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PUBLIC DISCLOSURE COPY

# **TAX RETURN FILING INSTRUCTIONS**

\*\* FORM 990 PUBLIC DISCLOSURE COPY \*\*

### FOR THE YEAR ENDING

DECEMBER 31, 2021

Prepared for	MUSLIM ADVOCATES P.O. BOX 34440 WASHINGTON, DC 20043
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.  THIS RETURN WAS PREPARED WITH THE BEST INFORMATION AVAILABLE AND MAY NEED TO BE AMENDED ONCE THE AUDIT IS FINALIZED.

# \*\* PUBLIC DISCLOSURE COPY \*\*

Form **991** 

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

ΑI	For the	2021 calendar year, or tax year beginning and	ending	_	
B	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres				
	Name change	Doing business as		30-02987	94
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  P.O. BOX 34440	Room/suite	E Telephone number (202)897	
_	Final return/termin-			G Gross receipts \$	7,076,742.
	ated Amend	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20043		-	
F	⊒return ⊒Applica			H(a) Is this a group re for subordinates	
_	⊥tiön pendin	SAME AS C ABOVE		H(b) Are all subordinates in	
$\overline{}$	Гах-ехе	empt status: X 501(c)(3)	or 527	1 ' '	list. See instructions
		e: WWW.MUSLIMADVOCATES.ORG	01 021	H(c) Group exemption	
		organization: X Corporation Trust Association Other ►	L Year		1 State of legal domicile: DC
		Summary			<u></u>
	1	Briefly describe the organization's mission or most significant activities: SEE	PART I	II, LINE 1.	
ű					
Governance	2	Check this box   if the organization discontinued its operations or dispose	sed of more	than 25% of its net as	ssets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	11
জ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11
es	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		5	25
Activities &		Total number of volunteers (estimate if necessary)			11
Act	7 a	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	0.
				Prior Year	Current Year
ne	1	Contributions and grants (Part VIII, line 1h)		2,093,716.	6,966,659.
Revenue	1	Program service revenue (Part VIII, line 2g)		15,000. -27,513.	90,628.
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-27,513.	10,958.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,070,413.	7,073,164.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,070,413.	7,073,104.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)  Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	I	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,758,218.	-
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)		500.	1,728.
per	10a	Total fundraising expenses (Part IX, column (D), line 25)   659,8	20.		
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		933,178.	1,545,830.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,691,896.	
	19	Revenue less expenses. Subtract line 18 from line 12		-621,483.	3,714,703.
Net Assets or Fund Balances		·	Ве	ginning of Current Year	End of Year
sets alan	20	Total assets (Part X, line 16)		2,698,918.	6,110,743.
t As	21	Total liabilities (Part X, line 26)		270,896.	301,068.
		Net assets or fund balances. Subtract line 21 from line 20		2,428,022.	5,809,675.
		Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.	
٠.		Signature of officer		I Date	
Sig		KANYA SHABAZZ, CHIEF OPERATING OFFICE	D	Duto	
Her	e	Type or print name and title	IX.		
		Print/Type preparer's name Reparer's signature	П	Date Check	PTIN
Pai	d		1	11/14/2022	
		Firm's name GELMAN, ROSENBERG & FREEDMAN	110		52-1392008
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N	*	THIII 3 LIN	
	,	BETHESDA, MD 20814-2930		Phone no. (3	01) 951-9090
Mar	v the IF	RS discuss this return with the preparer shown above? See instructions		1	X Yes No

Pai	Check if Schedule O contains a response or note to any line in this Part III
_	
1	Briefly describe the organization's mission:
	TO PROMOTE EQUALITY, LIBERTY AND JUSTICE FOR ALL, BY PROVIDING
	LEADERSHIP THROUGH LEGAL ADVOCACY, POLICY ENGAGEMENT AND CIVIC
	EDUCATION AND BY SERVING AS A LEGAL RESOURCE TO PROMOTE THE FULL AND
	MEANINGFUL PARTICIPATION OF MUSLIMS IN AMERICAN PUBLIC LIFE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X No
Ū	If "Yes," describe these changes on Schedule O.
4	
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 \$1,192,697. including grants of \$) (Revenue \$)
	LEGAL ADVOCACY - MUSLIM ADVOCATES TAKES LEGAL ACTION, INCLUDING FILING
	LAWSUITS AND AMICUS BRIEFS, TO PROTECT THE RIGHTS OF AMERICAN MUSLIMS
	AND AMERICANS OF ALL FAITHS AGAINST HATE AND DISCRIMINATION.
4b	(Code:) (Expenses \$
	PUBLIC ADVOCACY - MUSLIM ADVOCATES EDUCATES THE PUBLIC AND URGES THE
	PUBLIC, INCLUDING THE MEDIA, CORPORATIONS, AND PUBLIC OFFICIALS, TO
	REJECT ANTI-MUSLIM HATE AND TAKE ACTION AGAINST BIGOTRY AND
	DISCRIMINATION.
4c	(Code: ) (Expenses \$ 471,700 • including grants of \$ ) (Revenue \$
	POLICY ENGAGEMENT AND OUTREACH - MUSLIM ADVOCATES ENGAGES AND EDUCATES
	POLICYMAKERS ABOUT THE IMPACT OF DISCRIMINATORY LAWS AND POLICIES ON
	THE RIGHTS AND FREEDOMS OF AMERICAN MUSLIMS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
	Total program service expenses 2,215,528.
70	Form <b>990</b> (2021)
	10111000 (2021)

