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# Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2014

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

	For o	ale	ndar	year 2014, or ta	x year beginning	, 2014,	and ending					
,	LAF	AN	ME	MORIAL SUN	SHINE FOUNDATI		A Employer identification in 88-0192311	umber				
	432	20	E P	INNACLE RI AZ 85718		•		B Telephone number (see in (520) 577-13	•			
	100		,	110 00710			i	C If exemption application	s pending, check here			
	G	Chec	k ali	that apply:	Initial return	Initial return of a form	ner public charity	D 1 Foreign organizations, ch	eck here			
		Final return Amended return Address change Name change						2 Foreign organizations meeting the 85% test, check here and attach computation				
	H Check type of organization X Section 501(c)(3) exempt private foundation											
	, ,	air n		tion 4947(a)(1) value of all assets a	nonexempt charitable t	rust Other taxable prounting method: X C	orivate foundation	F If the foundation status was terminated under section 507(b)(1)(A), check here				
	(	from		l, column (c), line 16	5)	Other (specify)						
	Par	* \$ <del>1</del> T	Ar	2,224, alvsis of Re		column (d) must be or  (a) Revenue and	(b) Net investmen	under section 507(b)(1)(  (c) Adjusted net	(d) Disbursements			
				total of amounts in and (d) may not neces- nounts in column (a)	expenses per books	income	income	for charitable purposes (cash basis only)				
			1		s, etc, received (attach schedule)	1,237,993.	ED-FLARE W.	海性量量(1)。 (4)				
22			2	Ck ► if the four	ndn is not required to attach Sch B	Com See the Sales Sales Sales Sales Sales	S THE STREET	AND THE WASHINGTON				
2015			3	Interest on savings and ter	mporary cash investments	2,256.	2,25		<b>建设</b>			
0			4	Dividends and interest from	m securities	. 31,311مر	31,31	1.	· · · · · · · · · · · · · · · · · · ·			
		1		Gross rents Net_rental income			-19 <sup>th</sup> + 2 , , -1 }	अस् दश पुरस्	CHARLES THE THE PARTY OF			
	R		6 a	or (loss) Net gain or (loss) from sai	le of assets not on line 10	15,676.						
$\Rightarrow$	Ε			Gross sales price for assets on line 6a				2000年1月1日	THE RESERVE OF THE PARTY OF THE			
<b>C</b> \	V E	i		Capital gain net inco	ome (from Part IV, line 2)	Mark San	15,67					
Ш	N U		8 9	Net short-term capital Income modifications	-	10000		***				
Z	Ĕ			Gross sales less	Ĭ	TANK A COMPANY TO LEAD A	And the state of the state of the	AND LEADING TO THE AND LEADING				
SCANNEL				allowances								
Q			_	Less Cost of goods sold		. Little Committee and the Committee of		Charles and the state of				
<b>O</b>		ĺ	_	Gross profit or (loss) (attack Other income (attack			SALTER TOWNER, AND	They.	MERCHANICA PARTICIPATION OF			
			••	•	EE STATEMENT 1	7,908.	7,90	08.	manifest of a second of the second of			
			12	Total. Add lines 1		1,295,144.	57,15					
			13		icers, directors, trustees, etc	42,810.			42,810.			
			14 15	Other employee sal			ļ		<del></del>			
				Legal tees (attach so	chedule) SEE \$1 2	3,748.	1,87	74.	1,874.			
		Ê	b	Accounting fees (att	ach sen a CSEE ST 3	2,846.	1,42		1,423.			
		N	С	Othermor tees (att	adisa) CSEE SALA	1,461.	1,46					
	O P	Ŝ	17	Interest	SEE-STM 5	68.		68.				
	O P E R A T	T R	18 19	Taxes (attach schedule) s Degreciation (attach	DEN, SUTSING	81.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	81.				
	Ť	Ŷ		sch) and depletion								
	Ņ G	Ł	20 21	Occupancy Travel, conferences,	and mostures	8,086.			4,043. 173.			
			22	Printing and publica		347.	<del> </del>		1/3.			
	A N D	E X P	23	Other expenses (atta								
		ř	•		EE STATEMENT 6	35,074.	1	12.	29,877.			
		Ĕ	24	Total operating and expenses. Add lines	s 13 through 23	94,521.	5,03	19.	80,200.			
