# SCANNED FEB 27 2019

orm 990-PF Department of the Treasury Internal Revenue Service

2949133513213

EXTENDED TO NOVEMBER 15, 2018

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
tot enter social security enter Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

| For                             | calendar year 2017 or tax year beginning   |                                       | , and ending              |   |  |
|---------------------------------|--|---------------------------------------|---------------------------|---|--|
| Na                              | me of foundation   | · · · · · · · · · · · · · · · · · · · |                           | A Employer identification                           | on number  |
| _0                              | MID FOR IRAN   |                                       |                           | 27-132685   | 9  |
| Nur                             | mber and street (or P O box number if mail is not delivered to street a                                  | iddress)                              | Room/suite                | B Telephone number                                  | <del></del> ,                                    |
| F                               | P.O. BOX 11623   |                                       |                           | 801-321-7   | 725  |
|                                 | ly or town, state or province, country, and ZIP or foreign po  | stal code                             | <del>-</del> ·            | C If exemption application is                       | pending, check here                              |
| S                               | SALT LAKE CITY, UT, 84147  |                                       |                           | ]   |  |
| G (                             | Check all that apply: Initial return   | Initial return of a fo                | rmer public charity       | D 1 Foreign organization                            | ns, check here                                   |
|                                 | Fırfal return  | Amended return                        |                           | 2 Foreign groanizations of                          | neeting the 85% test                             |
|                                 | Address change   | Name change                           |                           | 2 Foreign organizations in<br>check here and attach | computation -                                    |
| H (                             | Check type of organization (X) Section 501(c)(3) exe   |                                       |                           | E If private foundation st                          |  |
| <u>_</u>                        |  | Other taxable private founda          | 1                         | under section 507(b)(                               | 1)(A), check here $ ightharpoonup$               |
|                                 | air market value of all assets at end of year J Accounting   | -                                     | Accrual                   | F If the foundation is in                           | _  |
|                                 |  | er (specify)                          | 2.1                       | under section 507(b)(                               | 1)(B), check here                                |
|                                 | art   Analysis of Revenue and Expenses   |                                       |                           | (-) Adv   | (d) Disbursements                                |
|                                 | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) | (a) Revenue and expenses per books    | (b) Net investment income | (c) Adjusted net income                             | for charitable purposes<br>(cash basis only)     |
|                                 | 1 Contributions, gifts, grants, etc., received   | 93,000.                               |                           | N/A   |  |
|                                 | 2 Check If the foundation is not required to attach Sch. B   |                                       |                           | -   |  |
|                                 | 3 Interest on savings and temporary cash investments   | 27.                                   | 27.                       |   | STATEMENT 1                                      |
|                                 | 4 Dividends and interest from securities   |                                       |                           |   |  |
|                                 | 5a Gross rents   |                                       |                           |   |  |
|                                 | Net rental income or (loss)  |                                       |                           |   |  |
| une                             | 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all b assets on line 6a   |                                       |                           |   |  |
| Revenue                         | 7 Capital gain net income (from Part IV, line 2)   |                                       | 0.                        |   |  |
| ď                               | 8 Net short-term capital gain  |                                       |                           |   | •  |
|                                 | 9 Income modifications   |                                       | •                         |   |  |
|                                 | 10a Gross sales less returns and allowances  |                                       |                           |   |  |
|                                 | b Less Cost of goods sold  |                                       |                           |   |  |
|                                 | c Gross profit or (loss)   |                                       |                           |   |  |
|                                 | 11 Other income  |                                       |                           |   |  |
| _                               | 12 Total Add lines Isthrough 11  | 93,027.                               | 27.                       |   | ,  |
|                                 | 13 Compensation of officers, directors, trustees, etc  | 62,000.                               | 0.                        |   | 62,000   |
|                                 | 14 Other employée salaries and wages 15 Pension plans employée banglité 10                               |                                       |                           |   | +  |
| S                               | Lie i eugiei Bigud Mei ible Mai d'alle light le la                   |                                       |                           |   |  |
| penses                          | b Accounting fees  |                                       |                           |   |  |
| Š                               | c Other professional rees EN, STMT 2   | 7,344.                                | 0.                        |   | 7,344  |
| ě.                              | 17 Interest  | .,                                    |                           |   | .,,,,,   |
| Operating and Administrative Ex | 18 Taxes   |                                       |                           |   |  |
| ııstı                           | 19 Depreciation and depletion  |                                       |                           |   |  |
| Ē                               | 20 Occupancy   |                                       |                           |   |  |
| P                               | 21 Travel, conferences, and meetings   | 2,263.                                | 0.                        |   | 2,263  |
| and                             | 22 Printing and publications   |                                       |                           |   |  |
| ng i                            | 23 Other expenses STMT 3   | 2,687.                                | 27.                       |   | 2,660  |
| rati                            | 24 Total operating and administrative  |                                       |                           |   |  |
| ) pe                            | expenses Add lines 13 through 23   | 74,294.                               | 27.                       |   | 74,267<br>18,000                                 |
| J                               | 25 Contributions, girts, grants paid   | 18,000.                               | <del></del> ,             |   | 18,000   |
|                                 | 26 Total expenses and disbursements  | 00 00 /                               | ^=                        |   | 00.055   |
|                                 | Add lines 24 and 25  | 92,294.                               | 27.                       |   | 92,267   |
|                                 | 27 Subtract line 26 from line 12   | 733.                                  |                           |   |  |
|                                 | Excess of revenue over expenses and disbursements     Net investment income (descents)                   | /33.                                  | 0.                        |   |  |
|                                 | b Net investment income (if negative, enter -0-)   | <del></del>                           |                           | N/A   | <del>                                     </del> |
|                                 | C Adjusted net income (if negative, enter -0-)   |                                       |                           | I II/A  | I  |

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2017)

