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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

OMB No 1545-0052

ror cale	ndar year 2013 of tax year deginning SEP	_11, 2013	, and ending	DEC 31, 2013	
Name o	of foundation			A Employer identification	number
NAT	'ALIE GIORGI SUNSHINE FO	INDATTON		46-3699023	
	and street (or PO box number if mail is not delivered to street a		Room/suite	B Telephone number	·
170	5 HAGGIN GROVE WAY		(916)281-7	235	
	town, state or province, country, and ZIP or foreign p	ostal code	<u>-</u>	C If exemption application is po	
CAR	MICHAEL, CA 95608				
G Chec	k all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return			
	Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
	k type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
		Other taxable private founda		under section 507(b)(1)	
	arket value of all assets at end of year J Account		Accrual	F If the foundation is in a	60-month termination
		ther (specify)		under section 507(b)(1)	(B), check here
▶\$ Part	32,030. (Part I, colu				1
Part	(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	(d) Disbursements for charitable purposes (cash basis only)
1		34,664.	/ // // i	N/A	(casi pasis only)
2	Check If the foundation is not required to attach Sch. B	* * * * * * * * * * * * * * * * * * * *			
3	Interest on savings and temporary cash investments				4250 0000
4	Dividends and interest from securities				V 1 1 1 1 20 20 3
50	a Gross rents				The state of
1	Net rental income or (loss)	Arag, "wri,	· 244 (1. / ·	Charles in the second	9. 7. M. 14
a) 6:	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		e Pili		
	D assets on line 6a			* * * * * * * * * * * * * * * * * * * *	**************************************
Revenue 7	Capital gain net income (from Part IV, line 2)		0.		
_	Net short-term capital gain				
9 10:	Income modifications Gross sales less returns			\$** \$ * ;	19
1	and allowances Less Cost of goods sold				
	c Gross profit or (loss)	(\$%)		1 2 3 7 3 4 4 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4	
111					4 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
12	Total. Add lines 1 through 11	34,664.	0.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
န္တို 16	a Legal fees				
X۱	b Accounting fees			1	
	Other professional fees				
e 17	Interest		<u> </u>		
Administrative E 12 21 21 21 21 21 21 21 21 21 21 21 21	Taxes		, ,	2: NOV 3 1 50.	1.
linis 19	Depreciation and depletion			·	
Adm 20	Occupancy Travel, conferences, and meetings		R. A.	70.00	
	Printing and publications			-	
<u>a</u>	Other expenses STMT 1	2,634.	0.		2,634.
= I	Total operating and administrative	2,034.	0.		2,034.
era	expenses. Add lines 13 through 23	2,634.	0.		2,634.
리 ₂₅	•	0.			0.
	Total expenses and disbursements.				<u> </u>
	Add lines 24 and 25	2,634.	0.		2,634.
27	Subtract line 26 from line 12:				
	& Excess of revenue over expenses and disbursements	32,030.			
	b Net investment income (if negative, enter -0-)		0.		
	C Adjusted net income (if negative, enter -0-)			N/A	1

8 Enter qualifying distributions from Part XII, line 4

6 Enter 1% of net investment income (1% of Part I, line 27b)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

7 Add lines 5 and 6

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Form 990-PF (2013) NATALIE GIORGI SUNSHINE FOUND	ATION	46-3699	<u> 1023</u>	F	age 4
Part VI Excise Tax Based on Investment Income (Section 494	40(a), 4940(b), 4940(e), or 4	948 - see i	nstruct	tions	s)
1a Exempt operating foundations described in section 4940(d)(2), check here and	d enter "N/A" on line 1.				1
Date of ruling or determination letter: (attach copy of letter if n	ecessary-see instructions)	ll			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1			0.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4	l% of Part I, line 12, col. (b).	1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2		-	0.
3 Add lines 1 and 2	·	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5			0.
6 Credits/Payments:			.,,		
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a				1
b Exempt foreign organizations - tax withheld at source	6b	1			ì
c Tax paid with application for extension of time to file (Form 8868)	6c	1			1
d Backup withholding erroneously withheld	6d	7			1
7 Total credits and payments. Add lines 6a through 6d		1,1			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ttached	8			<u> </u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			<u> </u>
11 Enter the amount of line 10 to be; Credited to 2014 estimated tax	Refunded	11			
Part VII-A Statements Regarding Activities		<u> </u>			
1a During the tax year, did the foundation attempt to influence any national, state, or local le	pislation or did it participate or interven	e in	7	Yes	No
any political campaign?	9		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pur	poses (see instructions for the definitio	1)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	•	•	1 11		
distributed by the foundation in connection with the activities	and copies of any materials publish	50 Or	1 1		e t
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t	the vear:		1		1
(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation manage	•			l	,
e Enter the reimbursement (if any) paid by the foundation during the year for political exper		_			
managers. ▶ \$ 0.					4
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?		2		X
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	o instrument, articles of incorporation.	or		1	í
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ar?		5		X
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:		li		
By language in the governing instrument, or				ŀ	
By state legislation that effectively amends the governing instrument so that no mandal	tory directions that conflict with the state	e law		ŀ	t I
remain in the governing instrument?	,		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete Part II col (c) and Part X	V	7	Х	
11 100,	complete i are ii, coi (c), and i are x	•			
8a Enter the states to which the foundation reports or with which it is registered (see instruc	ctions)		1 1	İ	,
CA				i	1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	· · · · ·		8b	X	/
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					
year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV					X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sch	•	STMT 2	10	Х	
		Fo	rm 990-	PF (2013)