		١	25	Contributions, gifts, grant	s paid PART XV	238,482.			238,482.			
			26	Total expenses and Add lines 24 and 25		333,003.	5,0	19. 0	. 318,682.			
			27	Subtract line 26 from					-			
			а	Excess of revenue of and disbursements	-	962,141.			A STATE OF THE STATE OF THE STATE OF			
			b	Net investment inco	ome (if negative, enter -0-)		52,13					
			c	Adjusted net incom	e (if negative, enter -0-)	مست بدوسوود ود برخانه بالب	" me am in and any	<u>चित्र</u> 0	न्याप्त क्षेत्र प्राप्त कार्यक्रमान प्राप्तिक संस्थात र प्र			



Dark	n	Balance Sheets Attached schedules and amounts in the detection of the should be for end-of-year amounts	cription	Beginning of year	<u> </u>	Ena o	year
rait		Balance Sheets column should be for end-of-year amounts (See instructions)	only	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
	1	Cash - non-interest-bearing		66,320.	69,3	78.	69,378.
	2	Savings and temporary cash investments		186, 221.	26,7		26,728.
	3	Accounts receivable		Material responsibilities in a	مالت م	~ ~~	Carrent de la company
		Less allowance for doubtful accounts					
	4	Pledges receivable		-	-		
		Less. allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)		किक्किक्षास्थान्य स्थापना व्यक्त	1 46, 17 . 7		Jan Jan Jan Hart
٨	7	Other notes and loans receivable (attach sch)					
A S E T	_	Less' allowance for doubtful accounts					
S	8	Inventories for sale or use		107		07	107
	9	Prepaid expenses and deferred charges		187.	<u> </u>	.87.	187.
S	10:	a Investments — U S and state government obligations (attach schedule)					
	1	<b>b</b> Investments — corporate stock (attach schedule) STATEMEN		304,577.	1,886,9	925.	1,886,925.
	(	$oldsymbol{c}$ Investments — corporate bonds (attach schedule) STATEMEN	IT 8	48,287.	196,3	329.	196,329.
	11	Investments — land, buildings, and equipment basis. ►					
		Less accumulated depreciation (attach schedule)					
	12	Investments – mortgage loans					
	13	Investments - other (attach schedule). STATEMEN	IT 9	124,423.	45,3	358.	45,358.
	14	Land, buildings, and equipment basis ►				Ž.	The state of the s
		Less accumulated depreciation (attach schedule)					
	15	Other assets (describe		)			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item l)		730,015.	2,224,9	905.	2,224,905.
Ļ	17	Accounts payable and accrued expenses					
Å	18	Grants payable					A STATE OF THE STA
В	19	Deferred revenue					
Ĺ	20	, , ,	S				with the same of the same of
Ļ	21	Mortgages and other notes payable (attach schedule)					· · · · · · · · · · · · · · · · · · ·
<u>i</u>	22	Other liabilities (describe		)			ا ما يوليد المالي مالي مالي مالي المالية
E S	23	Total liabilities (add lines 17 through 22)		0.		0.	- contract to the contract to
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 3	n. •				
N F	24						
EUTN	25	Temporarily restricted .					
, D	26	Permanently restricted					
A B S A E A		Foundations that do not follow SFAS 117, check he and complete lines 27 through 31.	e ► [	X			MAN GATT ALLA
ĔĹ	27	Capital stock, trust principal, or current funds					the state of the second
SŅ	28	Paid-in or capital surplus, or land, bldg., and equipment fund			<u> </u>		
OE	29	Retained earnings, accumulated income, endowment, or other funds		730,015.	2,224,9		, ·
RS	30			730,015.	2,224,9	905.	Francisco Vingenius a mer
	31	Total liabilities and net assets/fund balances (see instructions)		730,015.	2,224,9	905	-,
Par	1111	Analysis of Changes in Net Assets or Fund	Balan		2,221,	<del>, , , , , , , , , , , , , , , , , , , </del>	<u> </u>
		al net assets or fund balances at beginning of year - F			agree with		
1	end	in net assets or fund balances at beginning of year — Figure reported on prior year's return)	art II, CO	iumin (a), ime 30 (must i 	agree willi	1	730,015.
2		er amount from Part I, line 27a				2	962,141.
