Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 **2019**

Inspection

Open to Public

Α	Fo	r the	2019 calendar y	year, or tax year begin	ining		, 2019,	and end	ing		, 20
В	Che	ck if a	pplicable:	C Name of organizationNa	tional I	ranian American (Council			D Emplo	yer identification number
	Add	lress c	hange	Doing business as							73-1626026
$\overline{\sqcap}$	Nan	ne cha	inge		O. box if mail is r	not delivered to street address)		Room/su	ite	E Teleph	one number
Ħ		al retui	•	L629 K Street 1		,			503		(202)386-6325
Ħ			n/terminated			nd ZIP or foreign postal code			303	G Gross	
Ħ		ended			•	id ZiF or loreign postar code					•
H				Washington, DC		1 3h-3:			11/->	\$	1,214,369 or subordinates? Yes X No
Ш	App	olicatio	n pending	F Name and address of pri	•	amai Abdi			` '		
				Same as C above			7		1 ' '		s included? Yes No
<u></u>			pt status: X 501) (insert no	.) 4947(a)(1) or	527		1		(see instructions)
J		bsite:		iacouncil.org					H(c) Group	exemption	number
K		_	rganization: X Cor	poration Trust Ass	ociation C	ther	L Year of format	tion: 200)2 M S	State of lega	al domicile: MD
P	art		Summary								
			•	the organization's miss		<u> </u>					anization of
9						ity in order to					
Governance		advance peace & diplomacy, secure equitable immigration policies,									the civil rights
ern			of all Amer								
õ				_		d its operations or dispose					
		3	Number of voting	g members of the gove	rning body (F	Part VI, line 1a)				3	11_
es		4	Number of indep	pendent voting member	s of the gove	erning body (Part VI, line 1	b)			4	10
Ę		5	Total number of	individuals employed ir	ı calendar ye	ar 2019 (Part V, line 2a)				5	16
Activities &		6	Total number of	volunteers (estimate if	necessary)					6	100
∢		7a	Total unrelated b	ousiness revenue from	Part VIII, coli	umn (C), line 12				7a	0
		b	Net unrelated bu	usiness taxable income	from Form 9	90-T, line 39				7b	0
									Prior Year		Current Year
		8	Contributions an	nd grants (Part VIII, line	1h)				912	,688	1,194,567
ne		9									0
ēn		10	•	,	-,	and 7d)			16	,049	6,542
Revenue		11				9c, 10c, and 11e) • • •				,375	(118,438)
_		12				Part VIII, column (A), line 1			1,053		1,082,671
_	-	13			•	A), lines 1-3)	,			,000	1,000
		14						301	,000	0	
		15								,464	511,645
es	:		6a Professional fundraising fees (Part IX, column (A), line 11e)							,404	511,645
Expenses				g expenses (Part IX, col							U
ă	-		-		` ,		130,105			221	
ш						11f-24e)				,021	567,770
						(, column (A), line 25)			1,640		1,080,415
_	-	19	Revenue less ex	kpenses. Subtract line	18 from line	12				,373)	2,256
ō	ğ							Begi	nning of Curre		End of Year
set	Sala	20	`	rt X, line 16)				•		,322	842,067
Ą	:ĕ	21	Total liabilities (F	, -,				٠		,571	34,361
		22			line 21 from l	ine 20 • • • • • • • • •		•	765	,751	807,706
	art		Signature							1. 6	
						ompanying schedules and statem all information of which preparer			owiedge and be	ellet, it is	
_											
Sig	nr		Jamal A								
			Signature of	officer						Date	
He	re			Abdi, President							
_				name and title							
_			Print/Type prepare	er's name	Preparer's sign	ature	Date		Check	if	PTIN
Pa			John Mull	ins	John Mul	lins	11-16-20	020	self-em	ployed	P01429307
	•	arer		Mullins,				F	Firm's EIN		
Us	e C	Only	Firm's address	7625 Wis	consin A	venue		F	Phone no.		
				Bethesda							770-6371
May	y the	e IRS	discuss this retu	urn with the preparer sh	own above?	(see instructions)					· · · X Yes No

9) National Iranian American Council Checklist of Required Schedules Part IV

			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			
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	X	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		Х	
•	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	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
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		x
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 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		Х
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	44.		
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	11a	Х	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		37
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	110		Х
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		
-	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		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X · · · · · · ·	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
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	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E- · · · · · · · · · · · · · · · · · ·	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States? • • • • • • • • • • • • • • • • • • •	14a		Х
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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
40	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	46		
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		X
17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	- ' '		X
10	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?		Λ	
. •	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19		х
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> · · · · · · · · · · · · · · · · · ·	20a		X
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		x

Form 990 (2019) National Iranian American Council 73-1626026 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 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 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Х 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II х 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 Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L. Part IV 28a Х A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c x Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 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," Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 х Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 19? Note: All Form 990 filers are required to complete Schedule O. x Statements Regarding Other IRS Filings and Tax Compliance Part V

						_
				Yes	No	,
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	18			Ī
b	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable	1b	0			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

19) National Iranian American Council
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? • • • • • • • • • • • • • • • • • • •	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor? • • • • • • • • • • • • • • • • • • •	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? • • • • • • • • • • • • • • • • • • •	7b	х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7e		Х
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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them.)	40-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? • • • • • • • • • • • • • • • • • • •	12a		
b 12	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. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	134		
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> O · · · · · · · · · · · · · · · · · ·	14b		21
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	- 1~		
-	excess parachute payment(s) during the year?	15		х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? • • • • • • • • • • • • • • • • • • •	16		х
	If "Yes," complete Form 4720, Schedule O.			