| <u></u>                  |         | Balance Sheets   Attached schedules and amounts in the description                                 | Beginning of year | End o          | f year                    |
|--------------------------|---------|--|-------------------|----------------|---------------------------|
| LP                       | art     | Column should be for end-of-year amounts only  | (a) Book Value    | (b) Book Value | (c) Fair Market Value     |
|                          | 1       | Cash - non-interest-bearing  | 6,999.            | 6,975.         | 6,975.                    |
|                          | 2       | Savings and temporary cash investments   |                   |                |                           |
|                          | 3       | Accounts receivable ►  |                   |                |                           |
|                          | ŀ       | 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   |                   |                |                           |
|                          | 7       | Other notes and loans receivable   |                   |                |                           |
|                          |         | Less allowance for doubtful accounts ▶   |                   |                |                           |
| ţ                        | 8       | Inventories for sale or use  |                   |                |                           |
| Assets                   | 9       | Prepaid expenses and deferred charges  |                   |                |                           |
| 4                        | 10a     | Investments - U.S. and state government obligations  |                   |                |                           |
|                          | b       | Investments - corporate stock  |                   |                |                           |
|                          | C       | Investments - corporate bonds  |                   |                |                           |
|                          | 11      | Investments - land buildings and equipment basis   |                   |                |                           |
|                          |         | Less accumulated depreciation  |                   |                |                           |
|                          | 12      | Investments - mortgage loans   |                   |                |                           |
|                          |         | Investments - other  |                   |                |                           |
|                          | 14      | Land, buildings, and equipment basis ► 31,868.   |                   |                | <u></u>                   |
|                          |         | Less accumulated depreciation STMT 5   31,868.   |                   |                |                           |
|                          |         | Other assets (describe   |                   |                |                           |
|                          | 16      | Total assets (to be completed by all filers - see the  |                   | 6 005          | 6 005                     |
|                          |         | instructions. Also, see page 1, item I)  | 6,999.            | 6,975.         | 6,975.                    |
|                          |         | Accounts payable and accrued expenses  | 798.              | 41.            |                           |
|                          |         | Grants payable   |                   |                |                           |
| es                       | 19      | Deferred revenue   |                   |                |                           |
| Liabilities              |         | Loans from officers, directors, trustees, and other disqualified persons                           |                   |                |                           |
| Ë                        |         | Mortgages and other notes payable  |                   |                |                           |
|                          | 22      | Other liabilities (describe  |                   |                |                           |
|                          |         | Table Nakilistan (add lines 17 through 00)   | 798.              | 41.            |                           |
| _                        | 23      | Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here          | 730.              | #1.            |                           |
|                          |         | Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31 |                   |                |                           |
| S                        | 24      | · · · · · · · · · · · · · · · · · · ·  |                   |                |                           |
| ince                     |         | Unrestricted Temporarily restricted  |                   |                |                           |
| Net Assets or Fund Balan |         | Permanently restricted   |                   |                | •                         |
| ă                        | 20      | Foundations that do not follow SFAS 117, check here  |                   |                |                           |
| Ē                        |         | and complete lines 27 through 31   |                   |                |                           |
| ò                        | 27      | Capital stock, trust principal, or current funds   | 0.                | 0.             |                           |
| ets                      | 28      | Paid-in or capital surplus, or land, bldg., and equipment fund                                     | Ö.                | 0.             |                           |
| Ass                      | 29      | Retained earnings, accumulated income, endowment, or other funds                                   | 6,201.            | 6,934.         |                           |
| e                        | 30      | Total net assets or fund balances  | 6,201.            | 6,934.         |                           |
| ~                        |         |  |                   |                |                           |
|                          | 31      | Total liabilities and net assets/fund balances   | 6,999.            | 6,975.         |                           |
| Б                        | art     | Analysis of Changes in Net Assets or Fund B  | alances           |                |                           |
| Ξ                        |         |  |                   | <del></del>    |                           |
|                          |         | net assets or fund balances at beginning of year - Part II, column (a), line                       | 30                |                | £ 201                     |
|                          |         | t agree with end-of-year figure reported on prior year's return)                                   |                   |                | 6,201.                    |
|                          |         | amount from Part I, line 27a   |                   | 2              | 733.                      |
|                          |         | rincreases not included in line 2 (itemize)  | <del></del>       |                | 6,934.                    |
|                          |         | ines 1, 2, and 3 eases not included in line 2 (itemize)  |                   | 4 5            | 0,934.                    |
|                          |         | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co                     | nlumn (h) line 30 |                | 6,934.                    |
| Ť                        | . 5 (0) | 2000 or raine bassiness at one or your time a minus line of a raiting of                           | (v), into oo      |                | Form <b>990-PF</b> (2017) |

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| <u> </u>  |                       | sses for Tax on In                                     |                  |                                      |             | 11                  |                      |  |   |                      |           |
|---|-----------------------|--|------------------|--------------------------------------|-------------|---------------------|----------------------|--|---|----------------------|-----------|
| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) |                       |  | ` P              | How ac<br>- Purcl<br>- Dona          |             | (c) Date<br>(mo., d | acquired<br>ay, yr ) | ( <b>d)</b> Date sold<br>(mo., day, yr.) |   |                      |           |
| 1a  |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| b NOI   | NE                    |  |                  |                                      | _           |                     |                      |  |   |                      |           |
| <u>c</u>  | _                     |  |                  |                                      | -           |                     |                      |  |   |                      |           |
| <u>d</u>  | -                     |  |                  |                                      | -           |                     |                      |  |   |                      |           |
|   | ///                   | Deargouting allowed                                    | (a) Co           | at or other book                     | Ь_          |                     |                      | /b) C                                    | our or (loss  |                      | —         |
| (e) Gross sales price   | (1)                   | Depreciation allowed (or allowable)                    |                  | st or other basis<br>expense of sale |             |                     |                      |  | ain or (loss<br>s (f) minus                           |                      |           |
| <u>a</u>  |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| <u>b</u>  |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| c<br>d  |                       |  |                  | <u> </u>                             |             |                     |                      |  |   |                      |           |
| e   |                       |  |                  |                                      |             |                     |                      |  |   | ** *** ***           |           |
| Complete only for assets showin   | g gain in             | column (h) and owned by t                              | he foundation    | on 12/31/69                          |             |                     | (1)                  | Gains (C                                 | ol (h) gain   | minus                |           |
| (i) FMV as of 12/31/69  |                       | (j) Adjusted basis<br>as of 12/31/69                   | (k) Ex           | cess of col. (i)<br>col. (j), if any |             |                     | còl.                 | (k), but r                               | not less tha<br>(from col-(                           | 1 -0-) <b>o</b> r    |           |
| a   |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| <u>b</u>  |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| C   |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| d   |                       |  |                  |                                      |             |                     |                      |  |   |                      |           |
| е   |                       |  |                  |                                      |             |                     |                      |  |   | •                    |           |
| 2 Capital gain net income or (net car   | pital loss            | If gain, also enter If (loss), enter -0-               |                  |                                      | }           | 2                   |                      |  |   |                      |           |
| 3 Net short-term capital gain or (los   | c) ac defi            | •  |                  |                                      |             |                     |                      |  |   |                      |           |
| If gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8   |                       |  | u (o).           |                                      | }           | 3                   |                      |  |   |                      |           |
| Part V Qualification U  | nder S                | Section 4940(e) for                                    | Reduced          | Tax on Net                           | Inv         | estn                | nent Inc             | ome                                      |   |                      |           |
| If section 4940(d)(2) applies, leave th<br>Was the foundation liable for the sect<br>If "Yes," the foundation doesn't qualify             | ion 4942<br>y under s | tax on the distributable am ection 4940(e). Do not com | plete this par   | t.                                   |             |                     |                      |  |   | Yes X                | No        |
| 1 Enter the appropriate amount in e   | ach colu              | mn for each year; see the in                           | structions be    | fore making any e                    | ntries      | 3                   |                      |  |   | 730                  |           |
| (a)<br>Base period years<br>Calendar year (or tax year beginnir   | ng in)                | (b)<br>Adjusted qualifying dist                        | ributions        | Net value of no                      | (c)<br>ncha |                     | use assets           |  | (d) Distribution ratio (col. (b) divided by col. (c)) |                      |           |
| 2016  |                       |  | 0,599.           |                                      |             |                     | 2,546                |  |   | 12.8008              |           |
| 2015  |                       |  | 5,295.           |                                      |             |                     | 7,249                |  |   | 24.1819              |           |
| 2014  |                       |  | 9,326.           |                                      |             |                     | 2,306                |  |   | 4.8209               |           |
| 2013  |                       |  | 3,241.<br>1,521. |                                      |             |                     | 5,880<br>8,464       |  |   | 5.5348<br>3.2153     |           |
| 2012  |                       | <u> </u>   | 1,521.           |                                      |             |                     | 0,404                | +  | 1   | 3.2155               | <u> </u>  |
| 2 Total of line 1, column (d)   |                       |  |                  |                                      |             |                     |                      | 2  |   | 50.5538              | 09        |
| 3 Average distribution ratio for the 5<br>the foundation has been in exister  | •                     | •  | on line 2 by 5.0 | o, or by the numb                    | er of       | years               |                      | 3  |   | 10.1107              | 62        |
| 4 Enter the net value of noncharitab  | le-use as             | sets for 2017 from Part X, I                           | ine 5            |                                      |             |                     |                      | 4  |   | 11,16                | 9.        |
| 5 Multiply line 4 by line 3   |                       |  |                  |                                      |             |                     |                      | 5  |   | 112,92               | 7.        |
| 6 Enter 1% of net investment incom  | na / 10/- nf          | Part I line 27h)                                       |                  |                                      |             |                     |                      | 6  |   |                      | 0.        |
|   | 10 ( 1 /0 UI          | . w.c., iiii   |                  |                                      |             |                     |                      |  |   | 112,92               |           |
| 7 Add lines 5 and 6   |                       |  |                  |                                      |             |                     |                      | 7  | -   |                      |           |
| 8 Enter qualifying distributions from If line 8 is equal to or greater than   |                       |  | 1b, and comp     | lete that part usin                  | g a 1       | % tax r             | ate.                 | 8  |   | 92,26                | <u>7.</u> |
| See the Part VI instructions.   |                       | <u>.</u>   |                  |                                      |             | _                   |                      |  | ,   | orm <b>990-PF</b> (2 | 017       |