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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	Х	
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			21
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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		Х

132003 12-09-21

# Form 990 (2021) MUSLIM ADVOCATES 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		1.00	1		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х		
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		7.7			
04 -	Schedule J	23	Х			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete					
	Schedule K. If "No," go to line 25a	24a		X		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b				
	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				
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X		
D	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					
		25b		X		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		<del></del>		
	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		X		
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		X		
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):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		x		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X		
	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		Х		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation					
	contributions? If "Yes," complete Schedule M	30		X		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x		
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32				
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 55				
•	Part V, line 1	34		Х		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х		
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		<u> </u>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v		
07	If "Yes," complete Schedule R, Part V, line 2	36		X		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	- 57				
•		38	х			
Pai	Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance	-		_		
	Check if Schedule O contains a response or note to any line in this Part V					
			Yes	No		
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 37	_				
b	Litter the number of Forms w-2d included of fine ra. Litter -0-11 not applicable	4				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	х			
	(garrowing) withings to prize without:	LIC				

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

			Yes	No								
<b>2</b> a	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											
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X									
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			Х								
	Did the organization have unrelated business gross income of \$1,000 or more during the year?											
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O											
4a	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)?											
b	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).											
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?											
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		X								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30										
oa	any contributions that were not tax deductible as charitable contributions?	6a		Х								
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ou										
	were not tax deductible?	6b										
7	Organizations that may receive deductible contributions under section 170(c).	- OD										
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		Х								
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b										
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required											
	to file Form 8282?	7c		X								
d	If "Yes," indicate the number of Forms 8282 filed during the year											
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х								
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? N/A	8										
9	Sponsoring organizations maintaining donor advised funds.	_										
а	Did the sponsoring organization make any taxable distributions under section 4966?  N/A  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  N/A	9a										
	, , , , , , , , , , , , , , , , , , , ,	9b										
10	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a											
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b											
	Section 501(c)(12) organizations. Enter:											
	Gross income from members or shareholders N/A 11a											
	Gross income from other sources. (Do not net amounts due or paid to other sources against											
	amounts due or received from them.)											
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a										
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year											
13	Section 501(c)(29) qualified nonprofit health insurance issuers.											
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a										
	Note: See the instructions for additional information the organization must report on Schedule O.											
b	Enter the amount of reserves the organization is required to maintain by the states in which the											
	organization is licensed to issue qualified health plans											
	Enter the amount of reserves on hand			v								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>								
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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	45		Х								
	excess parachute payment(s) during the year?  If "Ves " see the instructions and file Form 4720. Schedule N.	15		- 41								
16	If "Yes," see the instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х								
.0	If "Yes," complete Form 4720, Schedule O.	10										
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?  N/A	17										
	If "Yes." complete Form 6069.											

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

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion 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 on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1										
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		Х							
3											
	of officers, directors, trustees, or key employees to a management company or other person?										
4											
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		X							
7a											
	more members of the governing body?	7a		X							
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		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b		Х							
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 on Schedule O	9		Х							
Sec	tion 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		X							
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	X								
11a	<b>1a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
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	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	on Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
b	Other officers or key employees of the organization	15b		X							
	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		X							
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									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only	) availa	able							
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finaı	ncial								
	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										
	ANNETTE J. COOK - (510)350-2000										
	510 3RD STREET, SUITE 200, OAKLAND, CA 94607										

132006 12-09-21

Form 990 (2021) MUSLIM ADVOCATES 30-0298794 Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and title	(B) Average			Pos	C) ition	1		<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week	(do not check more than one box, unless person is both an officer and a director/trustee)					h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) KANYA SHABAZZ CHIEF OPERATING OFFICER	50.00					x		150,609.	0.	34,404
(2) FARHANA KHERA	50.00					<del> </del>				
PRES. & EXECUTIVE DIR. (UNTIL 7/21)	F0 00			Х				135,354.	0.	42,043
(3) SCOTT SIMPSON PUBLIC ADVOCACY DIRECTOR	50.00					х		100,701.	0.	29,701
(4) RASHID ALVI BOARD MEMBER AND CHAIR	5.00	X		x				0.	0.	0
(5) SHAHZAD MALIK SECRETARY	5.00	х		х				0.	0.	0
(6) ASTRID VERMEER TREASURER	5.00	x		х				0.	0.	0
(7) FAIYAZ HUSSAIN BOARD MEMBER	5.00	x						0.	0.	0
(8) KAMEELAH MU'MIN RASHAD BOARD MEMBER	5.00	X						0.	0.	0
(9) MOHAMED YUSUF M. MOHAMED BOARD MEMBER	5.00	X						0.	0.	0
(10) MOHAMMAD FADEL BOARD MEMBER	5.00	X						0.	0.	0
(11) NAHID ALINIAZEE	5.00									
BOARD MEMBER (12) NAIEL IQBAL	5.00	Х						0.	0.	0
BOARD MEMBER		Х						0.	0.	0
(13) OSMAN HUSSEIN BOARD MEMBER	5.00	x						0.	0.	0
(14) SAEMA SOMALYA	5.00	^						0.	0.	0
BOARD MEMBER		Х						0.	0.	0
		_								