Part VI G

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

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

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 · · · · · · · · · · 1a 11			
	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 in line 1a, above, who are independent · · · · · · · · · · 1b 10			
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	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		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		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
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		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?•••	12b	x	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	x	
15	Did the process for determining compensation of the following persons include a review and approval by		Λ	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b		v
Б	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		Х
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
IVa	with a taxable entity during the year?	16a		
h		IVa		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	46h		
500	organization's exempt status with respect to such arrangements?	16b		
17	List the states with which a copy of this Form 990 is required to be filed Statement #17 Section 6404 requires on exempiration to make its Forms 4033 (4034 or 4034 A if continuely). 000 and 000 T (Section F04(a))			
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) available for public inspection. Indicate how you made these available. Check all that apply.			
	W Own website W Another's website W Upon request Upon req			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The Organization (202)386-6325, 1629 K Street NW, Washington, DC 20006			

For	m 99	90 C	201	9)

Page 7

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box if heither the organization not any rela	ileu organiza	lion co	inpe	iisa	ieu a	arry cu	пеп	t officer, director, o	i ilusiee.	
					(C)					
(A)	(B)	Position				(D)	(E)	(F)		
Name and title	Average	١,	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated amount	
	hours			•		r/trustee		compensation	compensation	of other
	per week							from the organization	from related organizations	compensation from the
	(list any hours for	유교	Ins	Officer	Ke.	Hig	Fo	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	direc	tituti	icer	Key employee	jhes: iploy	Former	,		related organizations
	organizations	for tr	onal		ploy	t cor				
	below	Individual trustee or director	Institutional trustee		ee	nper				
	dotted line)	0	tee			Highest compensated employee				
						ď				
(1) Shokooh Miry	1.00									
Chair		х		Х				0	0	0
(2) Max Safavi	1.00									
Treasurer		Х		Х				0	0	0
(3) Ahmad Shams	1.00									
Director		х						0	0	0
(4) Sanam Anderlini	1.00									
Director		х						0	0	0
(5) Peyman Jarahi	1.00									
Director		х						0	0	0
(6) Alireza Shaibani	1.00									
Director		х						0	0	0
(7) Jamal Abdi	40.00									
President		х		Х				118,000	0	0
(8) Kayvon Sarmadi	1.00									
Secretary		х		Х				0	0	0
(9) Ardavan Badii	1.00									
Director		х						0	0	0
(10)Siobhan Amin	1.00									
Director		х						0	0	0
(11)Ladan Manteghi	1.00									
Director		х						0	0	0
<u>(12)</u>										
(13)										
(13)										
(14)										
		1								

Fait	Section A. Officers, Directors, Trustees	s, Key Empi	oyees	, and) HI	gnes	St Con	nper	nsated Employees	(continuea)						
	(A) Name and title	(B) Average hours per week	box,	, unles	Pos eck m ss per	rson i	han one s both a //trustee	n	(D) Reportable compensation from the	(E) Reportable compensation from related	COI	(F) ated am of other mpensati				
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	orga	rom the nization and organiz				
<u>(15)</u>																
<u>(16)</u>																
<u>(17)</u>																
<u>(18)</u>																
<u>(19)</u>																
<u>(20)</u>																
<u>(21)</u>																
(22)																
(23)																
(24)																
(25)																
1b	Subtotal															
С	Total from continuation sheets to Part VII, Sec	tion A .														
d	Total (add lines 1b and 1c)								118,000	0			0			
2	Total number of individuals (including but not limit	ed to those I	isted a	bove	e) wł	ho re	eceive	d mo	ore than \$100,000	of						
	reportable compensation from the organization	•											1			
												Yes	No			
3	Did the organization list any former officer, direct			-	e, o	r hig	jhest c	omp	pensated							
	employee on line 1a? If "Yes," complete Schedule										3		х			
4	For any individual listed on line 1a, is the sum of r	-														
	organization and related organizations greater that															
_	individual · · · · · · · · · · · · · · · · · · ·										4		X			
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If</i> "Yes,	•			-			-			5		v			
Secti	on B. Independent Contractors	Complete	ocneuu	110 0	101 3	sucii	perso	''					Х			
1	Complete this table for your five highest compens	ated indene	ndent (ontr	acto	ors th	nat rec	eive	ed more than \$100	000 of						
•	compensation from the organization. Report comp															
	(A)				<i>j</i>				(B)		(C)					
Hamid	Name and business address Avaired N. Spaulding Av		900	46				Dev	Description of service 7't. Consulta		Compens	L89,2	240			
2	Total number of independent contractors (including	a but not lim	ited to	thos	e lie	ted	above	L) wh	10							
-	received more than \$100,000 of compensation fro	-						,	· -	1						

