Form 990

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

OMB No. 1545-0047 2020

De	partment o	of the Treasury enue Service	 Do not enter social security numbers on this form as it may be man Go to www.irs.gov/Form990 for instructions and the latest in 	de public.		164	Inspection
A	For th	e 2020 calend	dar year, or tax year beginning 7/01 , 2020, and ending				20 2021
В	Check if	applicable:	C				ification number
	Ad	dress change	MIDDLE EAST MEDIA AND RESEARCH		52-	2068	483
	Na	me change	INSTITUTE, INC.		E Teleph		
	Init	ral return	PO BOX 27837		202	-055	-9070
	Fina	I return/terminated	WASHINGTON, DC 20038-7837	-	202	, ,,,,,	3070
	X Am	ended return			G Gicss	racainte	\$ 9,358,273.
	App	olication pending	F Name and address of principal officer: STEVEN STALINSKY	H(a) Is this a			
			SAME AS C ABOVE	H(b) Are all s			142 110
ī	Tax-e	xempt status:	X 501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527	If "No," a	ittach a lis	t. See ins	tructions
J	Web	site: ► WW	1 Market one	H(c) Group ex	emotion n	umbar Þ	
K	Form		X Corporation Trust Association Other ► L Year of formation				egal domicile: DC
Pa	art I	Summan				State Of It	egar domicse. DC
-	1 E	Briefly describ	e the organization's mission or most significant activities: SEE, SCHED	III E			
a				OLE CO	7		
č					//·		
Ë				A			
Š	2 0	check this box	if the organization discontinued its operations or disposed of mor	re than 25	% of its	nel ass	sets.
Activities & Governance	3 1	number of vot	ing members of the governing body (Part VI, line 1a)ependent voting members of the governing body (Part VI, line 1	<i>J</i>		3	8
es	5 T	ofal number	of individuals employed in calendar year 2020 (Part VI, line 70)		• • • • •	4	5
Ξ	6 7	otal number	of volunteers (estimate if necessary)			6	27
Act	7a T	otal unrelated	business revenue from Part VIII, column (C), line 12		*****	7a	<u>5</u>
	PV	let unrelated	business taxable income from Form 990-T, Part I, The			7b	0.
				Pri	or Year		Current Year
Revenue	8 C	Contributions a	and grants (Part VIII, line 1h).	6.	445,3	53.	8,133,765.
	9 P	rogram servic	ce revenue (Part VIII, line 2g)		686, 9		1,102,313.
leve	10 Ir	nvestment inc	ome (Part VIII, column (A), lines 3, 4		-1,5		-943.
ш	11 0	ther revenue	(Part VIII, column (A), lines 5, 6d, 86, 9c, 10c, and 11e)				
_	12 T	otal revenue	- add lines 8 through 11 (must equal PavIII, column (A), line 12)	8,	130,7	51.	9,235,135.
	14 0	nants and sin	nilar amounts paid (Part IX, column (A), lines 1-3).				
	14 B	elleills paid (o or for members (Part IX, 2007), tine 4)				
es	15 5	alaries, other	compensation, employee beneats (Part IX, column (A), lines 5-10)	2,	144,8	54.	2,243,405.
Expenses	16a P	rotessional tu	ndraising fees (Par XX) column (A), line 11e)				
X	ьт	otal fundraisir	ng expenses (Pan X.cg) mn (D), line 25) ► 593, 155.		nd		37-11-11-11-11-1
"	17 0	ther expense	s (Part IX, colonn (A), lines 11a-11d, 11f-24e)	5,	861,5	72.	5,529,977.
	18 To	otal expenses	. Add lin 3 1)-17 must equal Part IX, column (A), line 25)	8,	006,4	26.	7,773,382.
_	19 R	evenue less e	expenses. Subtract line 18 from line 12		124,3	25.	1,461,753.
200			T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Beginning	of Curren	t Year	End of Year
Not Assets or Fund Balances	20 To	otal assets (P	arl X, line 16)		506,6		4,612,496.
DI P			(Part X, line 26)		717,0	19.	1,361,120.
			und balances. Subtract line 21 from line 20	1,	789,6	23.	3,251,376.
	rtll	Signature					
Under	r penalties lete. Decla	of perjury, I decla eration of preparer	are that I have examined this return, including accompanying schedules and statements, and to the (other than officer) is based on all information of which preparer has any knowledge.	best of my k	nowledge :	and belief	f, it is true, correct, and
		C1	- C		71		
c:~	-	Signature	of officer	Date	0/19	14	
Sig Her	re re	A CTTTI	EN STALINSKY	DUDOM		-	
1101			ni name and title	EXECUT	IVE D	TREC	TOR
		Print/Type prep	Secretary Catalysis according to the secretary	7-	, 10	1. 10	TIN
D-:	4	CANDESCRIPTION OF THE PROPERTY	ETMPEDCED ()- //-		September 1	9 "	
Pai Pre	a parer	Firm's name	110/11/10	> Se	f-employe	0 P	00684202
Use	Only	Firm's address	ISAAC REITBERGER, CPA 10 YEATMAN CT				1.664350
	,	· mm a duoidss			m's EIN		1664350
Mav.	the IRS	discuss this	SILVER SPRING, MD 20902 return with the preparer shown above? See instructions	. <u> </u> Ph	one no.	(240)	Test To
-			The property of the control of the month of the control of the con				X Yes No

	n 990 (2020) MIDDLE EAST MEDIA AND RESEARCH	52-2068483	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
	Did the organization undertake any significant program services during the year which were not listed on the price	~	
-	Form 990 or 990-EZ?		V No
	If "Yes," describe these new services on Schedule O.	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	rvices? Yes	X No
	If "Yes," describe these changes on Schedule O.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A NO
4	[4]	ices, as measured by ex-	nenses
	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	s to others, the total exp	enses,
	and revenue, if any, for each program service reported.		
	(Code:) (Expenses \$ 6,820,463. including grants of \$) (R	evenue \$	
- u	SEE SCHEDULE O	evenue \$)
	PEE PCHEDOTE O		
4 b	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
		¥ 	
10	(Code:) (Expenses \$ including grants of \$) (Re		
40	(Code:) (Expenses \$ including grants of \$) (Re	venue \$)
9			
,			
4 d (Other program services (Describe on Schedule O.)	***************************************	
((Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses ► 6 820 463		

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete		Yes	No
•	Schedule A	1	Х	
2	The second secon	2	Х	
3	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 Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9		9	2	Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V.	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
99	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	b Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b	21	Х
9	c Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d	х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
ı	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	10
Ł	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	•	Х

Part IV	Checklist	of Require	d Schedules	(continued)

Wilesa			Yes	No
22	Pid the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	х	
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		x
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</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 of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
	a 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
2	c 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		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		Х
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		Х
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		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	4		
	Check if Schedule O contains a response or note to any line in this Part V			Щ
1.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c	Х	
BAA	TEEA0104L 10/07/20	Form	990 (20201