Fai	Section A. Officers, Directors, Trus	stees, Key Em	ploy	<u>rees</u>	, an	a H	<u>igne</u>	st C	compensated Employe	es (continuea)				
	(A)	(B)	(C)					(D) (E)				(F)		
	Name and title	Average	Posit (do not check m					one	Reportable	Reportable	;	Es	stimate	ed
		hours per week	box, unless person is both an officer and a director/trustee)					th an	compensation	compensation		ar	nount	of
		(list any	$\vdash$					T	from the	from related organization	- 1	com	other pensa	tion
		hours for	direct				p		organization	(W-2/1099-MIS			om th	
		related	tee or	ıstee			ensate		(W-2/1099-MISC/	` 1099-NEC)			anizat	
		organizations	al trus	nal tri		oyee	omb		1099-NEC)				d relat	
		below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	mer				orga	anizati	ons
		11110)	Ĕ	ŝ	₽	, Ke	ĔĔ.	요						
							-							
						_								
			1											
1b	Subtotal							<b></b>	386,664.		0.	10	6,1	48.
С	Total from continuation sheets to Part V							<b></b>	0.		0.			0.
d	Total (add lines 1b and 1c)								386,664.		0.	10	6,1	48.
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bov	e) wl	ho re	eceived more than \$100	0,000 of reportab	le			
	compensation from the organization													
_													Yes	No
3	Did the organization list any <b>former</b> officer,	•		•	•	•		_		•				v
	line 1a? If "Yes," complete Schedule J for s											3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	•							•	the organization		4	Х	
5	Did any person listed on line 1a receive or									idual for services		4	21	
3	rendered to the organization? If "Yes," com							Ciat	ed organization or indiv	idual for services	'	5		Х
Sec	tion B. Independent Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-		,								
1	Complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of cor	npens	ation ·	from	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	/ithir	n the organization's tax	year.				
	(A)								(B)		_	(0		
<del></del>	Name and business		<u> </u>	7.77	.7	<u> </u>	יות	_	Description of s	services	C	ompe	nsatio	n
1 -1 1 1	PTA WESSIER PLACE 1900	- STREET	I .	INIV	NΙ	'	1 H.							

the organization. Hepott compensation for the calcinating with or with	in the organization of tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
GUPTA WESSLER PLLC, 1900 L STREET NW, STE.		
312, WASHINGTON, DC 20036	LITIGATION SERVICES	150,000.
WEST END STRATEGY TEAM, 2401 PENNSYLVANIA	COMMUNICATIONS	
AVE., NW, SUITE 410, WASHINGTON, DC 22037	CONSULTING	126,000.
LAW OFFICE OF NAOMI TSU LLC	INTERIM LEGAL	
1990 7TH STREET, HOOD RIVER, OR 97031	DIRECTOR	112,445.

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization > 3

		Check if Schedule O contains a response of	or note to any lir	ne in this Part VIII			
		-	,	(A)	(B)	(C)	_ (D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
σω							000110110 0 12 0 1 1
		Federated campaigns 1a					
윤리		Membership dues 1b					
Łŝ,	C	Fundraising events1c					
후	(	Related organizations 1d					
ï,	•	Government grants (contributions)	333,233.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and					
돌림			533,426.				
三 三 三		Noncash contributions included in lines 1a-1f	68,717.				
징필	_	Total. Add lines 1a-1f		6,966,659.			
<u> </u>			Business Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
.	•	LEGAL AWARDS	900099	90,628.	90,628.		
<u>ş</u>			700077	70,020.	70,020.		
ne P	k	'					
n S	(	;					
ĕ ā	(	<u> </u>					
Program Service Revenue	•	<u> </u>					
ه ا	f	All other program service revenue					
	ç	Total. Add lines 2a-2f		90,628.			
	3	Investment income (including dividends, interes					
		other similar amounts)		14,536.			14,536.
	4	Income from investment of tax-exempt bond pr		-			-
	5	Royalties					
	Ŭ	(i) Real	(ii) Personal				
	6 .		(.,,				
		Less: rental expenses 6b					
		Rental income or (loss)					
		Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
_	k	Less: cost or other basis					
ne		and sales expenses <b>7b</b>	3,578.				
Ver	(	Gain or (loss) 7c	-3,578.				
ther Revenue	(	Net gain or (loss)		-3,578.			-3,578.
ē		Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
	ŀ	Less: direct expenses 8b					
		Net income or (loss) from fundraising events	<b></b>				
		Gross income from gaming activities. See	·····				
	9 6						
		Part IV, line 19 9a					
		D Less: direct expenses 9b					
		Net income or (loss) from gaming activities	<b></b>				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	k	Less: cost of goods sold10b					
		Net income or (loss) from sales of inventory	<b></b>				
s		L. C.	Business Code				
Miscellaneous Revenue		MISCELLANEOUS	900099	4,164.			4,164.
ane in in	Ł	REIMBURSEMENTS	900099	755.			755.
<u>18</u>		All other revenue					
≥		• Total. Add lines 11a-11d	<b>&gt;</b>	4,919.			
	12	Total revenue. See instructions		7,073,164.	90,628.	0.	15,877.
				, , , , , , , , , , , ,	,		

