	0		Det		f Organization	Evomo	Erom	n		Tov		OMB No. 1545-0047
Form	99	<i>J</i> U	Rei	turn c	of Organization	Exempt	From I	nco	me	lax		2021
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation										ations)	2021	
Department of the Treasury b Do not enter social security numbers on this form as it may be made public.											Open to Public	
		ue Service	►	Go to w	/ww.irs.gov/Form990 for	instructions a	and the lates	t infor	mation			Inspection
A F	or the	2021 calend	ar year, or tax ye				, 2021, a					, 20
B CI	heck if a	pplicable:	C Name of orga	anizatior Na	tional Iranian Am	erican Co	uncil			0) Emplo	oyer identification number
A A	dress o	hange	Doing busine	ess as								73-1626026
	ame cha	ange	Number and	street (or P.	O. box if mail is not delivered to str	eet address)		Room/s	suite	E	Teleph	none number
	itial retu	-	1629 K S			,			503			(202) 386-6325
Π Fi	nal retu	rn/terminated			vince, country, and ZIP or foreign p	ostal code					G Gross	s receipts
	nended	return	Washingt								\$	1,229,335
E E		n pending			ncipal officer: Jamal Abdi				H(a)	ls this a gro	oup return f	for subordinates? Yes X No
<u> </u>			Same as									es included?
I Ta	x-exem	pt status: X				a)(1) or	527					st. See instructions
	ebsite:		.niacouncil		<u>, , , ()</u>						emption	
		rganization: X	Corporation Tru		ociation Other		L Year of formati	on: 20				al domicile: MD
Par		Summar	· <u> </u>									
	1	Briefly descri	, be the organization	on's miss	ion or most significant activ	ities: NTAC	. the 50	1(c)	(3)	iste	r or	manization of
					to educating & e	-						
nce		•										the civil rights
nai		of all A		romacy	, becare equicabi	e innigia	cion poi	1010.	5, un	u pr		<u>, che civii iigneo</u>
Activities & Governance	2			anization	discontinued its operation	s or disposed	of more than	25% 0	f its net	assets		
õ	3				rning body (Part VI, line 1a						3	8
oo س	4		-	-	s of the governing body (P						4	7
itie	5				i calendar year 2021 (Part						5	18
ťi	6		of volunteers (es			••••••					6	764
Ac	7a		· ·		Part VIII, column (C), line 1						7a	
	-				from Form 990-T, Part I, lir						7b	0
		Net unielated			10111 0111 990-1, 1 arti, il			<u></u>			10	
	8	Contributions	and grapts (Part		1h)				Prio	r Year	005	Current Year
ē	9				2g)					729,	085	1,228,461
Revenue		-	•		(A), lines 3, 4, and 7d)						01.0	0
ev.	10 11			`	, ,						912	874
œ	12				nes 5, 6d, 8c, 9c, 10c, and					700	007	0
	12				must equal Part VIII, colum X, column (A), lines 1-3)	, , ,				729,	997	1,229,335
			•	•				·				0
	14				K, column (A), line 4) ••• e benefits (Part IX, column			·		070	620	0
es	15	-	•			():	,			978,	632	375,852
Expenses			0		column (A), line 11e)							0
, adv			e							2.61	100	406.007
ш	17	•		().	nes 11a-11d, 11f-24e) • equal Part IX, column (A),				-	361,		436,307
	18	•		· ·	· · · · · · · · · · · · · · · · · · ·	,				<u>, 339 ,</u>		812,159
	19	Revenue les	expenses. Sub	tractime	18 from line 12 • • • • •					(609,		417,176
Net Assets or Fund Balances		Tatal assists							ginning o			End of Year
sset Bala	20		Part X, line 16)							321,		559,780
etA	21		s (Part X, line 26)							143,		25,459
Par	22	Signatu		Subtract	ine 21 from line 20 • • •			•		178,	047	534,321
				ned this retu	rn, including accompanying sched	ules and statemen	ts and to the bes	t of my k	nowledge	and hel	iof it ic	
					ficer) is based on all information of				liowicage		101, 1113	
		.										
Sigr			Abdi								Dat	
											Dai	
Here Jamal Abdi, President Type or print name and title												
		<u> </u>										
D -1		Print/Type pre			Preparer's signature		Date			Check	if	PTIN
Paid		John Mu			John Mullins		11-14-20	22		self-empl	oyed	P01429307
Prep				llins,					Firm's E	IN 🕨		
Use	Only	Firm's address			consin Avenue				Phone n			
					MD 20814						202-	770-6371
-				-	own above? See instructio	ons						XYes No
For P	aperv	vork Reduction	on Act Notice, se	e the se	parate instructions.							Form 990 (2021)

	n 990 (2021) National Iranian American Council	73-1626026	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
1	Briefly describe the organization's mission:		
	NIAC, the 501(c)(3) sister organization of NIAC Action, is dedicated to educa	ting & enga	ging the
	Iranian-American community in order to advance peace & diplomacy, secure equi	table immig	ration
	policies, and protect the civil rights of all Americans.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	🗌 Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	🗌 Yes	x No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	d bv	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	•	
	the total expenses, and revenue, if any, for each program service reported.	,	
4a	(Code:) (Expenses \$ 665,671 including grants of \$) (Revenue	\$)
Ŧu	NIAC Council work is focused round 3 areas: 1- Advancing Peace & Diplomacy 2.		/
	Immigration Policies and 3. Protecting Civil Rights 3. Protecting Civil Rights		
	Department of Treasury for a formal rule change to license Americans to opera		
	from Iran, which could effectively end the discriminatory actions faced by ou		
	also called on Bank of America to halt its practice of shutting the accounts		
	Iranian national origin or heritage and underscoring that sanctions do not ob		
	institutions to close the bank accounts of individuals ordinarily resident in		
	NIAC also continued to demand answers around the tragic death of Bijan Ghaisa		
	coalition of Iranian-American organizations to urge accountability from the U	.S. Park Po	lice,
	Department of Justice, and FBI surrounding details of the investigation.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 665 , 671		
			m 000 (0001)

