICA 200,058 0 MIDDLE EAST AND NORTH AFRICA 10,000 0 EAST ASIAN AND THE PACIFIC 228,387 0 EAST ASIAN AND THE PACIFIC 92,250 0 EAST ASIAN AND THE PACIFIC 53,200 0 EAST ASIAN AND THE PACIFIC 10,000 0 CENTRAL AMERICA AND THE CARRIBEAN 478,089 0 CENTRAL AMERICA AND THE CARRIBEAN 412,350 0

Additional Data

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
MUSLIM AID AMERICA

Employer identification number
46-2504422

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ILM FOUNDATION 448 WEST SCHOOL STREET COMPTON,CA 90220	95-4661915	501C3	9,175		FMV		PROGRAM SUPPORT
(2) PROJECT DOWNTOWN NATIONAL 20721 QUINELLA ST ORLANDO,FL 32833	83-3833223	501C3	11,060		FMV		PROGRAM SUPPORT
(3) MUSLIM GIVING BACK 5218 3RD AVENUE BROOKLYN,NY 11220	82-2712941	501C3	6,000		FMV		PROGRAM SUPPORT
(4) A CONTINUOUS CHARITY 7035 NUECES DR IRVING,TX 75039	45-5424452	501C3	25,000		FMV		PROGRAM SUPPORT
(5) IKRAM FOUNDATION 2201 COOPERATIVE WAY 600 HERNDON,VA 20171	47-1523065	501C3	15,000		FMV		PROGRAM SUPPORT
(6) PROJECT CURE 10377 E GEDDES AVE 200 CENTENNIAL,CO 80112	84-1568566	501C3	42,000		FMV		PROGRAM SUPPORT
(7) TEXAS MUSLIM WOMENS FOUNDATION PO BOX 863388 PLANO,TX 75075	20-3060929	501C3	90,000		FMV		PROGRAM SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 7

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
MUSLIM AID AMERICA

Employer identification number
46-2504422

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		**(B)** Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
1 MANSOOR SAKHIY EXECUTIVE DIRECTOR	**(i)**	123,531			27,192		150,723	
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

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Name of the organization
MUSLIM AID AMERICA

Employer identification number
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Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	1	705,519	FMV
20 Drugs and medical supplies	X	1	7,267,642	FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement | 29 |

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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Software ID:

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
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Employer identification number
46-2504422

