

### 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



## Form **990-PF**

Department of the Treasury Internal Revenue Service

### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

Fo	r calen	dar year 2011 or tax year beginning		, 2011,	, and e	ending		, 20	
Na	me of fo	undation				A Employer	identification number		
Mo	men: F	oundation					93-1317612		
N	ımber an	d street (or P O. box number if mail is not delivered to street address	is)	Room/s	Room/suite B Telephone number (see instructions			s)	
PC	PO Box 322					503-349-4939			
Cr	City or town, state, and ZIP code					C If exempt	ion application is pendi	no. check here ▶ □	
CI	Clearwater, FL 33757							<b>,</b>	
G	Check	all that apply:  Initial return Initial ret	urn of a former	public o	charity	D 1. Foreigi	organizations, check t	nere ▶□	
		☐ Final return ☐ Amende	ed return			2 Foreign	organizations meeting	the 85% test	
	_	Address change  Name c	hange				here and attach compu		
Н		type of organization:  Section 501(c)(3) exemp				F If private	foundation status was t	erminated under	
		n 4947(a)(1) nonexempt charitable trust					07(b)(1)(A), check here	. •	
ı		narket value of all assets at J Accounting meth		☐ Ac	crual	F If the four	ndation is in a 60-month	termination	
		f year (from Part II, col. (c),				under sec	tion 507(b)(1)(B), check	here ►	
	line 16		be on cash basi	s.)					
Ŀ	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue		(b) Net	ınvestment	(c) Adjusted net	(d) Disbursements for chantable	
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses books			come	income	purposes (cash basis only)	
	T				_			(Cash basis Only)	
	1	Contributions, gifts, grants, etc., received (attach schedule		0				· · · · · · · · · · · · · · · · · · ·	
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. E		<del></del>					
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	·	2976					
	5a	Gross rents		2970					
	b	Net rental income or (loss)	-					<del></del>	
ø	6a	Net gain or (loss) from sale of assets not on line 10		0					
Ž	b	Gross sales price for all assets on line 6a		-		•		<del></del>	
Revenue	7	Capital gain net income (from Part IV, line 2)							
æ	8	Net short-term capital gain							
	9	Income modifications						•	
7	10a	Gross sales less returns and allowances							
	b	Less: Cost of goods sold					- "		
-	C	Gross profit or (loss) (attach schedule)							
,	11	Other income (attach schedule)		9920	S	tatement 2			
	12	Total. Add lines 1 through 11		12898					
S	13	Compensation of officers, directors, trustees, etc.	<b>٦</b> L	0					
: es	14	Other employee salaries and wages EIVED	ــــالاد						
ē	15	Pension plans, employee benefits	<i>[</i> ]						
Expenses	16a	Accounting fees (attach schedule)	?	45					
_	b	Accounting fees (attach schedule) Other professional fees (attach schedule) Interest  OGOFN				<del> </del>			
į	C	Other professional fees (attach schedule)	28						
į	17	Interest OGDEN, UT.				<del></del>			
<u> </u>	18	Taxes (attach schedule) (see instructions)		2112					
Ξ	19	Depreciation (attach schedule) and depletion		3112					
A	20	Occupancy	-						
힏	22								
Operating and Administrative	23	Other expenses (attach schedule)	-	4963		tatement 3			
ing	24	Total operating and administrative expenses	<u> </u>	7303					
rat		Add lines 13 through 23	-	8120					
be	25	Contributions, gifts, grants paid		8500				8500	
0	26	Total expenses and disbursements. Add lines 24 and 25	,	16620				8500	
_	27	Subtract line 26 from line 12:	<u> </u>	.5525			<u></u>		
	a	Excess of revenue over expenses and disbursement:	<u>.</u>						
	Ь	Net investment income (if negative, enter -0-) .		<del></del>	<u> </u>	0			
		Adjusted net income (if negative, enter -0-)					0		

Form **990-PF** (2011)