EEA

	1990 (2021) National Iranian American Council 73-162 rt IV Checklist of Required Schedules	26026	5	P	age 3
				Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"				
	complete Schedule A		1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to				
	candidates for public office? If "Yes," complete Schedule C, Part I		3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)				
	election in effect during the tax year? If "Yes," complete Schedule C, Part II		4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,				
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors				
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If				
	"Yes," complete Schedule D, Part I		6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		-		
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	•	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		<u> </u>		
•	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	· · ⊢	-		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V		10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	· · –			~
••	VII, VII, IX, or X as applicable.				
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i>				
a	complete Schedule D, Part VI	1	1a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	· · [-		~	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	1	1b		х
~	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	· · [-			
U	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	1.	1c		v
Ь	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	· · [-			<u>x</u>
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	1.	1d		v
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		1u 1e		<u>x</u>
e f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	· · [-	ie		x
'		4	1.5		
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	•••	1f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII				
b		12	24		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		2b	v	
12				х	
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		13 4a		<u>x</u>
		· · ⊢ ·	4a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate				
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	4	4b		
45		· · ⊢ ·	40		<u>x</u>
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		16		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	··⊢	16		<u>x</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		.		
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	··⊢	17		<u>x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on				
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	· · _1	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?				
•-	If "Yes," complete Schedule G, Part III		19		<u>x</u>
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20	0a		х

21

x

Form 990 (2	2021)
Part IV	C

			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		<u>x</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
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	0 4-		
h	through 24d and complete Schedule K. If "No," go to line 25a	24a		<u>x</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	244		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
d 25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
zJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		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.	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III.	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	- -		
	or IV, and Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	x	<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	0.5 h		
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>x</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?/f "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		v
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<u>x</u>
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		v
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	31		<u>x</u>
00	19? Note: All Form 990 filers are required to complete Schedule O.	38	x	
Par		55		L
n ai	Check if Schedule O contains a response or note to any line in this Part V			\square
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	1c	x	

	990 (2021) National Iranian American Council 73-1626)26	F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		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 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
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 on 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	x	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	x	
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			
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 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) • • • • • • • • • • • • • • • • • • •			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	_		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1		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		x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			1
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Forr	n 990 (2021) National Iranian American Council 73-16260	26	P	age 6
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			. x
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		x
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6 7-	Did the organization have members or stockholders?	6		x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7.0		
F	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?	76		
0		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
2	The governing body?	8a	v	
a b	Each committee with authority to act on behalf of the governing body?	8b	x x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		<u> </u>	
•	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			А
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
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	х	
с	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	х	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	L
b	Other officers or key employees of the organization	15b		x
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
800	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Statement #17			
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.			
40	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
20	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		/	

Form 990 (202	21) National Iranian American Council	73-1626026	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Con Independent Contractors	mpensated Employe	es, and
	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 wi	thin 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

			mpe			arry cu	nen		103100.	
					(C)					
(A)	(B)	Position				(D)	(E)	(F)		
Name and title	Average	`	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated amount	
	hours	offic	er and	d a dii	rector	/trustee)	compensation	compensation	of other
	per week (list any							from the organization (W-2/	from related organizations W-2/	compensation from the
	hours for	or c	Inst	Officer	Key	Hig	Former	1099-MISC/	1099-MISC/	organization and
	related	vidu.	itutic	cer	em	hest ploye	mer	1099-NEC)	1099-NEC	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	e com				
	below	Istee	rust		e	pen				
	dotted line)		ee			Highest compensated employee				
						<u>u</u>				
(1) Jamal Abdi	40.00									
President		х		х				118,000	0	0
(2) Ardavan Badii	1.00									
Director		х						0	0	0
(3) Siobhan Coley-Amin	1.00									
Director		х						0	0	0
(4) Masoud Loghmani	<u>1.00</u>									
Director		х						0	0	0
(5) Ahmad Shams	<u>1.00</u>									
Director		х						0	0	0
(6) Ladan Manteghi	<u>1.00</u>									
Chair		х		х				0	0	0
(7) Payman Jarrahy	<u>1.00</u>									
Director		х		х				0	0	0
(8) Max Safavi	1.00									
Treasurer		х		х				0	0	0
<u>(9)</u>										
<u>(10)</u>										
<u>(11)</u>	L									
<u>(12)</u>										
<u>(13)</u>										
(14)										
÷-'										
	•									

Form 990 (2021)

(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) Reporta compensa from rela	ation ted	со	(F) nated am of other mpensat	
	(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/ 1099-NEC)	organization 1099-MI 1099-NE	MISC/		rom the inization d organiz	
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b Subtotal		· · · ·	•••		•••		• •						
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but not lim reportable compensation from the organization 	ited to those li							• 118,000 ore than \$100,000 •	of	0			0
 3 Did the organization list any former officer, direct employee on line 1a? <i>If "Yes," complete Schedul</i> 4 For any individual listed on line 1a, is the sum of 	e J for such ii	ndividu	al		••		•••				3	Yes	No X
organization and related organizations greater th	an \$150,000?	P If "Ye									4		x
 5 Did any person listed on line 1a receive or accru for services rendered to the organization? If "Yes 	e compensati	on fror		-				zation or individual			5		x
Section B. Independent Contractors											-		
1 Complete this table for your five highest compen compensation from the organization. Report com										tax year.			
(A) Name and business addre	ess							(B) Description of servic	es	-	(C) Compens	sation	
2 Total number of independent contractors (includi received more than \$100,000 of compensation fi	-				sted	above) wh	10					