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	PROVIDE HELP TO PEOPLE WHO ARE VICTIMS OF NATURAL DISASTERS OR CONFLICTS OR SUFFERING FROM POVERTY, HUNGER, DISEASE, ILLITERACY, DISCRIMINATION, HOMELESSNESS, DEBT, UNEMPLOYMENT, INJUSTICE, OR LACK OF SKILLS OR ECONOMIC OPPORTUNITY.
FORM 990, PAGE 2, PART III, LINE 4B	EMERGENCY IN 2021 MUSLIM AID USA RESPONDED TO VARIOUS EMERGENCIES, NATURAL AND MAN- MADE IN AFGHANISTAN, BOSNIA, PAKISTAN, ROHINGYA IN BANGLADESH, SOMALIA, SYRIAN REFUGEES IN TURKEY, LEBANON, PALESTINE, AND YEMEN. IN PALESTINE, MAUSA SUPPORTED AL-MAKASSED HOSPITAL AND THE PALESTINIAN RED CRESCENT SOCIETY TO RESPOND TO URGENT MEDICAL CASES AND EMERGENCIES THROUGH THE PROVISION OF LIFE-SAVING MEDICAL EQUIPMENT AND SUPPLIES AND ENHANCED ACCESS OF THE COMMUNITY MEMBERS TO EMERGENCY HEALTH SERVICES IN EAST JERUSALEM. MORE THAN FOUR HUNDRED THOUSAND INDIVIDUALS BENEFITED FROM THIS PROJECT. MAUSA SUPPORTED OXFAM USA TO IMPROVE ACCESS TO WASH SERVICES AND PROMOTE HEALTHIER SCHOOL ENVIRONMENTS IN 19 PUBLIC PRIMARY AND SECONDARY SCHOOLS ACROSS THE GAZA STRIP BY IMPROVING SAFE AND EQUITABLE ACCESS OF MALE AND FEMALE SCHOOL STUDENTS INCLUDING PEOPLE WITH DISABILITIES TO BASIC WASH SERVICES AND COVID-19 PRACTICES AND PROTOCOLS. MAUS SUPPORTED AMERICAN NEAR EAST REFUGEE AID TO IMPROVE THE OPERATIONAL STATUS OF COMMUNITY FACILITIES BY PRODUCING SAFE, FRESH, AND SUSTAINABLE SOURCES OF POTABLE WATER THROUGH THE INSTALLATION OF REVERSE OSMOSIS (RO) UNITS, TO INCREASE ACCESS TO SAFE AND CLEAN POTABLE WATER FOR OVER 22,370 BENEFICIARIES AND THE STAFF OF FOUR COMMUNITY FACILITIES. IN ROHINGYA, MAUSA CONSTRUCTED URGENT TRANSITIONAL SHELTERS FOR 115 FAMILIES TO IMPROVE THE LIVING CONDITIONS OF ROHINGYA FAMILIES LIVING IN REFUGEE CAMPS IN BANGLADESH AND PROVIDED HUMANITARIAN ASSISTANCE SUCH AS NUTRITIONAL NEEDS. MAUSA ALSO PROVIDED MORE THAN 1000 REFUGEE FAMILIES WITH ENSURED ACCESS TO CLEAN WATER. MAUSA PROVIDED EMERGENCY RELIEF TO MORE THAN 1000 PEOPLE IN INDIA, DELHI, HARYANA, UTTAR PRADESH, JAMMU & KASHMIR, WHO WERE AFFECTED BY THE COVID-19 PANDEMIC. THE BENEFICIARIES RECEIVED LIFE-SAVING MEDICAL HELP THROUGH THE PROVISION OF OXYGEN AND AMBULANCE SERVICES. THE PROJECT LIFTED THE BURDEN ON RELATIVES OF PEOPLE AFFECTED BY COVID WHO CANNOT ACCESS THESE SERVICES. EMERGENCY RELIEF WAS PROVIDED TO COVID-19 DIAGNOSED PATIENTS TO HELP SAVE LIVES AND REDUCE THE RISK OF HEALTH COMPLICATIONS. WARS BRING DEVASTATION AND DESPERATE NEED. THERE IS A SHORTAGE OF LIFE- SAVING MEDICATION, CLEAN FILTERED WATER, AND FOOD IN GAZA. MOST PEOPLE ARE ANXIOUS TO LEAVE THEIR HOMES TO GET FOOD AS THEY FEAR BEING BOMBED. IN GAZA-PALESTINE, MAUSA PROVIDED FOOD PARCELS TO 1200 ORPHANED CHILDREN, WIDOWS, AND AGGRIEVED FAMILIES WHO HAVE LOST THEIR HOMES, TO HELP THEM HAVE ACCESS TO BASIC NUTRITIONAL NEEDS.
