

Short Form
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2008Department of the Treasury
Internal Revenue Service

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other org- anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 9/01 , 2008, and ending 8/31 , 2009										
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; vertical-align: top;">C</td> <td style="width:60%;"> IRANIAN SCHOLARSHIP FOUNDATION PO BOX 7531 MENLO PARK, CA 94026-7531 </td> <td style="width:30%; vertical-align: top;"> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">D</td> <td>Employer identification number 20-3100594</td> </tr> <tr> <td>E</td> <td>Telephone number 650-331-0508</td> </tr> <tr> <td>F</td> <td>Group Exemption Number..... ►</td> </tr> </table> </td> </tr> </table>	C	IRANIAN SCHOLARSHIP FOUNDATION PO BOX 7531 MENLO PARK, CA 94026-7531	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">D</td> <td>Employer identification number 20-3100594</td> </tr> <tr> <td>E</td> <td>Telephone number 650-331-0508</td> </tr> <tr> <td>F</td> <td>Group Exemption Number..... ►</td> </tr> </table>	D	Employer identification number 20-3100594	E	Telephone number 650-331-0508	F	Group Exemption Number..... ►
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E	Telephone number 650-331-0508									
F	Group Exemption Number..... ►									
<p>• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).</p>										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"> I Website: ► www.iranianscholarships.com </td> <td style="width:40%;"> G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ► </td> </tr> <tr> <td colspan="2"> H Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF). </td> </tr> </table>		I Website: ► www.iranianscholarships.com	G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►	H Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).						
I Website: ► www.iranianscholarships.com	G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►									
H Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).										
J Organization type (check only one) — <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527										
K Check <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.										
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. ► \$ 247,463.										

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)			
R E V E N U E	1	Contributions, gifts, grants, and similar amounts received.....	235,597.
	2	Program service revenue including government fees and contracts.....	
	3	Membership dues and assessments.....	
	4	Investment income.....	11,866.
	5a	Gross amount from sale of assets other than inventory.....	
	5b	Less: cost or other basis and sales expenses.....	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (att sch).....	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>	
	6a	Gross revenue (not including \$ of contributions reported on line 1).....	
	6b	Less: direct expenses other than fundraising expenses.....	
E X P E N S E S	6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a).....	
	7a	Gross sales of inventory, less returns and allowances.....	
	7b	Less: cost of goods sold.....	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a).....	
	8	Other revenue (describe ►).....	
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8).....	247,463.
	10	Grants and similar amounts paid (attach schedule)..... See Statement 1.....	237,000.
	11	Benefits paid to or for members.....	
	12	Salaries, other compensation, and employee benefits.....	
	13	Professional fees and other payments to independent contractors.....	1,750.
A S S E T S	14	Occupancy, rent, utilities, and maintenance.....	
	15	Printing, publications, postage, and shipping.....	1,021.
	16	Other expenses (describe ► See Statement 2).....	73,647.
	17	Total expenses (add lines 10 through 16).....	313,418.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9).....	-65,955.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return).....	548,662.
	20	Other changes in net assets or fund balances (attach explanation).....	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20.....	482,707.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.			
(See the instructions for Part II.)		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments.....	548,662.	482,707.
23	Land and buildings.....		
24	Other assets (describe ►).....		
25	Total assets	548,662.	482,707.
26	Total liabilities (describe ►).....	0.	0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21).....	548,662.	482,707.

Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

28 See Statement 3

(Grants \$	237,000.)	If this amount includes foreign grants, check here.	<input type="checkbox"/>	28a	237,000.
------------	-----------	-------------------------------------------------------------	--------------------------	-----	----------

(Grants \$ _____) If this amount includes foreign grants, check here. ☐ **29a**

30

(Grants \$) If this amount includes foreign grants, check here. ☐ **30 a**

31 Other program services (attach schedule). 31 a
(Grants \$) If this amount includes foreign grants, check here. ▶ ☐

32	Total program service expenses (add lines 28a through 31a).....	32	237,000.
----	-----------------------------------------------------------------	----	----------

(a) Name and address

(b) Title and average hours per week devoted to position

(c) Compensation (If not paid, enter -0-.)

