

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2013

Open to Public Inspection

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.
 Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning 01-01-2013, 2013, and ending 12-31-2013

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CAIR-FOUNDATIONINC Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 453 NEW JERSEY AVE SE City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20003	D Employer identification number 77-0646756 E Telephone number (202) 488-8787 G Gross receipts \$ 2,385,052
F Name and address of principal officer NEHAD A HAMMAD 453 NEW JERSEY AVE SE WASHINGTON, DC 20003		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW CAIR COM		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 2005 M State of legal domicile DC

Part I Summary

1	Briefly describe the organization's mission or most significant activities TO ENHANCE UNDERSTANDING OF ISLAM, ENCOURAGE DIALOGUE, PROTECT CIVIL LIBERTIES, EMPOWER AMERICAN MUSLIMS, AND BUILD COALITIONS THAT PROMOTE JUSTICE				
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets				
3	Number of voting members of the governing body (Part VI, line 1a)	3		8	
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		8	
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5		23	
6	Total number of volunteers (estimate if necessary)	6		0	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		0	
7b	Net unrelated business taxable income from Form 990-T, line 34	7b		0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year		Current Year	
	9 Program service revenue (Part VIII, line 2g)	1,581,411		2,201,843	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0		0	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,567		3,448	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	233,084		39,732	
		1,824,062		2,245,023	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0		0	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0		0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,210,378		1,584,426	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0		0	
	b Total fundraising expenses (Part IX, column (D), line 25) <u>208,436</u>				
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	821,063		1,756,762	
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,031,441		3,341,188		
19 Revenue less expenses Subtract line 18 from line 12	-207,379		-1,096,165		
Net Assets or Fund Balances		Beginning of Current Year		End of Year	
	20 Total assets (Part X, line 16)	3,164,555		2,165,734	
	21 Total liabilities (Part X, line 26)	176,752		112,538	
22 Net assets or fund balances Subtract line 21 from line 20	2,987,803		2,053,196		

Part II Signature Block

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

Sign Here	*****	Signature of officer
		NIHAD AWAD EXECUTIVE DIRECTOR
		Type or print name and title
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature
	G F JOEY MUSMAR CPA	
	Firm's name MILLER MUSMAR PC	
	Firm's address 12353 SUNRISE VALLEY DR STE A	
	RESTON, VA 20191	

May the IRS discuss this return with the preparer shown above? (see instructions)

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) OMAR ZAKI CHAIRMAN/PRESIDENT	1 00	X						0	0	0
(2) SARWAT HUSAIN VICE CHARMAN/DIRECTOR	1 00	X						0	0	0
(3) AHMED SHEHAB TREASURER	1 00	X						0	0	0
(4) DR JAMES JONES SECRETARY	1 00	X						0	0	0
(5) MASOUD NASSIMI BOARD MEMBER	1 00	X						0	0	0
(6) ROULA ALLOUCH BOARD MEMBER	1 00	X						0	0	0
(7) DR ESAM OMEISH BOARD MEMBER	1 00	X						0	0	0
(8) NEHAD A HAMMAD EXECUTIVE DIRECTOR	40 00 1 00			X				189,059	0	22,897
(9) ASRA RASHEED CONTROLER	40 00			X				118,988	0	1,826
(10) CARY D HOOPER DIRECTOR OF COMMUNICATONS	40 00					X		134,709	0	16,508

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NEHAD A HAMMAD EXECUTIVE DIRECTOR	(i)	189,059	0	0	5,816	17,081	211,956	0
	(ii)	0	0	0	0	0	0	0
(2) CARY D HOOPER DIRECTOR OF COMMUNICATONS	(i)	134,709	0	0	3,964	12,544	151,217	0
	(ii)	0	0	0	0	0	0	0