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

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

. 2023, and ending 8/31 , 20 2024 For the 2023 calendar year, or tax year beginning 9/01 D Employer identification number Check if applicable: 20-3100594 IRANIAN SCHOLARSHIP FOUNDATION Address change PO BOX 7531 Telephone number Name change MENLO PARK, CA 94026-7531 (408) 857-2709 Initial return Final return/terminated G Gross receipts \$ 949,842 Amended return H(a) Is this a group return for subordinates? X No Yes F Name and address of principal officer: Application pending **H(b)** Are all subordinates included? If "No," attach a list. See instructions Yes No Same As C Above 4947(a)(1) or 527 501(c) (X 501(c)(3) Tax-exempt status: H(c) Group exemption number Website: www.iranianscholarships.com M State of legal domicile: L Year of formation: 2005 X Corporation Trust Association Form of organization: Summary Part I Briefly describe the organization's mission or most significant activities: Education/Culture Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 0 5 0 6 Total number of volunteers (estimate if necessary)..... 7a Total unrelated business revenue from Part VIII, column (C), line 12. **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. **Current Year** 671,186 815,620. 8 Contributions and grants (Part VIII, line 1h)..... Revenue Program service revenue (Part VIII, line 2g) 45,433. Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... -6,161Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 665,025. 861,053. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 538,400. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 405,850. Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) 293,524. 178,144. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).... Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 831,924. 583,994. 29,129. Revenue less expenses. Subtract line 18 from line 12. 81,031. End of Year **Beginning of Current Year** 1,254,768. 1,159,249. Total assets (Part X, line 16) 20 Total liabilities (Part X, line 26) 21 1,254,768. 1,159,249. Net assets or fund balances. Subtract line 21 from line 20. 22 Signature Block Part II 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. Signature of officer Sign Secretary-Treas Here MEHDI SAFIPOUR Type or print name and title Date Preparer's signature Print/Type preparer's name self-employed Non-Paid Preparer Paid Preparer Firm's name Use Only Firm's address May the IRS discuss this return with the preparer shown above? See instructions

20-3100594

Page 2

Part IV Checklist of Required Schedules

911/53	Checklist of Required Solications		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3		X
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		X
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
	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	10000	X
	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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		X
	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.	11b		X
С	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.	11c		X
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.	11d	-	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	X
Ł	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	12t)	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	148	1	X
ŀ	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.	141	0	X
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		X
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		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20	а	X
	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20	b	
21	The state of the s	21		X
	domestic government on harrix, column (vy, inter-till appropriate page 202	Fo	rm 99	0 (2023)

Part IV Checklist of Required Schedules (continued)

		V	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	X	
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? <i>If "Yes," complete Schedule J.</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		X
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? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	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		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	olf "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		
	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		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1:	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
1	n Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable)		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	10		
	(gambling) winnings to prize winners?			(2023)

Form 990 (2023) IRANIAN SCHOLARSHIP FOUNDATION Statements Regarding Other IRS Filings and Tax Compliance (continued)

Part V

arı	Statements Regarding Other Into I mings and Tax Compilation (Committee Committee Commi	Y	es	No		
				200 000		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0					
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X		
3a	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b				
				A		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X		
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		X		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	E III	X		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			17		
	Form 8282?	7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year			V		
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	_ ^		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	8				
	organization have excess business holdings at any time during the year?	0				
9 Sponsoring organizations maintaining donor advised funds.						
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?					
10	Section 501(c)(7) organizations. Enter:	-xe				
2	Initiation fees and capital contributions included on Fact vin, into 12					
	Gross receipts, included on Form 990, Fait VIII, line 12, for public use of olds literature					
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders					
١	Gross income from thembers of shareholders. Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).					
	against amounts due or received from them.). Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
12	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year					
12	Section 501(c)(29) qualified nonprofit health insurance issuers.					
13	a Is the organization licensed to issue qualified health plans in more than one state?	13a				
	Note: See the instructions for additional information the organization must report on Schedule O.					
Ţ	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.	8				
	- Enter the amount of reserves on hand					
11	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X		
	h If "Yes " has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		_		
15	the example subject to the section 4960 tax on navment(s) of more than \$1,000,000 in remuneration or			X		
10.00	excess parachute payment(s) during the year?					
	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		X		
	15 "Van " complete Form 1720 Schedule O					
1.	Continue 501(2)(21) examinations. Did the trust or any disqualified or other person, engage in any activities that would	17				
1	result in the imposition of an excise tax under section 4951, 4952, or 4953?	. 17		(S) (S) (S) (S)		
	If "Yes," complete Form 6069.	ESSELLIN.	99	0 (2023		
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Part	a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	yes i	OH	
	Check if Schedule O contains a response or note to any line in this Part VI.			11
Sect	ion A. Governing Body and Management	Т	Yes	No
	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
	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
	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?	3		X
4	Did the organization make any significant changes to its governing documents			3.7
	gines 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
72	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			21
а	The governing hody?	8a		X
h	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	even	ue C	ode.)
000			Yes	140
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	10b		<u></u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
h	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
122	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done			37
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO. Executive Director, or top management official	15a		X
ŀ	Other officers or key employees of the organization.	15b		X
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	1	X
ŀ	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?	16b)	
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None	01(0)	(3)= -	
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain on Schedule O)			шу)
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements avail 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	State the name, address, and telephone number of the person who possesses the organization about an arrangement of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization about a transfer of the person who possesses the organization and the person who person who person are transfer of the person who person are transfer or the person and the person are transfer or the person and the person are transfer or transfer or the person are transfer or transfer or transfer or t			