	90 (2021) National Iranian American Counc	il		73-16260) 26 Page 9
Part	VIII Statement of Revenue				_
	Check if Schedule O contains a response or note to any line in the interview of the second se	nis Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and 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 1,228,461 g Noncash contributions included in lines 1a-1f 1g \$				
<i>"</i> o o	h Total. Add lines 1a-1f	1,228,461			
Program Service Revenue	2a				
	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents	874			874
	b Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss)	-			
Other Revenue	other than inventory 7a b Less: cost or other basis and sales expenses 7b c Gain or (loss) 7c d Net gain or (loss)	-			
Other	8a Gross income from fundraising events (not including \$	-			
	c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities, See Part IV, line 19 9a 9b Less: direct expenses 9b	-			
	c Net income or (loss) from gaming activities	-			
Miscellanous Revenue	11a Business Code b				
Misc Ré	d All other revenue	1,229,335	0	0	874

4

5

7

8

National Iranian American Council

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 (D) Do not include amounts reported on lines 6b, 7b, (A) (B) (C) Total expenses Program service Fundraising Management and 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations 1 and domestic governments. See Part IV, line 21 . . . 2 Grants and other assistance to domestic 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 118,000 107,276 8,342 2,382 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 153,769 11,958 3,415 169,142 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . 9 Other employee benefits 1,240 61,432 55,848 4,344 10 27,278 1,928 24,799 551 11 Fees for services (nonemployees): а 7 6 1 b С Accounting 61,669 51,169 6,156 4,344 d Professional fundraising services. See Part IV, line 17 . е f Other. (If line 11g amount exceeds 10% of line 25, column a (A) amount, list line 11g expenses on Schedule O.) . 186,387 154,652 18,605 13,130 12 Advertising and promotion 80 80 13 Office expenses 49,800 16,552 33,248 14 40 33 4 3 15 106,214 16 82,648 18,331 5,235 17 13,711 12,389 1,322 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 23 Insurance 6,887 6,887 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.) Bank Fees 4,982 4,982 а b Other 6,530 6,530 С d All other expenses е

812,159

665,671

116,108

30,380

25

26

Total functional expenses. Add lines 1 through 24e . .

.

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 🕨 📘 if following SOP 98-2 (ASC 958-720)

Form 990 (2021) National Iranian American Counc

73-1626026

Page **11**

Par	t 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	36,982	1	273,038
	2	Savings and temporary cash investments	238,606	2	40,250
	3	Pledges and grants receivable, net	800	3	50,000
	4	Accounts receivable, net		4	173,644
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	2,053	8	
βŝ	9	Prepaid expenses and deferred charges	19,422	9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 22,132			
	b	Less: accumulated depreciation 10b 22,132		10c	
	11	Investments - publicly traded securities	897	11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14			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)	321,608	16	559,780
	17	Accounts payable and accrued expenses	143,561	17	25,459
	18			18	
	19			19	
	20	Tax-exempt bond liabilities		20	
~	21 22	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
tie	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	23	Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third		27	
		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	143,561	26	25,459
	-	Organizations that follow FASB ASC 958, check here	,	-	
es		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	178,047	27	534,321
3alá	28	Net assets with donor restrictions		28	
J Dr		Organizations that do not follow FASB ASC 958, check here			
Fur		and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
let ,	32	Total net assets or fund balances	178,047	32	534,321
Ż	33	Total liabilities and net assets/fund balances	321,608	33	559,780

EEA

Form **990** (2021)

Form		3-162602	6	Pa	age 12
Pa	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		229,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		812,	159
3	Revenue less expenses. Subtract line 2 from line 1	3		417,	176
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		178,	047
5	Net unrealized gains (losses) on investments	5			
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		(60,	902)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		534,	321
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule 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:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	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				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				000 (2024)

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Form 990 (2021)

SCHEDULE /	A
(Form 990)	

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

e trust.	2021						
	Open to Public						
	Inspection						
identification number							
1 60 600 6							

OMB No. 1545-0047

Name	ame of the organization Employer identification number								
Nati	on	al Iranian American Cou	ncil				73-162602	6	
Par		Reason for Public Cha		Il organizations mus	st comple	ete this p			
The o	rdar	ization is not a private foundation b	•	-			,		
1	л	A church, convention of churches, of	•	•		,			
2	П	A school described in section 170(•	/ // // ///			
3	Н	A hospital or a cooperative hospital				1)/iii)			
4	Н	A medical research organization op	•				(1)(A)(iii) Enter the		
-		hospital's name, city, and state:		on with a hospital descrit	Jeu III Seci				
5		· · · <u> </u>		r university ewood or on	orated by a	aovorpmo	ntal unit described in		
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)								
6			,	unit described in section	470/6//4/	(
6	Н	A federal, state, or local governmen	-				nom the general nublic		
7		An organization that normally received in exercised 170(b)(4)(4)(4)			jovernmen	tai unit of i	form the general public		
0		described in section 170(b)(1)(A)(v		,					
8 9	Н	A community trust described in sec An agricultural research organization		• • • •	aratad in a	niunation	with a land grant collag	•	
9								e	
		or university or a non-land-grant co	nege of agriculture	(see instructions). Enter	the name,	city, and s	tate of the college of		
10	x	university:An organization that normally received	ups: (1) more then	33 1/3% of its support for	om contrib	itions mar	mbership food and are		
10	Δ	receipts from activities related to its						55	
		support from gross investment inco) from businesses		
11		acquired by the organization after J An organization organized and ope							
12	Н	An organization organized and ope						ses of	
12		one or more publicly supported orga		•			, , ,		
		the box in lines 12a through 12d that						Oncor	
а		Type I. A supporting organization					•	a	
a		the supported organization(s) the			••	Ũ		9	
		supporting organization. You m		• • • •	only of the				
b		Type II. A supporting organizat	-		/ith its sup	ported orga	anization(s) by having		
-		control or management of the s				-	.,	ed	
		organization(s). You must con			p 01 0 0 110 111		indiago dio capport		
с		Type III functionally integrate	•		nnection w	vith, and fu	nctionally integrated wit	h.	
		its supported organization(s) (s						,	
d		Type III non-functionally integ	,	•				n(s)	
		that is not functionally integrate		• • •				. ,	
		requirement (see instructions).	-	• • •					
е		Check this box if the organization	-				I, Type II, Type III		
		functionally integrated, or Type	III non-functionally	integrated supporting or	ganization				
f	Е	nter the number of supported organ	izations						
g	Р	rovide the following information abo	ut the supported or	ganization(s).					
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi	Amount of
				(described on lines 1-10		Ir governing	support (see		r support (see
				above (see instructions))	docum		instructions)	"	nstructions)
					Yes	No			
(A)									
.,									
(B)									
. ,									
(C)									
(D)									
(E)									
Total									
_									

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

-	e A (Form 990) 2021 National II	anian Amer	ican Counc	il		73-162602	
Part	II Support Schedule for Organiz	ations Desc	ribed in Sec	tions 170(b)	(1)(A)(iv) and	1 170(b)(1)(A	.)(vi)
	(Complete only if you checked the complete only if you checked	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	alify under
	Part III. If the organization fails to	o qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	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)						
6	Public support. Subtract line 5 from line 4 .						
Secti	on B. Total Support		•	•		•	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	•	,			12	
13	First 5 years. If the Form 990 is for the o						
	organization, check this box and stop he						<u> ►</u> _
	on C. Computation of Public Suppo		-				
14	Public support percentage for 2021 (line	.,	-			14	%
15	Public support percentage from 2020 Sch					15	%
16a	33 1/3% support test - 2021. If the organ						_
b	box and stop here . The organization qua		• • •	-			
b	33 1/3% support test - 2020. If the organ						
170	this box and stop here . The organization 10%-facts-and-circumstances test - 20	-		-			
17a	10% or more, and if the organization mee	-					
	Part VI how the organization meets the fa						
	-			-	-		· _
h	organization						
b	15 is 10% or more, and if the organization	-					
	in Part VI how the organization meets the					•	•
	organization			-	•		
18	Private foundation. If the organization di						see
	instructions						

National Iranian American Council Support Schedule for Organizations Described in Section 509(a)(2)

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	1,725,398	1,117,568	1,194,567	729,085	1,228,461	5,995,079
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	2,603					2,603
3	Gross receipts from activities that are not an	2,603					2,003
5	unrelated trade or business under section 513						
4	Tax revenues levied for the						
4							
	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	1,728,001	1,117,568	1,194,567	729,085	1,228,461	5,997,682
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	23,428	20,600	37,080	36,783		117,891
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	23,428	20,600	37,080	36,783		117,891
8	Public support. (Subtract line 7c from						
	line 6.)						5,879,791
Secti	on B. Total Support		ł	•			
	dar year (or fiscal year beginning in)►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9		1,728,001	1,117,568	1,194,567	729,085	1,228,461	5,997,682
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources	11,545	14,004	6,495	912	874	33,830
b	Unrelated business taxable income (less	11,545	14,004	0,455		074	33,030
~	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b	11 545	14.004	6 405	01.0	074	
11	Net income from unrelated business	11,545	14,004	6,495	912	874	33,830
	activities not included on line 10b, whether						
40	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,						
			1,137,160			1,229,335	6,037,100
14	First 5 years. If the Form 990 is for the o	•			•		· / · / _
	organization, check this box and stop he						<u></u> ▶ []
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2021 (line a		•	13, column (f))		15	97.39 %
16	Public support percentage from 2020 Sch					16	96.92 %
Secti	on D. Computation of Investment In	come Perce	entage				
17	Investment income percentage for 2021 (line 10c, colur	nn (f), divided l	by line 13, colu	mn (f))	17	1.00 %
18	Investment income percentage from 2020	Schedule A,	Part III, line 17			18	1.00 %
19a	33 1/3% support tests - 2021. If the orga					nore than 33 1/	
	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests - 2020. If the organization	-	-	-			
	line 18 is not more than 33 1/3%, check this box						► 🗍
20	Private foundation. If the organization d		-			-	
-				, . , . ., .			·

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Page 4

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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 lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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	e ins	tructi	ons).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction)	ns).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
_	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	~		
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	0 1		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2021

 Part IV
 Support

EEA

 National Iranian American Council

 Supporting Organizations (continued)

Schedule A (Form 990) 2021

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Page 5

Yes No

Part			izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	izati	ons must complete Sec	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
•	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	-		
•	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
-	on C - Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	-		
-	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	-	ntegrated Type III suppo	rting organization
•	(see instructions).	, 1		