Form 990 (2020) MIDDLE EAST MEDIA AND RESEARCH

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, field for the calendar year ending with or within the year exceed by this return. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note: If the sun of lines 1 and 2a is greater than 52,0 your up be required to -6th (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other saudicity over, a financial account in a foreign country (see the 3 period 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 Was the organization as party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization as party to a prohibited fax shelter transaction at any time during the tax year? 5a Was the organization as party to a prohibited fax shelter transaction at any time during the tax year? 5a Was the organization as party to a prohibited fax shelter transaction at any time during the tax year? 5a Was the organization as party to a prohibited fax shelter transaction at any time during the tax year? 5a Was the organization as party to a prohibited fax shelter transaction at year year year year year year year year				Yes	No
b If at least one is reported on line 2a, did the organization file all required feefarel employment tax returns? 2 b X Note: If the sum of lines 1 and 28 is greater fram 329, vum by the reputation 6 -66 (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a Al any time during the celeradry year, did the organization have an interest in, or a signature or other authority over, a translation of the file of the organization have an interest in, or a signature or other authority over, a translation of the file of the organization have an interest in, or a signature or other authority over, a translation of the file of the organization have an interest in, or a signature or other authority over, a translation of the file of the organization have an interest in, or a signature or other authority over, a translation of the file of the organization into a protein the file of the organization and the organization and any time during the tax year? 5 a Was the organization have annual gross receipts that are normally organize than \$100,000, and did the organization solicid any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible? 6 a Does the organization have annual gross receipts that are normally organize than \$100,000, and did the organization solicid any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 b If Yes, indicate the number of Forms 8828 filed during the year and the gross organization file organization organization normal protein the pools or services provided? 9 organization feefance and protein the pools or services provided? 10 the organization feefance	2a		STEE		
Note: If the sum of lines Ia and 2a is greater than 250, you may be required to e-the (see instructions) 3 a Did the organization have unrelated business organ income of \$1,000 or more during the year? 5 a Did Test, has if field a form 980-1 for this year? If the labe 8, provide a explanation on Scedule 0 3 b 4 A at any time during the calendary apply of the sear of the search of				v	
3 a bif the organization have unrelated business gross income of \$1,000 or more during the year?. 3 a bif Yes, a file a farm \$50 file this 2, mile with a profession advented 0. 4 a Na sny time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly a foreign country. 5 a Mas the organization apparty to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization apparty notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b J C If Yes, it line 5 as of 5, of the organization into file form 6886-7? 6 a 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? 6 b J C Organizations that may receive deductible contributions under section 170(c). 8 b J Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 b J Yes, did the organization include with every solicitation and expert year. 9 b J Yes, did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 b J Yes, and the organization are pay to prohibite that the payor and the pay			20	Λ	1000000
b If Yes, that if fled a form 99-Ir of this yast if We for line 98, provide an explanation on Schedulc 0. 4 a A lat you float the during the calendary year, dit the programization have an interest in, or a singular or other substrity over, a financial account in a foreign country. See instructions for flient prequirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization star of the deception of the foreign selection of the value of the goods or services provided? 5 b If Yes, of the department of the donor of the value of the goods or services provided? 5 c If Yes, of the foreign selection of the foreign sele			33		x
4 a X any time during the calender year, did the organization have an interest in, or a signature or other authority over, a financial account of the foreign country Sush as a bank account, securities account, or other financial accountry? Se in einstructions for filing requirements for FinCR Form 116, Report of Foreign Bank and Financial Accounts (FBAR). 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization aparty notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X or If Yes, it in line 5 aor 5b, did the organization in file form 8885-17. 6 a 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 or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the paper? 7 b If Yes, did the organization traceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the paper? 8 b If Yes, did the organization will be paper? 9 b If Yes, did the organization will be paper? 10 b If the organization secreties are payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the paper? 10 b If the organization secreties are payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the paper? 10 b If the organization secreties are payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 11 b If the organization received a payment in excess of payment			3,000		11
Se in shructions for filing requirements for Fing FICEN form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter transaction? 5 b X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 c C 6 a 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? 6 a X b If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 organization stat may receive deductible contributions under section 170(c). 8 bif Yes, 'did the organization notify the donor of the value of the goods or services provided? 7 bif Yes, 'did the organization notify the donor of the value of the goods or services provided? 8 bif Yes, 'indicate the number of Forms 8282 filed during the year. 9 bif Yes, 'indicate the number of Forms 8282 filed during the year. 9 bif He organization received a contribution of qualified intellectual property, did the organization file form 8993 as required? 10 did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file? 10 from 1986-02. 10 from 1986-02. 11 did the organization make any tax boats, airplanes, or other vehicles, did the organization file? 12 page 12			35		
See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X cit 'Yes,' to line 5 a or 5b, did the organization file Form 8865-T? 5 c 6 a Does the organization shear was enoted grown and the state of the organization of the organization shell of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 5 b If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or organization and express statement that such contributions or gifts were not tax deductible or organization and party for goods and services provided to the payor? 7 organizations that may receive deductible contributions under section 170(c): a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 b If Yes, indicate the number of Forms 8282 filed during the year. 2 b If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 at the number of Forms 8282 filed during the year. 4 b If the organization for general payment in excess of \$75 made payments or a personal benefit contract? 7 c X 7 d If the organization for general payment in excess of special payments or a personal benefit contract? 7 c X 7 d If the organization for during the year, pay premiums, directly, to pay premiums on a personal benefit contract? 7 d If the organization for payments of the payments of the organization file Form 8289 as required? 8 b If Yes, indicate the number of Forms 8282 filed during the year? 9 Sponsoring organization maintainin			4a		Х
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?. 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 c If "Yes," to line 5a or 5b, did the organization file Form 8886-17. 5 c C 16 a 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 Chartesble contributions? 6 a X 5 li "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 b If "Yes," did the organization on the suchage, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8 b If "Yes," did the organization on the suchage, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 b If the organization received a contribution of qualified intellectual property, did the organization flex of the suchage of the such as a sequence of the organization received a contribution of qualified intellectual property, did the organization flex of the organization flex of the organization make and the such as a payment of qualified intellectual property, did the organization flex of the organization have excess business hodings at any time during the year. 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business hodings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 49667. 9 a Did the sponsoring organizatio					
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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?. b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	a G	Pross income from members or shareholders			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?. b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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. c Enter the amount of reserves on hand. 14a Did the organization receive any payments for indoor tanning services during the tax year? 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 excess parachute payment(s) during the year? 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.	b G	Gross income from other sources (Do not net amounts due or paid to other sources			
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. a Is the organization licensed to issue qualified health plans in more than one state? 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. c Enter the amount of reserves on hand. 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 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 excess parachute payment(s) during the year? 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.			12a		
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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			134		
which the organization is licensed to issue qualified health plans	bЕ	nter the amount of reserves the organization is required to maintain by the states in			
14a Did the organization receive any payments for indoor tanning services during the tax year?	W	rhich the organization is licensed to issue qualified health plans			
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O					F-100
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?			14a		X
excess parachute payment(s) during the year?			14b		
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?	15 Is	s the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			37
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	e:	Yes I see instructions and file Form 4720. Schodule N	15		<u> </u>
If 'Yes,' complete Form 4720, Schedule O.		Solution (Company of the Company of			v
			16		X
			Form	990 (020

Form 990 (2020) MIDDLE EAST MEDIA AND RESEARCH 52-2068483 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 8 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent..... 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, trustees, or key employees to a management company or other person?..... X 3 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 Did the organization have members or stockholders?..... 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?.... 7 a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: SEE SCHEDULE O 8a **b** Each committee with authority to act on behalf of the governing body?..... 86 X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates?.... 10a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13..... X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done X 13 Did the organization have a written whistleblower policy?..... X 13 14 Did the organization have a written document retention and destruction policy?..... X 14 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? a The organization's CEO, Executive Director, or top management official..... 15 a X **b** Other officers or key employees of the organization.... 15b X If 'Yes' to line 15a or 15b, describe the process in 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?.... X 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?..... 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE 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. Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records ▶ 20 STEVEN STALINSKY P.O. BOX 27837 WASHINGTON DC 20038-7837 202-955-9070

Form 990 (2020)	MIDDLE	EAST	MEDIA	AND	RESEARCH
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Page 7

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII.....