	990-PF (2013) NATALIE GIORGI SUNSHINE FOUNDATION 46-369	9023		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► WWW.NATEAM.ORG			
14	The books are in care of ▶ LOUIS GIORGI, M.D., PRESIDENT Telephone no.▶(916)	281-	723	5
	Located at ► 1705 HAGGIN GROVE WAY, CARMICHAEL, CA ZIP+4 ►9			-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3000		$\overline{}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	Securities, or other financial account in a foreign country?	1 46		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	16	L	 ^ -
	country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
•		т	Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	165	INO
Id	During the year did the foundation (either directly or indirectly).			', ;
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No.		,"	, , ,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	ŀ	l .	1 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	İ		,*1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			1 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available	*		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	€.	3	8
	termination of government service, if terminating within 90 days.)		٠,	. ;
b	If any answer is "Yes" to 1a(1)-(6), did any 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)? N/A	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here	-		<u> </u>
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2013?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ı, š	és.	
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		΄.	,
	before 2013?			1 3
	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		l	1
	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.			1
	>			,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	l '
	during the year?			۱ '
b	If "Yes," did it have excess business holdings in 2013 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,	1 _	<u> </u> .	l'
	Form 4720, to determine if the foundation had excess business holdings in 2013) N/A	3b	<u> </u>	L
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X
		orm 99 0)-PF	(2013)

Form 990-PF (2013) NATALIE GIORGI SUNSHINE F			46-36990	23 Page 6			
Part VII-B Statements Regarding Activities for Which Fe	orm 4720 May Be R	equired (continu	ued)				
5a During the year did the foundation pay or incur any amount to:							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No				
(2) Influence the outcome of any specific public election (see section 4955); or	s X No						
any voter registration drive?	any voter registration drive?						
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No				
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section						
509(a)(1), (2), or (3), or section 4940(d)(2)?							
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?			s X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations		.			
section 53.4945 or in a current notice regarding disaster assistance (see instruc	•		N/A	5b			
Organizations relying on a current notice regarding disaster assistance check he				1			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from				1			
expenditure responsibility for the grant?	Ŋ	I/A	s No	1			
If "Yes," attach the statement required by Regulations section 53 4945-	1 /						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on						
a personal benefit contract?		Ye	s X No	-			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?		<u> </u>	6b X			
If "Yes" to 6b, file Form 8870							
7a At any time during the tax year, was the foundation a party to a prohibited tax si		Ye	s X No				
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mai	nagers, Highly					
List all officers, directors, trustees, foundation managers and their controls	omponention	 ·					
List dir officers, directors, addition, fouridation managers and dien c	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eynense			
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
	to position	enter -0-)	compensation	allowances			
SEE STATEMENT 3		0.	0.	0.			
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
	devoted to position	(C) compensation	and deterred compensation	allowances			
NONE							
	, , , , , , , , , , , , , , , , , , ,						
		1		_			

		<u> </u>		<u> </u>			
Total number of other employees paid over \$50,000			<u>_</u>	0			
			Form	990-PF (2013)			

Form 990-PF (2013) NATALIE GIORGI SUNSHINE FOUNDATION	46-369	99023 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation No. Paid Employees, and Contractors (continued)	lanagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infinite number of organizations and other beneficiaries served, conferences convened, research papers produced, et	ormation such as the c.	Expenses
1 N/A		
2		
3		
4		
Part IX-B. Summary of Program-Related Investments	<u></u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 0	Amazzat
1 N/A	and 2.	Amount
1 11/11		
2	· · · · · · · · · · · · · · · · · · ·	
All other program-related investments. See instructions.		
3	1	
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2013)