### 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).

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			, , ,	X
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	<b>(D)</b> Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	177,396.	72,866.	75,764.	28,766
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	1,304,045.	918,910.	37,395.	347,740
8	Pension plan accruals and contributions (include				<u> </u>
	section 401(k) and 403(b) employer contributions)	69,052.	46,252.	5,261.	17,539
9	Other employee benefits	137,779.	94,412.	7,617.	35,750
10	Payroll taxes	122,631.	82,410.	9,291.	30,930
11	Fees for services (nonemployees):				
а	Management				
b	Legal	227,608.	225,508.	2,100.	
С	Accounting	101,063.		101,063.	
d	Lobbying	1 - 0			
е	Professional fundraising services. See Part IV, line 17	1,728.			1,728.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	000 500	E44 400	165 000	454 006
	column (A), amount, list line 11g expenses on Sch 0.)	830,723.	511,489.	167,238.	151,996
12	Advertising and promotion	19,460.	19,447.	3.	10.
13	Office expenses	35,628.	16,560.	2,459.	16,609
14	Information technology	81,538.	63,673.	4,948.	12,917
15	Royalties	0.040	1 000	011	TO 4
16	Occupancy	2,842.	1,907.	211.	724
17	Travel	2,638.	2,006.	136.	496.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0 515	0 011	0.0	014
19	Conferences, conventions, and meetings	2,515.	2,211.	90.	214
20	Interest	461.		461.	
21	Payments to affiliates	12 500	0 150	020	2 200
22	Depreciation, depletion, and amortization	12,598. 19,816.	8,452. 2,690.	938.	3,208, 1,021,
23	Insurance	19,010.	4,090.	10,103.	1,041
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)  RECRUITMENT	89,070.	78,322.	6,833.	3,915
-	DUES AND SUBSCRIPTIONS	75,451.	67,155.	4,751.	3,915
b	BAD DEBT	40,000.	07,133.	40,000.	3,343
C	FILING FEES	3,672.	875.	365.	2,432.
d		747.	383.	84.	280
	· — — •	3,358,461.	2,215,528.	483,113.	659,820
25	Total functional expenses. Add lines 1 through 24e	3,330,401.	4,413,340.	±03,113•	039,040
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)				
	12-09-21				Form <b>990</b> (2021

Form 990 (2021)
Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,081,570.	1	929,245.
	2	Savings and temporary cash investments			1,217,824.	2	5,085,096.
	3	Pledges and grants receivable, net			328,430.	3	31,825.
	4	Accounts receivable, net			32,847.	4	2,929.
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ıbstantial	contributor, or 35%			
		controlled entity or family member of any of t	hese per	sons		5	
	6	Loans and other receivables from other disqu	ualified p	ersons (as defined			
		under section 4958(f)(1)), and persons descri	ibed in se	ection 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			16,867.	9	56,444.
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	48,280.			
	b	Less: accumulated depreciation	10b	43,076.	21,380.	10c	5,204.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, lir	ne 11			12	
	13	Investments - program-related. See Part IV, li	ne 11 🗼			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must e	equal line	33)	2,698,918.	16	6,110,743.
	17	Accounts payable and accrued expenses			262,511.	17	301,068.
	18	Grants payable			2 225	18	
	19	Deferred revenue			8,385.	19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ies	22	Loans and other payables to any current or f					
Ħ		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t		_		22	
_	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li	nes 17-2	1). Complete Part X			
		of Schedule D			270,896.	25	301,068.
	26	Total liabilities. Add lines 17 through 25			270,090.	26	301,000.
es		Organizations that follow FASB ASC 958, o	спеск пе	re 🕨 🔼			
ğ	07	and complete lines 27, 28, 32, and 33.			1,846,025.	07	5,637,108.
3ale	27	Net assets without donor restrictions			581,997.	27 28	172,567.
βE	28	Net assets with donor restrictions			301,337.	28	172,507.
Ē		Organizations that do not follow FASB ASC	C 958, CI	ieck nere			
ō		and complete lines 29 through 33.	-1-			00	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun				29 30	
Ass	30	Paid-in or capital surplus, or land, building, or					
et/	31	Retained earnings, endowment, accumulated			2,428,022.	31 32	5,809,675.
Z	32	Total liabilities and not assets (fund balances		l l	2,698,918.	33	6,110,743.
	33	Total liabilities and net assets/fund balances			4,000,910.	აა	0,110,743.

Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,07		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,35	•	
3	Revenue less expenses. Subtract line 2 from line 1	3	3,71		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,42		
5	Net unrealized gains (losses) on investments	5		1	83.
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 on Schedule O)	9	-33	3,2	33.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	5,80	9,6	75.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			Form	990	(2021)

#### **SCHEDULE A**

(Form 990)

Total

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

Open to Public Inspection

**Employer identification number** Name of the organization MUSLIM ADVOCATES 30-0298794 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 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. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

### 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 fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	71		,			
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	( )	( )	` '	( )	( )	
	membership fees received. (Do not						
	include any "unusual grants.")	5,764,110.	2,472,379.	1,786,726.	2,093,716.	6,966,659.	19,083,590.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5,764,110.	2,472,379.	1,786,726.	2,093,716.	6,966,659.	19,083,590.
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)						3,780,688.
6	Public support. Subtract line 5 from line 4.						15,302,902.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	5,764,110.	2,472,379.	1,786,726.	2,093,716.	6,966,659.	19,083,590.
8	Gross income from interest,						_
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,638.	6,239.	6,192.	3,035.	14,536.	31,640.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	71,035.					71,035.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	8,113.	34,992.	14,196.	5,612.	4,919.	67,832.
11	<b>Total support.</b> Add lines 7 through 10						19,254,097.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	491,897.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	501(c)(3)	_
	organization, check this box and stop	here					<b>&gt;</b> □
Sec	ction C. Computation of Publ						
14	Public support percentage for 2021 (I	ine 6, column (f), d	ivided by line 11, o	olumn (f))		14	79.48 %
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	70.98 %
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2020. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			▶□
17a	10% -facts-and-circumstances tes	<b>t - 2021.</b> If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop here	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organization	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances tes	<b>t - 2020.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, che	ck this box and <b>sto</b>	op here. Explain in	Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organ	ization	▶□
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	ı, 16b, 17a, or 17b	, check this box a	nd see instructions	s ▶□
						0	Form 000\ 2021

Schedule A (Form 990) 2021

# 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.)

Se	ction A. Public Support	, 1	,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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	1					
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support				_	_	
Cale	endar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
11							
	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
							<u></u> ▶∟⊥
	ction C. Computation of Publ					11	
	Public support percentage for 2021 (I					15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Inves					Land	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
198	a 33 1/3% support tests - 2021. If the						I / IS not
	more than 33 1/3%, check this box a						<b>P</b>
k	33 1/3% support tests - 2020. If the	•			•	•	
20	line 18 is not more than 33 1/3%, che						

# Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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.
- 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).
- **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.
- **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.
- 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.
- **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.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).
- 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).
- 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.
- **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.**
- 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.
- 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.
  - **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.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	30		
	9с		
	10a		
	10b		
di ila		~ 000	0004

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office			
	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 suppor organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<b>1</b>		
	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		
	tion 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		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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		
	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 on 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		
Sect	tion 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 yea(see instruc	tions).		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (	see instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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		
	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		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	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		
	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		L

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ing Orga	nizations	3			
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust or	n Nov. 20, 1970 (explain in I	Part VI). See instructions.			
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion 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					
Sect	ion 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):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	<b>1</b> b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in <b>Part VI</b> ):						
_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					
Sect	ion C - Distributable Amount			Current Year			
_1_	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 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-function	ally integra	ted Type III supporting org	anization (see			
	instructions).						

Schedule A (Form 990) 2021

Sche	dule A (Form 990) 2021 MUSLIM ADVOCA			3	0-0298794 Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ıed)	
Sect	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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 t	he organization is responsive	e		
	(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	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
<u>i</u> _	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				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				

Schedule A (Form 990) 2021

any. Subtract lines 3g and 4a from line 2. For result greater

than zero, explain in Part VI. See instructions.
Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2022. Add lines 3j

Part VI. See instructions.

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

# **Schedule B** (Form 990)

**Schedule of Contributors** 

▶ Attach to Form 990 or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Schedule B (Form 990) (2021)

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

MUSLIM ADVOCATES 30-0298794								
Organization type (check	Organization type (check one):							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
General Rule  For an organization property) from an	e)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule of the control of	g \$5,000 or more (in money or						
Special Rules								
sections 509(a)(1) contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Z, line 1. Complete Parts I and II.	nd that received from any one						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.								
year, contribution is checked, enter purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must nswer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify nat it doesn't meet the filing requirements of Schedule B (Form 990).								

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization

MUSLIM ADVOCATES

30-0298794

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$5,006,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		s150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$333,233.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

Name of organization Employer identification number 30-0298794

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	f additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - -	
		_   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		- - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		-	
		_   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		-	
		- - - - -	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		- -	
		-   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	-	-	
		- - -	
l		_   \$	

Schedule B (Form 990) (2021) Name of organization **Employer identification number** 30-0298794 MUSLIM ADVOCATES Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE C** (Form 990)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
		ADVOCATES			30-0298794
Pa	art I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures		▶\$	
Pa	art I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un-	der section 4955	▶\$	
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 4955	▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a	a Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c),	<u> </u>	<del></del>
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt func	tion activities > \$	
2	Enter the amount of the filing organ		•		
	exempt function activities				
3	Total exempt function expenditures		· · · · · · · · · · · · · · · · · · ·		
	line 17b	4400 DOL 6 H1		<b>&gt;</b> \$	
4	5 5				
5	Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC). If	ation listed, enter the amount paromptly and directly delivered to	id from the filing organize a separate political org	zation's funds. Also enter th anization, such as a separa	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2021

LHA

132041 11-03-21

75,333.