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

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

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. Position (do not check more than one box, unless person is both an officer and a (A) Name and title (B) (D) (E) (F) Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from related organizations (W-2/1099-MISC) Average hours Estimated amount of other compensation from director/trustee) per week Officer employee Institutional trustee ndividual trustee key employee ormer lighest compensated (list any hours for related the organization and related organizations organiza-tions below dotted line) (1) STEVEN STALINSKY 52 EXECUTIVE DIREC 0 X X 201,230 0 17,644. (2) ELLIOT ZWEIG 40 DEPUTY DIRECTOR 0 X 131,637 0. 5,500. (3) RUHAMA SOSNOW 40 EDITOR 0 X 105,558 0. 29,650. (4) YIGAL CARMON 40 PRESIDENT 0 X X 134,844. 0 0. (5) GISELE GILDENER 40 DIR OF DEVELOPMENT 0 X 108,712. 0 4,000. ALBERTO FERNANDEZ 40 VICE PRESIDENT 0 X 0. 100,000 0 (7) OLIVER REVELL 0.5 DIRECTOR 0 X 0 0. 0. (8) ROBERT REILLY 0.5 DIRECTOR 0 X 0 0 0. (9) JEFFREY KAUFMAN 0.5 DIRECTOR X 0 0 0 0. (10) ANNA BARDUCCI 0.5 DIRECTOR 0 X 0 0. 0. MICHAEL MUKASEY 0.5 DIRECTOR X 0 0 0. 0. (12)(13)(14)

Part VII Section A. Officers, Directors, Tri	5/2///553.00	ney	En		87.5	es,	an	d Highest Con	npensated Emp	loyees (continued)
	(B)				C) sition					
(A) Name and title	Average hours	box	, unle	ess p	erson	e than	th an	1 Reportable	(E) Reportable	(F)
	per week (list any		1 =		-	or/trus		compensation from	compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from
	hours	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	the organization and related
	related organiza	ictor t	iona	-4	nplo	/ee	۳			organizations
	- tions below dotted	ruste	trus		/ee	l pen				
	line)	ĕ	tee			sated				
(15)	-	\vdash					_			
A32		1								
(16)										
(17)			\dashv							
(17)	 -	- 1								
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(19)										
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(21)									ie .	
(22)										
(23)			\dashv	-	-	-				
				- 1						
(24)			T			-				
(OF)					,:					
(25)					- 1					
1 b Subtotal			_			-	_	781,981.	0.	56,794.
c Total from continuation sheets to Part VII, Section							•	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	781,981.	0.	56,794.
2 Total number of individuals (including but not limited	to those lis	sted a	bov	e) w	ho r	eceiv	ed i	more than \$100,000	of reportable compo	ensation
from the organization > 5										IV. I N.
3 Did the organization list any former officer, direct	or trustee	, ko	, or	anla		0.5	iah	ost componented	omenia	Yes No
on line 1a? If 'Yes,' complete Schedule J for such	individua	il		ihio	уее, 			·····	employee 	3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greater	reportable	con	nper	nsat	ion i	and (othe	er compensation fi	rom	
the organization and related organizations greater such individual	than \$15	0,000	0? <i>I</i> :	f 'Ye	es,'	com	olet	e Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue	compens	ation	fro	m a	ny ι	ınrel	ated	d organization or i	ndividual	
for services rendered to the organization? If 'Yes, Section B. Independent Contractors	' complete	e Sch	nedu	ıle J	for	such	n pe	erson		5 X
1 Complete this table for your five highest compens.	ated inde	pend	ent	con	tract	ors 1	that	received more the	an \$100.000 of	
compensation from the organization. Report compens	ation for th	ne cal	end	ar ye	ear e	endin	g w	ith or within the org	anization's tax year.	
(A) Name and business addre	ess							(B) Description of	services ((C) Compensation
YESODOT SHALOM 7 HA MA'ALOT STREET JERUSALE	M, IS	RAEL					-	TRANSLATION SE		2,994,277.
NETSTRATEGIES DIGITAL MARKETING LLC 8260 GR				75	MCL	EAN,		WEBSITE MGMT/S		296, 230.
2 Total number of independent contractors (including bu	ıt not limite	ed to	thos	e lie	ted	ahov"	e) ''	vho received more t	han	
\$100,000 of compensation from the organization		10	103	- 113	.cou	abov	-) W	mo received more (IGH	
BAA		E AO10	ו ומר	יחיחי	/20					Form 000 (2020)

	m 990 (2020) MIDDLE EAST MEDIA AND RESEARC	H		52-2068483	Page 9
Pa	rt VIII Statement of Revenue				
	Check if Schedule O contains a response or note to ar	(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
		0	function revenue	revenue	under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a				
Gra	b Membership dues				
ts, α	c Fundraising events 1 c				
Gift F	d Related organizations 1 d				
ns,	e Government grants (contributions) 1 e f All other contributions, gifts, grants, and				
otr	similar amounts not included above 1f 8,133,765.				
ē t	g Noncash contributions included in				
o L	lines la-1f 1g h Total. Add lines la-1f	0.100.755			
<u>0</u> 6	Business Code	8,133,765.			
Program Service Revenue	2a SUBSCRIPTIONS 516110	1,102,313.	1,102,313.		
Re	b	1,102,313.	1,102,313.		
<u>e</u>	c				
er.	d				
Ē	e				
ogra	f All other program service revenue				
ğ	g Total. Add lines 2a-2f	1,102,313.			
8	3 Investment income (including dividends, interest, and				
	other similar amounts)	27.			27.
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross rents 6a				
	b Less: rental expenses 6b				
	c Rental income or (loss) 6c				
	d Net rental income or (loss)				
	7 a Gross amount from (i) Securities (ii) Other				
	sales of assets other than inventory 7a 122, 168.				
	b Less: cost or other basis				
	and sales expenses 7b 123, 138.				
	c Gain or (loss) 7c -970 .				
		-970.			-970.
иe	8 a Gross income from fundraising events (not including \$				
Other Revenu	of contributions reported on line 1c).				
8	See Part IV, line 18 8a				
her	b Less: direct expenses 8b				
ਠੋ	c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities. See Part IV, line 19				
	AND THE PROPERTY OF THE PROPER				
	b Less: direct expenses 9b c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less				
	b Less: cost of goods sold 10b				
	c Net income or (loss) from sales of inventory				
S	Business Code				
용 의	11a				
en a	b				
e e	b c d All other revenue				
Miscellaneous Revenue	d All other revenue				
	e roat and tipes trailin		THE RESERVE OF THE PARTY OF THE	CONTRACTOR OF TAXABLE PARTY.	

1,102,313.

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

	Check if Schedule O contains a response or note to any line in this Part IX.								
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	organizations and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic individuals. See Part IV, line 22								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	781,981.	481,239.	65,427.	235,315.				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	1,112,449.	983,560.	42,594.	86,295.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	40,724.	28,636.						
9	Other employee benefits			4,163.	7,925.				
10	Payroll taxes	166,082. 142,169.	129,544.	24,912.	11,626.				
11		142,109.	113,192.	8,642.	20,335.				
	a Management	15	W						
	b Legal	35,637.	3,504.	32,133.					
	c Accounting	66,917.	1,500.	65,417.					
	Lobbying	00,917.	1,500.	05,417.					
	Professional fundraising services. See Part IV, line 17								
	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	4,025.		4,025.					
	Advertising and promotion								
13	Office expenses	97,016.	72,762.	14,553.	9,701.				
14	Information technology	700,580.	669,800.		30,780.				
15	Royalties	546.050							
16 17	Occupancy Travel.	546,250.	437,000.	54,625.	54,625.				
7.5	Payments of travel or entertainment expenses for any federal, state, or local public officials.	28,061.	23,188.	4,873.					
	Conferences, conventions, and meetings								
	Interest								
	Payments to affiliates								
22	Depreciation, depletion, and amortization	89,137.	66,852.	13,371.	8,914.				
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	24,291.	17,004.	4,858.	2,429.				
فتور	expenses on Schedule O.)								
	TRANSLATION AND RESEARCH	3,642,631.	3,642,631.	2 2 22					
	OUTSIDE SERVICES	110,515.	76,000.	4,365.	30,150.				
	PRINTING AND PUBLICATIONS	108,788.	25,296.	5,439.	78,053.				
	TELEPHONE, INTERNET, CABLE All other expenses	55,081.	41,311.	8,262.	5,508.				
	Total functional expenses. Add lines 1 through 24e	21,048. 7,773,382.	7,444. 6,820,463.	2,105.	11,499.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	1,113,362.	0,820,463.	359,764.	593,155.				
BAA		TEFA01101 10/0	7/00		Form 990 (2020)				