| Part VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)   | Form 990-PF (2017)  |                   |             | age 4       |
|--|---|-------------------|-------------|-------------|
| Date of ruling or determination letter:  | <u></u>   | e instru          | ction       | is)         |
| b Domestic foundations that meet the section 4947(a)(c) requirements in Part V, check here  □ and enter 1% of Part I, line 12, col. (b)  c Part I, line 12, col. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  3 Add lates 1 and 2  4 Obelier A (morms) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  5 Tax based on investment income. Subtract line 4 Horn line 3. If zero relss, enter -0-)  5 Tax based on investment income. Subtract line 4 Horn line 3. If zero relss, enter -0-)  6 CerdistiPayments:  2 2017 estimated tax payments and 2016 overpayment credited to 2017  5 Exempt foreign organizations - tax withheld at source  6 Cax paid with application for extension of time to life (form 888)  6 Baxbuy withholding erroneously withheld  7 Total credits and payments. Add lines 5a through 6d  8 Eiter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  8 Tax due If the total of lines 5 and 6 is more than line 7, enter amount oved  9 Total penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  10 Toverpayment liftine 7 is more train to total of lines 5 and 6 is more than line 7, enter amount oved  10 Toverpayment liftine 7 is more train to total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be. Credited to 2018 estimated tax ▶ Retunded ▶ 11  PERTY UII-A Distantements Regarding Activities  1a During the tax your, dut the foundation attempts to influence any national, tatale, or local legislation or did it participate or intervene in any political campagna?  b Line is spend more than 5100 during the year (either directly) to political purposes? See the instructions for the definition of the spend from the form 1120-POL for this year?  6 Line the amount of line 10 to be. Credited to 2018 estimated tax be proposed on foundation managers. ▶ \$ 0. c. (2) Din foundation members of year admits that we not previously benefit of the a         |   |                   | • • •       | .           |
| of Part I, line 279  All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)  1 Yas under sention 51 (domestic section 4947(p)(1) trusts and taxable foundations only; others, enter -0-)  3 Add lines 1 and 2  3 D.  4 Dublitte 8, (normon) tax (domestic section 4947(p)(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-  5 Credist-Pymments  a 2017 estimated tax payments and 2016 overpayment credited to 2017  Exempt foreign organizations - tax withheld at source  5 D.  5 Exempt foreign organizations - tax withheld at source  5 D.  6 D.  6 D.  6 D.  7 D.  7 D.  8 Exempt foreign organizations - tax withheld at source  1 Total credits and payments. Add lines 5a through 6d  8 Enter any penalty for underpayment of estimated tax. Deck here ☐ # Form 2220 is attached  9 T.  9 Total credits and payments. Add lines 5a through 6d  8 Enter any penalty for underpayment of estimated tax. Deck here ☐ # Form 2220 is attached  9 T.  1 Total credits and payments. Add lines 5a through 6d  1 Total penalty for underpayment of estimated tax. Deck here ☐ # Form 2220 is attached  1 Total credits and payments. Add lines 5a through 6d  8 Enter any penalty for underpayment of estimated tax. Deck here ☐ # Form 2220 is attached  1 Total credits and payments. Add lines 5a through 6d  9 T.  0 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  2 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  2 Total credits and payments. Add lines 5a through 6d  1 Total credits and payments. Add lines 5a through 6d  1          |   |                   |             |             |
| e All other domestic foundations enter 2% of the 27b Exempt Grongs 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-)  3 Add lines 1 and 2  4 Cubritio A (incomo) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  5 Tax based on exestiment income. Subtract line 4 from line 3. If zero or less, enter -0-  5 Tax based on exestiment income. Subtract line 4 from line 3. If zero or less, enter -0-  5 Condish/Payments:  a 2017 estimated tax payments and 2016 overpayment credited to 2017  6 Exempt foreign organizations - tax withheld at source  6 Tax paid with application for extension of time to fite (Form 8868)  6 Exit pay inhibition or extension of time to fite (Form 8868)  6 Exit pay inhibition or extension of time to fite (Form 8868)  7 Total credits and payments. Add lines 5 am trough 6d  8 Exit pay inhibition or extension of time to fite (Form 8868)  9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment line 7 is more than 16 total or lines 5 and 8, enter the amount overpaid  11 Einer the amount of line 10 to be: Dredited to 2018 estimated tax Per Addition of the 10 total tax payment of 10 total tax pay         | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here   ■ and enter 1%  |                   |             | 0.          |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 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. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tox 10 Testimated tax payments and 2016 overpayment credited to 2017 5 Exempt foreign organizations - tax withheld at source 6 Tax pay of with application for extension of time to file (form 8868) 6 D O C Company organizations - tax withheld at source 6 Tax does life the company organizations - tax withheld at source 6 Tax does life the company organizations - tax withheld at source 7 Total credits and payments. Add lines 5 at through 5 de C O C Company organizations or extension of time to the time organization or destinated tax P S O C Company organization or destinated tax P S O C Company organization or destinated tax P S O C Company organization or destinated tax P Returned P S O C O Company organization organiza          | of Part I, line 27b   |                   |             |             |
| 3 Add loses 1 and 2 4 Cubditic A (incron) tax (domestic section /947(a)(1) trusts and taxable foundations only, others, enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter-0-) 5 Tax based manufacture and taxable incomposed to the first of the fir          | c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)                       |                   |             |             |
| 4 Subutic A (mocnne) 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-  6 Credite/Payments:  a 2017 estimated tax payments and 2016 overpayment credited to 2017  b Exempt foreign organizations - tax withheld at source  6 Backup withholding erroneously withheld  7 O.  8 Backup withholding erroneously withheld  7 Total credits and payments. Add lines for through 6d  8 Enter any penalty for underpayment of estimated tax. Check here ☐ #Form 2220 is attached  9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  9 Total credits and payments. Add lines for through 5d  8 Enter any penalty for underpayment of estimated tax. Check here ☐ #Form 2220 is attached  10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount owed  9 Total credits and 10 the 10           | 2 Tax under section 511 (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- 6 Cedis/Payments. a 2017 estimated bax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations. 1ax withheld at source 1 Tax pad with application for extension of time to tele (Form 8868) 6 Baskup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 9 Tax dee if the total of lines 5 and 8 is more than line 7, enter amount over 10 Overgayment lill line 7 is more than the total of lines 5 and 8, lines for amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded 11 11  PERT VII-A 1 Statements Regarding Activities 1a During the tax your, dut the foundation attempt to influence any national, ctate, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1 a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in comerction with the activities. c Did the foundation he Form 1120-P0L for the year? 1 (1) On the foundation he Form 1120-P0L for the year? 2 If Set the reimbursement (if any) year do you not previously prepared to the IRS? 1 If "Yes," attach addieled description of the activities and copies of any materials published or distributed or distributed by the foundation managers. ▶ \$ 0. 2 Enter the reimbursement (if any) year play by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. 2 Enter the reimbursement (if any) year play by the foundation of the activities. 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 11 "Yes," that a detailed description of the activities. 4 Did the foundation      | 3 Add lines 1 and 2   |                   |             |             |
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| managers.  \$ 0.  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities  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  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  4b If "Yes," has it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, discolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  • By language in the governing instrument, or  • 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?  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 X  8a Enter the clates to which the foundation reports or with which it is registered. See instructions.  UT  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  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," output Part XIV If Yes, output Part XIV If Yes, output Part XIV If Yes, out      | · · · · · · · · · · · · · · · · · · ·   |                   |             |             |
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| year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schoolule listing their names and addresses  10 X   |   | 8b                | _X          |             |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," utlach a pehedule listing their names and addresses 10 X   | · · · · · · · · · · · · · · · · · · ·   |                   |             | / لپ        |
| 10 Cit dirty por come substitution of the factors during the tax your in Test, attached school fishing thair names and addresses   |   | -                 |             |             |
|  |   |                   | DE /        |             |