Schedule C (Form 990) 2021	MUSLIM ADVO				298794 Page 2		
Part II-A   Complete if the or	ganization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	lection under		
section 501(h)).							
A Check ► ☐ if the filing organize	ation belongs to an affi	liated group (and list ir	n Part IV each affiliated	group member's nam	ne, address, EIN,		
expenses, and sha	are of excess lobbying	expenditures).					
B Check ► ☐ if the filing organiz	ation checked box A a	nd "limited control" pro	ovisions apply.				
	its on Lobbying Expe ditures" means amou		)	(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to inf	luence public opinion (	grassroots lobbying)		0.			
<b>b</b> Total lobbying expenditures to inf	•			0.			
c Total lobbying expenditures (add	~	• • • • • • • • • • • • • • • • • • • •		0.			
<b>d</b> Other exempt purpose expenditu				3,358,461.			
e Total exempt purpose expenditur				3,358,461.			
f Lobbying nontaxable amount. En	· · · · · · · · · · · · · · · · · · ·			317,923.			
If the amount on line 1e, column (a)		bying nontaxable am					
Not over \$500,000	20% of	the amount on line 1e.					
Over \$500,000 but not over \$1,00	00,000 \$100,00	00 plus 15% of the exc					
Over \$1,000,000 but not over \$1,	500,000 \$175,00	00 plus 10% of the exc					
Over \$1,500,000 but not over \$17	7,000,000 \$225,00	00 plus 5% of the exce					
Over \$17,000,000	\$1,000,	000.					
g Grassroots nontaxable amount (e	nter 25% of line 1f)			79,481.			
h Subtract line 1g from line 1a. If ze	ro or less, enter -0						
i Subtract line 1f from line 1c. If zer	o or less, enter -0			0.			
j If there is an amount other than z	ero on either line 1h or	line 1i, did the organiza	ation file Form 4720	_			
reporting section 4911 tax for this	year?				Yes No		
	4-Year Ave	eraging Period Under	Section 501(h)				
(Some organizations		01(h) election do not ate instructions for li	•	of the five columns b	elow.		
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	(d) 2021	(e) Total		
2a Lobbying nontaxable amount	301,332.	312,353.	284,595.	317,923.	1,216,203.		
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,824,305.		
a Total labbuing avangitures		1 800.	7 892.		9 692.		

78,088.

71,149.

3,852.

3,852. Schedule C (Form 990) 2021

304,051.

456,077.

79,481.

d Grassroots nontaxable amount e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

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

For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
а	Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5) or se	ection		
· ui	501(c)(6).	311 00 1(0)(	0), 01 00	otion		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
_3_	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			III-A, lin	e 3, is	
1	Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		1			
2	expenses for which the section 527(f) tax was paid).	Jai				
9	• • • • • • • • • • • • • • • • • • • •		2a			
	Current year Carryover from last year					
C						
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc					
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
	t IV Supplemental Information		-			
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II-	A lines 1 :	and 2 (See		
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.	,,	.,	aa = (000		
	,,, <del></del>					

#### **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

Inspection

Name of the organization

MUSLIM ADVOCATES

**Employer identification number** 30-0298794

Par			r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) zenor adviced ianiae	(a) i and and only accounts
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		funds
3	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
Ü	for charitable purposes and not for the benefit of the donor		
Par		ganization answered "Yes" on Form 990. Part	
1	Purpose(s) of conservation easements held by the organizat	-	,
·	Preservation of land for public use (for example, recreations)		istorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic st		
	Number of conservation easements included in (c) acquired		
	listed in the National Register		
3	Number of conservation easements modified, transferred, re		
	year ►		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic 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 conserv	vation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservatior	n easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) abo	ve 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 conservat	ion easements in its revenue and expense sta	atement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statement	s that describes the
	organization's accounting for conservation easements.		
Par			er Similar Assets.
	Complete if the organization answered "Yes" on Forn		
1a	If the organization elected, as permitted under FASB ASC 99		
	of art, historical treasures, or other similar assets held for pu		erance of public
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 99		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furthera	ance 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 tre	- · · · · · · · · · · · · · · · · · · ·	ain, provide
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	is for Form 990.	Schedule D (Form 990) 2021

Pai	t III Organizations Maintaining Co	ollections of A	rt, Hist	orical Tr	reasures, c	or Othe	r Simil	ar Asse	t <b>s</b> (continu	ued)
3	Using the organization's acquisition, accession	n, and other record	ds, check	any of the	following that	t make s	ignificant	use of its	5	
	collection items (check all that apply):									
а	Public exhibition	c	ι 🗌 ι	oan or exc	hange progra	ım				
b	Scholarly research	е	. 🗌 (	Other						
С	Preservation for future generations									
4	Provide a description of the organization's col	lections and explai	n how th	ey further t	the organization	on's exer	npt purpo	ose in Pa	t XIII.	
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be mai	intained as part of	the organ	nization's c	ollection?				Yes	☐ No
Pai	t IV Escrow and Custodial Arrang								line 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia	n or other intermed	diary for	contribution	ns or other as	sets not	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a									
									Amount	
С	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
	Ending balance									
	Did the organization include an amount on Fo								Yes	□ No
	If "Yes," explain the arrangement in Part XIII.						•			
Pai										
	·	(a) Current year		rior year	(c) Two year			ears back	(e) Four	ears back
1a	Beginning of year balance	-		-						
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
·	and programs									
f	Administrative expenses									
	End of year balance									
g 2	Provide the estimated percentage of the curre	ont year and balance	L (lino 1	a column (	a)) hold as:					
2		erit year erid balarit		y, coluitii (	a)) Helu as.					
	Board designated or quasi-endowment  Permanent endowment	%	_%							
	· · · · · · · · · · · · · · · · · · ·									
C		-								
20	The percentages on lines 2a, 2b, and 2c should be there and suggest funds not in the passes	•	ation tha	+ ara bald a	and administs	rad far th	aa araani	ration		
Sa	Are there endowment funds not in the posses	ision of the organiz	ation tha	it are neid a	and administe	rea for tr	ie organiz	zation	Г	Yes No
	by:									163 140
	(i) Unrelated organizations									
	(ii) Related organizations									
	If "Yes" on line 3a(ii), are the related organizat								3b	
4 Dai	t VI Land, Buildings, and Equipme		owment i	unas.						
Га	Complete if the organization answered		) Dort IV	/ line 11e 9	Soo Form 000	Dort V	lino 10			
		1			1				(-I) D1-	
	Description of property	(a) Cost or o			t or other	٠,	cumulate	ea	(d) Book	value
	Land	basis (investr	nent)	Dasis	(other)	uep	reciation			
	Land									
	Buildings									
	Leasehold improvements				7,518.		7,0	<del>77  </del>		441.
	Equipment				0,762.				Л	,763.
	Other		V 1 -				35,9	22.	<u>4</u>	201