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:	(
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	10,299.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	10,299.
e		13,	
	1c (attach detailed explanation) 1e 0 •	-	
2	Acquisition indebtedness applicable to line 1 assets	1 °2 "	0.
3	Subtract line 2 from line 1d	3	10,299.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	154.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,145.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	156.
F	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.)		
1	Minimum investment return from Part X, line 6	1	156.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	156.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	156.
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	156.
F	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	TÌ.L	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,634.
b	Program-related investments - total from Part IX-B	1b	0.
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;	i.i	
а	Suitability test (prior IRS approval required)	3a_	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,634.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,634.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies for the	section

	(a)	/b\	(-)	(4)
	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				156
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2013:			!	
a From 2008				
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from			, h	
Part XII, line 4. ► \$ 2,634.	•			*** **
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				156
e Remaining amount distributed out of corpus	2,478.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.			0,
must be shown in column (a))		•		. 4.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,478.	<u></u>		
b Prior years' undistributed income. Subtract				
line 4b from line 2b		<u> </u>		
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		•		
amount - see instructions		0.		
e Undistributed income for 2012 Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2013. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		,	
8 Excess distributions carryover from 2008		······································	<u> </u>	
not applied on line 5 or line 7	0.			1
9 Excess distributions carryover to 2014.		····		
Subtract lines 7 and 8 from line 6a	2,478.			
10 Analysis of line 9:	, =	···· ··-		
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012	ļ			
e Excess from 2013 2,478.				ł

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Total

Form 990-PF (2013)

▶ 3b

inter gross amounts unless otherwise indicated.	Unrelated b	isiness income		led by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code		1 5555		
a b			1 1		
			11		
d			+		-
e			1 1		
f			11	-	
g Fees and contracts from government agencies			1 1		
2 Membership dues and assessments			1 1		· · · · · · · · · · · · · · · · · · ·
Interest on savings and temporary cash			1 1		
investments					
4 Dividends and interest from securities			1 1		
5 Net rental income or (loss) from real estate:		S 2 2	1		
a Debt-financed property			1		
b Not debt-financed property		··········	 		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events			1 1		
O Gross profit or (loss) from sales of inventory					
1 Other revenue.					
a					
b					
С					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)	* * * * * *	0.		0.	(
3 Total. Add line 12, columns (b), (d), and (e)	·			13	(
See worksheet in line 13 instructions to verify calculation	s.)				
Part XVI-B	s to the Accomi	alishment of Ex	emnt	Purnoses	
Tate Att 25			Cilipi		
Line No. Explain below how each activity for which			A contrib	uted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other t	than by providing funds	for such purposes).		- · · · · · · · · · · · · · · · · · · ·	
				 	
	<u> </u>				
				 	····
	······································				
					·····
					

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Form 990					INE FOUNDATION		46-3699		Pa	ige 13
Part 2	Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable									
		Exempt Organi	izations		·					
	-	-			g with any other organizati		on 501(c) of		Yes	No
the	Code (other than section 501(c)	(3) organizations) or	in section 52	7, relating to political organ	nizations?				
a Tra	nsfers f	rom the reporting founda	ation to a noncharitab	le exempt org	anization of:				- 1	
(1)	Cash							1a(1)		X
(2)	Other	assets						1a(2)		X
b Oth	ner trans	sactions:								. :
(1)	Sales	of assets to a noncharital	ble exempt organizati	ion				1b(1)		X
(2)	Purch	ases of assets from a nor	ncharitable exempt or	rganization				1b(2)		X
(3)	Rental	l of facilities, equipment,	or other assets					1b(3)		X
(4)	Reimb	oursement arrangements						1b(4)		·X
(5)	Loans	or loan guarantees						1b(5)		Х
(6)	Perfor	mance of services or me	mbership or fundrais	ing solicitation	ns			1b(6)		X
c Sh	aring of	facilities, equipment, ma	iling lists, other asset	ts, or paid emi	ployees			10		X
d If t	he answ	er to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b) should a	lways show the fair r	narket value of the goods, o	ther ass	ets,	
or	services	given by the reporting fo	oundation. If the foun	idation receive	d less than fair market vali	ue in any transaction	or sharing arrangement, sh	ow in		
col	umn (d)) the value of the goods,	other assets, or servi	ces received.						
(a) Line n	0	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	naring arr	angemer	its
				N/A					~	
									-	
				•						
										