3	Other	r increases not included in line 2 (itemize) <u>SEE STA</u>	EMENT	'_10		3	533,762.
4	Add	l lines 1, 2, and 3.				4	2,225,918.
5		eases not included in line 2 (itemize)				5	1,013.
6	Tota	al net assets or fund balances at end of year (line 4 mil	nus line 5	5) - Part II, column (b),	line 30	6	2,224,905.

		osses for Tax on Investmer	it income				
	(a) List and describe 2-story brick warehouse	the kind(s) of property sold (e.g., ie; or common stock, 200 shares M	eal estate, _C Company)	(b) How acc P — Purch D — Dona	iase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	100 APPLE INC			P		9/04/12	12/30/14
b	50 BIOGEN IDEC INC			P		9/04/12	12/30/14
c	92 HOME DEPOT INC			P		9/04/12	12/30/14
d	.23 AEGON NV ORD RE			P		6/20/14	6/20/14
e	.OI IMOUN NO OND IN	G AMER		P	,	9/19/14	9/19/14
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba			(h) Gain or (e) plus (f) m	(loss) ninus (g)
<u>a</u>	11,223.			9,569.			1,654.
b	17,069.			7,315.			9,754.
c	9,488.			5,220.			4,268.
d	2.	·		2.			0.
e	4.			4.			0.
		ing gain in column (h) and owned	(k) Excess of colum		0.	l) Gains (Col) I) minus column (I	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	over column (j), if a			an -0-) or Losses (f	
							1 651
a							1,654. 9,754.
<u>b</u>						<del>.</del>	4,268.
<u>c</u>							4,200.
							0.
е			Dort Line 7			<u> </u>	<u></u>
2	Capital gain net income or (ne	t capital loss) $-$ If (loss), er	enter in Part I, line 7 Titer -0- in Part I, line 7	-	2		15,676.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5					20,0,00
-		e 8, column (c) (see instructions)	_				
	in Part I, line 8	e 8, column (c) (see instructions)	(1035), enter -0-	_	3	ĺ	0.
Pär	Qualification Under	Section 4940(e) for Reduce	ed Tax on Net Investr	nent Inco	ome		
(For c	optional use by domestic private for	oundations subject to the section 494	O(a) tax on net investment in	come )		N/A	<del>-</del>
lf coo	tion 4040(d)(2) applies leave t	this part blank					
11 500	tion 4940(d)(2) applies, leave t	illis part blarik					
Was	ili					_	
If 'Va	the foundation liable for the sec	ction 4942 tax on the distributable a	amount of any year in the l	oase period	d?	Yes	☐ No
	s,' the foundation does not qua	lify under section 4940(e). Do not	complete this part		d? 	Yes	∏ No
	s,' the foundation does not qua		complete this part		d? 	Yes	□ No
1	s,' the foundation does not qua	lify under section 4940(e). Do not	complete this part	y entries		(d) Distribution	n ratio
1	s,' the foundation does not qua Enter the appropriate amount in (a) Base period years Calendar year (or tax year	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries		(d) Distribution	
1	s,' the foundation does not qua Enter the appropriate amount in  (a)  Base period years Calendar year (or tax year beginning in)	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries		(d) Distribution	n ratio
1	s,' the foundation does not qua Enter the appropriate amount in  (a)  Base period years Calendar year (or tax year beginning in)  2013	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries		(d) Distribution	n ratio
1	s,' the foundation does not qua Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries		(d) Distribution	n ratio
1	s,' the foundation does not qua Enter the appropriate amount in  (a) Base period years Calendar year (or tax year beginning in)  2013  2012  2011	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries		(d) Distribution	n ratio
	s,' the foundation does not qual Enter the appropriate amount in  (a) Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries	(colu	(d) Distribution	n ratio
	s,' the foundation does not qual Enter the appropriate amount in  (a) Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010	each column for each year, see the in	complete this part instructions before making an  (c) Net value of	y entries		(d) Distribution	n ratio
	s,' the foundation does not qual Enter the appropriate amount in  (a) Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d) .  Average distribution ratio for ti	each column for each year, see the in	complete this part estructions before making an  (c) Net value of noncharitable-use as  total on line 2 by 5, or by	y entries	(colu	(d) Distribution	n ratio
2	s,' the foundation does not qual Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation.	lify under section 4940(e). Do not each column for each year, see the in (b) Adjusted qualifying distributions  the 5-year base period — divide the	nstructions before making an (c) Net value of noncharitable-use as total on line 2 by 5, or by 5 years	y entries	(colu	(d) Distribution	n ratio
2 3	s,' the foundation does not qual Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation.	each column for each year, see the in has been in existence if less than	nstructions before making an (c) Net value of noncharitable-use as total on line 2 by 5, or by 5 years	y entries	(colu	(d) Distribution	n ratio