Form 990 (2019)
Part VIII

	Check if Schedule O contains a response or note	to any line in this	s Part VIII			[
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1g h Total. Add lines 1a-1f 1g 2a 5 c 6 d 6 e 6 f All other program service revenue 1a	Business Code	1,194,567			
	3 Investment income (including dividends, interest, and other similar amounts)	d ▶ ds ▶	6,495			6,495
Revenue	c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7a (i) Securities 7a 47 7b 7c 47	(ii) Other				
Other Rev	d Net gain or (loss)	13,260 131,698	(118,438)			(118,438)
	b Less: direct expenses 9b					
Miscellanous Revenue	· · · · · · · · · · · · · · · · · · ·	Business Code				
	12 Total revenue. See instructions	.	1,082,671	0	0	(111,896)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to	any line in this Part IX			x		
Do n	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B)	(C) Management and	(D) Fundraising		
8b, 9	b, and 10b of Part VIII.	iotal expenses	Program service expenses	general expenses	expenses		
1	Grants and other assistance to domestic organizations						
	and domestic governments. See Part IV, line 21	1,000	1,000				
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	118,000	98,019	12,686	7,295		
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	320,247	266,019	34,431	19,797		
8	Pension plan accruals and contributions (include	320,217	200,013	31,131	13,131		
Ŭ	section 401(k) and 403(b) employer contributions)	3,075	2,476	461	138		
9	Other employee benefits		•	4,423	1,928		
10	Payroll taxes	17,502	11,151				
	·	52,821	31,226	19,137	2,458		
11	Fees for services (nonemployees):						
a	Management	1 000	1 000				
b	Legal	1,200	1,200				
С	Accounting	33,015	9,481	22,852	682		
d	Lobbying						
е	Professional fundraising services. See Part IV, line 17						
f	Investment management fees						
g	Other. (If line 11g amount exceeds 10% of line 25, column						
	(A) amount, list line 11g expenses on Schedule O.) • •	176,531	103,422	29,878	43,231		
12	Advertising and promotion	46,876	45,973	903			
13	Office expenses	56,968	26,739	27,628	2,601		
14	Information technology	18,029	17,898	126	5		
15	Royalties						
16	Occupancy · · · · · · · · · · · · · · · · · · ·	51,370	40,604	7,172	3,594		
17	Travel	83,752	41,209	11,051	31,492		
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	75,107	68,634	6,473			
20	Interest · · · · · · · · · · · · · · · · · · ·						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization						
23	Insurance	5,002		5,002			
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 O.)						
а	Bank Fees	4,366	2,658	274	1,434		
b	Bad Debts	15,450	•		15,450		
С	Other	104		104			
d		101		201			
e	All other expenses						
25	Total functional expenses. Add lines 1 through 24e · ·	1,080,415	767,709	182,601	130,105		
26	Joint costs. Complete this line only if the	2,000,410	, 0, 7, 1, 0, 9	102,001	100,100		
-	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) · · · · · · · · ·						
<u></u>	10110 Willing 0 01 30-2 (1100 330-120)				Form 990 (2019)		

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	223,801	1	246,756
	2	Savings and temporary cash investments	33,441	2	32,317
	3	Pledges and grants receivable, net	124,538	3	134,102
	4	Accounts receivable, net	30,029	4	161,394
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		_	
	•	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
ets	7	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net		6 7	
	7	Inventories for sale or use		8	
Assets	8	Prepaid expenses and deferred charges	10 145	9	10 500
⋖	9 10a		10,147	9	18,560
	IUa	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 22,132			
	b	basis. Complete Part VI of Schedule D		10c	
	11	Investments - publicly traded securities	378,518	11	226,090
	12	Investments - other securities. See Part IV, line 11	370,310	12	220,030
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	22,848	15	22,848
	16	Total assets. Add lines 1 through 15 (must equal line 33)	823,322	16	842,067
	17	Accounts payable and accrued expenses	57,571	17	34,361
	18	Grants payable	0.70.2	18	0-700-
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iabi		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	57,571	26	34,361
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	765,751	27	807,706
Ва	28	Net assets with donor restrictions		28	
pur		Organizations that do not follow FASB ASC 958, check here			
Net Assets or Fund Balances		and complete lines 29 through 33.			
o s	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
t As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	765,751	32	807,706
	33	Total liabilities and net assets/fund balances	823,322	33	842,067

		<u>/3-16.</u>	26026)	Pa	ige 12
Paı	rt 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		1,	082,	671
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,	080,	415
3	Revenue less expenses. Subtract line 2 from line 1	3			2,	256
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			765,	751
5	Net unrealized gains (losses) on investments	5			30,	704
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			8,	995
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			807,	706
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. 🗌
					Yes	No
1	Accounting method used to prepare the Form 990: Cash					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		[2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Single Audit Act and OMB Circular A-133?			3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ī			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

EEA Form **990** (2019)