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

BAA

$\overline{\mathrm{X}}$ Check this box if neither the organization nor any relative	ted organiz	ation	con			d any	/ cui	rrent officer, directo	or, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle:	ss pe	ition more rson i irecto	than of the hand o	an ee)	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) AZADEH HARIRI	10	.,,						0.	0.	0.
CEO	20	X			-			0.	0.	0.
(2) MEHDI SAFIPOUR Secretary-Treas	$-\frac{20}{0}$	X						0.	0.	0.
(3)						() () () () () () () () () ()				
					12.					
		-						×		
(7)										
(8)		-								
(9)		-								
(10)										
(11)										
(12)		-								
(13)		-								
(14)		_								
			-							Form 990 (2023

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Part VII Section A. Officers, Directors, 1	rustees, i	Ney I	_1111			, and	i riigilest con	pensatea Emp	Toyota (continuou)
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, u officer	ot che inless r and	a di		oth an ustee)	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)									
(16)									
(17)									
(18)									
<u>(19)</u>									
(20)									
(21)									
(22)									
(23)								d	
(24)									
(25)		-							
1b Subtotal							0.		
c Total from continuation sheets to Part VII, Se	ction A						0		
The state of the s							0	. 0	
2 Total number of individuals (including but not lim from the organization 0	ited to those	listed	abo	ove)	who re	eceive	d more than \$100,0	Jou of reportable co	
								» = 1.74 ************************************	Yes No
3 Did the organization list any former officer, d on line 1a? If "Yes,"complete Schedule J for	Sucii illulvio	iuci.	0.000	1.000	2572 1171				3 X
4 For any individual listed on line 1a, is the sur	n of reporta	able co	omp	ens ? If	ation "Yes,"	and o	ther compensation plete Schedule J f	n from or	4 X
the organization and related organizations gives such individual.5 Did any person listed on line 1a receive or action for services rendered to the organization? If	*** * * * * * * * * * * * * * * * * * *					inrola	ated organization	or individual	
for services rendered to the organization: II	163, 6011	OICIC (OCITI	Cuu	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Complete this table for your five highest comcompensation from the organization. Report compensation.	pensated in	ndeper	nde	nt c	ontrac	tors t	hat received more a with or within the	than \$100,000 of organization's tax y	ear.
(A) Name and business		51 (110	COTO	7100	, , , , ,			B) n of services	(C) Compensation
Tamo and Samuel									
·							> 1 1	ere than	
2 Total number of independent contractors (include	ling but not	imited	to t	hos	e listed	abov	re) who received mo	ore man	
\$100,000 of compensation from the organiza	ation 0	TEF	A010)8L (08/23/23				Form 990 (202
BAA		1,000,000							