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| Pa | art VII-A   Statements Regarding Activities (continued)   |               |          |               |
|----|---|---------------|----------|---------------|
|    |   |               | Yes      | No            |
| 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            |          | Х             |
| 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            |          | Х             |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13            | X        |               |
|    | Website address ► OMIDFORIRAN.ORG   |               |          |               |
| 14 | The books are in care of ► THE FOUNDATION Telephone no. ► (801)3  | 21-           | 772      | 5             |
|    | Located at ▶P.O. BOX 11623, SALT LAKE CITY, UT ZIP+4 ▶84  | 147           |          |               |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here   |               | <b>•</b> | $\Box$        |
|    | and enter the amount of tax-exempt interest received or accrued during the year   | N             | /A       |               |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,  |               | Yes      |               |
|    | securities, or other financial account in a foreign country?  | 16            |          | X             |
|    | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the  |               |          |               |
|    | foreign country   | <u> </u>      |          | 1             |
| Pa | art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required   |               |          |               |
|    | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |               | Yes      | No            |
| 18 | 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?  |               |          | 1 1           |
|    | (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?  X Yes No  |               |          |               |
|    | (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)?  Yes X No   | 1             |          | {             |
|    |   |               | •        |               |
|    | (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.)  Yes X No   |               |          |               |
|    |   |               |          |               |
| ε  | of 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            |          | X             |
|    | Organizations relying on a current notice regarding disaster assistance, check here   | 10            |          |               |
|    | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected   |               |          |               |
| ٠  | before the first day of the tax year beginning in 2017?   | 1c            |          | X             |
| ,  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation  |               |          | <del></del> - |
| -  | defined in section 4942(j)(3) or 4942(j)(5)):   |               |          |               |
| а  | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning  |               |          |               |
|    | before 2017?  |               |          |               |
|    | If "Yes," list the years ▶ , , , , ,  |               |          |               |
| b  | Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach  |               |          |               |
|    | statement - see instructions ) N/A  | 2b            |          |               |
| C  | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  |               |          |               |
|    | <b>▶</b> , <u>,</u> ,,,   |               |          |               |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time   |               |          |               |
|    | during the year?  |               |          | l i           |
| b  | If "Yes," did it have excess business holdings in 2017 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 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 foundation had excess business holdings in 2017 ) N/A  | 3b            |          | <u> </u>      |
|    | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a            |          | X             |
| b  | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that  |               |          | لب_ا          |
|    | had not been removed from jeopardy before the first day of the tax year beginning in 2017?  | 4b            |          | X             |
|    | For   | m <b>99</b> ( | )-PF     | (2017)        |

Total number of other employees paid over \$50,000

|  | 0.5   | 1206050           |
|--|---|-------------------|
| Form 990-PF (2017) OMID FOR IRAN  Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)  |   | 1326859 Page 7    |
| 3 Five highest-paid independent contractors for professional services. If none, enter  | r "NONE "                                   |                   |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service                         | (c) Compensation  |
| NONE   | (b) Type of service                         | (C) Companication |
| NONE   | $\dashv$                                    |                   |
|  |   |                   |
|  | $\dashv$                                    |                   |
|  | -   |                   |
|  | 7   |                   |
|  |   |                   |
| **************************************   | 7   |                   |
|  |   |                   |
|  | <u> </u>                                    |                   |
| Total number of others receiving over \$50,000 for professional services   |   | ▶ 0               |
| Part IX-A Summary of Direct Charitable Activities  |   | <u> </u>          |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod | lical information such as the<br>Juced, etc | Expenses          |
| 1  |   |                   |
| ann amamana d  |   | 74 267            |
| SEE STATEMENT 7  |   | 74,267.           |
| 2  |   |                   |
|  |   |                   |
|  |   |                   |
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| 4  |   |                   |
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|  |   |                   |
| Part IX-B   Summary of Program-Related Investments   |   |                   |
| Describe the two largest program-related investments made by the foundation during the tax year on   | lines 1 and 2                               | Amount            |
| 1 N/A  |   |                   |
|  |   |                   |
|  |   |                   |
| 2  |   |                   |
|  |   |                   |
|  |   |                   |
| All other program-related investments. See instructions.   |   |                   |
| 3  |   |                   |
|  |   |                   |

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Total. Add lines 1 through 3

A Section 1

| P  | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations  | ndations     | , see instructions ) |
|----|---|--------------|----------------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes  |              |                      |
| а  | Average monthly fair market value of securities   | 1a           | 0.                   |
|    | Average of monthly cash balances  | 1b           | 0.<br>11,339.        |
|    | Fair market value of all other assets   | 1c           |                      |
| d  | Total (add lines 1a, b, and c)  | 1d           | 11,339.              |
| е  | Reduction claimed for blockage or other factors reported on lines 1a and  |              |                      |
|    | 1c (attach detailed explanation) 1e 0.  |              |                      |
| 2  | Acquisition indebtedness applicable to line 1 assets  | 2            | 0.                   |
| 3  | Subtract line 2 from line 1d  | 3            | 11,339.              |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4            | 170.                 |
| 5  | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5            | 11,169.              |
| 6  | Minimum investment return. Enter 5% of line 5   | 6            | 558.                 |
| P  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here   ■ and do not complete this part.) | nd certain   |                      |
| 1  | Minimum investment return from Part X, line 6   | 1            | 558.                 |
| 2a | Tax on investment income for 2017 from Part VI, line 5  |              |                      |
| b  | Income tax for 2017 (This does not include the tax from Part VI.)   | 1            |                      |
| C  | Add lines 2a and 2b   | 2c           | 0.                   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1   | 3            | 558.                 |
| 4  | Recoveries of amounts treated as qualifying distributions   | 4            | 0.                   |
| 5  | Add lines 3 and 4   | 5            | 558.                 |
| 6  | Deduction from distributable amount (see instructions)  | 6            | 0.                   |
| 7  | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.  | 7            | 558.                 |
| _  | art XII Qualifying Distributions (see instructions)   | 1 1          |                      |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  |              | 92 267               |
|    | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26  | 1a           | 92,267.              |
|    | Program-related investments - total from Part IX-B  | 1b 2         | <u> </u>             |
| 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   |              |                      |
|    | Suitability test (prior IRS approval required)  | 3a           |                      |
|    | Cash distribution test (attach the required schedule)   | 3b           | 92,267.              |
| 4  | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4  | 4            | 94,201.              |
| 5  | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment  | _            | Λ                    |
| _  | Income Enter 1% of Part I, line 27b   | 5            | 92,267 <b>.</b>      |
| 6  | Adjusted qualifying distributions Subtract line 5 from line 4   | 6            | ·                    |
|    | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years                 | qualities fo | or the section       |