SCHEDULE A

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2019

Open to Public

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Inspection

Name	ame of the organization Employer identification number							
		al Iranian American Counc					73-162602	
Pa	rt I	Reason for Public Charity	y Status (All or	ganizations must c	omplete	this part	i.) See instructions	3.
The	orga	nization is not a private foundation bec			-			
1	H	A church, convention of churches, or			` ' '	l)(A)(i).		
2	Н	A school described in section 170(b)		•				
3	H	A hospital or a cooperative hospital se	-			•	\/ . \/.\	
4	Ш	A medical research organization oper	ated in conjunction	with a hospital described	d in sectio	n 170(b)(1)(A)(III). Enter the	
-	П	hospital's name, city, and state:	ofit of a calloga ar u	university supped or energy	atad by a d	a. / a. r.m. ma a. m. f	tal unit described in	
5	Ш	An organization operated for the bene	_	iniversity owned or opera	ated by a g	overnmeni	iai unii described in	
6	П	section 170(b)(1)(A)(iv). (Complete F A federal, state, or local government of	•	it described in section 1	70/b\/1\/A	\(\alpha\)		
6 7	H	An organization that normally receive	-				m the general public	
'	Ш	described in section 170(b)(1)(A)(vi).	•		verninenta	i dilit oi iio	in the general public	
8	П							
9	A community trust asserted in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college							
·		or university or a non-land-grant colle						
		university:	5 5 \	,	,	3 ,	3	
10	X	An organization that normally receive	s: (1) more than 33	1/3% of its support from	contributi	ons, memb	pership fees, and gross	:
		receipts from activities related to its e	xempt functions - s	ubject to certain exception	ons, and (2	2) no more	than 33 1/3% of its	
		support from gross investment incom-	e and unrelated bu	siness taxable income (l	ess sectior	า 511 tax) f	rom businesses	
		acquired by the organization after Jun	ie 30, 1975. See se	ection 509(a)(2). (Compl	ete Part III	.)		
11		An organization organized and operat	ted exclusively to te	est for public safety. See	section 50	09(a)(4).		
12		An organization organized and opera-	ted exclusively for t	the benefit of, to perform	the function	ons of, or to	carry out the purpose	s
		of one or more publicly supported orga	anizations describe	ed in section 509(a)(1) o	r section (509(a)(2). S	See section 509(a)(3) .	
		Check the box in lines 12a through 12	2d that describes th	e type of supporting org	anization a	ind comple	te lines 12e, 12f, and 1	l2g.
	а	Type I. A supporting organization	operated, supervis	sed, or controlled by its s	upported o	rganizatior	n(s), typically by giving	
		the supported organization(s) the	power to regularly	appoint or elect a major	ity of the di	irectors or	trustees of the	
		supporting organization. You must	st complete Part I	V, Sections A and B.				
	b		n supervised or con	trolled in connection with	n its suppo	rted organi	zation(s), by having	
		control or management of the sup		·	ersons that	control or	manage the supported	
		organization(s). You must comp						
	С			•				
		its supported organization(s) (see	,	•	•			
	d	Type III non-functionally integra	•	•				•
		that is not functionally integrated.					nt and an attentiveness	5
		requirement (see instructions). Yo	-				T II T III	
	е	Check this box if the organization				s a Type I,	Type II, Type III	
		functionally integrated, or Type III Enter the number of supported organ		tegrated supporting orga				
	f g	Provide the following information about						
		i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of
	,	, riame of supported organization	()	(described on lines 1-10	listed in you	-	support (see	other support (see
				above (see instructions))	docum	ent?	instructions)	instructions)
					Yes	No		
(A)								
/B\								
(B)								
(C)								
(D)								
(E)								
Tota								
1010							i	i

990 or 990-EZ) 2019 National Iranian American Council 73-1626026 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u>Sec</u>	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	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)						
	Public support. Subtract line 5 from line 4						
_	ction B. Total Support						
	endar year (or fiscal year beginning in)►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4 · · · · · · · · · · · · · · · · · ·						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities, etc. (s		•			12	
13	First five years. If the Form 990 is for the or	-			-	•	· · · ·
	organization, check this box and stop here						▶ ∐
	ction C. Computation of Public Suppo						
	Public support percentage for 2019 (line 6, c					14	%
	Public support percentage from 2018 Sched					15	%
16a	33 1/3% support test - 2019. If the organiza						_
	box and stop here. The organization qualified			-			_
r	33 1/3% support test - 2018. If the organiza						
47-	this box and stop here . The organization qu	-	•	-			_
1/a	10%-facts-and-circumstances test - 2019.	-					
	10% or more, and if the organization meets					•	
	Part VI how the organization meets the "fact			-	· ·		ortea 💆 🗆
	organization						···· ▶ ∐
ľ	0 10%-facts-and-circumstances test - 2018.						ııne
	15 is 10% or more, and if the organization m					<u>-</u>	ali alı
	Explain in Part VI how the organization mee						
10	supported organization						
18	Private foundation. If the organization did r						
	instructions	<u> </u>					· · · · • L

73-1626026

90 or 990-EZ) 2019 National Iranian American Council Support Schedule for Organizations Described in Section 509(a)(2) Part III

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	1,335,470	812,594	1,725,398	1,117,568	1,194,567	6,185,597
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an	95,163	94,216	2,603			191,982
9	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	1,430,633	906,810	1,728,001	1,117,568	1,194,567	6,377,579
	Amounts included on lines 1, 2, and 3		,	_,:_:,:==	_,,	_,,	.,,
	received from disqualified persons	8,062	13,209	23,428	20,600	37,080	102,379
b	Amounts included on lines 2 and 3	,	•	,		,	
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	8,062	13,209	23,428	20,600	37,080	102,379
8	Public support. (Subtract line 7c from						
	line 6.)						6,275,200
_	ction B. Total Support						
	endar year (or fiscal year beginning in)▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	1,430,633	906,810	1,728,001	1,117,568	1,194,567	6,377,579
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources	5,953	6,343	11,545	14,004	6,495	44,340
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975 Add lines 10a and 10b						
	Net income from unrelated business	5,953	6,343	11,545	14,004	6,495	44,340
•••	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)				5,588		5,588
13	Total support. (Add lines 9, 10c, 11,				3,300		3,300
. •	and 12.)	1,436,586	913.153	1.739.546	1.137.160	1,201,062	6,427,507
14	First five years. If the Form 990 is for the or						
	organization, check this box and stop here	•			•	•	, , ,
Se	ction C. Computation of Public Suppo						
15	Public support percentage for 2019 (line 8, c	column (f), divid	led by line 13,	column (f)) .		15	97.63 %
16	Public support percentage from 2018 Sched	lule A, Part III, I	ine 15			16	98.23 %
	ction D. Computation of Investment In						
17	Investment income percentage for 2019 (line	e 10c, column (f), divided by I	ine 13, column	ı (f)). 	17	1.00 %
	Investment income percentage from 2018 S					18	1.00 %
19a	33 1/3% support tests - 2019. If the organiz						
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2018. If the organiz						
	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did r	not check a box	on line 14, 19	a, or 19b, che	ck this box and	l see instructioi	ns ▶ 📗