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 MUSLIM ADVOC	CATES	30-0298794	<u>+ Paç</u>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o		-	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year marke	t value
I) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year marke	t value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
	on Form 000 Port IV line	a 11d Coo Form 000 Port V line 15	
Complete if the organization answered "Yes" o	Description	(b) Book	volue
	<i>Description</i>	(b) 600k	value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line		
(a) Description of liability		(b) Book	value
(1) Federal income taxes			
(2)			
(3)			
(4)			

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2021

Sched	dule D (Form 990) 2021 MUSLIM ADVOCATES			30-	0298794 <sub>Page</sub> 4
Par	<u> </u>	nents Wi			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	9,254,497
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	183.		
	Donated services and use of facilities		2,514,383.		
	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
	Add lines 2a through 2d			2e	2,514,566
3	Subtract line 2e from line 1			3	6,739,931
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	333,233.		
	Add lines <b>4a</b> and <b>4b</b>			4c	333,233
	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5	7,073,164
Par	XII Reconciliation of Expenses per Audited Financial Stater	ments W	ith Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total expenses and losses per audited financial statements			1	5,872,844
	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	2,514,383.		
	Prior year adjustments				
	Other losses				
	Other (Describe in Part XIII.)				
	Add lines <b>2a</b> through <b>2d</b>			2e	2,514,383
3	Subtract line <b>2e</b> from line <b>1</b>			3	3,358,461
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)				
	Add lines <b>4a</b> and <b>4b</b>			4c	0
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18.)			5	3,358,461
	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac			4; Part	X, line 2; Part XI,
PAR	T X, LINE 2:				
FOR	THE YEAR ENDED DECEMBER 31, 2021, THE O	RGANIZ	ATION HAS D	OCUI	MENTED ITS
CON	SIDERATION OF FASB ASC 740-10, INCOME TA	XES, 1	HAT PROVIDE	S G	UIDANCE FOR
REP	ORTING UNCERTAINTY IN INCOME TAXES AND H	AS DET	ERMINED THA	T N	O MATERIAL
UNC	ERTAIN TAX POSITIONS QUALIFY FOR EITHER	RECOGN	IITION OR DI	SCL	OSURE IN
THE	FINANCIAL STATEMENTS.				

#### PART XI, LINE 4B - OTHER ADJUSTMENTS:

PPP LOAN THAT WAS REPORTED AS A CONDITIONAL GRANT ON THE

333,233.

PRIOR YEAR FINANCIAL STATEMENTS AND RECOGNIZED ON THE 2021 FORM

990 IN THE YEAR IT WAS FORGIVEN.

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 MUSLIM ADVOCATES	30-0298794 Page 5
Schedule D (Form 990) 2021 MUSLIM ADVOCATES  Part XIII Supplemental Information (continued)	

#### **SCHEDULE J** (Form 990)

**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.

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

MUSLIM ADVOCATES

Part I Questions Regarding Compensation

**Employer identification number** 30-0298794

	·		Yes	No
<b>1</b> a	Check the appropriate 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 indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as 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, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the 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.			
	X Compensation committee			
	Independent compensation consultant  X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 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:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	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:			
	The organization?	6a		Х
b	Any related organization?	6b		Х
	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 on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued 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		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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Schedule J (Form 990) 2021

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

MUSLIM ADVOCATES

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 aren't 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.