(d) Contributions to employee benefit plans and deferred compensation

(e) Expense account and other allowances

AZADEH HARIRI ----- 1169 TRINITY DRIVE ----- MENLO PARK, CA 94025	CEO 10.00	0.	0.	0.
MEHDI SAFIPOUR ----- 109 OAKLAND PLACE ----- LOS GATOS, CA 94027	Secretary-Treas 20.00	0.	0.	0.

Part V Other Information (Note the statement requirement in General Instruction V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity.		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N.		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a 0.		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved. 38b N/A		
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9.		N/A
b Gross receipts, included on line 9, for public use of club facilities.		N/A
40a 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 0. ; section 4912 0. ; section 4955 0.		
b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I.		X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 0.		
d Enter amount of tax on line 40c reimbursed by the organization. 0.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T.		X
41 List the states with which a copy of this return is filed None		

42a The books are in care of **MEHDI SAFIPOUR** Telephone no. **94026**
 Located at **PO BOX 7531 MENLO PARK CA** ZIP + 4 **94026**

	Yes	No
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country: ..		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ..		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here. ☐ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year. **43** N/A

	Yes	No
44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51. See Statement 4

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	46	X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	47	X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If 'Yes,' was the related organization(s) a section 527 organization?	49b	

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors receiving over \$100,000		

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

Sign Here

Signature of officer

Date

Type or print name and title.

Paid Preparer's Use Only

Preparer's signature

Non-Paid Preparer

Date

Check if self-employed

Preparer's Identifying Number (See instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

EIN

Phone no.

May the IRS discuss this return with the preparer shown above? See instructions.

Yes X No

BAA

Form 990-EZ (2008)

Part I 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)		334,728.	450,868.	531,671.	235,597.	1,552,864.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-3.	0.	334,728.	450,868.	531,671.	235,597.	1,552,864.
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).						0.
6 Public support. Subtract line 5 from line 4.						1,552,864.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4.	0.	334,728.	450,868.	531,671.	235,597.	1,552,864.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						0.
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 IV.).						0.
11 Total support. Add lines 7 through 10.						1,552,864.
12 Gross receipts from related activities, etc. (see instructions)					12	0.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☒

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)).	14	%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f.	15	%

16a **33-1/3 support test – 2008.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ☐

b **33-1/3 support test – 2007.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ☐

17a **10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

b **10%-facts-and-circumstances test – 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ☐

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.) ...						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
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.						
6 Total. Add lines 1-5.						
7a Amounts included on lines 1, 2, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (add lns 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h.	18	%
19a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ <input type="checkbox"/>		

Part IV

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

This image shows a full page of a worksheet designed for handwriting practice. It features 20 evenly spaced, horizontal dashed lines across the entire width of the page. The background is plain white, providing a clear guide for letter formation and alignment. There are no margins, text, or other markings present.

IRANIAN SCHOLARSHIP FOUNDATION

20-3100594

Statement 1
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid

Class of Activity:	SCHOLARSHIP	
Donee's Name:	Please See Attached Schedule	
Donee's Address:	Please See Attached Schedule	
Cash Amount Given:		\$ 237,000.

Statement 2
Form 990-EZ, Part I, Line 16
Other Expenses

Advertising.....	\$ 1,125.
Auction Items Purchased.....	28,504.
Bank and Credit Card Charges.....	1,137.
Fundraising Expenses.....	32,228.
Office Expenses.....	1,199.
Outside Services.....	8,594.
Student Transportation.....	522.
Supplies.....	338.
Total	\$ 73,647.

Statement 3
Form 990-EZ, Part III, Line 28
Statement of Program Service Accomplishments

The Iranian scholarship foundation identifies the best and brightest Iranian students who are in need of financial assistance and provides them with the means to reduce financial burden while encouraging community service.

Statement 4
Form 990-EZ, Part VI
Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.....	No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.....	No

TAXABLE YEAR

2008

California Exempt Organization Annual Information Return

FORM

199

Calendar year 2008 or fiscal year beginning month 09 day 01 year 2008, and ending month 08 day 31 year 2009

A First Return Filed?