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
	163	140
1		
2		
3a		
3b		
3с		
00		
4a		
4b		
4c		
5a		
- Gu		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		
(Form 990	or 990-l	EZ) 2019

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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	-		
_	organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Saci	tion C. Type II Supporting Organizations			
<u> </u>	non o. Type ii oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	NO
	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			
Casi	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		14	
	D:10		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	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 year (see in	struc	tions	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity ((see ii	nstruc	ctions
2	Activities Test. Answer (a) and (b) 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		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
~	of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the</i>			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	2.5		
о a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
b	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or its supported organizations: it ites, describe in rait vi the role played by the organization in this regard.	JU		ı

	lule A (Form 990 or 990-EZ) 2019 National Iranian American Council		73-16260	26 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust	on Nov. 20, 1970 (explain	in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organization	zatior	ns must complete Sections	A through E.
	tion A. Adivated Not Income		(A) Dries Vees	(B) Current Year
Sec	tion A - Adjusted Net Income		(A) Prior 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			
co	llection of gross income or for management, conservation, or			
ma	aintenance 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		
Sec	tion B - Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
ins	structions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
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			
fa	actors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
se	e instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

6

EEA

emergency temporary reduction (see instructions).

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sec	ction D - Distributions			Current Year			
_1	Amounts paid to supported organizations to accomplish exer						
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported					
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpose						
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6							
7							
8	· ·						
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2019 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
1	Distributable amount for 2019 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2019						
	(reasonable cause required - explain in Part VI). See						
	instructions.						
3	Excess distributions carryover, if any, to 2019						
a	From 2014						
b	From 2015						
	From 2016						
d	From 2017						
е	From 2018						
	Total of lines 3a through e						
	Applied to underdistributions of prior years						
	Applied to 2019 distributable amount						
÷	Carryover from 2014 not applied (see instructions)						
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2019 from						
_	Section D, line 7: \$						
	Applied to underdistributions of prior years						
	Applied to 2019 distributable amount						
	Remainder. Subtract lines 4a and 4b from 4.						
	Remaining underdistributions for years prior to 2019, if						
5	·						
	any. Subtract lines 3g and 4a from line 2. For result						
	greater than zero, explain in Part VI . See instructions.						
6	Remaining underdistributions for 2019. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2020. Add lines 3j						
	and 4c.						
8_	Breakdown of line 7:						
	Excess from 2015						
	Excess from 2016						
^	Excess from 2017						

d Excess from 2018 e Excess from 2019

. . . .

lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

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) orga	nizations: Complete Part III.			
Nam	ne of organization			Employer iden	tification number
Na	ational Iranian Americ				626026
Pa	rt I-A Complete if the	organization is exempt unde	r section 501(c) or is a section 527 o	rganization.
1	Provide a description of the orga	anization's direct and indirect political can	npaign activities in P	art IV. (see instructions for	
	definition of "political campaign a	activities")			
2		nditures (see instructions)			
3		paign activities (see instructions)			
Pa		organization is exempt unde	•	, , ,	
1		tax incurred by the organization under se			
2		tax incurred by organization managers u			
3		ction 4955 tax, did it file Form 4720 for th			
4a					· · · U Yes U No
b	If "Yes," describe in Part IV.			\	- \ (0)
		organization is exempt unde		, ,	c)(3).
1	-	ded by the filing organization for section	•		
_				·	
2		ganization's funds contributed to other or	-		
_	•			▶ \$	
3	•	res. Add lines 1 and 2. Enter here and or			
		rm 1120-POL for this year?			· · · Yes No
4					
5		d employer identification number (EIN) of or each organization listed, enter the amo			=
	. ,	ons received that were promptly and dire	•		
		or a political action committee (PAC). If a	-	·	
	as a separate segregated fund to	a political action committee (1 Ac). If at	dulional space is ne	eded, provide information in r	aitiv.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				Tarias: Il Horio, critor o .	delivered to a separate
					political organization. If none, enter -0
					,
((1)				
((2)				
	(2)				
((3)				
	(A)				
'	(4)				
	(5)				
'	(5)				
	(6)				
	(6)			1	