2 3	s,' the foundation does not qual Enter the appropriate amount in  (a) Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation.	each column for each year, see the in the 5-year base period — divide the in has been in existence if less than the strategies assets for 2014 from Partiable-use assets for 2014 from Partiabl	nstructions before making an (c) Net value of noncharitable-use as total on line 2 by 5, or by 5 years	y entries	2 3 4	(d) Distribution	n ratio
2 3	s,' the foundation does not qual Enter the appropriate amount in  (a)  Base period years Calendar year (or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation  Enter the net value of nonchain Multiply line 4 by line 3	each column for each year, see the in the 5-year base period — divide the in has been in existence if less than the strategies assets for 2014 from Partiable-use assets for 2014 from Partiabl	nstructions before making an (c) Net value of noncharitable-use as total on line 2 by 5, or by 5 years	y entries ssets	2 3 4 5	(d) Distribution	n ratio
2 3 4 5 6	s,' the foundation does not qual Enter the appropriate amount in  (a)  Base period years Calendar year (or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation  Enter the net value of nonchar  Multiply line 4 by line 3  Enter 1% of net investment in	lify under section 4940(e). Do not deach column for each year, see the in (b)  Adjusted qualifying distributions  the 5-year base period — divide the in has been in existence if less than ritable-use assets for 2014 from Parcome (1% of Part I, line 27b)	nstructions before making an (c) Net value of noncharitable-use as total on line 2 by 5, or by 5 years	y entries ssets	2 3 4 5	(d) Distribution	n ratio

	990-PF (2014) LAPAN MEMORIAL SUNSHINE FOUNDATION, INC 88-0192311	<del></del>	. <u> </u>	aye 4
Part		5)		
	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)			
	Domestic foundations that meet the section 4940(e) requirements in Part V,		1,0	<u> 143.</u>
	check here ► and enter 1% of Part I, line 27b	-	4	-
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			_
	foundations only Other's enter -0-)			0.
_	Add lines 1 and 2		1,0	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		1 (	0.
-	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<del></del>	1,0	)43.
	Credits/Payments:	3 2	ئىرۇ.	` = }
	2014 estimated tax pmts and 2013 overpayment credited to 2014			÷,
	Exempt foreign organizations — tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6 c 1.500	***	- -	
	76.3		. Į ,	<i>†</i> -
	Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 6d.	<u> </u>	1 4	
	Total dedits and payments. And interest of through of		1,0	587.
	Enter any penalty for underpayment or estimated tax enest note			0.
	Tax due. If the total of filles 3 and 6 is more than the 7, effect amount owed			<u> </u>
	Overpayment. If the 7 is more than the total of times of the distance overpain.			0.
	Enter the amount of the to to be, dreated to 2013 estimated tax			<u> </u>
·	'VII-A" Statements Regarding Activities	· Ample St	Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	162	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			100 m
	Did the foundation file Form 1120-POL for this year?	1 c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	-	-	-
	(1) On the foundation >\$ 0. (2) On foundation managers. >\$ 0.	1.00	聖書	٠ 🌣
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0.			140
	foundation managers \$	2	- ' '	x
2	If 'Yes,' attach a detailed description of the activities	11 12	1 , pa "y	LIP.
	·	]		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	4 b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
,	If 'Yes,' attach the statement required by General Instruction T	3.0	، غزي	7
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ŀ.
Ū	By language in the governing instrument, or			
		»* -		m
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	<u> </u>
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ju	AZ			
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	8 b	X	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5)	-	^	
	for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	9	-	X
	and addresses	10	<u> </u>	X
BAA	Fi	orm <b>99</b>	0-PF (	2014)

rai	t 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		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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address  N/A  The books are in care of ► DAVID LAPAN  Telephone no ► (520)			·
14	The books are in care of ► <u>DAVID LAPAN</u> Located at ► 4320 E PINNACLE RIDGE PLACE TUCSON AZ  Telephone no ► (520)  ZIP + 4 ► 85718	_5//	_121	<u>+</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here	_N/A	·	-
13	and enter the amount of tax-exempt interest received or accrued during the year	+1/ +	•	∐ N/A
	· · · · · · · · · · · · · · · · · · ·		Yes	No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If 'Yes,' enter the name of the foreign country	11.75		ļ
Påi	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<del></del>	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)	٧,		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	7	****	× .