		Check if Schedule O contains a	response or note to an	y line in this Part VII	l		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns	1a				
Contributions, Giffs, Grants, and Other Similar Amounts		Membership dues	1b				
s, G		Fundraising events	1c				
Gift		Related organizations	1d				
ns,		Government grants (contributions)	1e				
ntio		All other contributions, gifts, grants, and similar amounts not included above	1f 815,620.				
현환		Noncash contributions included in	010/020.				
ont		Total. Add lines 1a-1f	1g	015 620			
	n	Total. Add lines 1a-11	Business Code	815,620.			
Program Service Revenue	2a		Business code				
eve	b						
e e	c						
Š.	d						
Š	е						
gra	f	All other program service revenue.		A)			
Pro	g	Total. Add lines 2a-2f	ON A NEW YORK POINT CASE ASSESSMENT			AND AND SHAPE	
		Investment income (including divider					
		other similar amounts)		45,296.	45,296.		
		Income from investment of tax-ex-					
	5	Royalties			The state of the s		
	•		(II) Personal				
		Gross rents					
		Less: rental expenses 6b Rental income or (loss) 6c					
		Net rental income or (loss)					
	7a Gross amount from (i) Securities (ii) Other						
			005				
	L	other than inventory Less: cost or other basis	926.				
	D	and sales expenses 7b 88,	789.				
	С		137.				
	d	Net gain or (loss)		137.	137.		
Φ	8a	Gross income from fundraising events					
П		(not including \$	_				
eve		of contributions reported on line 1c).					
Z.		See Part IV, line 18	8a				
Other Revenue		Less: direct expenses Net income or (loss) from fundrai	8b	ESCHOOL STATE OF THE STATE OF T		of makes bloom to built and the	
0			sing events				
	9a	Gross income from gaming activities. See Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	С	Net income or (loss) from gaming	activities				
	10a	Gross sales of inventory, less					
		returns and allowances	10a				
		Less: cost of goods sold Net income or (loss) from sales of	10b				of a local Heat of the same with
	С	Net income or (loss) from sales of	Business Code				
Miscellaneous Revenue	11a						
20 2	11a b c d						
ella Me	С						
SC	d	All other revenue					
Σ		Total. Add lines 11a-11d					
	12	Total revenue. See instructions.		861,053.	45,433.	0	

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re	sponse or note to any	line in this Part IX		
	ot include amounts reported on lines 'b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	538,400.	538,400.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	0.	0.	0.	0.
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	0.	0.	0.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
	Other employee benefits				
	Payroll taxes				
11	Fees for services (nonemployees):				
	Management		13		
b	Legal				
	Accounting				
	Lobbying.				
е	Professional fundraising services. See Part IV, line 17				
	Investment management fees	7,066.		7,066.	
	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	4,396.		4,396.	
13	Office expenses	2,433.		2,433.	
14	Information technology	2,100.			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Fundraising Gala	252,046.			252,046.
	Outside Services	27,143.		27,143.	
С		440.		440.	
d) 				
	All other expenses		222 100	44 450	050 046
25	Total functional expenses. Add lines 1 through 24e	831,924.	538,400.	41,478.	252,046.
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).				
RΔΔ		TEFA0110L 08	133133		Form 990 (2023)

27

BAA

20-3100594 Page 11 Form 990 (2023) IRANIAN SCHOLARSHIP FOUNDATION **Balance Sheet** Part X (B) End of year Beginning of year 90,787. 1 40,377 Cash - non-interest-bearing..... 484,529 2 418,501 Savings and temporary cash investments..... 3 Pledges and grants receivable, net..... 3 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B)..... 7 Notes and loans receivable, net..... 8 Inventories for sale or use..... Assets 9 Prepaid expenses and deferred charges..... 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 10c 10b **b** Less: accumulated depreciation..... 745,480. 634,342 11 Investments — publicly traded securities. 11 12 12 Investments – other securities. See Part IV, line 11...... 13 Investments - program-related. See Part IV, line 11...... 13 14 Intangible assets. 14 15 Other assets. See Part IV, line 11..... 15 1,159,249. 16 1,254,768. Total assets. Add lines 1 through 15 (must equal line 33).... 17 Accounts payable and accrued expenses..... 17 18 Grants payable 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Liabilities Loans and other 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 22 23 Secured mortgages and notes payable to unrelated third parties... 24 Unsecured notes and loans payable to unrelated third parties..... Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 0. 0 Total liabilities. Add lines 17 through 25..... Organizations that follow FASB ASC 958, check here alances and complete lines 27, 28, 32, and 33.

=	21	Net assets without delice.		28	
Bal		Net assets with donor restrictions		20	
Fund		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
0	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
8	30	Retained earnings, endowment, accumulated income, or other funds	1,159,249.	31	1,254,768.
Assets		Total net assets or fund balances	1,159,249.		1,254,768.
Net,		Total liabilities and net assets/fund balances.	1,159,249.		1,254,768.
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27