		Check if Schedule O contains a response or note t	o any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,437,758.	1	644,313
	2	Savings and temporary cash investments			100	2	
	3	Pledges and grants receivable, net			756,282.	3	2,225,000
	4	Accounts receivable, net		5,739.	4	=/==//	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe		5			
	6	Loans and other receivables from other disqualified p					
		section 4958(f)(1)), and persons described in section		6			
	7	Notes and loans receivable, net				7	
Ø	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			66,883.	9	E4 063
As	732				00,003.	9	54,963.
	108	a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	531,192.			
		Less: accumulated depreciation.	10h	353,472.	224,952.	10 c	177 720
	11	Investments — publicly traded securities		333,412.	224,932.	11	177,720.
	12	Investments – other securities. See Part IV, line 11				12	
	13	Investments – program-related. See Part IV, line 11.			***************************************	13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15,028.	15	1 510 500	
	16	Total assets. Add lines 1 through 15 (must equal line	2,506,642.	16	1,510,500.		
		Total assets. And lines I through is (must equal line	33)		2,300,042.	'0	4,612,496.
	17	Accounts payable and accrued expenses			125,393.	17	410,609.
	18	Grants payable				18	120,005.
	19	Deferred revenue			303,398.	19	389,366.
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete Part I'				21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	icer, direction, or 359	tor, trustee, %		22	
-	23	Secured mortgages and notes payable to unrelated th	ird narties			23	
	24	Unsecured notes and loans payable to unrelated third				24	348,912.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to relate plete Part	d third parties, X of Schedule D.	288,228.	25	212,233.
	26	Total liabilities. Add lines 17 through 25			717,019.	26	1,361,120.
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	X				2,002,120.
<u>a</u>	27	Net assets without donor restrictions			1,789,623.	27	2,594,140.
ŭ	28	Net assets with donor restrictions				28	657,236.
Fund		Organizations that do not follow FASB ASC 958, check and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current funds		29			
ets	30	Paid-in or capital surplus, or land, building, or equipm				30	*
SS	31	Retained earnings, endowment, accumulated income,				31	
17	32	Total net assets or fund balances			1,789,623.	32	3,251,376.
S	33	Total liabilities and net assets/fund balances			2,506,642.	33	4,612,496.
BAA	1		EEA0111L		2,000,042.		Form 990 (2020)

		2-2068483	J	Р	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.				П
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7250 500	235,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		173,	
3	Revenue less expenses. Subtract line 2 from line 1	3		161,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	17,007,017	789,	
5	Net unrealized gains (losses) on investments.			0,	025.
6	Donated services and use of facilities	. 6			
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32			-	<u> </u>
	column (B))	10	3,2	51,3	376.
Pa	rt XII Financial Statements and Reporting			.00	
	Check if Schedule O contains a response or note to any line in this Part XII			0 2 2 2 2 E	П
			1000 Marie	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Part State	65810E
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	a 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 review		EU STEEL		71
	separate basis, consolidated basis, or both:	wed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
ŀ	were the organization's financial statements audited by an independent accountant?		2 b	х	1
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sen-			DEPARTS.	le de
	basis, consolidated basis, or both:	arate			
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud	dit.			
	review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single		2-		v

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.....

TEEA0112L 10/19/20

Form 990 (2020)

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

1031100	INSTITUTE,	OI MEDIA AND I	RESEARCH			Employer Identili			
Day						52-206848	83		
Par		arity Status. (All	organizations must	comp	lete th	is part.) See instru	ictions.		
	organization is not a private four								
1	A church, convention of church)(i).			
2	A school described in section								
3	A hospital or a cooperative	hospital service orga	inization described in se	ection 17	70(b)(1)(A)(iii).			
4	A medical research organiz	ation operated in cor	junction with a hospital	describ	ed in se	ction 170(b)(1)(A)(iii).	Enter the hospital's		
	name, city, and state:	N2 345 3				· / / / / / / / / / / / / / / / / / / /			
5									
6	A federal, state, or local go		nental unit described in	section	1 7 0(b)(1)(A)(v).			
7	An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial (Complete Part II.)	part of its support from a	governn	nental ur	nit or from the general pu	ablic described		
8	A community trust describe		(A)(vi). (Complete Part	II.)					
9	An agricultural research organ	nization described in se	ection 170(b)(1)(A)(ix) ope	rated in	coniuncti	ion with a land-grant coll	eae		
	or university or a non-land-gra	ant college of agricultur	re (see instructions). Ente	er the nar	ne, city,	and state of the college	or		
	university:					- Commence of the Commence of			
10	An organization that normal from activities related to its investment income and unre June 30, 1975. See section	exempt functions, su elated business taxab	ibject to certain exception	port from ons; and 511 tax	n contril (2) no from b	butions, membership fe more than 33-1/3% of businesses acquired by	es, and gross receipts its support from gross the organization after		
11	An organization organized a			fety. See	section	n 509(a)(4).			
12	An organization organized a or more publicly supported or	and operated exclusive	rely for the benefit of, to	perforn	the fur	nctions of, or to carry o	ut the purposes of one		
	_ lines 12a through 12d that d	escribes the type of :	supporting organization	and cor	nplete li	nes 12e, 12f, and 12g.			
а	Type I. A supporting organization(s) the power to recomplete Part IV, Sections 2	equiarly appoint or elec	ed, or controlled by its su ct a majority of the directo	pported or ors or true	organizat stees of	tion(s), typically by giving the supporting organizati	g the supported on. You must		
b	Type II. A supporting organiz	zation supervised or	controlled in connection	with its	suppor	ted organization(s), by	having control or		
	management of the supporting must complete Part IV, Section 19	organization vested in tions A and C.	n the same persons that o	control or	manage	the supported organizat	tion(s). You		
С	Type III functionally integrated organization(s) (see instruct	A supporting organizations). You must com	ation operated in connection	n with, a	nd functi	onally integrated with, its	supported		
d	Type III non-functionally integrated. The functionally integrated. The instructions). You must com	rated. A supporting or	ganization operated in co	nnection	with its	supported organization(s	\ that is not		
е	Check this box if the organiz	plete Part IV, Section	ns A and D, and Part V.	the IDS	that it is	a Type I Type II Typ	o III functionally		
	integrated, or Type III non-fu	inctionally integrated	supporting organization	٦.			e in functionally		
1	Enter the number of supported Provide the following information	organizations	d =====:==#:==/=>						
2000									
(I) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your g	s the tion listed overning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(A)					B				
					(,				
(B)									
(C)									
	10								
(D)									
(E)	- Harris		я			Adde			
F-4-1							<u>e</u>		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cal beg	endar year (or fiscal year jinning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	membership fees received. (Do not include any 'unusual grants.).	5,531,323.	5,942,467.	4,880,940.	6,445,353.	6,133,764.	28,933,847.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	5,531,323.	5,942,467.	4,880,940.	6,445,353.	6,133,764.	28,933,847.
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)						8,733,051.
6	Public support. Subtract line 5 from line 4						20,200,796.
Sec	tion B. Total Support			-			
Cale beg	endar year (or fiscal year inning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	5,531,323.	5,942,467.	4,880,940.	6,445,353.	6,133,764.	28,933,847.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	19.	19.		6.		44.
9	Net income from unrelated business activities, whether or not the business is regularly carried on				·		0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). SEE FART VI	731,191.	350,223.	1,814,442.	1,686,996.	1,102,313.	
11	Total support. Add lines 7 through 10						34,619,056.
12	Gross receipts from related activ	ities, etc. (see ins	tructions)			12	0.
	First 5 years. If the Form 990 is a organization, check this box and			third, fourth, or fi	fth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pub	olic Support P	ercentage				
	Public support percentage for 20						58.35%
	Public support percentage from 2 33-1/3% support test—2020. If the	ne organization did	d not check the bo	ox on line 13, and	l line 14 is 33-1/3	% or more check	60.78 %
	and stop here. The organization	qualifies as a pub	licly supported or	ganization			► X
b	33-1/3% support test—2019. If the and stop here. The organization	e organization did qualifies as a pub	not check a box licly supported or	on line 13 or 16a, ganization	and line 15 is 33	3-1/3% or more, c	heck this box
1 7 a	10%-facts-and-circumstances ter or more, and if the organization r the organization meets the facts-	neets the facts-ar	id-circumstances	test check this h	ny and ston here	Evolain in Part \	/I how
	10%-facts-and-circumstances tes or more, and if the organization r organization meets the 'facts-and	neets the facts-ar -circumstances' to	id-circumstances est. The organizat	test, check this b tion qualifies as a	ox and stop here , publicly supporte	. Explain in Part \ ed organization	/I how the
18	Private foundation. If the organiz	ation did not chec	k a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions ►
BAA					Sch	odulo A (Form 00	0 or 990-E71 2020