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	100	*	- Minister .
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			in there.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1-2-2 day	د منځند	
		3	L. N	
	(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 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 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			
I	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here		7	2
(	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 2014?	1 c	E. E.	X
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		4 (4) (1)	132.
i	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	1. The state of th	第727	177-
				-
		100 mg/3	1	<b>.</b> .
l	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer 'No' and attach statement — see instructions ).	2 b	N	/A
•	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	- E		
	► 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>	<del>大学</del>	ئىيە. دىسىدا	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No		Carro	
ı	b If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation	1,	'	1
•	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 dift or bequest, or	ئىس دىسى سىسىسى	 	
	(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 2014)	3 6	N	A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
				† <u> </u>
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	. 4 t	-	X
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	•	OHH 23	, F	رد ۱۷ ۱۲

Form 990-PF (2014) LAPAN MEMORIAL SUN			88-019	2311 Page <b>6</b>		
Part VII-B   Statements Regarding Activition		4/20 May Be Requ	<b>Jirea</b> (continuea)	<del></del>		
5 a During the year did the foundation pay or incur	-	40454.00				
(1) Carry on propaganda, or otherwise attempt	to influence legislation	(section 4945(e)) /	∐ Yes X	No		
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	tion drive?	•	Yes X	1 1 - 1		
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	∐ Yes X	No Professional Pr		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc, org )	ganization described	Yes X	No S		
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	No					
b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?						
Organizations relying on a current notice regar	-		<b>-</b>	5b N/A		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	ibility for the grant?		N/A Yes	No Control of the Con		
If 'Yes,' attach the statement required by Regu	lations section 53 4945	o-5(d)				
6 a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes X	No		
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	lly, on a personal benet	it contract?	6b X		
If 'Yes' to 6b, file Form 8870		hitad tau abaltar transa		N. Control of the con		
7a At any time during the tax year, was the found	· · ·			No 7b		
b If 'Yes,' did the foundation receive any proceed Part VIII' Information About Officers, Di				*/ **		
and Contractors	rectors, rrustees,	roundation Manag	jers, riigiliy Falu L	inipioyees,		
1 List all officers, directors, trustees, foundatio	n managers and their o	compensation (see inst	ructions).			
· List all officers, and ottors, transcess, fourtaine	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances		
DAVID LAPAN	VICE PRESIDE	0.	0.	0.		
4320 E PINNACLE RIDGE PL	3.00	:				
TUCSON, AZ 85718			12.1.			
LUCY KIN	EXECUTIVE DI	40,000.	0.	0.		
1121 N CAMINO DE JUAN	30.00					
TUCSON, AZ 85745						
ALAN VOELKEL	ASST EXEC DI	2,810.	0.	0.		
220 S COUNTRY CLUB TUCSON, AZ 85716	32.00					
LISA LAPAN	PRESIDENT	0.	0.	0.		
1044 20TH STREET #J	3.00					
SANTA MONICA, CA 90403				<u> </u>		
2 Compensation of five highest-paid employees (ot						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
NONE			Compensation	<del></del>		
				T		
				l		
	!		}	1		
		·		<del> </del>		
			L			
Total number of other employees paid over \$50,000	<del></del>		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
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Form 990-PF (2014) LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

Pan	see instructions.)	eign	ioundations,
	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities	1 a	1,355,967.
b	Average of monthly cash balances	1 b	165,030.
С	Fair market value of all other assets (see instructions)	1 c	<del></del>
d	Total (add lines 1a, b, and c)	1 d	1,520,997.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c	7ª 50 - 8	
	(attach detailed explanation) 1 e 0.	• 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,520,997.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	22,815.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,498,182.
6	Minimum investment return. Enter 5% of line 5	6	74,909.
Pär	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► and do not complete this part.)	ting fo	oundations
1	Minimum investment return from Part X, line 6	1	74,909.
2 a	Tax on investment income for 2014 from Part VI, line 5 2a 1,043.		
b	Income tax for 2014 (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2 c	1,043.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	73,866.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	73,866.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	73,866.