OIIII	550 (2020) IIIIIII BOITO MINOMIT TO STATE TO STA				
Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.	1	0.0	1 0	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	2		1,0	
2	Total expenses (must equal Part IX, column (A), line 25)	3		1,9	
3	Revenue less expenses. Subtract line 2 from line 1			9,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	1,15		
5	Net unrealized gains (losses) on investments.	5	6	6,3	90.
6	Donated services and use of facilities	6			
7	Investment expenses	7 8			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O).	9	No. of London		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,25	4,7	68.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
	Check it Schedule & Contains a response of field to any mile and any			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ed on a			
	separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis				
	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separ	ate			
	basis, consolidated basis, or both.				
	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 auditively, or compilation of its financial statements and selection of an independent accountant?	t, 	. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	Functive Consistence			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a		X
Ł	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why on Schedule O and describe any steps taken to undergo such audits	dit 	3b		
BAA	TECA01131 08/22/22		Form	990	(2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number IRANIAN SCHOLARSHIP FOUNDATION 20-3100594 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or b management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. C Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not d functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations. Provide the following information about the supported organization(s). (v) Amount of monetary (vi) Amount of other (iii) Type of organization (described on lines 1-10 above (see instructions)) (iv) Is the organization listed in your governing document? (i) Name of supported organization (ii) FIN support (see instructions) support (see instructions) Yes No (A) (B) (C) (D) (E) Total

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.)

Sect	ion A. Public Support						
Caler begir	dar year (or fiscal year ning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	874,392.	204,474.	261,652.	671,185.	815,619.	2,827,322.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	874,392.	204,474.	261,652.	671,185.	815,619.	2,827,322.
	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						2,827,322.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	874,392.	204,474.	261,652.	671,185.	815,619.	2,827,322.
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		<u>.</u>				0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10					12	2,827,322.
12	Gross receipts from related activ						
	First 5 years. If the Form 990 is organization, check this box and	stop nere		, third, fourth, or t	fifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pu	blic Support F	Percentage			1.0	100 000/
14	Public support percentage for 2	023 (line 6, colum	in (f), divided by I	ine 11, column (f))	14	100.00 %
15	Public support percentage from	2022 Schedule A	, Part II, line 14				
	33-1/3% support test—2023. If and stop here. The organization	i qualifies as a pu	iblicity supported t	ngarnzation			
	33-1/3% support test—2022. If t and stop here. The organizatio	n quaimes as a pu	iblicity supported	organization			
	or nore, and if the organization the organization meets the fact	s-and-circumstand	ces test. The orga	nization qualifies	as a publicly sup	ported organization	on
	o 10%-facts-and-circumstances or more, and if the organization organization meets the facts-ar	d-circumstances	test. The organiza	ation qualifies as	a publicly support	ted organization.	
18	Private foundation. If the organ	nization did not ch	eck a box on line	13, 16a, 16b, 17	a, or 1/b, check t	nis box and see ii	A (Form 990) 2023

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

oubborr oo		9				/ /			
(Complete only	y if you checked	the box on line	10 of Part I	or if the	organization	failed to	qualify und	er Part II. If th	ne organization
	under the tests								

Sect	ion A. Public Support		•				**************************************
	lar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").	(a) 2019	(b) 2020	(6) 2021	(d) 2022	(6) 2023	(i) Fotos
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
170	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		0			1	(0 T
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
1 0 a	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						
	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						,
	Total support. (Add lines 9, 10c, 11, and 12.)				COL 1	tion F01(a)(2)	
	First 5 years. If the Form 990 is organization, check this box and	stop here		, third, fourth, or	fifth tax year as a	section 501(c)(s)	
Sec	tion C. Computation of Pu	blic Support F	rercentage	line 12 caluma /	f)		%
15	Public support percentage for 2	023 (line 8, colum	in (t), divided by	line 15, column (A SERVICE SPECE THE LAND	%
16	Public support percentage from						0
Sec	tion D. Computation of Inv	vestment Inco	me Percentag	je		T	
17	Investment income percentage	for 2023 (line 10c	, column (f), divid	ded by line 13, co	olumn (f))		%
18	Investment income percentage	from 2022 Schedu	ule A. Part III, lin	e 17			%
19a	a 33-1/3% support tests-2023. If	the organization	did not check the	box on line 14, a nization qualifies	and line 15 is mor as a publicly sup	e than 33-1/3%, ar ported organization	
	33-1/3% support tests-2022. If	the organization	did not check a b and stop here. T	ox on line 14 or he organization (line 19a, and line qualifies as a publ	icly supported orga	nization
20	Private foundation. If the organ	ization did not ch	eck a box on line	14, 19a, or 19b,	check this box ar	nd see instructions.	
-			TEE 40403	08/14/23		Schedule	A (Form 990) 2023

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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.)

Castian	A AI	Cuppoding	Organizations
Section	A. AI	Supporting	Organizations

Yes No 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 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 2 described in section 509(a)(1) or (2). 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b 3a and 3c below. b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization 3b made the determination. c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use. 3с 4a 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 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 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was 5a accomplished (such as by amendment to the organizing document). b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b organization's organizing document? 5c c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of 6 the filing organization's supported organizations? If "Yes," provide detail in Part VI. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990). 8 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))? 9a If "Yes," provide detail in Part VI. **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**. 9b c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 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," 10a answer line 10b below. b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine

whether the organization had excess business holdings.)

cne	edule A (Form 990) 2025 TRANTAN SCHOLLARSHIT TOURDATTOR			
Par	t IV Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		162	140
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c	DESCRIPTION OF	
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			Ma
			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		
Sec	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?	1	Tes	No
2	an appointed or elected by the supported	2		
3	voice in the organization's investment policies and in directing the use of the organization's income of 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).			
	a The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e insti	ructio	15).
2	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 substantially all of its activities.	22	a .	
	b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	21:	0	
	Al State of the St			
	Parent of Supported Organizations. <i>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.	3	a	
	b 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.	3	b	

Par 1	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga Check here if the organization satisfied the Integral Part Test as a qualifying trusinstructions. All other Type III non-functionally integrated supporting organization	t on Nov	7. 20, 1970 (explain in	Part VI). See through E.
Sect	ion 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		
ec	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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other 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		4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally interest (see instructions).	tegrated	Type III supporting o	rganization

Sch	edule A (Form 990) 2023 IRANIAN SCHOLARSHIP			3100	0594 Page 7
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
Sec	tion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1	
2		of supported organization	S,		
	in excess of income from activity			2	
3		ipported organizations		3	
4		en will have the lighter than the		4	
5		details in Part VI)		5	
6					
	Total annual distributions. Add lines 1 through 6.		-1-1-11-	7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required — explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
	a From 2018				
	b From 2019				
	c From 2020				
	d From 2021				
1	e From 2022				
	f Total of lines 3a through 3e				
	g Applied to underdistributions of prior years				
	h Applied to 2023 distributable amount				
	i Carryover from 2018 not applied (see instructions)				
	j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2023 from Section D, line 7:				
	a Applied to underdistributions of prior years			540000000	
	b Applied to 2023 distributable amount				
	c Remainder. Subtract lines 4a and 4b from line 4.	With the second state of the second s			
5	Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			_	
6	Remaining underdistributions for 2023. 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 2024. Add lines 3j and 4c.				Contract to the second

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8 Breakdown of line 7:
a Excess from 2019...
b Excess from 2020...
c Excess from 2021...
d Excess from 2022...
e Excess from 2023...

Schedule A (Form 990) 2023

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.)

SCHEDULE I (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection Employer identification number 20-3100594 X No

Go to www.irs.gov/Form990 for the latest information. Part | General Information on Grants and Assistance IRANIAN SCHOLARSHIP FOUNDATION Department of the Treasury Internal Revenue Service Name of the organization

[×				
	Yes		es" on	7	
Part General Information on Grains and Assistance	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees eligibility for the grants or assistance? The selection criteria used to award the grants or assistance?	Consider in Bart IV the organization's procedures for monitoring the use of grant funds in the United States.	2 Describe in an in the organization answered "Yes" on	art II Grants and Other Assistance to Dollies to Organization of the Control of t	Form 990 Part IV. line 21, for any recipient that received more trial \$2,000; I are in carried and recipient that received more trial \$2,000; I are in carried and recipient that received the second and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient that received the second are in carried and recipient the second are in carried and recipient that received the second are in carried and recipient that recipient the second are in carried and recipient that recipient the second are in carried and recipient that recipient the second are in carried and recipient that recipient the second are in carried and recipient the second are in
0		1		2	1

FORTH 990, Fair IV, III C Z.I, ISI GAIS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(c) IRC section	(d) Amount of cash grant	(e) Amount of noncash	(f) Method of valuation	(g) Description of	(h) Purpose of grant
(a) Name and address of organization or government	(b) EIN	(if applicable)		assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance
(I)		-					
(2)							
(3)							
(4)					-		
					×		

	TEE A 2001 06/12/23	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3 Enter total number of other organizations listed in the line 1 table.	

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

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Schedule I (Form 990) 2023

20-3100594

IRANIAN SCHOLARSHIP FOUNDATION Schedule I (Form 990) 2023

(f) Description of noncash assistance Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance 538,400 (c) Amount of cash grant 89 (b) Number of recipients (a) Type of grant or assistance 1 Scholarships Part IV 7 n 4 2 9

Schedule I (Form 990) 2023

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

IRANIAN SCHOLARSHIP FOUNDATION

Employer identification number

20-3100594

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.