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A Public Support

Sec	ction A. Public Support								
	ndar year (or fiscal year beginning in) F Gifts, grants, contributions, and membership fees received. (Do not include	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 20	20	(f) Total	_
	any 'unusual grants.')		1	1					
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		1						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.								
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons								
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.	i i		5	N				
C	Add lines 7a and 7b								_
8	Public support. (Subtract line 7c from line 6.)								_
Sec	tion B. Total Support			· · · · · · · · · · · · · · · · · · ·					_
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 202	20	(f) Total	_
9	Amounts from line 6		1						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable								_
	income (less section 511 taxes) from businesses acquired after June 30, 1975								
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								_
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).								_
13	Total support. (Add lines 9, 10c, 11, and 12.)								_
14	First 5 years. If the Form 990 is forganization, check this box and	or the organizatio	n's first, second,	third, fourth, or fi	fth tax year as a s	section 501	(c)(3)		ī
	tion C. Computation of Pub		ercentage						_
	Public support percentage for 202			ne 13, column (f))			15	96	_
16	Public support percentage from 2	2019 Schedule A.	Part III, line 15.				16	%	_
	tion D. Computation of Inve						1		-
	Investment income percentage fo				mn (fl)		17	8	_
	Investment income percentage from						18	8	_
	33-1/3% support tests-2020. If the) i
	is not more than 33-1/3%, check	this box and stop	here. The organi	ization qualifies a	s a publicly suppo	rted organi	zation]
	33-1/3% support tests-2019. If the line 18 is not more than 33-1/3%,	, check this box a	nd stop here. The	e organization qua	alifies as a publicly	y supported	l organ	nization ►]
	Private foundation. If the organiz	ation did not chec	ck a box on line 1	4, 19a, or 19b, ch	neck this box and	see instruc	tions]
AA			TEEARISE	2011 4100					_

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

_			Yes	No
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.	1		
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).	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
	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.	3b		
	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.	3c		
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
l	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.	4b		
•	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.	4c		
5	a 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).	5a		
ŀ	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?	5b		
ď	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		To the second
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 .	9a	1/1	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer line 10b below.	10a		
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.).	10b		# ne

P	art IV Supporting Organizations (continued)							
1	1 Has the organization accepted a gift or contribution from any of the following persons?		Yes	No				
	a 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						
_	c A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c						
Se	ection B. Type I Supporting Organizations							
	Did the governing body, members of the governing body, officers pating in their official according to the control of the governing body.		Yes	No				
i	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								
	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						
Se	ction 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						
Se	ction 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?							
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).							
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						
Se	ction 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 instructions).							
	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.							
	c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	r. Posterio de Carros						
	C The organization supported a governmental entity. Describe in Part VI now you supported a governmental entity (see	instruc	ctions,).				
2	Activities Test. Answer lines 2a and 2b below.	-	Yes	No				
	a 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			(117)				
	substantially all of its activities.	2a	151000	NAME OF				
	b Did the activities described in 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	01						
	but for the organization's involvement.	2b		Q HIGH				
3	Parent of Supported Organizations. Answer lines 3a and 3b below.							
i	a 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.	20						
-	200	3a						
ı	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b						

1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	v 20 1970 (explain in	n Part VI). See through E.
Sec	ction 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		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ā	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
(Fair market value of other non-exempt-use assets	1c		
c	Total (add lines 1a, 1b, and 1c)	1d	2	
E	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		
Sec	tion 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		
	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-functionally integrated (see instructions).	grated 7	Type III supporting org	anization
BAA			Schedule A (Fo	rm 990 or 990-EZ) 20

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) S		ations (continue	d)	0403 Fage
	tion D - Distributions		ationio (oorkiriao	<u> </u>	Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	urposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	ns,	2		
3	Administrative expenses paid to accomplish exempt purposes of s	upported organizations		3	
4	Amounts paid to acquire exempt-use assets	apported organizationio		4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.	ion is responsive (provide	details	8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	11	7	10	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ens	(iii) Distributable Amount for 2020
_1	Distributable amount for 2020 from Section C, line 6				i i
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
	From 2015			34235	
b	From 2016				
	From 2017				
	From 2018				
е	From 2019				
f	Total of lines 3a through 3e			Elair.	
g	Applied to underdistributions of prior years			1	
h	Applied to 2020 distributable amount			ARE	
i	Carryover from 2015 not applied (see instructions)			NEST S	
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7:				
	Applied to underdistributions of prior years			1	
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.				
	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016		Name of the second		
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019			A R	

BAA

e Excess from 2020.....

Schedule A (Form 990 or 990-EZ) 2020

52-2068483

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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. (See instructions.)