Рa	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		Balance Sheets  Attached schedules and amounts in the description colum should be for end-of-year amounts only (See instructions.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	5496	12123	
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
2	8	Inventories for sale or use	-		
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U.S. and state government obligations (attach schedule)			
`	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
ľ	••	Less. accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	<del></del>		
	13	Investments—other (attach schedule)	93902	90946	statement 5
	14			50540	Statement 3
	14	Land, buildings, and equipment: basis   10700	4 88198	85086	statement 6
	15	Less: accumulated depreciation (attach schedule) ► 2191 Other assets (describe ► )	4 00130	63066	Statement 0
	16	Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)	187596	188155	
$\dashv$	17		10/330	100133	
l		Accounts payable and accrued expenses	<del></del>		
es	18	Grants payable			
ΞÌ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ו≝	21	Mortgages and other notes payable (attach schedule)		·	
	22	Other liabilities (describe > )	<del></del>		
-	23	Total liabilities (add lines 17 through 22)	<del> </del>	<del></del>	
ဖွ		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
ဍိ			407500	400455	
<u>a</u>	24	Unrestricted	187596	188155	
Balances	25	Temporarily restricted			
ק	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ►			
<u> </u>	0=	and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
ë	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
ŝ	29	Retained earnings, accumulated income, endowment, or other funds	187596	188155	
<u>;</u>	30	Total net assets or fund balances (see instructions)	187596	188155	
۳Į	31	Total liabilities and net assets/fund balances (see			
		instructions)	187596	188155	<u> </u>
	rt III	Analysis of Changes in Net Assets or Fund Balance			
7		I net assets or fund balances at beginning of year—Part II, co			
_		of-year figure reported on prior year's return)			187596
_		r amount from Part I, line 27a		2	0
3	Othe	er increases not included in line 2 (itemize)			0
4	Add	lines 1, 2, and 3		4	187596
5	Decr	reases not included in line 2 (itemize) See Statement 9 I net assets or fund balances at end of year (line 4 minus line 5)-	<u>-</u>	5	559
_6	Гota	net assets or fund balances at end of year (line 4 minus line 5)-	-Part II, column (b), II	ne 30 <b>6</b>	188155

art_	(a) List and describe the I	kind(s) of property sold (e.g., real estate, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr )
1a						
b						
C						
d						
е						
	(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		r other basis ense of sale		n or (loss) f) minus (g)
a						
b						
С						<u> </u>
d						
<u>e_</u>						
	Complete only for assets show	ing gain in column (h) and owned	by the foundation	n on 12/31/69		. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I. (j), if any		less than -0-) or rom col (h))
а						
b						
С						
d						
е						
2	Capital gain net income or (		also enter in Pa , enter -0- in Pa		2	
	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) (see instru-	ctions). If (loss	s), enter -0- in )	3	
art	V Qualification Unde	r Section 4940(e) for Redu	uced Tax on I	Net Investmen	t Income	
		ection 4942 tax on the distribu jualify under section 4940(e). I			base period?	☐ Yes ☐
Π	Enter the appropriate amou	int in each column for each ye	ar; see the instr	ructions before m	nakıng any entries.	
Cale	(a)  Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value	(c) of nonchantable-use a	assets Dis	(d) tribution ratio divided by col. (c))
	2010					
	2009					
-	2008			-		<del></del>
	2007					
	2006		1			
?	Total of line 1, column (d)				. 2	
3		or the 5-year base period—div				<del></del>
		ation has been in existence if le				
	, , , , , , , , , , , , , , , , , , ,		· · <b>,</b> · · ·			
ŀ	Enter the net value of nonc	haritable-use assets for 2011	from Part X, line	5	4	
5	Multiply line 4 by line 3 .				5	
6	Enter 1% of net investment	income (1% of Part I, line 27t	o)		6	
7	Add lines 5 and 6				7	
В	Enter qualifying distribution	s from Part XII, line 4			8	
	If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box i	n Part VI, line 1	b, and complete	that part using a 1	1% tax rate. Se

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstru	ctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0	
	here ►				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0	
3					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0	
6	Credits/Payments:				
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld				
d 7				0	
8	Total credits and payments. Add lines 6a through 6d			-	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-		<del>-</del>	
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax   Refunded   11				
Part '	/II-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
	participate or intervene in any political campaign?	1a		1	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		1	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?	1c		1	
d					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1	
	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
-	By language in the governing instrument, or			ļ	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	✓	1	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	✓		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶				
	OREGON				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	✓	ļ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"		,		
40	complete Part XIV	9	<b>✓</b>	<del> </del>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	40		1	
	ramou and addresses	10		<u> </u>	

Р	aq	е	٤

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		✓
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address www momenifoundation org			
14		3349	1939	
	Located at ► PO Box 322 Clearwater, FL ZIP+4 ►	3375	7	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year <b>\Delta 15</b>		٠	▶ ⊔
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority	rity Ye		No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		14	T 84 -
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			:
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		ŀ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		-	
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		l	
	all years listed, answer "No" and attach statement—see instructions.)	2b		
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1		
	foundation had excess business holdings in 2011.)	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		1

Page	6
------	---

Eam	990-PF	/2011\

	0-PF (2011)			4=00			1.4		Pa
	VII-B	Statements Regarding Activities		1 4720	May Be R	equire	d (continued)		
5a	During the year did the foundation pay or incur any amount to:								
		y on propaganda, or otherwise attempt t					Yes V No	·	- 1
		ence the outcome of any specific public							
	directly or indirectly, any voter registration drive?							1 1	
		ide a grant to an individual for travel, stu						·	
		ride a grant to an organization other that ion 509(a)(1), (2), or (3), or section 4940(o						,	
		ride for any purpose other than religious loses, or for the prevention of cruelty to o					☐Yes 🗹 No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in								
	Regulation	ons section 53.4945 or in a current notice	regarding disaster a	ssistanc	e (see instr	uctions)	?	5b	i
	Organiza	ations relying on a current notice regardi	ng disaster assista	nce che	ck here .		▶□	]	
С	_	nswer is "Yes" to question 5a(4), does to	-			the tax	_		
		e it maintained expenditure responsibility						, ,	
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).								
6a		foundation, during the year, receive any				emiums	<b>.</b>		
-							☐Yes ☑No	,	
b	•	foundation, during the year, pay premiur				henefit		6b	1
		to 6b. file Form 8870.	no, directly or main	ouy, on	a porsonia	50110111	Contract.	55	
72		me during the tax year, was the foundation	a narty to a prohibite	d tay sh	elter transac	tion?	☐ Yes ☑ No	.	ŀ
		did the foundation receive any proceed						7b	
	VIII	Information About Officers, Direct							es.
G.I. (		and Contractors	,, .			-9,			,
1	List all	officers, directors, trustees, foundatio	n managers and t	neir con	npensation	ı (see i	nstructions).		
•			(b) Title, and average	(c) Co	mpensation		Contributions to	(e) Exper	
		(a) Name and address	hours per week	(If not	paid, enter	l emplo	b Et	I (e) Exper	
			I devoted to position	1			oyee benefit plans erred compensation	other a	llowance
loui M	Iomeni		devoted to position		-0-)		erred compensation	other a	llowance
<b></b>	iomeni	Parameter El 23757	President 2						llowance
ОВо	x 322 Cle	arwater, FL 33757	President 2		Î-O-)		erred compensation		llowance
O Bo	ox 322 Cle on Momer	arwater, FL 33757 ni	<del> </del>		Î-O-)		erred compensation		llowance
O Bo amro O Bo	ox 322 Cle on Momer ox 322 Cle	arwater, FL 33757 ni arwater, FL 33757	President 2 Secretary 2		0		erred compensation 0		llowance
O Bo amro O Bo asmi	ox 322 Cle on Momer ox 322 Cle ne Ahrnd	arwater, FL 33757 ni Parwater, FL 33757 t	President 2		0	and def	erred compensation 0		ullowance
O Bo amro O Bo asmi O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle	arwater, FL 33757 ni arwater, FL 33757 t arwater, FL 33757	President 2 Secretary 2		0	and def	erred compensation 0 0		ullowance
O Bo amro O Bo asmi O Bo oxar	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle nne Mome	arwater, FL 33757 ni arwater, FL 33757 t arwater, FL 33757	President 2 Secretary 2		0	and def	erred compensation 0 0		ullowance
O Bo amro O Bo asmi O Bo oxar	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle nne Mome ox 322 Cle	earwater, FL 33757 ni earwater, FL 33757 t earwater, FL 33757 eni earwater, FL 33757	President 2 Secretary 2 Director 1 Director 1		0 0	and def	orred compensation  0  0  0		
O Bo amro O Bo asmi O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle nne Mome ox 322 Cle	arwater, FL 33757 ni narwater, FL 33757 t narwater, FL 33757 ni ni narwater, FL 33757 nsation of five highest-paid employe	President 2 Secretary 2 Director 1 Director 1	ose incl	0 0	and def	orred compensation  0  0  0		
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle nne Mome ox 322 Cle Compe	arwater, FL 33757 ni narwater, FL 33757 t narwater, FL 33757 ni ni narwater, FL 33757 nsation of five highest-paid employe	President 2  Secretary 2  Director 1  Director 1  es (other than the		0 0	and def	orred compensation  0  0  0  see instruction	s). If no	one, ei
O Bo amro O Bo asmi O Bo oxar O Bo 2	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	arwater, FL 33757 ni narwater, FL 33757 t narwater, FL 33757 ni ni narwater, FL 33757 nsation of five highest-paid employe	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0	and def	orred compensation  0  0  0  0  see instruction	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo 2	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the	average week	0 0 0 uded on li	and def	on the compensation of the	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, ei
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxar O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo O Bo O Bo O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours per hours p	average week	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el
O Bo amro O Bo asmi O Bo oxan O Bo oxan O Bo	ox 322 Cle on Momer ox 322 Cle ne Ahrnd ox 322 Cle ne Mome ox 322 Cle Compe "NONE.	earwater, FL 33757  ni Parwater, FL 33757  t Parwater, FL 33757  eni Parwater, FL 33757  nsation of five highest-paid employe "	President 2  Secretary 2  Director 1  Director 1  es (other than the hours perdevoted to	average week position	0 0 0 uded on li	and def	one of the compensation of	s). If no	one, el

	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
lone		
<b></b>		
		<del>-</del>
tal	number of others receiving over \$50,000 for professional services	0
2015	IX-A Summary of Direct Charitable Activities	
ell (	IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Provide scholarships to students	
2		
3		_
•		
4		
	IX-B Summary of Program-Related Investments (see instructions)	Amount
	conbe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Aniount
•	N/A	
2	· · · · · · · · · · · · · · · · · · ·	
•		
	other program-related investments. See instructions	
All		
All 9		1
3	. Add lines 1 through 3	

Part	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. Foreign see instructions.)	gn tounga	itions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	<del></del>
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	<del></del> _
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2011 from Part VI, line 5 2a		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	8500
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	8500
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
•	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8500
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation
			000 DE /0014

'art	VIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	<b>(d)</b> 2011
•	Undistributed income, if any, as of the end of 2011:				<del> </del>
2	Enter amount for 2010 only				
a b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2011:		<del>-  </del> -		<del> </del>
a	From 2006				
b	From 2007				
C	From 2008				
d	From 2009				
e	From 2010				
f	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII, line 4: ▶ \$				
а	Applied to 2010, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2011 distributable amount [				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2011				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b				-
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
e	Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) .				
8	Excess distributions carryover from 2006 not	<del></del>			
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2007				
b	Excess from 2008				
C	Excess from 2009		j		
d	Excess from 2010		1		}
e	Excess from 2011				

						- 40		
	0-PF (2011)	<del> </del>				Page 10		
Part					<u> </u>	<u>_</u>		
1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling							
b	Check box to indicate whether the four			L	ction 4942(j)(3)	or 4942(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years				
	income from Part I or the minimum	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total		
	investment return from Part X for	(4) 2011	(0) 2010	(4, 2000	(4,100)			
	each year listed							
	85% of line 2a							
С	Qualifying distributions from Part XII,					47000		
	line 4 for each year listed	8500	9500	11000	18000	47000		
ď	Amounts included in line 2c not used directly		1					
	for active conduct of exempt activities							
е	Qualifying distributions made directly							
	for active conduct of exempt activities							
	Subtract line 2d from line 2c	8500	8500	11000	18000	47000		
3	Complete 3a, b, or c for the							
	alternative test relied upon:							
а	"Assets" alternative test-enter							
	(1) Value of all assets							
	(2) Value of assets qualifying under				·			
	section 4942(j)(3)(B)(i)							
ь	"Endowment" alternative test-enter 2/3					- <del></del>		
_	of minimum investment return shown in							
_	Part X, line 6 for each year listed "Support" alternative test—enter:							
С	• •							
	(1) Total support other than gross investment income (interest,							
	dividends, rents, payments on							
	securities loans (section							
	512(a)(5)), or royalties)					<del> </del>		
	(2) Support from general public and 5 or more exempt							
	organizations as provided in							
	section 4942(j)(3)(B)(iii) .							
	(3) Largest amount of support from							
	an exempt organization							
	(4) Gross investment income					<del></del>		
Part				e foundation h	ad \$5,000 or mo	re in assets at		
_	any time during the year-		s.)					
1	Information Regarding Foundation	Managers:						
а	List any managers of the foundation					by the foundation		
	before the close of any tax year (but o	only if they have co	ntributed more tha	an \$5,000). (See s	ection 507(d)(2).)			
b						ge portion of the		
	ownership of a partnership or other e	ntity) of which the f	oundation has a 1	0% or greater into	erest.			
2	Information Regarding Contribution							
	Check here ▶ ☐ If the foundation	only makes contri	butions to presel	ected charitable	organizations and	does not accept		
	unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under							
	other conditions, complete items 2a,							
а	The name, address, and telephone nu	imber of the persoi	n to whom applica	ations should be a	ddressed:			
Mome	ni Foundation - PO Box 322 Clearwater,	FL 33757 503-349-49	39 (see statement	7)				
b	The form in which applications should	be submitted and	Information and r	naterials they sho	uld include:			
	ww. momenifoundation.org (see stateme							
С	Any submission deadlines:							
	30th of each year. (see statement 7)					<del> </del>		
d	Any restrictions or limitations on av	vards, such as by	geographical are	eas, charitable fi	elds, kinds of insti	itutions, or other		

Applicants must be full time college students of Iranian descent. See www. momenifoundation.org (see statement 7)

Part XV Supplementary Information (continued)  3 Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual,	Foundation			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount	
a Paid during the year	or substantial contributor	- Conpromi			
See statement 4	:		Education	9500	
			Education	8500	
	}				
Total				a 8500	
b Approved for future payment					
Total			<b>~</b> ^	<b>L</b> I	

	rt XVI	I-A Analysis of Income-Producing Ac	TIVITIES				
		s amounts unless otherwise indicated.		siness income	Excluded by sect	on 512, 513, or 514	(e)
1	Prog	ram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
	а			-			- · <del>-</del>
	b _						
	c _						
	d _						
	е _						
	f _						
	g F	ees and contracts from government agencies					<u> </u>
2		bership dues and assessments					
3		est on savings and temporary cash investments			14	2	
4		lends and interest from securities			14	2976	
5		ental income or (loss) from real estate:					
		Pebt-financed property					
		lot debt-financed property			16	4957	
6		rental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11		r revenue: a					
	<b>b</b> _				<del> </del>		
	d _						
40	e				<u> </u>	7025	7935
		otal. Add columns (b), (d), and (e)			l	7935	/933
						13	
	Works	sheet in line 13 instructions to verify calculation	18 1				
Pa		sheet in line 13 instructions to verify calculation  Relationship of Activities to the		ent of Exemp	t Purposes		
	rt XVI	-B Relationship of Activities to the A	ccomplishm			-A contributed u	mortantly to the
Lin			ccomplishm			-A contributed ii	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			l-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			-A contributed in oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			-A contributed in oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	nportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			l-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed ii oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			l-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the
Lin	rt XV e No.	-B Relationship of Activities to the A	ccomplishm			I-A contributed in oses). (See instruc	mportantly to the

		Exempt Or	ganizations									
1	in se		directly or indirectly ene Code (other than s								Yes	No
а	Trans	sfers from the rea	porting foundation to	a nonch	antable exempt o	rganization o	of:					
	(1) C					-				1a(1)		1
		Other assets .		• • •						1a(2)		1
ь	-	r transactions:								raizi		_ <del>`</del> _
			a nanchartable ave	mpt orga	nization					45/41		,
			a noncharitable exe							1b(1)		<b>✓</b>
			ets from a nonchanta		-					1b(2)		1
			, equipment, or other							1b(3)		1
			rrangements							1b(4)		<b>√</b>
		oans or loan gua								1b(5)		✓_
			ervices or membersh							1b(6)		
C			quipment, mailing lis							1c		✓_
d			of the above is "Yes									
			ther assets, or service									
	value	in any transacti	on or sharing arrange	ement, sh	now in column (d)	the value of	the goods,	other	assets, or se	ervices	recei	ved.
(a) Line	no	(b) Amount involved	(c) Name of nonch	antable exe	empt organization	(d) Descrip	otion of transfe	rs, trans	sactions, and sh	anng arr	angem	ents
						1						
	$\dashv$			<del></del> -								
	-+		<del></del>					_				
	-+			<u></u>		<del> </del>						
		<del></del>				<del>-                                    </del>						
						<del>-</del>						
					-							
								'		_		
	desc	ribed in section tes," complete the	ectly or indirectly aff 501(c) of the Code (o e following schedule.	ther than	section 501(c)(3)	or in sectio	n 527? .		[	] Yes		No
		(a) Name of organ	nization		(b) Type of organization	n	<u>.</u>	(c) Des	cription of relation	nship		
								_				
	_											
							·- <u>-</u> -					
			declare that I have examine						est of my knowle	dge and	belief, if	is true,
Sign	Corre	ect, and complete Deci	laration of preparer (other tha	ın taxpayer) ı	is based on all information	n of which prepa	irer nas any kno	wieage	May the	IRS disci	iss this	return
Here		My -	Myme	i	5/14/12	President			with the			
<b></b>		nature of officer or tru	stee		Date Title				(see instr	uctions)?	∐ 7es	□NO
n_: J		Print/Type preparer	r's name	Preparer'	s signature		Date		Chroli D	PTIN		
Paid		I V			-				Check if   self-employed			
Prep		-					L					
Use (												
		Firm's address -	<del></del>					Phone		orm <b>99</b>	n DE	·/OC145
									F	orm 53	U-PF	(2011)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