Par	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	318,682.
b	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	غستند 3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	318,682.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	318,682.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
BAA			Form <b>990-PF</b> (2014)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
1 Distributable amount for 2014 from Part XI,				72.066
line 7	and the second agency or the con-	<u> </u>	, , , , , , , , , , , , , , , , , , ,	73,866.
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only	- 1 marin galante		0.	
<b>b</b> Total for prior years: 20, 20, 20	The second control of	0.		
3 Excess distributions carryover, if any, to 2014		7		
<b>a</b> From 2009	1 2 2 3 4 4 5 6 3 6		,	
<b>b</b> From 2010	أخر ألم أمراء الميجيد	Sec. 3 is a second of		
c From 2011				·
d From 2012 222, 395.			•	
e From 2013 179, 909.				
f Total of lines 3a through e	402,304.			<u> </u>
4 Qualifying distributions for 2014 from Part	, , , ,	. ,		
XII, line 4 ► \$ 318,682.	,			
a Applied to 2013, but not more than line 2a			Ö.	
<b>b</b> Applied to undistributed income of prior years				7.7
(Election required — see instructions)	many and appropriate of the second specific .	0.	اما الدين المائد ما الماسين المهرميك و المارية المائد	a same market and a same of
c Treated as distributions out of corpus	,	المان	به الموهد مشالية عالم ما مساوم إيوني و	The wind the same the first of the same and layer the
(Election required — see instructions)	0.	man new parties and person of the second	ال الحراج والمجارة في الح	راي ميكيم راه العراماتي الدائل المال المال المال المال المال
d Applied to 2014 distributable amount	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			73,866.
e Remaining amount distributed out of corpus	244,816.			
5 Excess distributions carryover applied to 2014	0.	¥.,	42.5	0.
(If an amount appears in column (d), the	Large set for the first the same and the	Marine Marine Marine Contraction of	و و حام من والله المنظم	11.5 年初一年 12.1
same amount must be shown in column (a))		1 - 1 - 1		
	\$ 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		*	
6 Enter the net total of each column as	المستخاصة مستخدمات	maying the market of the same	ne is now works in his age where is	with and their consists of the wife
indicated below:	647 120			
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	647,120.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Prior years' undistributed income. Subtract	and the same of th		· - mi man mas to sychol-,	Annahaman describe to the children
line 4b from line 2b	Transfer of the second	0.	(1) (20 mm 1 mm	A some contraction bear as
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	A STATE OF THE STA	<u>,</u>	- maganaman comment	Simulation of the state of the state of the state of
amount – see instructions	7, 2, 3, 3,	0.		
e Undistributed income for 2013 Subtract line 4a from				Supplementary and the
line 2a. Taxable amount — see instructions	Charles of a later transfer of	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	0.	
f Undistributed income for 2014 Subtract lines	- 1	` ,	] .	
4d and 5 from line 1. This amount must be				
distributed in 2015	"at a metalist to a		•	0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		_		