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2020	2019	2018	2017	2016
SUBSCRIPTIONS TOTAL	\$1,102,313.	\$1,686,996.	\$1,814,442.	\$ 350,223.	\$ 731,191.
	\$1,102,313.	\$1,686,996.	\$1,814,442.	\$ 350,223.	\$ 731,191.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

PUBLIC DISCLOSURE COPY Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Name of the organization MIDDLE EAST MEDIA AND RESEARCH	Employer identification number						
INSTITUTE, INC. 52-2068483 Organization type (check one):							
Jrganization type (check one):							
Filers of: Section:							
Form 990 or 990-EZ X 501(c)(3) (enter number) organization							
4947(a)(1) nonexempt charitable trust not treated as a private fo	undation						
527 political organization							
Form 990-PF 501(c)(3) exempt private foundation							
4947(a)(1) nonexempt charitable trust treated as a private foundate	ation						
501(c)(3) taxable private foundation							
Check if your organization is covered by the General Rule or a Special Rule . Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule are	nd a Special Rule. See instructions.						
General Rule							
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor.							
Special Rules							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pari received from any one contributor, during the year, total contributions of the greater of (1) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	t II, line 13, 16a, or 16b, and that						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that during the year, total contributions of more than \$1,000 exclusively for religious, charitable, purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering contributor name and address), II, and III.	scientific, literary, or educational						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contribute during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file S 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its F Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or the schedule B (Form 990,	Form 990-EZ or on its Form 990-PF,						

	B (Form 990, 990-EZ, or 990-PF) (2020)		1 1 Page 2
Name of org	ganization E EAST MEDIA AND RESEARCH	D 5	er identification number
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional		.000403
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$2,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
BAA	TEEA07021 07/28/20	Schedule B (Form 99)) 990-F7 or 990-PF) (2020)

1 Page 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Page 3

Name of organization

BAA

Employer identification number

MIDDLE EAST MEDIA AND RESEARCH 52-2068483 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (See instructions.) N/A (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received Part I (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received Part I (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

BAA

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2020

Open to Public Inspection Employer identification number

MIDDLE EAST MEDIA AND RESEARCH

IN	STITUTE, INC.			52-2068483					
Pa	rt I Organizations Maintaining Dono	r Accounts.							
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.								
		(a) Donor advised for	unds	(b) Funds and other accounts					
1	Total number at end of year								
2	Aggregate value of contributions to (during year)								
3	Aggregate value of grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and don are the organization's property, subject to the	organization's exclusive legal of	ontrol?	Yes No					
-6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writin of the donor or donor advisor,	g that grant funds can or for any other purpo	be used only se conferring Yes No					
Pa	t II Conservation Easements.								
	Complete if the organization answ	wered 'Yes' on Form 990,	Part IV, line 7.						
1	Purpose(s) of conservation easements held by		t apply).						
	Preservation of land for public use (for examp	le, recreation or education)	Preservation of a	historically important land area					
	Protection of natural habitat		Preservation of a	certified historic structure					
92	Preservation of open space		_						
2	Complete lines 2a through 2d if the organization hast day of the tax year.	eld a qualified conservation contr	ibution in the form of a c						
3	Total number of consenting			Held at the End of the Tax Year					
	Total number of conservation easements								
	Total acreage restricted by conservation easen								
	Number of conservation easements on a certifi			С					
	Number of conservation easements included in structure listed in the National Register			d					
3	Number of conservation easements modified, transtax year ►		terminated by the organ	nization during the					
4	Number of states where property subject to conser								
5	Does the organization have a written policy reg	arding the periodic monitoring,	inspection, handling of	of violations,					
6	and enforcement of the conservation easement Staff and volunteer hours devoted to monitoring, in	ts it holds?	and opforcing concernet	Yes No					
·	►	ispecting, nationing of violations, a	and emorcing conservation	on easements during the year					
7	Amount of expenses incurred in monitoring, inspec ►\$	cting, handling of violations, and e	enforcing conservation ea	asements during the year					
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requ	irements of section 17	/0(h)(4)(B)(i) 					
9	In Part XIII, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements.	the organization's financial sta	atements that describe	s the organization's accounting for					
Par	Organizations Maintaining Collect Complete if the organization answ	tions of Art, Historical Treed 'Yes' on Form 990,	reasures, or Other Part IV, line 8.	Similar Assets.					
1 a	If the organization elected, as permitted under I	FASB ASC 958, not to report in	its revenue statemen	t and balance sheet works of art,					
190	Part XIII the text of the footnote to its financial	statements that describes thes	e items.	(a) (b) (b)					
b	If the organization elected, as permitted under I historical treasures, or other similar assets held for following amounts relating to these items:								
	(i) Revenue included on Form 990, Part VIII, li	ne 1	,						
	(II) Assets included in Form 990, Part X								
	If the organization received or held works of art, his amounts required to be reported under FASB A	SC 958 relating to these items:							
	Revenue included on Form 990, Part VIII, line 1.								
	Assets included in Form 990, Part X								

Schedule D (Form 990) 2020 MIDD				52-206		Page 2
Part III Organizations Mainta					•	nuea)
3 Using the organization's acquisition items (check all that apply):	1, accession, and othe	r records, check an	y of the following that r	make significant use of its	collection	
a Public exhibition		d Loan o	exchange program			
b Scholarly research		e Other	5- p5			
c Preservation for future gene	rations					-
4 Provide a description of the organizer transfer of the organizer.						
5 During the year, did the organiza to be sold to raise funds rather t	tion solicit or receive	donations of art,	historical treasures,	or other similar assets	п.,	П.,
Part IV Escrow and Custodia	Arrangements	Complete if the	ganization's collection)?	Yes OOO D	No
line 9, or reported an	amount on Form	990. Part X. li	e organization ar ne 21.	iswered tes on Fo	irm 990, P	art IV,
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian or oth	ner intermediary fo	or contributions or oth	er assets not included	Yes	□No
b If 'Yes,' explain the arrangement	in Part XIII and com	plete the following	table:		□	□•
		**************************************			Amount	
c Beginning balance				1 с	A CONTRACTOR OF THE CONTRACTOR	
d Additions during the year				1 d		
e Distributions during the year						
f Ending balance						
2 a Did the organization include an a						No
b If 'Yes,' explain the arrangement	in Part XIII. Check h	ere if the explana	tion has been provide	ed on Part XIII		5
B W E I						
Part V Endowment Funds. C					The second secon	WE DOWN
1 a Beginning of year balance	(a) Current year	(b) Prior year	(c) Two years back	k (d) Three years back	(e) Four ye	ears back
b Contributions					-	
THE CONTRACTOR OF THE CONTRACT					-	
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities						
and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage			1g, column (a)) held	as:		
a Board designated or quasi-endowme	The state of the s	[%]				
b Permanent endowment ▶						
c Term endowment ►						
The percentages on lines 2a, 2b, ar	id 2c should equal 100	%.				
3 a Are there endowment funds not in the	ne possession of the o	rganization that are	held and administered	for the		
organization by:					Yes	No
(i) Unrelated organizations					3a(i)	
(ii) Related organizationsb If 'Yes' on line 3a(ii), are the relation					3a(ii)	
4 Describe in Part XIII the intended					. 3b	
Part VI Land, Buildings, and F		mon s endowment	iulius.			
Complete if the organization		'Yes' on Form	990, Part IV, line	11a. See Form 990	0, Part X,	line 10.
Description of property	(a) Cost	or other basis	(b) Cost or other	(c) Accumulated	(d) Book	

				경기 경기 전환화되었다면 그렇게 그리면 보다가 그 어때까지
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements		280,942.	168,904.	112,038.
d Equipment		128,502.	108,851.	19,651.
e Other		121,748.	75,717.	46,031.
otal. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, co	olumn (B), line 10c.)		177,720.

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Schedule D (Form 990) 2020

Part VII Investments - Other Securities.		N/A	
Complete if the organization answered	Yes' on Form 990	0, Part IV, line 11b. See Form 9	990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	of-year market value
(1) Financial derivatives			102
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<u>(l)</u>			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) •			
Part VIII Investments — Program Related. Complete if the organization answered	N/I	N/A	00 D IV I 10
Complete if the organization answered			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1)			
(2)			
(3)			
_(4)			
(5)	0		
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) >			
Part IX Other Assets.			
Complete if the organization answered), Part IV, line 11d. See Form 9	
	scription		(b) Book value
(1) SOFTWARE DEVELOPMENT COSTS			1,510,500.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(10)			
	N /: 1E \		1 510 500
Total. (Column (b) must equal Form 990, Part X, column (E	ine 15.)		1,510,500.
Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo	orm 000 Part IV line 11	o or 11f Soo Form 900 Part V line 25	
	ption of liability	e of TH. See Form 950, Fart A, fille 25.	(b) Book value
(1) Federal income taxes	ption of hability		(b) Book value
(2) DEFERRED RENT EXPENSE			212,233.
(3)			212,233.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)		-	
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)		>	212,233.
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo			
tax positions under FASB ASC 740. Check here if the text of the footnote has			

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	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	9,235,135.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1	3	9,235,135.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		9,235,135.
D 13/0 D 10 11 / D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	er Return	
	"	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	"	7,773,382.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	"	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	"	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	"	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. 2 a 2 b	"	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses 2 c	1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.)	1	7,773,382.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	1	7,773,382.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 Ab Other (Describe in Part XIII.)	1 2e 3	7,773,382.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b.	1 2e 3	7,773,382.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 Ab Other (Describe in Part XIII.)	1 2e 3	7,773,382.