FORM 990, PAGE 2, PART III, LINE 4C	FOOD SECURITY MUSLIM AID USA PROVIDED FOOD AND OTHER ESSENTIAL ITEMS TO IDPS, REFUGEES, AND OTHER POVERTY-STRICKEN FAMILIES IN SOMALIA, YEMEN, AFGHANISTAN, PAKISTAN, BOSNIA, SYRIAN REFUGEES IN (TURKEY, AND LEBANON) ROHINGYA REFUGEES IN BANGLADESH, AND THE UNITED STATES. WE ALSO IMPLEMENTED SEASONAL PROJECTS INCLUDING FEED THE FASTING, QURBANI, WINTERIZATION KITS AND AQIQAH. MAUSA DELIVERED FOOD PARCELS TO OVER 67,000 PEOPLE IN THE HOLY MONTH OF RAMADAN AND CHARITABLE GIVING FOR THIS MONTH, OBSERVED BY MUSLIMS. FEEDING THE MOST VULNERABLE FAMILIES IN YEMEN, AFGHANISTAN, ROHINGYA REFUGEES IN BANGLADESH, PALESTINE, BOSNIA, ETHIOPIA, SYRIAN REFUGEES IN TURKEY, SENEGAL, PAKISTAN, KASHMIR, AND IN THE USA. QURBANI IS A RELIGIOUS OBLIGATION FOR MUSLIMS TO SHARE THE HAPPINESS OF THE FEAST OF EID-AL-ADHA WITH POOR PEOPLE THROUGH THE DISTRIBUTION OF QURBANI MEAT TO SUPPORT POOR FAMILIES IN ACCESS TO NUTRITIOUS FOOD THROUGH THE DISTRIBUTION OF MEAT FOR EID AL ADHA. OVER 27,000 PEOPLE BENEFITED FROM THE QURBANI MEAT IN 2021 IN YEMEN, AFGHANISTAN, BANGLADESH, ETHIOPIA, BOSNIA, SYRIAN REFUGEES IN TURKEY, INDIA, KASHMIR, SOMALIA, PALESTINE, SIERRA LEONE, AND GAMBIA.
FORM 990, PAGE 2, PART III, LINE 4D	EDUCATION AND LIVELIHOOD: IN 2021 MUSLIM AID USA SUPPORTED THE BUILDING OF 12 CLASSROOMS IN THREE SECONDARY SCHOOLS IN ETHIOPIA TO INCREASE ACCESS TO QUALITY PRIMARY EDUCATION FOR MARGINALIZED CHILDREN. MAUSA ALSO FUNDED A PROJECT TO CONSTRUCT A FIT-FOR-PURPOSE INFRASTRUCTURE FOR A SCHOOL IN PAKISTAN WHICH ALSO INCLUDED WASH FACILITIES. THIS PROJECT WILL ENABLE 250 STUDENTS AGED 4-11 TO RECEIVE A QUALITY EDUCATION IN A NEW CHILD-FRIENDLY, FULLY FUNCTIONAL, AND IN SEISMIC-COMPLIANT STRUCTURE. IN BOSNIA, MAUSA SUPPORTED THE INSTALLATION OF GREENHOUSES TO PRODUCE VEGETABLES YEAR-ROUND WHICH PROVIDED INCOME GENERATION FOR THE FARMERS. THIS PROJECT NOT ONLY INCREASED INCOMES BUT ALSO IMPROVED LIVING CONDITIONS AMONG RURAL MARGINALIZED HOUSEHOLDS. MAUSA ALSO SUPPORTED SIMILAR PROJECTS IN YEMEN, THROUGH INSTALLING GREENHOUSES, DISTRIBUTION OF SEEDLINGS, AND TRAINING ON GREENHOUSE FARMING. THIS PROJECT IS PROVIDING LONG-TERM SOLUTIONS FOR VULNERABLE HOUSEHOLDS IN IMPROVING THEIR INCOME AND FOOD SECURITY. ALSO, THIS INTERVENTION WILL SUPPORT FOOD PRODUCTION FOR THE LOCAL COMMUNITY. IN YEMEN 66 CLASSES IN 5 SCHOOLS HAD BEEN REHABILITATED AND UPGRADED. WASH FACILITIES (13 LATRINES) HAVE BEEN UPGRADED. 4129 STUDENTS BENEFITED FROM EQUITABLE ACCESS TO SAFE, INCLUSIVE, AND EQUIPPED LEARNING SPACES IN LEBANON MAUSA FUNDED SCHOOL IN A BUS. THIS PROJECT IS AN INNOVATIVE PROJECT THAT COVERS THE GAP IN EDUCATION FOR OUT-OF-SCHOOL CHILDREN. SINCE THEY ARE DEPRIVED OF THEIR RIGHT OF GOING TO SCHOOL DUE TO ECONOMIC REASONS. THE BUS COMES TO THEM TO PROVIDE THE BASICS OF THE ARABIC LANGUAGE, ENGLISH LANGUAGE, MATH, AND SCIENCE, ALONGSIDE AN ARRAY OF INTERACTIVE ACTIVITIES WHICH INCREASE CHILDREN'S ENGAGEMENT. THIS WILL INCREASE THE CHILDREN'S CHANCES OF INTEGRATING INTO MAINSTREAM EDUCATION. IN THE USA, MAUSA PROVIDED FINANCIAL SUPPORT TO SERVE THE UNDERSERVED FEMALE POPULATION (WOMEN EMPOWERMENT) IN LESS AFFLUENT NEIGHBORHOODS IN DIFFERENT STATES TO FACILITATE THEIR COLLEGE EDUCATION. THE PROGRAM WILL BE LAUNCHED IN PHASES, WITH EACH PHASE SERVING 13 STUDENTS FROM AN UNDERSERVED COMMUNITY. THE GOAL IS TO BUILD SPECIFIC PATHWAYS THAT LEAD TO EMPLOYMENT. HEALTH CARE: MUSLIM AID USA SUPPORTED VARIOUS HEALTH, NUTRITIONAL, MEDICAL COMMODITIES, AND PHARMACEUTICALS. IN GAZA, PROVIDED PREVENTION, PROTECTION, AND RESPONSE TO COVID-19