	1									
							· · · · · · · · · · · · · · · · · · ·			
				• • •						
			<u> </u>							
			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·					
	- 									
	+	······································				-				
2a IS	the four	idation directly or indirect	tly affiliated with, or r	related to one	or more tax-exempt organ	uzations described				
		501(c) of the Code (other				nzations acsonbed	Г	Yes	Y] No
		mplete the following sch		(0)) 01 111 3000	1011 027 1		L		122	טוו ר
	100, 00	(a) Name of org			(b) Type of organization		(c) Description of relations	מור		
		N/A	,		(4)	-	(0)	···P		
						†				
							· · · · · · · · · · · · · · · · · · ·			
				A1600	7	· · · · · · · · · · · · · · · · · · ·	····			
	Under	penalties of perjury I declared	that I have examined this		accompanying schedules and s	tatements, and to the be	st of my knowledge			
Sign	and be	lief, it is true, correct, and com	nplete Declaration of pre	parer (other than	taxpayer) is based on All inform.	ation of which preparer h	as any knowledge retu	the IRS or n with th	e prepare	er
Here		*	7/		1 11/15/14	PRESI)ENT Sho	wn below Yes		¬i. I
	Sign	ature of officer or trustee			Date	Title	L	Yes		_l No
	1	Print/Type preparer's na	 ·· · · · · · · · · · · · · · · · · 	Preparer's s		Date	Check If PTIN			
		71 - 51 - 51 - 51	-		000	1 1	self- employed			
Paid		TRACY S. P.	AGLTA	1 U/44	u. YVaeha	11/14/14		366	221	
Prep	arer	Firm's name ► MOS		LP	70:00	, , , , , , , , , , , , , , , , , , , 	Firm's EIN ▶ 91-01			
Use		Thin shalle - 1405	, avais ii		0		Lumes city > 31-01	.033	10	
	- •	Firm's address ▶ 31	21 W MARC	H I.N	STE 100		+			
	•		OCKTON, C				Phone no 209-9	355-	610	0

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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

2013

Name of the organization Employer identification number

	NA.	TALIE GIORGI SUNSHINE FOUNDATION	46-3699023				
Organiz	ation type (check o	ne)					
Filers of	:	Section:					
Form 99	0 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-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. O	nly a section 501(c)	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	. See instructions.				
General	Rule						
X	For an organization contributor. Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mo lete Parts I and II	ney or property) from any one				
Special	Rules						
	509(a)(1) and 170(i	e)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulo)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the gr) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II					
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.						
but it m	Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

NATALIE GIORGI SUNSHINE FOUNDATION

46-3699023

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHRISTINE SANFILIPPO 772 SANTA RITA WAY SACRAMENTO, CA 95864	\$5,400.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
373452 10 2		\$\$	Person Payroll Payroll Payroll Payroll Payroll Part II for noncash contributions Pagg. 990-990-990-990-990-990-990-990-990-990

Name of organization

Employer identification number

NATALIE GIORGI SUNSHINE FOUNDATION

46-3699023

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	3073023
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
222452 10 2		\$Schodula P. (Form.)	990 990.F7 or 990.PF1 (2012)

Schedule B	(Form 990, 990-EZ, or 990-PF) (2013)			Page		
Name of orga	anization	Employer identification number				
	E GIORGI SUNSHINE FOUN	DATION		46-3699023		
Part III	Exclusively religious, charitable, etc., indiverse. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	the following line entry. For organization c., contributions of \$1,000 or less for	is completin	0) organizations that total more than \$1,000 for the g Part III, enter er this information once) \$		
(a) No. from 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, a	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
			· · ·			
(a) No. from 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, a	and ZIP + 4	Relat	ionship of transferor to transferee		
(a) No. from 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					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
			_ -			
ļ		(a) Transfer of cit				
	Transferee's name, address, a	(e) Transfer of gift		tionship of transferor to transferee		
	manufect 5 manner, address, a	4130 pdf T 7	neia	and the state of t		
						

323454 10-24-13

FORM 990-PF	OTHER EXPENSES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOȘES	
BANK FEES SUPPLIES POSTAGE WEBSITE COSTS	12. 2,398. 46. 178.	0.		12. 2,398. 46. 178.	
TO FORM 990-PF, PG 1, LN 23	2,634.	0.		2,634.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 2
NAME OF CONTRIBUTOR	ADDRESS	

CHRISTINE SANFILIPPO

772 SANTA RITA WAY SACRAMENTO, CA 95864

FORM 990-PF PART VIII - LIS' TRUSTEES AND	FOUNDATION MAN	STATEMENT 3		
NAME AND ADDRESS		COMPEN- SATION		EXPENSE
KELLY BROTHERS 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
JOANNE GIORGI 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR, SEC		0.	0.
LOUIS GIORGI, M.D. 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	PRESIDENT AND	DIRECTOR 0.	0.	0.
MARK GRIJNSZTEIN, M.D. 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
DAVID HAGEN 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
VERONICA HAGEN 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
CANDACE LUCCHETTI 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
RYAN LUCCHETTI 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
JOHN MCGINNESS 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
KATHY OERTLI 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	TREASURER ANI	O CFO 0.	0.	0.

NATALIE GIORGI SUNSHINE FOUNDATION			46-3699	023
DON WREDEN, M.D. 1705 HAGGIN GROVE WAY CARMICHAEL, CA 95608	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

Form 8868 (Rev. 1-2014)					Page 2	
• If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	omplete only Part II and check this	box		X	
Note. Only complete Part II if you have already been granted an a				868.		
• If you are filing for an Automatic 3-Month Extension, comple		•				
Part II Additional (Not Automatic) 3-Month Ex			al (no co	pies needed).		
· · · · · · · · · · · · · · · · · · ·				g number, see ir		
Type or Name of exempt organization or other filer, see instrui	ctions	<u> </u>		identification nui		
int						
NATALIE GIORGI SUNSHINE FOUNDATION			46-3699023			
			Social security number (SSN)			
			000141 301	carry named (co	,,,,	
instructions City, town or post office, state, and ZIP code For a fo	reign addi	ress see instructions	<u> </u>			
CARMICHAEL, CA 95608	noigh addi	1000, 000 (1101/101/101/10				
						
Enter the Return code for the return that this application is for (file	a conarat	a application for each return)			0 4	
Enter the Netoni code for the return that this application is for the	a separat	e application for each return)			0131	
Application	Baturn	LAnnication			Return	
Application	Return	Application				
Is For	Code	Is For		345 35° . F	Code	
Form 990 or Form 990-EZ	01			* · · ·		
Form 990-BL	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720 (other than individual)			09	
Form 990-PF	04	Form 5227	-		10	
Form 990 T (sec 401(a) or 408(a) trust)	05	Form 6069		·· —	11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOPI Do not complete Part II if you were not already granted	an auton	natic 3-month extension on a previ	ously filed	d Form 8868.		
LOUIS GIORGI, N			0560			
• The books are in the care of > 1705 HAGGIN GRO	JVE WA		1 9560	18		
Telephone No ► (916)281-7235		Fax No ▶		 .		
 If the organization does not have an office or place of business 				J	-	
If this is for a Group Return, enter the organization's four digit	- `	• • • • • • • • • • • • • • • • • • • •		• .		
box ▶ If it is for part of the group, check this box ▶		ach a list with the names and EINs of	f all memb	ers the extension	ıs for	
		BER 15, 2014	550	24 0045	,	
,	SEP 1			31, 2013	<u>, </u>	
6 If the tax year entered in line 5 is for less than 12 months, c	heck rease	on X Initial return	Final r	return		
Change in accounting period						
7 State in detail why you need the extension		IODDIG TO NOT OUTDITO				
EXAMINATION OF THE ACCOUNTS AN			TENTL	A COMPLE	re to	
FILE AN ACCURATE AND COMPLETE	RETUR	N AT THIS TIME.				
				 		
8a If this application is for Forms 990-BL, 990 PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			_	
nonrefundable credits. See instructions			8a	\$	0.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	•	•	-	i		
tax payments made. Include any prior year overpayment all	lowed as a	credit and any amount paid				
previously with Form 8868			8b	\$	0.	
Balance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using	<u> </u>	1		
EFTPS (Electronic Federal Tax Payment System) See instr			8c		0.	
<u> </u>		st be completed for Part II o	•			
Under penalties of perjury, I declare that I have examined this form, include	ding accomp	panying schedules and statements, and to	o the best of	f my knowledge and	l belief,	
it is true, correct, and complete, and that I am authorized to prepare this f		_				
Signature Potter & Besso Title >	<u> </u>	. A .	Date	e ► 8/13/2	2014	
				Form 8868	(Rev 1-2014)	