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|--|---------------|---------------------|------|----------------|
| Part XIII Undistributed Income (see  | instructions) |                     |      | -              |
|  | (a)           | (b)                 | (c)  | (d)            |
|  | Corpus        | Years prior to 2016 | 2016 | 2017           |
| 1 Distributable amount for 2017 from Part XI,  |               |                     | _    |                |
| line 7   |               |                     |      | 558            |
| 2 Undistributed income, if any, as of the end of 2017  |               |                     |      | ,<br>          |
| a Enter amount for 2016 only   |               | ,                   | 0.   | <u></u>        |
| <b>b</b> Total for prior years   |               | _                   |      |                |
| ,,   |               | 0.                  |      | <u></u>        |
| 3 Excess distributions carryover, if any, to 2017:   |               |                     |      |                |
| a From 2012 90,098.  |               |                     |      |                |
| bFrom 2013 141,947.  |               |                     |      |                |
| c From 2014 58,711.  |               |                     |      |                |
| dFrom 2015 174,933.  |               |                     |      |                |
| eFrom 2016 159,972.  |               |                     |      |                |
| f Total of lines 3a through e  | 625,661.      |                     |      |                |
| 4 Qualifying distributions for 2017 from   |               |                     |      |                |
| Part XII, line 4: ►\$ 92,267.  |               |                     | 0.   |                |
| a Applied to 2016, but not more than line 2a   |               |                     | U •  |                |
| b Applied to undistributed income of prior   |               | 0.                  |      |                |
| years (Election required - see instructions)   |               | 0.                  |      |                |
| c Treated as distributions out of corpus   | 0.            |                     |      |                |
| (Election required - see instructions)   | 0.            |                     |      | 558.           |
| d Applied to 2017 distributable amount   | 91,709.       |                     |      | 330.           |
| e Remaining amount distributed out of corpus   | 0.            |                     |      | 0.             |
| 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))   | 0.            | `                   |      |                |
| 6 Enter the net total of each column as indicated below.   |               |                     |      |                |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 717,370.      |                     |      |                |
| b Prior years' undistributed income. Subtract  |               | ***                 |      |                |
| line 4b from line 2b   |               | 0.                  |      |                |
| c 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 | `             | 0.                  |      |                |
| d Subtract line 6c from line 6b Taxable  |               | ``                  |      | <del></del>    |
| amount - see instructions  |               | · 0.                |      |                |
| e Undistributed income for 2016. Subtract line   |               |                     |      |                |
| 4a from line 2a Taxable amount - see instr.  |               |                     | 0.   |                |
| f Undistributed income for 2017. Subtract  |               |                     |      |                |
| lines 4d and 5 from line 1. This amount must   |               |                     |      |                |
| be distributed in 2018   |               |                     |      | 0.             |
| 7 Amounts treated as distributions out of  |               |                     |      |                |
| corpus to satisfy requirements imposed by  |               | į                   |      |                |
| section 170(b)(1)(F) or 4942(g)(3) (Election   |               |                     |      |                |
| may be required - see instructions)  | 0.            |                     |      | <u> </u>       |
| 8 Excess distributions carryover from 2012   |               |                     |      |                |
| not applied on line 5 or line 7  | 90,098.       |                     |      |                |
| 9 Excess distributions carryover to 2018   | 600 000       |                     |      |                |
| Subtract lines 7 and 8 from line 6a  | 627,272.      |                     |      |                |
| 10 Analysis of line 9  |               |                     |      |                |
| a Excess from 2013 141,947.  |               |                     |      |                |
| <b>b</b> Excess from 2014 58,711.  |               |                     |      |                |
| c Excess from 2015 174, 933.   |               |                     |      |                |
| dExcess from 2016 159,972.<br>eExcess from 2017 91,709.  |               |                     |      |                |

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e Excess from 2017

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|---|--------------------------|----------------------------|--|----------------------------|--------------------------|
| Part XIV   Private Operating Fo   |                          |                            |  | N/A                        |                          |
| 1 a If the foundation has received a ruling or o                                      |                          |                            |  |                            |                          |
| foundation, and the ruling is effective for 2   |                          |                            | ▶ └┬_  | 1,0,0,1,0,                 | 210(1)(5)                |
| b Check box to indicate whether the founda  | <del></del>              | ng toundation described    |  | 4942(j)(3) or4             | 942(1)(5)                |
| 2 a Enter the lesser of the adjusted net  | Tax year                 | (1) 0040                   | Prior 3 years                                    | 1 (4) 0014                 | (2) 7 2424               |
| income from Part I or the minimum   | (a) 2017                 | <b>(b)</b> 2016            | (c) 2015   | (d) 2014                   | (e) Total                |
| investment return from Part X for   |                          |                            |  | /                          | 1                        |
| each year listed  |                          |                            |  |                            |                          |
| b 85% of line 2a  |                          |                            |  |                            |                          |
| c Qualifying distributions from Part XII,   |                          |                            |  |                            |                          |
| line 4 for each year listed   |                          |                            |  |                            |                          |
| d Amounts included in line 2c not   |                          |                            |  |                            |                          |
| used directly for active conduct of   |                          |                            |  |                            |                          |
| exempt activities   |                          |                            |  |                            |                          |
| e Qualifying distributions made directly  |                          |                            |  |                            |                          |
| for active conduct of exempt activities.  |                          |                            |  |                            |                          |
| Subtract line 2d from line 2c   |                          |                            |  |                            |                          |
| 3 Complete 3a, b, or c for the  |                          |                            |  |                            |                          |
| alternative test relied upon: a "Assets" alternative test - enter.                    |                          |                            |  |                            |                          |
| (1) Value of all assets   |                          |                            |  |                            |                          |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)                         |                          |                            |  |                            |                          |
| <b>b</b> "Endowment" alternative test - enter   | ·                        |                            |  |                            |                          |
| 2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed   |                          |                            |  |                            |                          |
| c "Support" alternative test - enter  |                          | /                          | <del>                                     </del> | †                          |                          |
| (1) Total support other than gross  |                          |                            |  |                            |                          |
| investment income (interest, dividends, rents, payments on securities loans (section  | ,                        |                            |  |                            |                          |
| 512(a)(5)), or royalties) (2) Support from general public                             |                          |                            |  |                            |                          |
| and 5 or more exempt<br>organizations as provided in<br>section 4942(j)(3)(B)(iii)    |                          |                            |  |                            |                          |
| (3) Largest amount of support from  |                          |                            |  |                            |                          |
| an exempt organization  |                          |                            |  |                            |                          |
| (4) Gross investment income   |                          |                            |  |                            |                          |
| Part XV Supplementary Inform  |                          | • • • •                    | if the foundation                                | n had \$5,000 or m         | ore in assets            |
| at any time during th   | <del></del>              | uctions.j                  |  |                            |                          |
| 1 Information Regarding Foundation a List any managers of the foundation who          | _                        | than 2% of the total cor   | ntributions received by the                      | foundation before the clo  | ose of any tax           |
| year (but only if they have contributed mo  |                          |                            | in out on a room to a by the                     |                            | , so or any lax          |
| KHOSROW B. SEMNANI  |                          |                            |  |                            |                          |
| b List any managers of the foundation who other entity) of which the foundation has a |                          |                            | (or an equally large porti                       | on of the ownership of a p | partnership or           |
| NONE  | -                        |                            |  |                            |                          |
| 2 Information Regarding Contribution  | n, Grant, Gift. Loan.    | Scholarship, etc., F       | Programs:  |                            |                          |
| Check here  if the foundation only the foundation makes gifts, grants, etc., to       | y makes contributions t  | o preselected charitable   | e organizations and does i                       |                            | uests for funds. If      |
| a The name, address, and telephone numbe  | r or email address of th | e person to whom appl      | ications should be addres                        | sed                        |                          |
| KHOSROW SEMNANI, 801-   |                          | .,                         |  |                            |                          |
| P.O. BOX 11623, SALT  |                          | UT 84147                   |  |                            |                          |
| b The form in which applications should be  |                          |                            | should include                                   | <del></del>                |                          |
| APPLICATIONS SHOULD B   | E MAILED I               | N THE FORM                 | OF A LETTE                                       | ₹.                         |                          |
| NONE  |                          |                            |  |                            |                          |
| d Any restrictions or limitations on awards,  | such as by geographica   | n areas, charitable fields | s, kinds of institutions, or                     | otner factors:             |                          |
| NONE  |                          |                            |  |                            |                          |
| 723601 01-03-18   |                          |                            |  |                            | Form <b>990-PF</b> (2017 |

| Part XV Supplementary Information             |  |                      |                                  |         |
|---|--|----------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During the Ye |  | Payment              |                                  |         |
| Recipient Name and address (home or business) | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount  |
| Name and address (nome or business)           | or substantial contributor   | recipient            |                                  |         |
| a Paid during the year                        |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
| UNITED 4 IRAN                                 |  | PUBLIC CHARITY       | DONATION TO SUPPORT              |         |
| 2000 HEARST #301                              |  |                      | UNITED 4 IRAN'S                  |         |
| BERKELEY, CA 94709                            |  |                      | CHARITABLE PURPOSE               | 6,000.  |
|   |  |                      |                                  |         |
| ABDORRAHAMAN BOROUMAND FOUNDATION             |  | PUBLIC CHARITY       | DONATION TO SUPPORT              |         |
| 3220 N STREET NW, SUITE 357                   | ,  |                      | ABDORRAHAMAN BOROUMAND           |         |
| WASHINGTON, DC 20007                          |  |                      | FOUNDATION'S                     |         |
|   |  |                      | CHARITABLE PURPOSE               | 6,000.  |
|   |  |                      |                                  |         |
| CAMPAIGN FOR HUMAN RIGHTS, INC.               |  | PUBLIC CHARITY       | DONATION TO SUPPORT              |         |
| 137 MONTAGUE STREET, PBA 384                  |  |                      | THE CAMPAIGN FOR HUMAN           |         |
| BROOKLYN, NY 11201                            |  |                      | RIGHT'S CHARITABLE               |         |
|   |  | <u> </u>             | PURPOSE                          | 6,000.  |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  | 10.000  |
| Total   | Υ  | <u> </u>             | ▶ 3a                             | 18,000. |
| <b>b</b> Approved for future payment          |  | j                    |                                  |         |
|   |  |                      |                                  |         |
| NONE  |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
| <del></del>                                   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      | <u> </u>                         |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
|   |  |                      |                                  |         |
| Total   |  |                      | <b>▶</b> 3h                      | 0.      |

| iter gross amounts unless otherwise indicated                                     | Unrelate  | business income         |                        | ded by section 512, 513, or 514 | (e)                                    |
|---|---|-------------------------|------------------------|---------------------------------|--|
| 1 Program service revenue   | (a)<br>Business<br>code                             | (b)<br>Amount           | Exclu-<br>sion<br>code | (d)<br>Amount                   | Related or exempt<br>function income   |
| a   |   |                         | +                      |                                 |  |
|   |   | <del>.</del>            | -1                     |                                 |  |
|   | 1 1   | <del>"</del> -          | -                      |                                 |  |
|   | 1 1   | ~                       | -                      |                                 |  |
|   | 1   |                         | 1                      |                                 | ······································ |
| 1   |   |                         | 1                      |                                 |  |
| g Fees and contracts from government agencies                                     |   |                         | 1                      |                                 |  |
| Membership dues and assessments   |   |                         | 1                      |                                 | <del></del>                            |
| Interest on savings and temporary cash  |   |                         |                        |                                 |  |
| investments   |   |                         | 14                     | 27.                             |  |
| Dividends and interest from securities  |   |                         | +==                    |                                 |  |
| Net rental income or (loss) from real estate                                      |   |                         | 1                      | -                               | · · · · · · · · ·                      |
| a Debt-financed property  | <del> </del>  | <del></del>             | +                      |                                 |  |
| b Not debt-financed property  | <del> </del>  |                         | 1                      |                                 |  |
| 6 Net rental income or (loss) from personal                                       | <del> </del>  |                         | 1                      |                                 |  |
| property  |   |                         |                        |                                 |  |
| Other investment income   | <del>                                     </del>    |                         | +                      |                                 |  |
| B Gain or (loss) from sales of assets other                                       | <del> </del>  |                         |                        |                                 |  |
| than inventory  |   |                         |                        |                                 |  |
| Net income or (loss) from special events  |   |                         |                        |                                 |  |
|   | 1   |                         | +                      |                                 |  |
| O Gross profit or (loss) from sales of inventory  1 Other revenue.                |   |                         | +                      |                                 |  |
|   |   |                         |                        |                                 |  |
| <u> </u>  | _   |                         | +                      |                                 |  |
| b   |   |                         | +                      |                                 |  |
| <u> </u>  |   |                         | +                      |                                 |  |
| d   | _   |                         |                        |                                 | <del>.</del>                           |
| Cubhatal Add salvens (b) (d) and (a)  | — <del>                                      </del> | 0                       |                        | 27.                             | 0                                      |
| 2 Subtotal. Add columns (b), (d), and (e)   |   |                         | •                      |                                 | 27                                     |
| 3 Total Add line 12, columns (b), (d), and (e)                                    | >   |                         |                        | 13                              |  |
| See worksheet in line 13 instructions to verify calculation                       | •   |                         |                        | * D                             |  |
| Part XVI-B Relationship of Activiti   |   |                         |                        |                                 |  |
| Explain below how each activity for which the foundation's exempt purposes (other |   |                         | -A contrib             | uted importantly to the accom   | plishment of                           |
| the foundation's exempt purposes (other   | than by providing run                               | us ioi sucii puiposes). |                        |                                 |  |
|   |   |                         |                        |                                 |  |
|   |   |                         |                        |                                 |  |
|   |   |                         |                        |                                 |  |
|   | <del></del>   |                         | · · · · · ·            |                                 |  |
|   |   |                         |                        |                                 |  |
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|   |   |                         |                        |                                 |  |
|   |   |                         |                        |                                 |  |
|   |   |                         |                        |                                 | <del>-</del>                           |
|   |   |                         |                        |                                 |  |
|   |   |                         |                        |                                 |  |
|   |   |                         |                        |                                 |  |

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| Form 990-PF (2        | 2017) <b>OMID</b>                                | FOR IRAN                |                     |                                    |                      | 27-132                                | <u> 6859</u>   | Pa        | ıge 13        |
|-----------------------|--|-------------------------|---------------------|------------------------------------|----------------------|---------------------------------------|----------------|-----------|---------------|
| Part XVII             | Information Re<br>Exempt Organ                   |                         | nsfers to a         | and Transactions                   | and Relation         | nships With Nonchar                   | itable         | )         |               |
| 1 Did the or          |  |                         | of the follows      | ng with any other organizat        | ion described in s   | eaction 501/c)                        | Т              | Yes       | No            |
|                       |  |                         |                     | ng to political organizations      |                      | section so i(c)                       |                |           |               |
| •                     | from the reporting found                         |                         |                     |                                    | •                    |                                       |                |           |               |
| (1) Cash              |  | ation to a noncharit    | aule exempt of      | ryamzanon or                       |                      |                                       | 1a(1)          |           | х             |
| (1) Casii<br>(2) Othe |  |                         |                     |                                    |                      |                                       | 1a(2)          |           | X             |
| ` .                   |  |                         |                     |                                    |                      |                                       | 14(2)          |           | <del></del> - |
| b Other tran          |  | ble everent everence    |                     |                                    |                      |                                       | 15/13          |           | х             |
|                       | s of assets to a noncharita                      | · -                     |                     |                                    |                      |                                       | 1b(1)<br>1b(2) |           | X             |
|                       | hases of assets from a no                        | •                       | organization        |                                    |                      |                                       | 1b(2)          | -         | X             |
|                       | al of facilities, equipment,                     |                         |                     |                                    |                      |                                       | 1b(4)          |           | X             |
| ٠.                    | ibursement arrangements<br>is or loan guarantees |                         |                     |                                    |                      |                                       | 1b(5)          |           | X             |
|                       | ormance of services or me                        | mharchin or fundra      | aicina calicitatii  | one                                |                      |                                       | 1b(6)          |           | X             |
|                       | of facilities, equipment, ma                     |                         | _                   |                                    |                      |                                       | 10             |           | X             |
|                       |  |                         |                     |                                    | lways show the f     | air market value of the goods, i      |                | ets.      |               |
|                       | •  | •                       | -                   | • •                                | =                    | ction or sharing arrangement, s       |                | ,         |               |
|                       | d) the value of the goods,                       |                         |                     |                                    |                      |                                       |                |           |               |
| (a)Line no            | (b) Amount involved                              |                         |                     | le exempt organization             | (d) Descri           | ption of transfers, transactions, and | sharing ar     | rangeme   | ints          |
|                       |  |                         | N/A                 |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      | -                                     |                |           |               |
|                       |  |                         |                     | •                                  |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      |                                       |                | <u>-</u>  |               |
|                       |  |                         |                     |                                    |                      |                                       |                |           | <del></del>   |
| 0- la the few         |  | the officered with our  |                     |                                    | vzetiena desembe     |                                       |                |           |               |
|                       |  |                         |                     | e or more tax-exempt organ         | nzations describe    | :0                                    | Yes            | v         | ] No          |
|                       | 501(c) (other than sectio                        |                         | section 5277        |                                    |                      | _                                     | 168            | <u> </u>  | טאו ב         |
| D II TES, C           | omplete the following schi<br>(a) Name of org    |                         |                     | (b) Type of organization           | T                    | (c) Description of relations          | hin            |           |               |
|                       | N/A  | jameation               |                     | (b) Type of organization           | <del></del>          | (e) accompliant of relations          | <u>p</u>       |           |               |
|                       | 11,711   |                         |                     |                                    | <del></del>          |                                       |                |           |               |
|                       | <del></del>                                      |                         |                     |                                    | <del></del>          |                                       |                |           |               |
|                       |  |                         | $\mathcal{I}$       |                                    |                      | -                                     |                |           |               |
|                       |  |                         | //                  |                                    | <del></del>          |                                       |                |           |               |
| Under                 | penalties of perjury I declare                   | that I have examined th | h/s return, includi | ng accompanying schedules an       | d statements, and to | the best of my knowledge              | y the IRS      | discuss 1 | hie           |
| Sign   L              | elief, it is true correct, and con               | nplete Deglaration of   | breparer (other tha | an texpayer) is based on all infor | nation of which pre  | parer has any knowledge retu          | irn with th    | e prepar  | er            |
| Here                  | 14/1/1   | 146                     |                     | //   ((, ), 1)                     | OFFI                 |                                       | Yes            |           | No            |
| Šigi                  | nature of officer or trustee                     | 7                       | ~~~                 | Date                               | Title                |                                       |                |           |               |
| •                     | Print/Type preparer's na                         | ame                     | Preparer's s        | signature                          | Date                 | Check if PTIN                         |                |           |               |
|                       |  |                         |                     |                                    |                      | self- employed                        |                |           |               |
| Paid                  |  |                         | 1                   |                                    |                      |                                       |                |           |               |
| Preparer              | Firm's name ▶                                    |                         |                     |                                    |                      | Firm's EIN ▶                          |                |           |               |
| Use Only              |  |                         |                     |                                    |                      |                                       |                |           |               |
|                       | Firm's address -                                 |                         |                     |                                    |                      |                                       |                |           |               |
|                       |  |                         |                     |                                    |                      | Phone no                              |                |           |               |
|                       | <u> </u>   |                         |                     | <del></del>                        |                      |                                       | rm QQf         | 1.DF      | (2017         |

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

| Name of the organization                                    |  | Employer identification number                        |
|---|--|---|
| O   | MID FOR IRAN   | 27-1326859  |
| 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   | X 501(c)(3) exempt private foundation  |   |
|   | 4947(a)(1) nonexempt charitable trust treated as a private foundation  |   |
|   | 501(c)(3) taxable private foundation   |   |
| Note: Only a section 501(c                                  | is covered by the <b>General Rule</b> or a <b>Special Rule</b> .<br>(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru  | ule See instructions                                  |
| General Rule  |  |   |
|   | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor   |   |
| Special Rules   |  |   |
| sections 509(a)(1)<br>any one contribut                     | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, line 1 Complete Parts I and II  | , or 16b, and that received from                      |
| year, total contrib   | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III  |   |
| year, contribution<br>is checked, enter<br>purpose Don't co | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious amplete any of the parts unless the <b>General Rule</b> applies to this organization because it le, etc., contributions totaling \$5,000 or more during the year | nore than \$1,000 If this box<br>s, charitable, etc , |
| but it must answer "No" or                                  | hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (fin Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fithe 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) (2017)

Employer identification number

| OMTD | FOR | TRAN |
|------|-----|------|

7 P. . .

| OMID        | FOR IRAN  | 27                         | 7-1326859   |
|-------------|---|----------------------------|---|
| Part I      | Contributors (see instructions) Use duplicate copies of Part I if | additional space is needed |   |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c) Total contributions    | (d)<br>Type of contribution   |
| 1           | KHOSROW B. SEMNANI P.O. BOX 11623 SALT LAKE CITY, UT 84147        | s93,000.                   | Person X Payroll  |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution   |
|             |   | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution   |
|             |   | <br>\$                     | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution   |
|             |   | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c) Total contributions    | (d) Type of contribution  |
|             |   | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d) Type of contribution  |
| 722462 11 0 |   | \$Sahadula B / Farm        | Person Payroll Noncash (Complete Part II for noncash contributions) |

Page 3

Name of organization

Employer identification number

# OMID FOR IRAN

27-1326859

| Part II                      | Noncash Property (see instructions) Use duplicate copies of Part II if a | idditional space is needed                      |                                |
|------------------------------|--|---|--------------------------------|
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received           |
|                              |  | \$  |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received           |
|                              |  | \$  |                                |
| (a)<br>No.<br>from<br>Part i | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received           |
|                              |  | \$  |                                |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                             | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received           |
| -                            |  | \$  |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received           |
|                              |  | \$  |                                |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                               | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received           |
| 723453 11-01-                |  | \$  | 990, 990-EZ, or 990-PF) (2017) |

| Schedule B                | 3 (Form 990, 990-EZ, or 990-PF) (2017)   |  | Page 4  |  |  |  |
|---------------------------|--|--|---|--|--|--|
| Name of org               |  |  | Employer identification number  |  |  |  |
|                           | FOR IRAN   | ·  | 27-1326859  |  |  |  |
| Part III                  | the year from any one contributor. Complete of   | columns (a) through (e) and the following            | section 501(c)(7), (8), or (10) that total more than \$1,000 for ng line entry. For organizations |  |  |  |
|                           | completing Part III, enter the total of exclusively religiou<br>Use duplicate copies of Part III if addition | s, charitable, etc., contributions of \$1,000 or les | ss for the year (Enter this info once)  |  |  |  |
| (a) No.                   |  | •  | (0.5)   |  |  |  |
| from<br>Part I            | (b) Purpose of gift  | (c) Use of gift                                      | (d) Description of how gift is held   |  |  |  |
|                           |  | <del></del>  | <del></del> \   |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  | (e) Transfer of gift                                 |   |  |  |  |
| _                         | Transferee's name, address, a  | nd ZIP + 4   | Relationship of transferor to transferee  |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift                                      | (d) Description of how gift is held   |  |  |  |
| 1                         |  | <del></del>  |   |  |  |  |
|                           |  |  |   |  |  |  |
| -                         | -  | (a) Transfer of orth                                 |   |  |  |  |
|                           | (e) Transfer of gift   |  |   |  |  |  |
| L                         | Transferee's name, address, a  | nd ZIP + 4   | Relationship of transferor to transferee  |  |  |  |
|                           |  |  |   |  |  |  |
| .                         |  |  |   |  |  |  |
| (a) No.                   |  |  |   |  |  |  |
| from<br>Part I            | (b) Purpose of gift  | (c) Use of gift                                      | (d) Description of how gift is held   |  |  |  |
|                           |  | -  |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  | (a) Tanadan of with                                  |   |  |  |  |
|                           | (e) Transfer of gift   |  |   |  |  |  |
|                           | Transferee's name, address, a  | Relationship of transferor to transferee             |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  | · · · · · ·   |  |  |  |
| (-) )                     | `  |  |   |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use 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  |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |

| INGS AND TEM                        | IPORARY CASH  | INVESTMENTS  | STATEMENT 1  |  |
|-------------------------------------|---|--|--|--|
| REVE                                |   |  | (C)<br>ADJUSTED<br>NET INCOME  |  |
|                                     | 27.   | 27.  |  |  |
|                                     | 27.   | 27.  |  |  |
| OTHER PROFES                        | SSIONAL FEES  |  | STATEMENT 2  |  |
| (A)<br>EXPENSES<br>PER BOOKS        |   |  |  |  |
| 7,344.                              | -   | 0.   | 7,344.   |  |
| 7,344.                              |   | 0.   | 7,344.   |  |
| OTHER E                             | XPENSES   |  | STATEMENT 3  |  |
| (A)<br>EXPENSES<br>PER BOOKS        |   |  |  |  |
|                                     | - <del></del>   |  |  |  |
| 61.<br>53.<br>563.<br>10.<br>2,000. |   | 7.<br>0.<br>0.<br>0.   | 34.<br>53.<br>563.<br>10.<br>2,000.  |  |
|                                     | OTHER PROFES  (A)  EXPENSES PER BOOKS  7,344.  OTHER E  (A)  EXPENSES | REVENUE NET PER BOOKS  27.  27.  OTHER PROFESSIONAL FEES  (A) (B) (B) EXPENSES NET INVEST PER BOOKS MENT INCOM  7,344.  OTHER EXPENSES  (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B | REVENUE NET INVESTMENT INCOME  27. 27. 27.  27. 27.  OTHER PROFESSIONAL FEES  (A) (B) (C) ADJUSTED ADJUSTED NET INCOME  7,344. 0.  OTHER EXPENSES  (A) (B) (C) ADJUSTED NET INCOME  7,344. 0.  OTHER EXPENSES  (A) (B) (C) ADJUSTED NET INCOME  OTHER EXPENSES |  |

# PART VII-B LINE 1(A)4

THE FOUNDATION REIMBURSED CERTAIN BUSINESS, TRAVEL AND MEETING EXPENSES THAT WERE INCURRED BY MEMBERS OF THE CORPORATION AND BOARD WHILE CONDUCTING FOUNDATION BUSINESS.

ALL OF THE ABOVE ARE EXCEPTIONS TO SELF-DEALING BECAUSE THE PAYMENTS FOR PERSONAL SERVICES WERE RESONABLE AND NECESSARY TO CARRY OUT THE EXEMPT PURPOSE OF THE FOUNDATION AND WERE

NOT EXCESSIVE.

| FORM 990-PF DEPRECIATION OF ASSE                                 | ETS NOT HELD FOR         | INVESTMENT                 | STATE                           | MENT 5  |
|--|--------------------------|----------------------------|---------------------------------|---------|
| DESCRIPTION  | COST OR<br>OTHER BASIS   | ACCUMULATEI<br>DEPRECIATIO |                                 | VALUE   |
| ORGANIZATIONAL COSTS<br>WEBSITE                                  | 20,748.<br>11,120.       | 20,74<br>11,12             |                                 | 0.      |
| TOTAL TO FM 990-PF, PART II, LN 14                               | 31,868.                  | 31,86                      | 58.                             | 0.      |
| FORM 990-PF PART VIII - LIST TRUSTEES AND                        | OF OFFICERS, D           |                            | STATE                           | EMENT 6 |
| NAME AND ADDRESS   | TITLE AND<br>AVRG HRS/WK | COMPEN-<br>SATION          | EMPLOYEE<br>BEN PLAN<br>CONTRIB |         |
| KHOSROW B. SEMNANI<br>P.O. BOX 11623<br>SALT LAKE CITY, UT 84147 | DIRECTOR<br>1.00         | 0.                         | 0.                              | 0.      |
| LARRY SHELTON P.O. BOX 11623 SALT LAKE CITY, UT 84147            | TREASURER<br>1.00        | 0.                         | 0.                              | 0.      |
| BAHMAN BAKHTIARI<br>P.O. BOX 11623<br>SALT LAKE CITY, UT 84147   | DIRECTOR<br>6.00         | 10,000.                    | 0.                              | 0.      |
| KIRK JOWERS<br>P.O. BOX 11623<br>SALT LAKE CITY, UT 84147        | DIRECTOR<br>1.00         | 0.                         | 0.                              | 0.      |
| AFSHIN MOLAVI<br>P.O. BOX 11623<br>SALT LAKE CITY, UT 84147      | DIRECTOR<br>1.00         | 0.                         | 0.                              | 0.      |
| AMIR SOLTANI<br>P.O. BOX 11623<br>SALT LAKE CITY, UT 84147       | DIRECTOR<br>20.00        | 52,000.                    | 0.                              | 0.      |
| TOTALS INCLUDED ON 990-PF, PAGE 6,                               | PART VIII                | 62,000.                    | 0.                              | 0.      |

OMID FOR IRAN

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

7

# ACTIVITY ONE

RESEARCH, PREPARATION, AND PUBLICATION OF THE IRANIAN ANTI-CORRUPTION PAPER. THE ANTI-CORRUPTION PROJECT SEEKS TO PROMOTE CIVIL SOCIETY BY INTRODUCING TRANSPARENCY AND ACCOUNTABILITY AS KEY ISSUES IN PROMOTING THE HUMAN, CIVIL, AND ECONOMIC RIGHTS OF THE IRANIAN PEOPLE. THE PROJECT SEEKS TO EDUCATE CIVIL SOCIETY LEADERS ABOUT THE POLITICAL, ECONOMIC, AND SOCIAL COSTS OF CORRUPTION.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 1

74,267.