erican	Council	73-1626026

rai	t II-A Complete if the organization	is exempt under section 501(c)(3) and filed	1 Form 5/68 (elec	ction under				
	section 501(h)).							
A C	heck 🕨 🗌 if the filing organization belongs to a	n affiliated group (and list in Part IV each affiliated group m	ember's name,	_				
	address, EIN, expenses, and share of excess lobbying expenditures).							
B C	heck 🕨 🗌 if the filing organization checked box	A and "limited control" provisions apply.						
	Limits on Lobby	ing Expenditures	(a) Filing	(b) Affiliated				
	(The term "expenditures" me	ans amounts paid or incurred.)	organization's totals	group totals				
1a	Total lobbying expenditures to influence public opin	ion (grassroots lobbying)						
b	Total lobbying expenditures to influence a legislative	e body (direct lobbying)						
С	Total lobbying expenditures (add lines 1a and 1b)			_				
d			1,080,415					
е	Total exempt purpose expenditures (add lines 1c a	nd 1d)	1,080,415					
f	Lobbying nontaxable amount. Enter the amount fro							
_	columns.	1	183,042					
L	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	Not over \$500,000	20% of the amount on line 1e.						
L	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.						
	Over \$17,000,000	\$1,000,000.						
g	Grassroots nontaxable amount (enter 25% of line 1	f)	45,761					
h	Subtract line 1g from line 1a. If zero or less, enter -	0						
i	Subtract line 1f from line 1c. If zero or less, enter -0							
j	If there is an amount other than zero on either line	1h or line 1i, did the organization file Form 4720						
	reporting section 4911 tax for this year?	Von Averaging Devied Under coetien 504/h		Yes				

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total				
2a	Lobbying nontaxable amount	174,677	196,487	236,329	183,042	790,535				
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,185,803				
С	Total lobbying expenditures	11,840	22,746	7,188		41,774				
d	Grassroots nontaxable amount	43,669	49,122	59,082	45,761	197,634				
е	Grassroots ceiling amount (150% of line 2d, column (e))					296,451				
f	Grassroots lobbying expenditures	11,780	15,000	3,472		30,252				

EEA Schedule C (Form 990 or 990-EZ) 2019

-01	acab "Van " rannana an linea to through ti balaw provide in Part IV a detailed	(a)	(b)
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	Amoun
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?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? · · · · · · · · · · · · · · · · · · ·			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		ш	
b	If "Yes," enter the amount of any tax incurred under section 4912		-	
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\		4.
۲a	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	c)(5),	or se	ction
	501(c)(6).			
				Yes
	Were substantially all (90% or more) dues received nondeductible by members?			1
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
<u>} </u>	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3 otion
-a	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O			
	answered "Yes."	ix (b)	ı aıt	III-A, IIIIC
	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of			
	political expenses for which the section 527(f) tax was paid).			
а	Current vear		2a	
a b	Current year		2a 2b	
a b c	Carryover from last year			
	Carryover from last year		2b	
3	Carryover from last year		2b 2c	
3	Carryover from last year		2b 2c	
3	Carryover from last year		2b 2c 3	
3	Carryover from last year		2b 2c	
3 1 5	Carryover from last year		2b 2c 3	
a Pa	Carryover from last year		2b 2c 3 4 5	
a Pa	Carryover from last year		2b 2c 3 4 5	
Pa	Carryover from last year Total		2b 2c 3 4 5	
Pa	Carryover from last year Total		2b 2c 3 4 5	
3 4 Pa	Carryover from last year Total		2b 2c 3 4 5	
Pa	Carryover from last year Total		2b 2c 3 4 5	
3 4 Pa	Carryover from last year Total		2b 2c 3 4 5	
Pa	Carryover from last year Total		2b 2c 3 4 5	
a Pa	Carryover from last year Total		2b 2c 3 4 5	
a Pa	Carryover from last year Total		2b 2c 3 4 5	
a ~	Carryover from last year Total		2b 2c 3 4 5	

SCHEDULE D (Form 990)

Department of the Treasury

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.

Internal Revenue Service

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

Em

OMB No. 1545-0047

2019

Open to Public Inspection

Name	of the organization		Employer identification number
Nat	ional Iranian American Council		73-1626026
Pa	rt I Organizations Maintaining Donor Advised F	unds or Other Similar Funds or Acc	ounts.
	Complete if the organization answered "Yes" or	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised	
	funds are the organization's property, subject to the organizati	on's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor ad		
	only for charitable purposes and not for the benefit of the dono	or or donor advisor, or for any other purpose	
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Pa			
	Complete if the organization answered "Yes" o	n Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or edu	cation) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form of a	conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		· · 2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	tax year 🕨		
4	Number of states where property subject to conservation ease	ement is located 🕨	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conserva	ation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conservation	easements during the year
	▶\$		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense sta	atement, and
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's financial statements	that describes the
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections	of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes"		
1a	If the organization elected, as permitted under FASB ASC 958	B, not to report in its revenue statement and I	palance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in furthe	erance of public
	service, provide, in Part XIII the text of the footnote to its finan	cial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958	s, to report in its revenue statement and bala	nce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthera	ince 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 trea	sures, or other similar assets for financial ga	ain, provide the
	following amounts required to be reported under FASB ASC 9	•	
а	Revenue included on Form 990, Part VIII, line 1 · · · · ·		> \$
b	Assets included in Form 990 Part X		> \$