Yes

☒ No

B Type of organization Exempt under Section 23701 D (insert letter)

IRC Section 4947(a)(1) trust ☐

CORP #

2754827

Corporation/Organization Name

IRANIAN SCHOLARSHIP FOUNDATION

FEIN

20-3100594

Address

PO BOX 7531

City

State ZIP Code

MENLO PARK, CA 94026-7531

C Amended Return? ☐ Yes ☒ NoD Are you a subordinate/affiliate in a group exemption? ☐ Yes ☒ No

a Is this a group filing for affiliates?

See General Instruction L. ☐ Yes ☒ Nob If 'Yes,' enter the number of affiliates. ☐ Yes ☒ Noc Are all affiliates included? ☒ Yes ☐ No

(If 'No,' attach a list. See instructions.)

d Is this a separate return filed by an organization

covered by a group ruling? ☐ Yes ☒ Noe Federal Group Exemption Number. ☐ Yes ☒ Nof Is a roster of subordinates attached? ☐ Yes ☒ No

E Final return?

☐ Dissolved ☐ Surrendered (Withdrawn)☐ Merged/Reorganized (attach explanation)If a box is checked, enter date ☐F Check the box if the organization filed: 1 ☐ 990T 2 ☐ 990PF3 ☐ 990HG If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. See General Instruction F. No filing fee is required. ☐H Accounting method used. 1 ☒ Cash 2 ☐ Accrual 3 ☐ OtherI If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If 'Yes,' complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations. ☐ Yes ☒ NoJ Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If 'Yes,' complete an explanation and attach copies of revised documents. ☐ Yes ☒ NoK Is the organization exempt under R&TC Section 23701g? ☐ Yes ☒ No

If 'Yes,' enter amount of gross receipts from nonmember sources. \$

L Is the organization under audit by the IRS or has the IRS audited in a prior year? ☐ Yes ☒ NoM Is the organization a Limited Liability Corporation? ☐ Yes ☒ NoN Did the organization file Form 100 or Form 109 to report taxable income? ☐ Yes ☒ No

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8.	1	11,866.
	2	Gross dues and assessments from members and affiliates.	2	
	3	Gross contributions, gifts, grants, and similar amounts received.	3	235,597.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction C.	4	247,463.
	5	Cost of goods sold.	5	
	6	Cost or other basis, and sales expenses of assets sold.	6	
	7	Total costs. Add line 5 and line 6.	7	
	8	Total gross income. Subtract line 7 from line 4.	8	247,463.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18.	9	313,418.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.	10	-65,955.
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F.	11	10.
	12	Total Payments.	12	
	13	Penalties and Interest. See General Instruction J.	13	
	14	Use tax. See General Instruction K.	14	
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result.	15	10.
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Title	Date	Telephone 650-331-0508
Paid Preparer's Use Only	Preparer's signature	NON-PAID PREPARER	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours, if self-employed) and address			
	FEIN			
	Telephone			
May the FTB discuss this return with the preparer shown above? See instructions. <input type="checkbox"/> Yes <input type="checkbox"/> No				