	(B) Breakdown of W	V-2 and/or 1099-MISo compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) KANYA SHABAZZ	(i)	150,609.	0.	0.	20,652.	13,752.		0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) FARHANA KHERA	(i)	135,354.	0.	0.	35,475.	6,568.	177,397.	0.
PRES. & EXECUTIVE DIR. (UNTIL 7/21)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public . Inspection

Department of the Treasury Internal Revenue Service

► 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 instructions and the latest information. Name of the organization

MUSLIM ADVOCATES

Employer identification number 30-0298794

Pai	rt I   Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin		s
4	Art Morto of ort		items contributed	Tomin 330, Fait viii, line 19				
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	X	7	68,717.	TODAY 7			
9	Securities - Publicly traded	Λ	/	00,717.	L M A			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
44	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
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 organiz		-				_	
	for which the organization completed Form 828	33, Part V, D	Donee Acknowledg	ement <b>29</b>			0	
							Yes	No
30a	During the year, did the organization receive by	contribution	on any property rep	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date	of the initia	al contribution, and	I which isn't required to be t	used for			
	exempt purposes for the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review	of any nonstandard contrib	utions?	31		X
32a	Does the organization hire or use third parties of	or related or	rganizations to soli	cit, process, or sell noncash	ı			
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II							

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Schedule M (Form 990) 2021

Part		is report	emental ting in Part t for any ad	I, colur	mn (b),	the number	e the info er of cont	rmation required ributions, the nur	by Part I, lines mber of items re	30b, 32b, and eceived, or a co	33, and whether the organization ombination of both. Also complete	
SCHEDULE M, PART I, COLUMN (B):												
THE	NUN	<b>IBER</b>	REPOR	TED	IN	COLUM	IN (B	) REPRESE	NTS THE	NUMBER	OF	
CON'	TRIE	BUTIC	ONS RE	CEI	VED.	•						
	11-17-0										Schedule M (Form 990)	

#### SCHEDULE O (Form 990)

Department of the Treasury

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 Form 990-EZ.

So to www.irs.gov/Form990 for the latest information.

2021
Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** 30-0298794 MUSLIM ADVOCATES FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: MOBILIZING VOLUNTEER ATTORNEYS LOBBYING FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. FORM 990, PART VI, SECTION B, LINE 11B: BEFORE FILING WITH THE IRS, FORM 990 WILL BE REVIEWED BY THE PRESIDENT/EXEC DIRECTOR, TREASURER, FINANCE COMMITTEE CHAIR, BOARD CHAIR, AND NONPROFIT SUITE (TRANSACTIONAL/FINANCIAL SERVICES FIRM), AND DISTRIBUTED MEMBER OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD CHAIR SEEKS COMPLETED CONFLICT OF INTEREST DECLARATIONS FROM THE BOARD MEMBERS AND OFFICERS ON AN ANNUAL BASIS. AN INTERESTED PERSON

THE BOARD CHAIR SEEKS COMPLETED CONFLICT OF INTEREST DECLARATIONS FROM THE BOARD MEMBERS AND OFFICERS ON AN ANNUAL BASIS. AN INTERESTED PERSON DISCLOSES THE EXISTENCE OF THE CONFLICT AND IS GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS IN CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE CONFLICT AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE LEAVES THE GOVERNING BOARD OR COMMITTEE MEETING, WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page 2

Name of the organization **Employer identification number** MUSLIM ADVOCATES 30-0298794 FORM 990, PART VI, SECTION B, LINE 15A: INDEPENDENT MEMBERS OF THE FINANCE COMMITTEE AND THE BOARD OF DIRECTORS REVIEW THE EXECUTIVE DIRECTOR'S COMPENSATION AND PERFORMANCE ANNUALLY DURING THE BUDGETING PROCESS. THE FINANCE COMMITTEE RECOMMENDS EXECUTIVE COMPENSATION BASED ON PERFORMANCE, AVAILABLE RESOURCES, AND COMPARABILITY DATA FROM SIMILARLY SITUATED LEGAL EDUCATION AND ADVOCACY ORGANIZATIONS. THE BOARD OF DIRECTORS DISCUSSES THE FINANCE COMMITTEE'S RECOMMENDATION AND VOTES TO APPROVE (OR NOT). DELIBERATIONS AND DECISIONS ARE DOCUMENTED CONTEMPORANEOUSLY IN MEETING MINUTES. THE LAST COMPENSATION REVIEW WAS HELD IN 2021. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT VA,WV,WI FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. AUDITED FINANCIAL STATEMENTS AND THE FORM 990 ARE ALSO ACCESSIBLE ON THE MUSLIM ADVOCATES WEBSITE. FORM 990, PART IX, LINE 11G, OTHER FEES: **COMMUNICATIONS:** PROGRAM SERVICE EXPENSES 24,013. MANAGEMENT AND GENERAL EXPENSES 7,851. FUNDRAISING EXPENSES 7,136. TOTAL EXPENSES 39,000.

ORGANIZATION/HR:

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page **2** 

Name of the organization  MUSLIM ADVOCATES	Employer identification number 30-0298794
PROGRAM SERVICE EXPENSES	46,832.
MANAGEMENT AND GENERAL EXPENSES	15,312.
FUNDRAISING EXPENSES	13,917.
TOTAL EXPENSES	76,061.
OTHER PROFESSIONAL SERVICES:	
PROGRAM SERVICE EXPENSES	440,644.
MANAGEMENT AND GENERAL EXPENSES	144,075.
FUNDRAISING EXPENSES	130,943.
TOTAL EXPENSES	715,662.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	830,723.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PPP LOAN RECOGNIZED AS A CONDITIONAL GRANT ON THE 2020	-333,233.
FINANCIAL STATEMENTS AND RECOGNIZED ON THE 2021 FORM 990	
IN THE YEAR IT WAS FORGIVEN.	
TOTAL TO FORM 990, PART XI, LINE 9	-333,233.

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