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

PART X - FASB ASC 740 FOOTNOTE

THE INSTITUTE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND THEREFORE HAS MADE NO PROVISION FOR FEDERAL INCOME TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS. IN ADDITION, THE ORGANIZATION HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A "PRIVATE FOUNDATION" WITHIN THE MEANING OF SECTION 509 (A) OF THE INTERNAL REVENUE CODE. THERE WAS NO UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2021.

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PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

THE INSTITUTE IS NOT SUBJECT TO INCOME TAXES IN ACCORDANCE WITH THE INCOME TAXES
TOPIC OF FASB ASC (FORMERLY FIN 48). THE INCOME TAXES TOPIC OF FASB ASC 740-10
CLARIFIES THE ACCOUNTING FOR INCOME TAXES, BY PRESCRIBING A MINIMUM RECOGNITION
THRESHOLD A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE
FINANCIAL STATEMENTS. IT ALSO PROVIDES GUIDANCE ON DERECOGNITION, MEASUREMENT AND
CLASSIFICATION OF AMOUNTS RELATING TO UNCERTAIN TAX POSITIONS, ACCOUNTING FOR AND
DISCLOSURE OF INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURES AND
TRANSITION RELATING TO THE ADOPTION OF THE NEW ACCOUNTING STANDARDS. THE COMPANY
ADOPTED FASB ASC 740-10 AS OF JULY 1, 2009, AS REQUIRED, AND DETERMINED THAT ITS
ADOPTION DID NOT HAVE A MATERIAL IMPACT ON THE INSTITUTE'S FINANCIAL POSITION AND
RESULTS OF OPERATIONS.

MANAGEMENT HAS EVALUATED SIGNIFICANT TAX POSITIONS OF ITS CONSOLIDATED FOR-PROFIT SUBSIDIARIES AGAINST THE CRITERIA ESTABLISHED BY PROFESSIONAL STANDARDS AND BELIEVES THERE ARE NO SUCH TAX POSITIONS REQUIRING ACCOUNTING RECOGNITION IN THE FINANCIAL STATEMENTS. MANAGEMENT DOES NOT BELIEVE ITS EVALUATION OF TAX POSITIONS WILL SIGNIFICANTLY CHANGE WITHIN TWELVE MONTHS OF JUNE 30, 2020. ANY CHANGES IN TAX POSITIONS WILL BE RECORDED WHEN THE ULTIMATE OUTCOME BECOMES KNOWN. THE INSTITUTE'S INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES GENERALLY FOR THE YEARS ENDED JUNE 30, 2018, 2019 AND 2020.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.
 Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number MIDDLE EAST MEDIA AND RESEARCH 52-2068483 INSTITUTE, INC. Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?.... For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) PART V (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients (a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures for offices in the émployees, (d) is a program service, describe specific type of service(s) in region agents, and and investments independent in the region contractors in the region located in the region) the region TRANSLATION AND TRANSLATION AND (1) MIDDLE EAST RESEARCH RES 3,143,128. TRANSLATION AND TRANSLATION AND (2) EUROPE RESEARCH RES 178,800. TRANSLATION AND TRANSLATION AND (3) SOUTH AMERICA RESEARCH RESEARCH 4,205. TRANSLATION AND TRANSLATION AND (4) SOUTH ASIA RESEARCH RESEARCH 28,000. (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)3,354,133 b Total from continuation sheets to Part I......

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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c Totals (add lines 3a and 3b).

Schedule F (Form 990) 2020

3,354,133.

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Schedule F (Form 990) 2020 MIDDLE EAST MEDIA AND RESEARCH

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(h) Description of noncash valuation (book assistance FMV, appraisal other)										(3)	Schedule F (Form 990) 2020
(g) Amount of noncash assistance										tax exempt 501(c)	
(f) Manner of cash disbursement										recognized as a	
(e) Amount of cash grant	=			.0						he foreign country, equivalency letter.	
(d) Purpose of grant										as charities by the	
(c) Region										nat are recognized I has provided a se	
(b) IRS code section and EIN (if applicable)										ations listed above the	ons or entities
1 (a) Name of organization											3 Enter total number of other organizations or entities BAA

Page 3

Schedule F (Form 990) 2020 MIDDLE EAST MEDIA AND RESEARCH

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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Schedule F	(Form 99	90) 2020	MTDDT.F	FAST	MEDIA	AND	RESEARCH
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52-2068483

Page 4

Pa	rt IV Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471).	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	X No
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Schedule F (Form 990) 2020

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION

THE ACCRUAL METHOD OF ACCOUNTING IS USED

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MIDDLE EAST MEDIA AND RESEARCH INSTITUTE, INC.

Employer identification number 52-2068483

ra	Part I Questions Regarding Compensation			
			Yes	No
1	1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on F VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	Form 990, Part		
	First-class or charter travel X Housing allowance or residence fo	or personal use		
	Travel for companions Payments for business use of pers	sonal residence		
	Tax indemnification and gross-up payments Health or social club dues or initial	tion fees		
	Discretionary spending account Personal services (such as maid, or	chauffeur, chef)		
ñ	Life and of the house on the 1- are should did the arrainable following the 1- are			
	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to expl	r Ilain	X	
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a	directors,		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization of the CEO/Executive Director, but explain in Part III.	on's CEO/ anization to		
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations	sation committee		
4	4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the organization or a related organization:	filing		
a	a Receive a severance payment or change-of-control payment?	4a		Х
	b Participate in or receive payment from a supplemental nonqualified retirement plan?			X
•	c Participate in or receive payment from an equity-based compensation arrangement?			X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Par	rt III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compen contingent on the revenues of:	sation		
а	a The organization?	5a		Х
b	b Any related organization?	5b		Х
	If 'Yes' on line 5a or 5b, describe in Part III.		14 1	
6	6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compens contingent on the net earnings of:	sation		
а	a The organization?	6а		Х
b	b Any related organization?	6b		X
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixe payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	ed 7		Х
8	8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was s to the initial contract exception described in Regulations section 53.4958-4(a)(3)?	subject		
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III	8		Х
9		ions		
	section 53.4958-6(c)?	9	ı	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

MIDDLE EAST MEDIA AND RESEARCH Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 52-2068483

Page 2

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

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

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation				
(A) Name and Title		() Base compensation	(ii) Bonus & incentive compensation	(ii) Other reportable compensation	(C) Ketirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
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STEVEN STALINSKY	Θ	201,230.		0.	9,500.	8,144.	218.874	; c
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91	€							
BAA			TEEA4102L 09/25/20	50			Schedule J	Schedule J (Form 990) 2020

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART 1, LINE 1A - RELEVANT INFORMATION REGARDING COMPENSATION BENEFITS

PRESIDENT TRAVELS A SUBSTANTIAL PART OF THE YEAR, IT WAS DETERMINED THAT IT WOULD BE WORK RELATED INDIVIDUALS IN DIFFERENT TIME ZONES INTERNATIONALLY DURING THEIR NORMAL BUSINESS HOURS, HE HAS TO BE AVAILABLE AT ALL TIMES, FREQUENTLY IN THE MIDDLE OF THE MORE COST EFFECTIVE TO MAINTAIN THIS ARRANGEMENT RATHER THAN LEASE ADDITIONAL SPACE RESIDENCE. MEMRI RENTS THIS APARTMENT. SINCE OFFICE SPACE IS AT A PREMIUM AND THE IN A COMMERCIAL ENVIRONMENT. IN ADDITION, IN ORDER TO ACCESS EMPLOYEES AND OTHER WHEN NOT ON TRAVEL, THE PRESIDENT MAINTAINS AN APARTMENT AS HIS OFFICE AND NIGHT Schedule J (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization MIDDLE EAST MEDIA AND RESEARCH INSTITUTE, INC.