Pai	rt III Organizations Maintaining	Collections of	Art, His	torical 7	Treasures	s, or Ot	her Similar <i>A</i>	Assets (c	ontinued
3	Using the organization's acquisition, accession	n, and other records	, check any	of the foll	owing that m	nake sign	ificant use of its		
	collection items (check all that apply):								
а	Public exhibition		d	☐ Loan o	or exchange	program	S		
b	Scholarly research		e	Other	_				
C	Preservation for future generations								
4	Provide a description of the organization's coll	ections and evolain	how they fo	irther the	organization'	's evemn	t nurnose in Part		
7	XIII.	colloris and explain	now they h		organization	3 CACITIP	t purpose iii i art		
_		rossivo donationa of	fart biotori	ool troopiu	roo or other	oimilor			
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to							□voo	□ No
Pai	rt IV Escrow and Custodial Arrar		art or the or	gariizaliori	S COILECTION	<u> </u>		· Yes	
ı u	Complete if the organization a	•	on Form	990 P	art IV line	9 or r	enorted an an	nount on I	Form
	990, Part X, line 21.	mowered res	0111 0111	000,10	art i v, iii io	0, 01 10	sported arrain	ilouiit oii i	OIIII
	Is the organization an agent, trustee, custodial	a or other intermedia	any for cont	ributiono o	r other cose	to not			
1a		·····						□voo	□ No
	•							· · 🗀 res	⊔ мо
b	If "Yes," explain the arrangement in Part XIII a	na complete the folio	owing table	:			1		
	B						+	mount	
C	Beginning balance					_	+		
d	Additions during the year						+		
е	Distributions during the year						-		
f	Ending balance								
2a	Did the organization include an amount on For		-			•		_	=
_ <u>b</u>		Check here if the exp	olanation h	as been pi	rovided on P	art XIII			. [
Pai				000 B	t IV / I!	40			
	Complete if the organization a	answered "Yes"	on Form	990, Pa	art IV, IIne	10.			
		(a) Current year	(b) Prid	or year	(c) Two year	s back	(d) Three years back	k (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curre	nt year end balance	(line 1g, co	olumn (a))	held as:				
а	Board designated or quasi-endowment	%							
b	Permanent endowment > %	, ,							
С	Term endowment								
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%.							
3a	Are there endowment funds not in the possess	sion of the organizat	ion that are	held and	administere	d for the			
	organization by:	-						ſ	Yes No
	(i) Unrelated organizations							- 3a(i)	
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as require	ed on Sche	dule R?				<u>``</u>	
4	. ,	•							l
Pai									
			on Form	990, Pa	art IV, line	11a. S	ee Form 990.	Part X, li	ne 10.
	<u> </u>								
	Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Entry years back years yea								
	Land	,	•		*				
b									
	· ·	-							
c d	Equipment	-			22 122		22 122		
u	Equipment	· -			22,132		22,132		

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

73-1626026

Schedule D (Form 990) 2019

National Iranian American Council

Part VII Investments - Other Securities

rait vii	Complete if the organization answered	"Yes" on For	m 990, Par	t IV, line 11b.	See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book va	llue	, ,	Method of valuation: end-of-year market value
(1) Financial	derivatives					
(2) Closely-he	eld equity interests	[
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G) (H)						
	n (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments - Program Related. Complete if the organization answered		m 990 Par	t IV line 11c	See Form	990 Part X line 13
	(a) Description of investment	100 0111 011	(b) Book va	·		Method of valuation:
	(a) Description of investment		(b) Book va	liue		end-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
<u>(7)</u>						
(8)						
(9)	(h) more than a life and the control of the control					
Part IX	n (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.					
Tartix	Complete if the organization answered	"Yes" on For	m 990 Par	t IV line 11d	See Form	990 Part X line 15
	(a) Desi		000, r di	,		(b) Book value
(1Securit	y Deposits	Cription				22,848
(2)	, Depositos					22,010
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.)				🕨	22,848
Part X	Other Liabilities.					
	Complete if the organization answered line 25.	"Yes" on For	m 990, Par	t IV, line 11e	or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book v	alue			
(1) Federal i	ncome taxes					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) T (1) (0) (1) (1)	(h) must small Form 200 Port V 1 (D) " 251					
	(b) must equal Form 990, Part X, col. (B) line 25.) • In Part XIII provide the text	-641644-	41	ionio financial etc		

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 - - - - - .

rd	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ei Ketu	111.
_	·		
1	Total revenue, gains, and other support per audited financial statements	1	1,113,375
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	30,704
3	Subtract line 2e from line 1	3	1,082,671
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
_ C	Add lines 4a and 4b	4c	
5 Do	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 D	1,082,671
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	per K	eturn.
4	·		
1	Total expenses and losses per audited financial statements	1	1,080,415
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,080,415
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	1 000 115
5 Pai	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,080,415
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; F	Oort V lin	•
	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	ait A, IIII	C
۷, ۲۵	art XI, illes zu anu 45, anu Fart XII, illes zu anu 45. Also complete tilis part to provide any adultiona illiomation.		