IRANIAN SCHOLARSHIP FOUNDATION 20-3100594
SCHEDULE OF SCHOLARSHIPS 8/31/2009

First Name	Last Name	Address	City	State	zip	Amount
Nina	Pedrad	7261 Lerner Hall	New York,	NY	10027	\$ 10,000.00
Nima	Naseri	46 Bankville Road	Armonk	NY	10504	\$ 2,000.00
Mohammad	Modarres	404 chelsea Street	Paramus	NJ	07652	\$ 7,000.00
Negin	Samadian-Mo	5170 Hickory Hollow Pkwy	Antioch	TN	37013	\$ 3,000.00
Maral	Satari	23525 Arlington Ave # 109	Torrance	CA	90501	\$ 7,000.00
Nahid	Samsami	PO Box 12846	Stanford,	CA	94309	\$ 3,500.00
Neekaan	Oshidarry	1494 Bittern Drive	Sunnyvale	CA	94087	\$ 2,000.00
Armaghan	Ghahri	21041 Parthenia St. Apt. 251	Canoga Park	CA	91304	\$ 10,000.00
Shahrnaz	Sedighipour	2444 Sacramento st.	Berkeley,	CA	94702	\$ 7,000.00
Sepehr	Keyhani	2616 Telegraph Avenue, Apt. 202	Berkeley,	CA	94704	\$ 10,000.00
Mitra	Akhtari	2248 Dwight Way apt. A	Berkeley	CA	94704	\$ 8,000.00
Negar	Yaghooti	2175 Dwight Way Apt#4	Berkeley	CA	94704	\$ 10,000.00
Kiana	Sharifi	1918 Channing Way, Apt. A	Berkeley,	CA	94704	\$ 10,000.00
Roxana	Rajaii	3310 Browning Place	Bloomington	IN	47401	\$ 7,000.00
Arash	Nayeri.	1251 14th St. # 211	Santa Monica	CA	90404	\$ 7,000.00
Dena	Shahriari	Stern Hall, Room # 205	Berkeley	CA	94720	\$ 7,000.00
Shila	Manandhar	2004 Isabelle Ave	San Mateo	CA	94403	\$ 5,000.00
Pardis	Khosravi	1295 Woodruff Dr.	San Jose	CA	95120	\$ 3,000.00
Farbod	Faraji	9516 Larrabee Ave.	San Diago	CA	92123	\$ 5,000.00
Mazyar	Kahali	10170 Parkwood Dr. Apt 8	Cupertino	CA	95014	\$ 3,000.00
Alen	Hakimi	18233 Erwin St.	Reseda,	CA	91335	\$ 5,000.00
Anita	Ashoori	1811 Manning Ave, apt #202	Los Angeles	CA	90025	\$ 5,000.00
Ashley	Hajishah	93 Briar Ln.	Irvine	CA	92602	\$ 7,000.00
Pedram	Daraei	24323 Val Verde Ct.	Laguna Hills,	CA	92653	\$ 5,000.00
Babak	AminiTehrani	15531 Woodruff Ave #10,	Bellflower	CA	90706	\$ 7,000.00
Anahita	Sabaghian	30041 Tessier apt 62	Laguna Niguel	CA	92677	\$ 7,000.00
Navid	Golshan	11642 Viking Ave	Northridge,	CA	91326	\$ 7,000.00
Roxana	Ghashghaei	38 Snadpragon	Irvine	CA	92604	\$ 7,000.00
Elham	Khazaei	1555 S. Bundy Dr. #205	Los Angeles	CA	90025	\$ 5,000.00
Seyed Ali	Mousavi	23833 Sunset Crossing Road	Diamond Bar	CA	91765	\$ 7,000.00
Shabnam	Fasa	2200 Colorado Ave. #543	Santa Monica	CA	90404	\$ 5,000.00
Soha	Haghani	415 Gayley Ave, Apt # 310	Los Angeles	CA	90024	\$ 6,000.00
Alina	Aghakhani	824 E. Valencia Ave.	Burbank	CA	91501	\$ 2,000.00
Jasmin	Harounian.	134 South Elm Dr.	Beverly Hills	CA	90212	\$ 5,000.00
Leila	Haghighat	5685 Mireille Drive	San Jose	CA	95118	\$ 2,000.00
Sarah	Golbon Raaii	1213 Johnson Street	Ames	IA	50010	\$ 5,000.00
Mahsa	Ighani	2807 Prarie Ct	Wylie	TX	75098	\$ 2,500.00
Payam	Ishani Afousi	1450 South West Temple apt C206	Salt Lake City,	Utah,	84115	\$ 5,000.00
Herire	Golnazarian	1305 Stanley Street #14	Glendale	CA	91206	\$ 6,000.00
Rezvaneh	Ganji	William Street Residence Hall	New York,	NY	10038	\$ 10,000.00
						\$ 237,000.00