Employer identification number 52–2068483

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

THE MIDDLE EAST MEDIA AND RESEARCH INSTITUTE (MEMRI) EXPLORES THE MIDDLE EAST THROUGH ITS MEDIA, PROVIDING TIMELY TRANSLATIONS OF ARABIC, FARSI, URDU, PASHTU, RUSSIAN AND CHINESE MEDIA AND PUBLISHING ORIGINAL ANALYSES OF POLITICAL, IDEOLOGICAL, INTELLECTUAL, RELIGIOUS AND OTHER TRENDS IN THE REGION, IN THE ARAB AND MUSLIM WORLD, AND IN RUSSIA AND CHINA. IT MONITORS AND REPORTS ON EXTREMIST ONLINE ACTIVITY, PROVIDING INFORMATION TO THE PUBLIC AND ASSISTING RELEVANT AUTHORITIES.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE MIDDLE EAST MEDIA RESEARCH INSTITUTE (MEMRI) EXPLORES THE MIDDLE EAST, THE ARAB AND MUSLIM WORLD, RUSSIA AND CHINA THROUGH THEIR MEDIA, "BRIDGING THE LANGUAGE GAP" BETWEEN THE WEST AND THESE REGIONS. IT PROVIDES TIMELY TRANSLATIONS OF ARABIC, FARSI, URDU, PASHTU, RUSSIAN AND CHINESE, THROUGH MEDIA AND OTHER OPEN SOURCES - PRINT, BROADCAST, AND ONLINE, INCLUDING SOCIAL MEDIA, SERMONS, AND SCHOOLBOOKS - AS WELL AS ORIGINAL ANALYSES OF POLITICAL, IDEOLOGICAL, INTELLECTUAL, SOCIAL, CULTURAL, AND RELIGIOUS TRENDS IN THE MIDDLE EAST. IT MONITORS AND REPORTS ON EXTREMIST ONLINE ACTIVITY, PROVIDING INFORMATION TO THE PUBLIC AND ASSISTING RELEVANT AUTHORITIES.

FOUNDED IN DECEMBER 1997 TO INFORM THE DEBATE OVER U.S. POLICY IN THE MIDDLE EAST, MEMRI IS AN INDEPENDENT, NONPARTISAN, NONPROFIT ORGANIZATION HEADQUARTERED IN WASHINGTON, DC.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

THE MIDDLE EAST MEDIA AND RESEARCH INSTITUTE (MEMRI) IS A VITAL, WORLDWIDE 24/7/365

OPERATION PROVIDING AN ESSENTIAL SERVICE FOR MEDIA, LEGISLATIVE BODIES, GOVERNMENT

AGENCIES, POLICY MAKERS, LAW ENFORCEMENT, ACADEMIA, AND THE PUBLIC AT LARGE.

MEMRI "BRIDGES THE LANGUAGE GAP" BETWEEN THE MIDDLE EAST/RUSSIA/CHINA AND THE WEST BY

MONITORING, TRANSLATING, AND ANALYZING THE MEDIA OF THESE REGIONS, OFFERING DIRECT

Employer identification number 52-2068483

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

RUSSIAN AND CHINESE. IT TRANSLATES CONTENT FROM THE ENTIRE SPECTRUM OF POLITICAL,
IDEOLOGICAL, CULTURAL, AND OTHER VITAL SPHERES, INFORMING GOVERNMENTS, LEGISLATURES,
AND LAW ENFORCEMENT AND ASSISTING THEM IN CARRYING OUT THEIR MISSIONS, AND ALSO
INFORMING MEDIA, ACADEMIA, AND THE PUBLIC AT LARGE. IT MONITORS AND REPORTS ON
EXTREMIST ONLINE ACTIVITY, PROVIDING INFORMATION TO THE PUBLIC AND ASSISTING RELEVANT
AUTHORITIES.

MEMRI RESEARCH - AVERAGING 20 REPORTS EVERY WEEK - IS DISSEMINATED DAILY BY EMAIL TO TENS OF THOUSANDS OF SUBSCRIBERS. IT IS ALSO AVAILABLE AT MEMRI.ORG, AND ON SOCIAL MEDIA. MEMRI PUBLISHES ITS RESEARCH IN ENGLISH AND OTHER MAJOR LANGUAGES. THE MAIN MEMRI WEBSITE, MEMRI.ORG, AND MEMRI PROJECT WEBSITES RECEIVE MILLIONS OF HITS ANNUALLY.

MEMRI PROVIDES BRIEFINGS AND RESEARCH TO FEDERAL, STATE, AND LOCAL AGENCIES THAT
FOCUS ON FOREIGN POLICY, COUNTERTERRORISM, AND MORE. MEMRI RESEARCH IS USED IN
CONGRESSIONAL HEARINGS ON ISSUES CONCERNING THE MIDDLE EAST, COUNTERTERRORISM, AND
OTHER VITAL ISSUES.

SINCE ITS FOUNDING IN 1997, MEMRI HAS BEEN AN INTEGRAL RESEARCH TOOL FOR THE U.S.

MILITARY. ON A DAILY BASIS, MEMRI ASSISTS AND LENDS SUPPORT TO ALL BRANCHES OF THE

U.S. ARMED FORCES - ARMY, NAVY, MARINES, AND AIR FORCE - INCLUDING HUNDREDS OF

DIFFERENT UNITS. MEMRI RESEARCH HAS BEEN USED FOR MILITARY CLASSROOM LESSONS AND

CULTURAL AWARENESS TRAINING, ON INTERNAL WEBSITES, IN MISSION SUPPORT FOR SOLDIERS,

AS TRAINING AIDS, IN PRE-DEPLOYMENT PREPARATION, IN BASIC RESEARCH, AND MUCH MORE.

ADDITIONALLY, MEDIA OUTLETS ACROSS THE U.S. - ALL MAJOR TV NETWORKS, MAJOR NEWSPAPERS

AND MAGAZINES, ONLINE NEWS OUTLETS, AND MORE - REGULARLY RELY ON MEMRI RESEARCH, AND

USE IT FOR SPECIAL MEDIA PROJECTS AND PROGRAMS. MEMRI RESEARCH IS ALSO USED BY

ACADEMIA, INCLUDING OVER 100 UNIVERSITIES AND HIGHER EDUCATION INSTITUTIONS IN THE

Name of the organization MIDDLE EAST MEDIA AND RESEARCH INSTITUTE, INC. Employer identification number 52-2068483

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

U.S.

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS
THERE ARE NO COMMITTEES

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 IS REVIEWED BY THE PRESIDENT AND EXECUTIVE DIRECTOR AND THE PRESIDENT THEN PRESENTS IT TO THE BOARD OF DIRECTORS FOR THEIR REVIEW PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

UPON REQUEST, THE ORGANIZATION MAKES AVAILABLE ITS GOVERNING DOCUMENTS. FINANCIAL

STATEMENTS AND FORM 990 ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE.