5 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000

at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

B check regulated Channel of organization Fatimised USA Mumber and stroke (pr 0 box, if mail is not delivered to sheet address) Rominised Rominised American center Table (1904 of Section 1904 o	Α	For the	2011 calenda	ar year, or tax year beginning January 1 , 2011, and ending	Dec	cember 3	1 , 20	11 _
Manufacture and street in P P D box, if mail is not delivered to street address) Room/suite E Telephonon number 1100 W 42nd Street 1100 W 42nd Str	В	Check if ap	applicable C Name of organization D Em		D Emp	Employer identification number		er
Interest term Table Tab	☑	Address c	ss change Fatimid USA			20-	5620781	
Terrelated The content of the c	닏	1	-	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Tele	phone num	ber	
Ageletatine preading	H	•		1100 W 42nd Street 125	1	317-	716-0744	
Indianapolis, IN 45288 Number Nu	H	i		City or town, state or country, and ZIP + 4	F Gro	up Exemp	otion	
Website: ▶ fatimidusa.org Zi 501(c)(3) 501(c)(1) 4 (mant no) 4947(a)(1) or 527 Form 990 Per 72 72 72 72 73 73 74 74 74 74 74 74	П	i		Indianapolis, IN 46208	Nur	mber 🕨		
Tax-exempt status (check only one)	G	Account	ting Method.	✓ Cash Accrual Other (specify) ►	H Check	▶ ☐ if ti	he organizatioi	n is not
K Check If the organization is not a section 509(ig(s) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-E2 or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 55, 6c, and 75, to line 9 to determine gross receipts if gross receipts are \$200,000 or more, or if total assets (Part II), line 25, column (B) below are \$500,000 or more, in the part I	1	Websit	te: ► fatim		require	d to attac	h Schedule B	
not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts if gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 netsed of Form 990-EZ Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received. 1 104625.90 2 Program service revenue including government fees and contracts 2 Program service revenue including government fees and contracts 3 Membership dues and assessments. 4 Investment income 5 Gross amount from sale of assets other than inventory 5 Less: cost or other basis and sales expenses. 5 Calming and fundraising events 6 Gaming and fundraising events 7 Gross income from gaming (attach Schedule G if greater than \$15,000) 6 Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6 Less: direct expenses from gaming and fundraising events 9 Less: cost of goods sold 10 Ret income or (loss) from gaming and fundraising events 11 Contributions of the fundraising events (loss) from gaming and fundraising events (loss) from gaming and fundraising events (loss) from gaming events (lo	J	Tax-exen	npt status (che	eck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	(Form 9	990, 990-E	EZ, or 990-PF)	
not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts if gross receipts are \$200,000 or more, or if total assets (Part II). L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts if gross receipts are \$200,000 or more, or if total assets (Part II). Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received. 1 Contributions, gifts, grants, and similar amounts received. 2 Program service revenue including government fees and contracts. 3 Membership dues and assessments. 4 Investment income 5a Gross amount from sale of assets other than inventory. 5a Gross amount from sale of assets other than inventory (Subtract line 5b from line 5a). 5b Less: cost or other basis and sales expenses. 5c Cain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a). 6 Gaming and fundraising events (not including \$ of contributions from fundraising events (not including \$ of contributions	K	Check ▶	lf the	e organization is not a section 509(a)(3) supporting organization or a section 527 organiz	ation and i	ts gross re	eceipts are nor	mally
Part Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)		not more						
Part Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) Check if the organization used Schedule O to respond to any question in this Part I 104625.90		the orga	inization choo	oses to file a return, be sure to file a complete return				
Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)	L	Add lines	5b, 6c, and 7	b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total ass	sets (Part II	ı		
Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, gants, and similar amounts received. 1 1 104625.90 2 Program service revenue including government fees and contracts 2 2 3 4 Investment income 4 4 5 5 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		line 25, c	olumn (B) belo	ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	_	
1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5 Less: cost or other basis and sales expenses 6 Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Garming and fundraising events 6 Garming and fundraising events 7 Gross income from garning (attach Schedule G if greater than \$15,000) 7 Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 8 C Less: direct expenses from garning and fundraising events 8 d Net income or (loss) from garning and fundraising events 9 Less: cost of goods sold 9 Total revenue (describe in Schedule O) 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 A265 03 20 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 22 Net assets or fund balances at end of year. Combine lines 18 through 20	F	Part I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	he instru	ctions fo	or Part I.)	
Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5 Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from gaming (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less: direct expenses from gaming and fundraising events c Less: direct expenses from gaming and fundraising events b Less: cost of goods sold c Gross sold inventory, less returns and wances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (subtract line 7b from line 4) 7 Card The venue. Add lines 1, 2, 3, 4, 5c, 6d 7c, and the first line 7b from line 4 7 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d 7c, and the first line first l			Check if	the organization used Schedule O to respond to any question in this Par	tl			
Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5 Eas: cost or other basis and sales expenses 5b Cain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) 6 Gross income from fundraising events (not including of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6 Less: direct expenses from gaming and fundraising events 6 Net income or (loss) from gaming and fundraising events 6 Net income or (loss) from gaming and fundraising events 6 Less: cost of goods sold 6 Gross as as of inventory, less returns and wances 7 Gross profit or (loss) from sales of inventory Subtract line 7b from line 8 Other revenue (describe in Schedule O) 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 1 pending profits 1 pending prof		1	Contribution	ons, gifts, grants, and similar amounts received		1	104	625.90
A Investment income 5a Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less: direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events b Less: cost of goods sold Gross sales of inventory, less returns and warens b Less: cost of goods sold Gross profit or (loss) from sales of inventory subtract line 7b from line 7c Other revenue (describe in Schedule O) 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 14 Occupancy, rent, utilities, and maintenance 17 Total expenses (describe in Schedule O) 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (explain in Schedule O) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Total expenses at end of year. Combine lines 18 through 20		2	Program s	ervice revenue including government fees and contracts		2		
Fig. 2012 Salaries, other compensation, and employee benefits 180 Salaries, other compensation, and employee benefits 190 Salaries, other compensation, and employee benefits 191 Salaries, other compensation, and employee benefits 192 Salaries, other compensation, and employee benefits 193 Salaries, other compensation, and employee benefits 194 Salaries, other compensation, and employee benefits 195 Salaries, other compensation, and employee benefits 196 Salaries, other compensation, and employee benefits 197 Salaries, other compensation, and employee benefits 198 Salaries, other compensation, and employee benefits 199 Salaries, other compensation, and employee benefits 190 Salar		3	Membersh	ip dues and assessments		3		