2009

Federal Statements

**Momeni Foundation** 

# Statement 1

Form 990-PF, Part I, Line 6a

Net Gain (Loss) from Noniventory Sales Per Books Assets Not Included in Part IV

Net Gain (loss)	O O
Cost Basis	
Gross Sales	
Date Sold	
Date Purchased	
Unit	
Quantity Unit	
Description	

တ္တ

80

TOTAL

Statement 2 Form 990-PF, Part I, Line 11 Other Income Rental Income - Noninvestment Property

\$9,920

TOTAL

Statement 3 Form 990-PF, Part I, Line 23 Other Expense

Misc. Fees Rental Expenses

TOTAL

\$4,963

\$0 \$4,963

# Federal Statements Momeni Foundation

Statement 4 Form 990-PF, Part I, Line 25 Contributions, Gifts and Grants

2009

University of Illinois at Urbana-Champaign Donee's Address University of Florida - Gainesville Northwestern University of Illinois Jniversity of Florida - Gainesville Jniversity of California - Berkeley University of Alberta, Canada Jniversity of Rhode Island, RI Touro University of California Colorado School of Mines San Diego State University University of Denver, CO Harvard University **NCLA** \$5000 \$5000 \$5000 \$5000 \$5000 \$5000 \$5000 \$1,000 \$1,000 Amount Given Mr. Massoud Baradaran- Shoraka Ms Seyedeh Maryam Zekavat Ms. Shadi Alagehbanzadeh Ms. Emily Mahsheed Malihi Donee's Name Mr. Alexander Javad Adel Ms. Roxanna Haghighat Mr. Aminollah Sabzevari Ms Amelia A. Shahrabi Mr. Pooria Daryabeygi Ms Anna Abdollahı Mr. Nima Boostani Mr. Farzan Fatemi Mr. Saman Moniri Mr. Arash Nayeri Class of Activity

\$8,500

Total

## Federal Statements **Momeni Foundation**

	_
	=
	ar
	₽.
3	Ë
ent	90-
E	9
ਰ	D.
ၓ	ŭ.

2009

Line 13 Investments - Other

Fair Market Value End of year Value Beg of Year Book Value Valuation Method Other Publicly Traded Securities

Charles Schwab equity & dept securities

Market Value TOTAL

\$0

\$90,946

\$93,902

\$90,946

\$93,902

Form 990-PF, Part II, Line 14 Statement 6

Accumulated Depreciation Category

\$85,600 \$21,400

\$21,914

\$21,914

ဇ္တ

\$85,086

\$63,686 \$21,400

\$107,000

TOTAL

Land

Land, Buildings and Equipment

Basis

Fair Market

Book Value

13525 SW Hazel Buildings

Name of Grant Program

**Application Submission Information** 

Form 990-PF, Part XV, Line 2a-d

Statement 7

Name

Momeni Foundation

# Federal Statements **Momeni Foundation**

Street Address:

2009

PO Box 322

City, State, Zip Code:

Telephone:

Form and content.

Submission deadline:

Restriction on Awards:

Clearwater, FL 33757 503-349-4939

see www.momenifoundation org

June 30 of each year Applicants must be full time students of Iranian descent - see www.momenifoundation.org

**Contributions to Donor Advised Funds** Form 990-PF, Part I, Line 1 Statement 8

Name

Type of Contribution

Cash

Moji Momeni

TOTAL

**8** 

8

Contribution Amount of

> Form 990-PF, Part III, Line 5 Statement 9

Decreases not included in line 2

Unrealized Gain/Loss of Marketable Securities

\$559