National Iranian American Council

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

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	e A (Form 990) 2021 National Iranian American			62602	6 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(Supporting Organ	izations (continue	d)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppor	ted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orgar	izations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	t VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	oonsive		
	(provide details in Part VI). See instructions.	C I		8	
9	Distributable amount for 2021 from Section C, line 6		1	9	
10	Line 8 amount divided by line 9 amount			10	
	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	s	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - <i>explain in Part VI</i>). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
— <u></u>	Carryover from 2016 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
-	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
a	Applied to 2021 distributions of phot years				
	Remainder. Subtract lines 4a and 4b from line 4.				
<u> </u>	Remaining underdistributions for years prior to 2021, if				
5					
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.			_	
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c. Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
<u> </u>	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				
EEA				Sch	edule A (Form 990) 2021

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

SCHE	DULE C		Political Campaign a	nd Lobbvind	a Activi	ties	OMB No. 1545-0047
(Form	990)	For (Drganizations Exempt From Income 1		-		2021
	ent of the Treasury Revenue Service	Complete	ete if the organization is described be Go to www.irs.gov/Form990 for in			or Form 990-EZ.	Open to Public Inspection
		vered "Yes,"	on Form 990, Part IV, line 3, or Form				•
	-		Complete Parts I-A and B. Do not com		· ·		
• Se	ection 501(c) (othe	er than section	on 501(c)(3)) organizations: Complete P	arts I-A and C below	. Do not com	plete Part I-B.	
• Se	ection 527 organiz	ations: Com	plete Part I-A only.				
If the o	rganization answ	vered "Yes,"	" on Form 990, Part IV, line 4, or Form	990-EZ, Part VI, lin	e 47 (Lobby	ing Activities), then	l
		-	that have filed Form 5768 (election und				
		0	that have NOT filed Form 5768 (election	,	<i>,,</i> .		•
	-		" on Form 990, Part IV, line 5 (Proxy T	ax) (See separate ir	nstructions)	or Form 990-EZ, Pa	art V, line 35c (Proxy
	ee separate instr	•					
-	of organization	5), or (6) org	anizations: Complete Part III.			Employer identific	ation number
	onal Iranian	Amonico				73-1626026	
Part			e organization is exempt und	er section 501(c) or is a		anization.
1	-		organization's direct and indirect politica	•	-		Janii 20000
•	definition of "polit		•	i sampaign asarraso			
2	•		penditures. See instructions			► \$	
3		-	ampaign activities. See instructions				
Part	I-B Comp	plete if th	e organization is exempt und	er section 501(c)(3).		
1	Enter the amoun	t of any exci	se tax incurred by the organization unde	er section 4955 •••		· · · · • • • • • • • • • • • • • • • •	
2	Enter the amoun	t of any exci	se tax incurred by organization manage	rs under section 495	5	· · · · · ► \$	
3	If the organizatio	n incurred a	section 4955 tax, did it file Form 4720 f	or this year? • • • •			🗌 Yes 🗌 No
4a	Was a correction	made?					🗌 Yes 🔄 No
	If "Yes," describe						(0)
Part	•		e organization is exempt und	•		t section 501(c)	(3).
1			pended by the filing organization for sect			• •	
2						· · · · · ► \$	
2		-	organization's funds contributed to othe	•		► ¢	
3	•		s			φ	
Ũ	•	•			-	► \$	
4			Form 1120-POL for this year?				· · Yes No
5			and employer identification number (EI				
			. For each organization listed, enter the	, .	-		•
	-		putions received that were promptly and				
	as a separate se	gregated fur	nd or a political action committee (PAC).	If additional space is	s needed, pro	ovide information in F	Part IV.
	(a) Name		(b) Address	(c) EIN	(d) Amo	unt paid from	(e) Amount of political
	(-)		(-)	(-)	filing or	ganization's o	contributions received and
					funds. If r	ione, enter -0	promptly and directly delivered to a separate
							political organization.
							If none, enter -0
(1)							
(2)							
(3)							
(4)							
(5)							
(0)							
(6)							
For Pap	erwork Reduction	Act Notice, se	ee the Instructions for Form 990 or 990-EZ			Sc	hedule C (Form 990) 2021
EEA							

Sch	edul		n American Council	73-16260	
P	art	II-A Complete if the organization	is exempt under section 501(c)(3) and file	ed Form 5768 (ele	ection under
		section 501(h)).			
Α	Ch	neck 🕨 🔲 if the filing organization belongs to a	n affiliated group (and list in Part IV each affiliated group	member's name,	
		address, EIN, expenses, and share	of excess lobbying expenditures).		
в	Ch	neck 🕨 🔲 if the filing organization checked boy	x 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 of	pinion (grassroots lobbying)		
	b	Total lobbying expenditures to influence a legisla	tive body (direct lobbying)		
	С	Total lobbying expenditures (add lines 1a and 1b)		
	d	Other exempt purpose expenditures		812,159	
	е	Total exempt purpose expenditures (add lines 10	c and 1d) ••••••••••••••••••••••••••••••••••	812,159	
	f	Lobbying nontaxable amount. Enter the amount	from the following table in both		
	-	columns.		146,824	
		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.		
		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	e 1f)	36,706	
	h	Subtract line 1g from line 1a. If zero or less, ente	er -0-	ļ	
	i	Subtract line 1f from line 1c. If zero or less, enter	r-O		
	j		ne 1h or line 1i, did the organization file Form 4720	-	
		reporting section 4911 tax for this year?		[Yes No

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total			
2a	Lobbying nontaxable amount	236,329	183,042	208,982	146,824	775,177			
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,162,766			
c	Total lobbying expenditures	7,188				7,188			
d	Grassroots nontaxable amount	59 <i>,</i> 082	45,761	52,246	36,706	193,795			
e	Grassroots ceiling amount (150% of line 2d, column (e))					290,693			
f	Grassroots lobbying expenditures	3,472				3,472			

EEA

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021 National Iranian American Council

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

	(election under section 501(h)).					
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed				(a)		
	description of the lobbying activity. Yes			A	mount	t
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)?					
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?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5), or :	sectio	on	
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		• • •	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (DR (I	o) Pa	rt III-A	A, line	e 3, is
	answered "Yes."					
1	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 year	• •	2a			
b	Carryover from last year	• •	2b			
C	Total · · · · · · · · · · · · · · · · · · ·	• •	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions	. <u>.</u>	5			
Dort	IV Supplemental Information					

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEE	DULE D
(Form	990)

Supplemental Financial Statements

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

2021 **Open to Public** Inspection

OMB No. 1545-0047

Departn	nent of the Treasury	· · · · · · · · · · · · ·	Attach to Form 990.			Open to Public
	Revenue Service	Go to www.irs.gov/Form9	90 for instructions a	nd the latest inform		Inspection
Name o	f the organization				Employer identifica	ation number
		American Council			73-16260	26
Pa		ations Maintaining Donor Advised			ccounts.	
	Complet	te if the organization answered "Yes"	on Form 990, Part	IV, line 6.		
			(a) Donor a	advised funds	(b) Funds	s and other accounts
1	Total number at e	end of year • • • • • • • • • • • • • • • • • • •				
2	Aggregate value	of contributions to (during year) • • • •				
3	Aggregate value	of grants from (during year)				
4		at end of year				
5	Did the organizat	tion inform all donors and donor advisors ir	writing that the asset	s held in donor advise	ed	
	-	janization's property, subject to the organiz	-			🗌 Yes 📋 No
6	-	tion inform all grantees, donors, and donor	-	-		
	-	e purposes and not for the benefit of the do				
		missible private benefit?				🗌 Yes 🗌 No
Par		rvation Easements.				
		e if the organization answered "Yes"				
1		nservation easements held by the organiza				
		of land for public use (for example, recreati	on or education)	—	a historically importa	
	Ξ	natural habitat		Preservation of a	a certified historic str	ructure
	Preservation of					
2	•	a through 2d if the organization held a qua	ified conservation cor	tribution in the form c		
		last day of the tax year.				at the End of the Tax Year
а		conservation easements				
b		stricted by conservation easements • • •				
С		ervation easements on a certified historic st	. ,		· · 2c	
d		ervation easements included in (c) acquired				
		listed in the National Register				
3		ervation easements modified, transferred, r	eleased, extinguished	, or terminated by the	organization during	the
	tax year 🕨					
4		s where property subject to conservation ea		▶		
5	-	zation have a written policy regarding the pe		-		
		nforcement of the conservation easements				
6	Staff and volunte	er hours devoted to monitoring, inspecting	handling of violations	, and enforcing conse	ervation easements	during the year
	►					
7	Amount of expen	nses incurred in monitoring, inspecting, han	dling of violations, and	d enforcing conservat	ion easements durir	ng the year
	▶\$					
8		ervation easement reported on line 2(d) abo	• •			
_	and section 170(••• Yes 🗌 No
9		ribe how the organization reports conserva		•		
		nd include, if applicable, the text of the foot	note to the organization	on's financial stateme	nts that describes th	ie
Der		counting for conservation easements.	of Art Listoria		Other Similar	Acceto
Par		zations Maintaining Collections			Other Similar	Assets.
	•	te if the organization answered "Yes"				
1a	•	n elected, as permitted under FASB ASC 9	•			orks
	-	reasures, or other similar assets held for pu		-	•	
	•	in Part XIII the text of the footnote to its fina				
b	•	n elected, as permitted under FASB ASC 9	•			
		asures, or other similar assets held for publ	ic exhibition, education	n, or research in furth	erance of public ser	vice,
	•	ving amounts relating to these items:				
		luded on Form 990, Part VIII, line 1 • • •				
		ded in Form 990, Part X • • • • • • • • •				
2	-	n received or held works of art, historical tr			l gain, provide the	
	-	ts required to be reported under FASB ASC	-			
а		d on Form 990, Part VIII, line 1 • • • • •				
b	Assets included i	in Form 990, Part X			🕨 💲	

