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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, and 990-PF.

FAMILY FOUNDATION

OMB No. 1545-0047

2008

Name of the organization

EBRAHMI

Employer identification number

84:1441613

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) ses for both the General Rule and a Special Rule. See instructions.)				
•	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or one contributor. Complete Parts I and II.				
Special Rules					
under sections 509(a	(3) organization filing Form 990, or Form 990-EZ, that met the 33%% support test of the regulations a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line and II.				
during the year, aggi	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
during the year, som not aggregate to mo the year for an exclu	(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, ne contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did one than \$1,000. (If this box is checked, enter here the total contributions that were received during sively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule ization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more				
Caution. Organizations that	are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990,				

990-EZ, or 990-PF).

990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990.

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Employer identification number

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	NONE.	\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page	of	of	Part II	

Name of organization .

Employer Identification number

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	NONE	\$	/
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	/
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	l
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B ((Form 990, 990-EZ, or 990-PF) (2008)			Page of of Part III	
Name of o	rganization			Employer identification number	
Part III	Exclusively religious, charitable, e aggregating more than \$1,000 for for organizations completing Part	t he year. Complete	columns (a) through		
	contributions of \$1,000 or less for				
(a) No. from Part I	(b) Purpose of gift		Ise of gift	(d) Description of how gift is held	
	NOWE				
		(e) Tran	sfer of gift		
	Transferee's name, address, and		-	ip of transferor to transferee	
(a) No. from Part i	(b) Purpose of gift	(c) U	se of gift	(d) Description of how gift is held	
				-	
-		(a) Tran	efer of nift		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) U	se of gift	(d) Description of how gift is held	
		••••			
]	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship		p of transferor to transferee		
(a) No.					
from Part I	(b) Purpose of gift	(c) U	se of gift	(d) Description of how gift is held	
			•		
-	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				