

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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, or 990-PF.

OMB No. 1545-0047

2010

Employer identification number Name of the organization 27-3280120 ZAKAT FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990 E7 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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990 EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor during the year, aggregate contributions 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 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable etc. purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990 EZ or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990 EZ or on line 2 of its Form 990 PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990 PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Schedule B (Form 990, 990-EZ or 990-PF) (2010)		Page 1 of 1 of Part I
Name of organization		Empl	oyer identification number
<u>ZAKAT</u>	FOUNDATION		7-3280120
Part I	Contributors (see instructions)		
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	OMAR HAMOUI 27 SHEPARD IRVINE, CA 92620	\$ 6,695,023.	Person Payrotl Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	OMAIMA SALOUS 27 SHEPARD IRVINE, CA 92620	\$6,695,022.	Person Payroll Noncash X (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)

023452 12 23-10

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Page 1 or 1 or Part II
Emptoyer identification number

ZAKAT FOUNDATION

27-3280120

(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
rom	Description of noncash property given	(see instructions)	Date received
art I	14,417 SHARES OF GOOGLE		
1	14,417 SHARES OF GOOGLE		
		\$ 6,695,023.	09/07/10
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received
	14,416 SHARES OF GOOGLE		
2			
1			00/05/10
		<u> </u>	09/07/10
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-			
		\$	
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
rom	Description of noncash property given	(see instructions)	Date received
art I			
		\$	
(a)		(a)	· · · · · · · · · · · · · · · · · · ·
No.	(b)	(c) FMV (or estimate)	(d)
rom art i	Description of noncash property given	(see instructions)	Date received
arti			
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
om art i	Description of noncash property given	(see instructions)	Date received
+			·
- 1), 990-EZ or 990-PF) (2