	D (Form 990) 2021 National Irania						73-1626		Page 2
Par	t III Organizations Maintaining	Collections of	Art, Histo	orical 1	Freasures	, or O	ther Similar As	ssets (co	ontinued)
3	Using the organization's acquisition, access	sion, and other recor	ds, check an	y of the f	ollowing that	make si	gnificant use of its		
	collection items (check all that apply):				-		-		
а	Public exhibition		dГ	loano	r exchange pi	rograms			
b	Scholarly research		e [-			
c	Preservation for future generations		• _	Jourier					
	_ •	allastiana and avala	in how thou f	urth or th	o organizatio		ant nurnage in Dart		
4	Provide a description of the organization's o	collections and expla	in now they i	urmerim	e organizatio	n's exer	npt purpose in Part		
_	XIII.					,			
5	During the year, did the organization solicit		-		-			Π	Π
Daw	assets to be sold to raise funds rather than		part of the or	rganizatio	on's collection	1?		· 🗌 Yes	No No
Par		-		000 5	S	0			-
	Complete if the organization	answered res	on Form	990, F	art IV, line	9, or	reported an arr	iount on	Form
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custo							_	_
	included on Form 990, Part X?							· 🗌 Yes	No No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	ollowing table	e:					
							Am	ount	
с	Beginning balance					. 1c	:		
d	Additions during the year					. 1d	1		
е	Distributions during the year						•		
f	Ending balance								
2a	Did the organization include an amount on						itv?	Yes	No
b	If "Yes," explain the arrangement in Part XII						•	_	=
Par					provided on i	art An			
	Complete if the organization	answered "Yes	" on Form	990 F	Part IV line	10			
			1						
4.5	Designing of the set below as	(a) Current year	(b) Prior	year	(c) Two years	back	(d) Three years back	(e) ⊢oury	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 cu	rrent year end balan	ce (line 1g, c	olumn (a	a)) held as:				
а	Board designated or quasi-endowment								
b	Permanent endowment	%	_						
C	Term endowment %								
•	The percentages on lines 2a, 2b, and 2c sh								
3a	Are there endowment funds not in the poss		zation that an	e held ar	nd administer	ed for th	0		
Ja	organization by:							Ŀ	Yes No
	(i) Unrelated organizations							- 3a(i)	
	(ii) Related organizations							- 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiz	•				• • • •		. 3b	
4	Describe in Part XIII the intended uses of the		lowment fund	ls.					
Par		-	" an -	000 5	ant N/ Ha	11- 1		Dent V. I	ine 10
	Complete if the organization	answered "Yes	on Form	990, P	rart IV, line	11a. S	See ⊢orm 990,	Part X, I	ne 10.
	Description of property	(a) Cost or oth		• •	r other basis	• •	Accumulated	(d) Book	value
		(investm	ent)	(0	other)	d	epreciation		
1a	Land	•••							
b	Buildings								
с	Leasehold improvements								
d	Equipment				22,132		22,132		
е	Other								
Total.	Add lines 1a through 1e. <i>(Column (d) must e</i>	I	X, column (E	3), line 10)c.)				
	U (1111 (1))			,	,				

Schedule D (Form		American Co	uncil			73-3	1626026	Page 3
Part VII	Investments - Other Securities.							
	Complete if the organization answered	"Yes" on For	m 990, Par	t IV, lin	e 11b. See	Form	990, Part X,	line 12.
	(a) Description of security or category		(b) Book va	lue		(c)	Method of valuation	:
	(including name of security)		(-,				end-of-year market v	
(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	"Yes" on For	m 990, Par	t IV, lin	e 11c. See l	Form	990, Part X,	line 13.
	· · ·							
	(a) Description of investment		(b) Book va	liue			Method of valuation end-of-year market v	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
	n (b) must equal Form 990, Part X, col. (B) line 13.)	•						
Part IX	Other Assets.					_		
i urenz	Complete if the organization answered	"Yes" on For	m 990 Par	t IV lin	e 11d See	Form	990 Part X	line 15
	· · ·		in 000, i ui	,	0 114. 000			
(1)	(a) Des ty Deposits	cripuon					(b) Boo	ok value
(1) (2)	ty Deposits							22,848
(3)								
(4)								
(5)								
(6)								
(7)								
(8)						+		
(9) Tatal (Calum	n (h) must souch Form 000, Port X, sol. (P) line 15)							
Part X	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.							22,848
	Complete if the organization answered	"Yes" on For	m 900 Par	t IV/ lin	e 11e or 11f	Sac	Form 000	Part X
	line 25.		in 550, i ai	,		. 000	- onn 330, r	arr _A ,
4								
1. (1) Ecdoral i	(a) Description of liability	(b) Book v	aiue					
(i) rederal	income taxes							

<u></u>		(b) book value
(1) Federal ir	ncome taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) must equal Form 990 Part X col. (B) line 25.)	

		73-1626026	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,229,233
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	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.)		
е	Add lines 2a through 2d	2e	(102)
3	Subtract line 2e from line 1	3	1,229,335
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	1,229,335
Part		per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	812,057
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	812,057
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	102
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	812,159
Part			
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4;	Part X, line	

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

01. Other revenues not included on Form 990 (Part XI, line 2d)

Debit balance of other income included in other expense.

02. Other expenses included on Form 990 (Part XII, line 4b)

Debit balance of other income included in other expense.

03. Footnote for uncertain tax position under FIN 48 (Part X)

The Organization follows the Financial Accounting Standards Board Accounting Standards Codification,

which provides guidance on accounting for uncertainty in income taxes recognized in the

Organizations' consolidated financial statements, if any. As of year end, the Organization had no

unrecognized tax benefits related to uncertain tax positions in its information return that would

qualify for either recognition or disclosure in its consolidated financial statements.

The Organization's policy would be to recognize interest and penalties on tax positions related to

its unrecognized tax benefits in income tax expense in the consolidated financial statements.

Through year end, there have been no matters that would have resulted in an accrual for interest and/or penalties.

Generally, the tax years before 2018 are no longer subject to examination by federal, state, or local taxing authorities.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2021
Open to Public
Inspection

Department of the Treasury Internal Revenue Service Name of the organization

National Iranian American Council

Employer identification number 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 reconcile beginning net assets because 990 was prepared before the audited financial

statements were completed.

06. List of other fees for services expenses (Part IX, line 11g)

Other Professional Fees \$184,122

Translation \$100

Public Relations \$2,165

SCHEDULE R (Form 990)	Related ► Complete if the orga	-	swered "Yes"		Partnerships IV, line 33, 34, 35b, 34			OMB No. 15 202 Open to	21
Internal Revenue Service	Go to www.	/w.irs.gov/Fo	orm990 for ins	tructions and the l	latest information.			Inspec	tion
Name of the organization							Employer identifica		
	an American Council cation of Disregarded Entities. Comple	te if the o	ragnization	answered "Ves	on Form 000 Pr	art IV/ line 33	73-1626026	0	
	(a)		ganization	(b)		(d)	(e)		΄f)
Nam	e, address, and EIN (if applicable) of disregarded entity		Prim	ary activity	(C) Legal domicile (state or foreign country)	Total income	End-of-year asset	s Direct o	f) ontrolling ntity
(1)					5 57				
(2)									
(3)									
(4)									
(5)									
						- <u></u>			
	cation of Related Tax-Exempt Organiz			e organization	answered "Yes" c	on Form 990, Pa	rt IV, line 34 k	because it	nad
	nore related tax-exempt organizations d	uring the ta	ax year.			(2)	(5)		(a)
Name	(a) e, address, and EIN of related organization	Prima	(b) ary activity	(C) Legal domicile (state	(d) Exempt Code section	(e) Public charity status	(f) Direct contro		(g) 512(b)(13) olled entity?
		1 11116	ary activity	or foreign country)	Exempt obde section	(if section 501(c)(3)) entity	Ye	
(1) NIAC Action,	47-3979683	Advancin	ig the						
1629 K Street		-	es of the						
Washington DC	20006	Iranian-	American	MD	501(c)(4)		N/A		X
(2)									
(3)									<u> </u>
									_
(4)									
(5)									+
N-7									

Page 2	
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Part III	dentification of because it had on	Related Organiz	zations Taxab	le as a	Partners	ship. C	complete i	f the the t	organiza	ation ans	wered	l "Ye	s" 0	n Form 990	, Part I	V, lir	e 34,	-
	(a) e, address, and EIN of elated organization	(b) Primary activity	/ (c) Legal domicile (state or foreign		(d) entity	Prec incom un exclu	(e) dominant he (related, hrelated, uded from hx under	Sha	(f) re of total income	(g) Share of en year asse		(h) Dispropor allocatio	tionate	(i) Code V-UBI amount in box 2 of Schedule K- (Form 1065)	Ge 20 ma 1 p ^a	j) neral or inaging artner?	Per	(k) centage /nership
(1)			country)				ns 512-514)				`	Yes	No		Yes	No	<u>)</u>	
(2)																		
(3)																		
(4)																		
(5)																		
Part IV	Identification of line 34, because i	Related Organia t had one or mor	zations Taxab	le as a	Corpora	tion o as a c	r Trust. C corporatio	omp n or t	lete if the rust duri	e organiz ing the ta	ation x yea	ansv r.	vere	d "Yes" on	Form 9	990, 1	Part I	V,
Na	(a) ime, address, and EIN of related c	organization	(b) Primary activi		(C) Legal don (state or foreigr		(d) Direct contro entity	Iling	(e Type o (C corp, S d		(f) Share c incor	of total	enc	(g) Share of d-of-year assets	(h) Percenta ownersh	-	(i) ection 51 contro entity	2(b)(13) olled
(1)																	Yes	No
(2)																		
(3)																		
(4)																		
(5)																		

Page 3	
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x x x x x

_x _x _x _x _x

x x x x x

Schedule R (F	orm 990) 2021 National Iranian American Council		7	/3-1626026		Page 3
Part V	Transactions with Related Organizations. Complete if the organization answ	vered "Yes" on Form	n 990, Part IV, line 34	l, 35b, or 36.		
Note: Co	nplete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Ye	es No
1 Durin	the tax year, did the organization engage in any of the following transactions with one or more related	organizations listed in Part	ts II-IV?			
a Recei	pt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1	a	x
b Gift, g	rant, or capital contribution to related organization(s) • • • • • • • • • • • • • • • • • • •			1	b	x
c Gift, g	rant, or capital contribution from related organization(s) • • • • • • • • • • • • • • • • • • •			1	c	x
d Loans	or loan guarantees to or for related organization(s)			1	d	x
e Loans	or loan guarantees by related organization(s)			1	е	x
f Divide	nds from related organization(s)			1	f	x
g Sale (of assets to related organization(s)			1	g	x
h Purch	ase of assets from related organization(s) • • • • • • • • • • • • • • • • • • •			1	h	x
i Excha	nge of assets with related organization(s)			1	i	x
j Lease	of facilities, equipment, or other assets to related organization(s)			1	j	x
k Lease	of facilities, equipment, or other assets from related organization(s)			1	k	x
I Perfo	mance of services or membership or fundraising solicitations for related organization(s)			1	I	x
m Perfo	mance of services or membership or fundraising solicitations by related organization(s)			1	m	x
n Shari	ng of facilities, equipment, mailing lists, or other assets with related organization(s)			1	n	x
o Shari	ng of paid employees with related organization(s)			1	0	x
p Reim	oursement paid to related organization(s) for expenses			1	p	x
q Reim	oursement paid by related organization(s) for expenses			1	q	x
r Other	transfer of cash or property to related organization(s)			1	r	x
s Other	transfer of cash or property from related organization(s)			1	s	x
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered relation	ships and transaction thre	sholds.		
	(a)	(b)	(C)	(d)		
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	ount invo	olved
(1)						

(2)

(3)

(4)

(5)

Page 4

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.

	(a)	(b)	(c)	(d)	(e		(f)	(g)	(h)	(i)	(j)		(k)
	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	organiz	tion c)(3) ations?	total income	Share of end-of-year assets	alloca	ortionate ations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	man par	eral or aging tner?	Percentage ownership
				0001010 012 014)	Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														

me(s) as shown on return	Federal Supporting Statements	2021 PG01
	anian American Council	73-1626026
	Form 990, Part VI, Section C, line 17	
	Form 990, Part VI, Section C, Tine I/	Statement #017
	a compact this form 000	
s required	e a copy of this Form 990 I to be filed:	
Californi District	a of Columbia	
Maryland		