b Less: cost or other basis and sales expenses . c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . d Gaming and fundraising events . a Gross income from gaming (attach Schedule G if greater than \$15,000) . b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . c Less: direct expenses from gaming and fundraising events . d Net income or (loss) from gaming and fundraising events . d Net income or (loss) from gaming and fundraising events . d Net income or (loss) from gaming and fundraising events . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales of inventory . d Net income or (loss) from sales or fund balances at end of year. Combine lines 18 through 20 . 20 Net assets or fund balances at end of year. Combine lines 18 through 20 . 21 1 106664.98		4	Investment	t income		4		
C Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5a	Gross amo	ount from sale of assets other than inventory 5a				
Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) \$15,000 b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less: direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events line 6c) 7a Gross sales of inventory, less returns and fighwances b Less: cost of goods sold c Gross profit or (loss) from sales of inventor usubtract line 7b from line b Less: cost of goods sold c Gross profit or (loss) from sales of inventor usubtract line 7b from line ground to grow the fighwances Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and		b	Less: cost	or other basis and sales expenses]		
a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less: direct expenses from gaming and fundraising events line 6c) 7a Gross sales of inventory, less returns and howances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory subtract line 7b from line 7a 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d 7c, and DEN 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 A265 03 10 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 106684.98		С	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c		
\$15,000) b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000). c Less: direct expenses from gaming and fundraising events		6	Gaming an	nd fundraising events				
sum of such gross income and contributions exceeds \$15,000). c Less: direct expenses from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or decid			Gross inc	ome from gaming (attach Schedule G if greater than				
sum of such gross income and contributions exceeds \$15,000). c Less: direct expenses from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or decid	9	3	\$15,000)	6a				
sum of such gross income and contributions exceeds \$15,000). c Less: direct expenses from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or (loss) from gaming and fundraising events fine 6c or decided or decided income or decid	Ž.	b	Gross inco	ome from fundraising events (not including \$ of contribut	ions	1 1		
c Less: direct expenses from gaming and fundraising events Gc Net income or (loss) from gaming and fundraising events Gc 7a Gross sales of inventory, less returns and May 18 2012 c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 8 Other revenue (describe in Schedule O) 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, Go 10 Grants and similar amounts paid (list in Schedule O) 9 104625.90 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 12 13 Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance 14 15 Printing, publications, postage, and shipping 15 16 Other expenses (describe in Schedule O) 16 2225.95 17 Total expenses. Add lines 10 through 16 17 2225.95 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 102399.95 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 4265.03 20 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 106664.98	ā	2	from fundr	raising events reported on line 1) (attach Schedule G if the				
d Net income or (loss) from gaming and fundraising certified lines 6a and 6b and subtract line 6c). 7a Gross sales of inventory, less returns and flowances b Less: cost of goods sold C Gross profit or (loss) from sales of inventory subtract line 7b from line 7b 8 Other revenue (describe in Schedule O). 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d 7c, Lata Lata 10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 4265 03 20 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 18 through 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20			sum of suc	ch gross income and contributions exceeds \$15,000) 6b]		
Total revenue, and other payments to independent contractors Printing, publications, postage, and shipping Other expenses (describe in Schedule O) Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at end of year. Combine 10s brown line 20, where 10s leaves 10s leav	_	С]		
Total revenue, and other payments to independent contractors Printing, publications, postage, and shipping Other expenses (describe in Schedule O) Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at end of year. Combine 10s brown line 20, where 10s leaves 10s leav	3	d	Net incom	e or (loss) from gaming and fundraising events (auth lines 6a and 6b and	subtract			
b Less: cost of goods sold c Gross profit or (loss) from sales of inventor usubtract line 7b from line 4 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d 7c, and a profit or 10 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 4265 03 20 Other changes in net assets or fund balances (explain in Schedule O) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 106664.98)		line 6c)			6d		
b Less: cost of goods sold c Gross profit or (loss) from sales of inventor usubtract line 7b from line 4 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d 7c, and a profit or 10 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 4265 03 20 Other changes in net assets or fund balances (explain in Schedule O) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 106664.98		7a	Gross sale	s of inventory, less returns and applyances .				
8 Other revenue (describe in Schedule O)		b	Less: cost	of goods sold				
8 Other revenue (describe in Schedule O)		c	Gross prof	fit or (loss) from sales of inventory (\$ubtract line 7b from line 🙉		7c		
Benefits paid to or for members		8	Other reve	nue (describe in Schedule O)		8		
Benefits paid to or for members		9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 3 LEV	▶	9	104	625.90
Salaries, other compensation, and employee benefits Professional fees and other payments to independent contractors Occupancy, rent, utilities, and maintenance Printing, publications, postage, and shipping Other expenses (describe in Schedule O) Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 18 through 20 12 13 14 15 16 17 18 19 19 19 10 10 10 10 10 10 10		10	Grants and	d similar amounts paid (list in Schedule O)		10		
Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 18 through 20 13 14 15 16 17 18 19 19 19 10 10 10 10 10 10 10		11	Benefits pa	aid to or for members		11		
Other expenses (describe in Schedule O)	Openses	12	Salaries, o	ther compensation, and employee benefits		12		
Other expenses (describe in Schedule O)		13	Profession	al fees and other payments to independent contractors		13		
Other expenses (describe in Schedule O)		14	Occupancy	y, rent, utilities, and maintenance		14		
Total expenses. Add lines 10 through 16	ŵ	ì 15	Printing, pi	ublications, postage, and shipping		15		
Total expenses. Add lines 10 through 16		16	Other expe			16	2	225.95
Excess or (deficit) for the year (Subtract line 17 from line 9)	_	17		enses. Add lines 10 through 16		17	2	225 95
Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	v.	, 18		(deficit) for the year (Subtract line 17 from line 9)		18	102	399 95
21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 10664.98	set	19	Net assets	s or fund balances at beginning of year (from line 27, column (A)) (must ag				
21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 10664.98	Net As	?	end-of-yea	ar figure reported on prior year's return)		19	4	265 03
21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 10664.98		20	Other char	nges in net assets or fund balances (explain in Schedule O)		20		
		21		· ·		21		

[∵] Paı	t II Balance Sheets. (see the instructions	for Part II.)				
	Check if the organization used Schedul	e O to respond to a	ny question in this	Part II	. ,	
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[4265 03	22	106664.98
23	Land and buildings		[23	
24	Other assets (describe in Schedule O)			_	24	
25			<u>.</u>	4265.03	-	106664.98
26	Total liabilities (describe in Schedule O)				26	2225.95
27	Net assets or fund balances (line 27 of colum			<u> </u>	27	106664.98
Par		•		•		Expenses
VA /le = /	Check if the organization used Schedul					quired for section
	t is the organization's primary exempt purpose?					(c)(3) and 501(c)(4) anizations and section
as m	ribe the organization's program service accomp leasured by expenses. In a clear and concise i	manner, describe the				7(a)(1) trusts, optional others)
perso	ons benefited, and other relevant information for e This year was focussed on raising funds and creati	· 	profile.			
	(O				00.	
29	(Grants \$) If this amoun	t includes foreign gra	ants, check here .	<u> ▶ ⊔</u>	288	0
29						
	(Grants \$) If this amoun	t includes foreign gra	ente chack hara		298	
30					236	-
•						
	(Grants \$) If this amoun	t ıncludes foreign gra	ants, check here .	• 🗇	30a	a
31	Other program services (describe in Schedule O)					
		t includes foreign gra			318	a
32	Total program service expenses (add lines 28a	through 31a)		>	32	0
Par	List of Officers, Directors, Trustees, and Ke	ey Employees. List ead	ch one even if not con	npensated. (see the	nstru	uctions for Part IV.)
	Check if the organization used Schedul	e O to respond to a	ny question in this	Part IV	. •	🗆
	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISO (if not paid, enter -0-)) Estimated amount of other compensation
Dr Na	asir Gondal	5	(ii not paid, enter o)	delence compensate	-	
41 P	elican Court, Syosset , NY 11791	3			0	0
	iq Siddiqui	5	-		\dashv	
5880	Gadsen Dr, Plainfield, IN 46168		(o	0	0
Dr V	/aleed Bin Azhar	5				
Kara	chi, Pakistan			o	0	0
					4	
					+-	
				 	+	
•						
			 			
			-	 	+	
			1			
			ŀ		1	

Part	· · · · · · · · · · · · · · · · · · ·			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Pari	V	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	100	✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35 _a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		√
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			ليــــا
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
_	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		- ✓
30 p	If "Yes," complete Schedule L, Part II and enter the total amount involved	1	*,	.,
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9		, 3	R
b	Gross receipts, included on line 9, for public use of club facilities	 , ,,	*, ;	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under	, ,	***	
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		, ; ;	P ×2
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	_	٠, ١	* 2
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	d A	, 1	
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	\$100 v.	\$, v	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	.*		<i>5</i> .
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed. ▶ Indiana			
42a		317-716-0744		
b	Located at ► 1100 W 42nd Street, Suite 125, Indianapolis, IN ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	464	208	No
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No.
	If "Yes," enter the name of the foreign country. ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	· ·	.	▶ □
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			*
	Form 990-EZ (see instructions)	45b	l	✓

		P	age 4
		Yes	No
in opposition		Ben Service Services	
	46		√
trusts only. A	ll sec	tion	
nswer questio	ns 4	7-491	o
<u></u>			
		Yes	No
during the tax			
	47	ļ	✓
	40		

Form 990-EZ (2011)

46	Did the	ne organization engage, directly or in andidates for public office? If "Yes," o	ndirectly, in political c	ampaign activities	on behalf				
Part \	VI	Section 501(c)(3) organizations 501(c)(3) organizations and secti and 52, and complete the tables Check if the organization used Sci	and section 4947 on 4947(a)(1) none for lines 50 and 51	(a)(1) nonexemp cempt charitable	t charita trusts mu	ble trusts or st answer qu	Ily. All section		
47 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							47 48 49a 49b tors, trustees	√ √ √ and key	
	(a) N	ame and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contribu	lealth benefits, tions to employee lans, and deferred impensation			
None									
									
									
		•	•				· -		
	•••								
f	Total	number of other employees paid ov	er \$100,000	. ▶ No	ne				
51		omplete this table for the organization's five highest compensated independent contractors who each received more than							
	\$100	,000 of compensation from the orga	inization. If there is no	one, enter "None."					
(a) !	Name a	nd address of each independent contractor pa	d more than \$100,000	(b) Type of s	service	(6) Compensation		
		<u> </u>							
None				-					
			·						
				-					
								-	
				1					
	-						-		
					,_				
				<u> </u>					
		number of other independent contra	• • • • • • • • • • • •	•	.▶				
52		ne organization complete Schedule			ons and 49	147(a)(1)	N □ Voc □	No	
Lindor -		xempt charitable trusts must attach				to the best of my l	► Yes L	=	
		of perjury, I declare that I have examined this is domplete. Declaration of preparer (other than					nowledge and be	iiei, ii is	
		allerian.	\ _			4/20	> 12012		
Sign		Signature of officer			Date				
Here		Shariq Siddiqui, Secretary of the I	Board						
		Type or print name and title	<u>-</u>						
Paid		Print/Type preparer's name	Preparer's signature		Date	Check] _{if} PTIN		
Prepa	arer					self-empl			
	e Only Firm's name ► Firm's EIN ►								
		Firm's address ▶				Phone no	_ = =		
May th	e IRS	discuss this return with the prepare	r shown above? See	instructions	<u> </u>	<u> </u>	► ☐ Yes L	_ No	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Fatimid USA Inc	20-5620781
Fatimid USA Inc incurred a total of \$2225.95 in expenses during 2011. These are itemized as follows:	
Bank Fees - \$27	
Returned check (insufficient funds) - \$1000	
Bank Fees - supplies (checks) - \$99 95	
Bank deposit tabulation error - \$1100	
•••••••••••••••••••••••••••••••••••••••	
·	
	