Return Reference	Explanation
	AMONG THE MOST VULNERABLE PALESTINIAN COMMUNITY. IN SOMALIA, SUPPORTED A ONE-STOP GBV REFERRAL CENTER TO ENSURE 200 SURVIVORS HAVE ACCESS TO LIFESAVING GBV INTERVENTIONS, INCLUDING MEDICAL TREATMENT, LEGAL AID, PSYCHOSOCIAL COUNSELING, COMMUNITY AWARENESS, AND DELIVERY OF DIGNITY KITS. IN ETHIOPIA, MAUSA FUNDED A PROJECT THAT CONSISTED OF 12 HEALTH CENTERS IN ETHIOPIA, FOR THE PURPOSE OF SCREENING AND TREATING PATIENTS WITH CATARACTS. IN TOTAL 1,500 BENEFICIARIES UNDERWENT SURGERY IN 4 HOSPITALS. ALL PATIENTS RECEIVED POSTOPERATIVE TREATMENT THE FOLLOWING DAY AS WELL AS TWO TYPES OF NECESSARY EYE DROPLETS FOR THE DURATION OF ONE MONTH, AT NO COST TO THEM. ORPHAN SUPPORT: ORPHAN SPONSORSHIP IS A VITAL LIFELINE FOR MANY VULNERABLE YOUNG CHILDREN. ALL OVER THE WORLD, THERE ARE CHILDREN WHO DO NOT HAVE THE LOVING SUPPORT OF A FAMILY. CHILDREN WHOSE ONLY SHELTER IS A PIECE OF PLASTIC SHEETING OR A CARDBOARD BOX, LIVING DAY TO DAY WITH THE RISK OF ABUSE, NEGLECT, AND EXPLOITATION. MUSLIM AID USA SUPPORTERS SPONSORED 869 ORPHANS IN 2021 IN AFGHANISTAN, BANGLADESH, BOSNIA, GAMBIA, INDIA, PAKISTAN, PALESTINE, SIERRA LEONE, SOMALIA, AND SRI LANKA. OTHER PROJECTS INCLUDED SEASONAL BACK-TO- SCHOOL, HOUSE RECONSTRUCTIONS FOR ORPHANS, AND RELIGIOUS DUES LIKE EID GIFTS. WASH: MAUSA HAS VARIOUS PROJECTS TO PROVIDE ACCESS TO SAFE WATER FOR DRINKING AND OTHER PURPOSES; DEEP WATER WELLS WITH SOLAR AND/OR HAND PUMPS, THE PROJECT ALSO SECURES LABORATORY TESTING OF WATER FROM THE DRILLED WELL, TO ENSURE THAT THE WATER IS SAFE FOR DRINKING. IN 2021 MUSLIM AID USA SUPPORTED WASH PROJECTS IN DIFFERENT COUNTRIES: MEGA WATER WELLS AND WASH ASSISTANCE FOR THE ROHINGYA REFUGEES IN BANGLADESH; COMMUNITY SAFE WATER WELLS IN CAMBODIA, SCHOOL, AND COMMUNITY WATER WELL IN ETHIOPIA, PERSONAL WATER WELLS FOR POOR RURAL COMMUNITIES IN PAKISTAN AND YEMEN.
FORM 990, PAGE 6, PART VI, LINE 11B	DRAFT OF THE FORM 990 IS PRESENTED TO THE BOARD AT A BOARD MEETING.
FORM 990, PAGE 6, PART VI, LINE 12C	WHEN A POTENTIAL CONFLICT OF INTEREST IS IDENTIFIED THE BOARD WILL CONVENE A MEETING TO DETERMINE THE POTENTIAL CONFLICT OF INTEREST AND THE APPROPRIATE RESPONSE.
FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD UNDERTAKES A REVIEW OF THE COMPENSATION OF THE EXECUTIVE DIRECTOR. THIS REVIEW INCLUDES, BUT IS NOT LIMITED TO, PERFORMANCE INPUT FROM KEY STAFF MEMBERS, A REVIEW OF ANY AVAILABLE NONPROFIT COMPENSATION SURVEYS PUBLICLY AVAILABLE, REVIEW OF COMPENSATION PRACTICES AND LEVELS THROUGH CONSULTATION WITH BOARD MEMBERS OF OTHER SIMILAR NON PROFIT AGENCIES WITHIN THE COMMUNITY, AND AN ANALYSIS OF BUDGET AND PROGRAM PERFORMANCE DATE FOR THE ORGANIZATION.
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

Additional Data

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