EEA Schedule D (Form 990) 2019

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2019

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Name of the organization						Employer ide	ntification number
<u>National Iranian American C</u>	ouncil					73-16	26026
Part I Fundraising Activities				swered "Yes" on	Form 9	90, Part IV	, line 17.
Form 990-EZ filers are no			-				
1 Indicate whether the organization raia Mail solicitations	sed funds through		-				
a ☐ Mail solicitations b ☐ Internet and email solicitations				f non-government g f government grants			
c Phone solicitations				raising events	'		
d In-person solicitations		9 🗆	opeciai iuriui	aising events			
2a Did the organization have a written of	r oral agreement w	vith any indiv	idual (includi	na officers, directors	trustees		
or key employees listed in Form 990	-	-		-		Пу	es 🗌 No
b If "Yes," list the 10 highest paid indiv							_
compensated at least \$5,000 by the		, ,	·				
•							
		(iii) Did fur	ndraiser have			ount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody c	or control of	(iv) Gross receipts from activity	•	tained by) ser listed in	(or retained by)
		contril	outions?	nom activity		ol. (i)	organization
		Yes	No				
1							
2							
3							
4							
5							
5							
6							
7							
8							
•							
9							
10							
Total			🕨				
3 List all states in which the organizatio	n is registered or li	censed to so	licit contribut	ions or has been no	tified it is e	xempt from	
registration or licensing.							

Schedule G (Form 990 or 990-EZ) 2019 National Iranian American Council Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through LA Fundraise SF Fundraise col. (c)) (total number) (event type) (event type) Revenue Gross receipts 19,870 126,425 780,227 926,522 2 Less: Contributions 18,345 123,675 771,242 913,262 Gross income (line 1 minus 1,525 2,750 8,985 13,260 Cash prizes Noncash prizes Rent/facility costs Direct Expenses Food and beverages Other direct expenses 131,698 8,531 46,128 77,039 Direct expense summary. Add lines 4 through 9 in column (d) 131,698 Net income summary. Subtract line 10 from line 3, column (d) (118,438)Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) · · · · · · · · · · · · · ▶ Enter the state(s) in which the organization conducts gaming activities: **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

If "Yes," explain:

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization National Iranian American Council 73-1626026 01. Form 990 governing body review (Part VI, line 11) 990 is prepared by CPA with staff input and shared with board prior to submission. 02. Conflict of interest policy compliance (Part VI, line 12c) Potential conflicts are brought to the attention of the Board Chair and President. Individuals with potential conflicts are excluded from deliberation and voting on the potential conflict. 03. CEO, executive director, top management comp (Part VI, line 15a) Compensation is reviewed and approved through the budgeting process. 04. Governing documents, etc, available to public (Part VI, line 19) NIAC's Form 990 is made available publicly at niacouncil.org/taxes. 05. Explanation of other changes in net assets or fund balances (Part XI, line 9) To adjust beginning net assets so it matches the 2018 Form 990. 06. List of other fees for services expenses (Part IX, line 11g) Other Professional Fees \$164,922 Translation \$1,609 Fellowship Stipends \$10,000

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Employer identification number

73-1626026

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Service Name of the organization

Part I

National Iranian American Council

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Open to Public Inspection

(a) Name, address, and EIN (if applicable) of disregarded entity		Prima	(b) ary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct con enti	trolling ty
(1)								
(2)								
(3)								
(4)								
(5)								
Part II Identification of Related Tax-Exempt Organizations du one or more related tax-exempt organizations du	ations. Couring the ta	n omplete if th ax year.	e organization a	answered "Yes" o	n Form 990, Par	t IV, line 34 bed	ause it ha	ad
(a) Name, address, and EIN of related organization	Prima	(b) ary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Sec. 51 controll	g) 2(b)(13) ed entity?
1629 K Street NW		es of the American	MD	501(c)(4)		N/A	100	x
(2)								
(3)								
(4)								
(5)								

	Identification of Related Organizations Taxable as a Partnershi		on Form 990, Part IV, line 34,
1 art III	because it had one or more related organizations treated as a partn	ership during the tax year.	

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of- year assets			Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	Section5 contr enti	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(=)									
(5)									

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Part V

No

Yes

1a

1b

Transactions with Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

	Gift, grant, or capital contribution from related organization(s)				1c		x
	Loans or loan guarantees to or for related organization(s)				1d		x
е	Loans or loan guarantees by related organization(s)				1e		x
f	Dividends from related organization(s)				1f		x
g	Sale of assets to related organization(s)				1g		x
h	Purchase of assets from related organization(s)				1h		x
i	Exchange of assets with related organization(s)				1i		x
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		x
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		x
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11		x
n	Performance of services or membership or fundraising solicitations by related organization(s)				1m		x
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		x
	Sharing of paid employees with related organization(s)				10	y	
						^	
р	Reimbursement paid to related organization(s) for expenses				1р		x
	Reimbursement paid by related organization(s) for expenses				1q	x	
•						^	
r	Other transfer of cash or property to related organization(s)				1r		x
	Other transfer of cash or property from related organization(s)				1s		x
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in						
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction	Amount involved	Method of determining		involved	d
	·	type (a-s)		_			
(1)	NIAC Action	ď	161,394	Cash			
(2)	NIAC Action	0	118,000	Cost			
(3)							
(4)							
(5)							
						-	
(6)							

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(state or foreign country) income (related, unrelated, excluded 501(c)(3) total income end-of-year assets allocations of Schedule K	(i)	(-)	(j)	(k)
(1)	ount in box 20 Schedule K-1	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Percentage ownership
(2) (3) (4) (5) (6) (7) (8)			Yes No	
(3) (4) (5) (6) (7) (8)				
(4) (5) (6) (7) (8) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (
(5) (6) (7) (8) (9)				
(6) (7) (8) (9)				
(7) (8) (9)				
(9)				
(9)				
(10)				
(11)				
(12)				