may be required — see instructions)	0.			,
8 Excess distributions carryover from 2009 not			1	1
applied on line 5 or line 7 (see instructions)	0.			<u> </u>
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	647 120	,		
10 Analysis of line 9:	647,120.			
a Excess from 2010				
	-{ .	1		
b Excess from 2011				
c Excess from 2012 222, 395.	4			
d Excess from 2013 179, 909.	4			
e Excess from 2014 . 244, 816.		l	L	F 000 DF (001 1)
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Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling					N/A
is effective for 2014, enter the date of the	ruling			^	1.0.000.000
<b>b</b> Check box to indicate whether the foundat		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(L) 2012	Prior 3 years (c) 2012	(4) 2011	(e) Total
investment return from Part X for each year listed	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
<b>b</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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					· · · · · · · · · · · · · · · · · · ·
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)			<u> </u>		
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(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 organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income.			<u> </u>		
Part XV Supplementary Information assets at any time during the	(Complete this ne year — see in	s part only if the nstructions.)	foundation had	\$5,000 or more	ın 
Information Regarding Foundation Mana a List any managers of the foundation who have close of any tax year (but only if they have DAVID LAPAN	e contributed more t	than 2% of the total o than \$5,000) (See	contributions received section 507(d)(2).)	by the foundation bef	ore the
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the NONE	n 10% or more of the foundation has a	e stock of a corporati 10% or greater inter	on (or an equally largest	e portion of the owner	ship of
2 Information Regarding Contribution, Gra Check here ☐ If the foundation only management of the foundation makes complete items 2a, b, c, and d.	akes contributions to es gifts, grants, etc	preselected charitat (see instructions) to	ole organizations and o individuals or orga	nizations under othe	
a The name, address, and telephone number of	or e-mail address of	the person to whom a	applications should be	addressed:	
b The form in which applications should be	submitted and info	rmation and materi	als they should inclu	de	
	Submitted and into	imation and materi	ais tirey silvulu iiltilu	uc	
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kınds of	institutions, or other	factors:
SEE STATEMENT FOR LINE 2A					

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3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year SEE STATEMENT 13	SUDSTANTIAL CONTRIBUTOR			
Total .			. ► 3a	238,482
b Approved for future payment			. 31	
ı <b>ota</b> i			31	וכ

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nter gross	s amounts unless otherwise indicated	Unrelate	d business income	Excluded b	by section 512, 513, or 514	(e)
Program service revenue:		(a) Business code	<b>(b)</b> Amount	(c) Exclu sion	(d) Amount	Related or exempt function income (See instructions.)
Progr	ram service revenue:			code		
a		- <del> </del>		+-+		
b						
·.—		<b>_</b>		+		
d		_				
e				<del> </del>		
† <del>_</del>	<del></del>		<del></del>	+-+		
-	and contracts from government agencies					
	bership dues and assessments			+ 1	0.056	
	st on savings and temporary cash investments	<u> </u>		14	2,256.	
	ends and interest from securities	Tta.* (4 - 12	and the second	14	31,311. (建设表表表表表表	<u> </u>
	rental income or (loss) from real estate:	<b>新</b> 注:"			<u>ૢૺૺૼૼૼૼૼૼૼૼૼૼૺ૽૽ૢ૽ૺ૽૽ઌ૽ૺૼૼૼૼૺૺૢૺ૽૽ઌ૽૽ૼૺઌ૽૽ૺૢૺૺૺૺૺૺૺ૾ૺઌ૽૽ઌ૽૽ૼૺઌ૽ૺૺૺૺૺૢૺ૽ઌ૽ઌ૽ૼૺઌ૽ૼૺૺૺૺૺૺૢૺૺૺઌૺૺૺઌ૽ૼૺઌ૽૽ૺઌ૽૽ૺઌ૽૽ૺઌ૽ૺૺૺૺૺૺૺૺૺૺ</u>	22 a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	-financed property	-		+		
	debt-financed property			+	<del></del>	
	ental income or (loss) from personal property	<del></del>		1 1	7 000	
	r investment income			14	7,908.	· · · · · · · · · · · · · · · · · · ·
	or (loss) from sales of assets other than inventory			18	15,676.	
	ncome or (loss) from special events			<del> </del>	<del></del>	
	s profit or (loss) from sales of inventory	35 SAT + F		J-1 - J-1	The said of the said	(4) at a
	r revenue	£ 55.5		1	the property of the same	
<u></u>			<del></del>	<del>                                     </del>		<del></del>
P		<u> </u>	<del></del>		<del></del>	
,		<del>-</del>	<del></del>	<del>  -  </del>		
<u></u>	· · · · · · · · · · · · · · · · · · ·	<del> </del>		++		
e					E7 1E1	
Cubi	otal Add columns (b) (d) and (a)	- 12-3.873 またい コ				
	otal. Add columns (b), (d), and (e)		" <del></del> -		57,151.	[
3 Total	I. Add line 12, columns (b), (d), and (e)		<u>.                                  </u>		13	57,15
B Total	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated	ions.)			13	57,15
B Total	I. Add line 12, columns (b), (d), and (e)	ions.)	ishment of Exemp		13	57,15
Totalee works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Totalee works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated	e Accompl		ot Purpo	13 ses	57,153
Totalee works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
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Total ee works art:XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total e works irt:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total e works irt:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total e works irt:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art:XVI ne No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Totalee works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art.XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art.XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
Total ee works art.XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	
3 Total ee works art∤XVI ine No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated.  Relationship of Activities to the	e Accompl		ot Purpo	13 ses	

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

									Yes	No
describe	organization directly ed in section 501(c) to political organiza	of the Code (ot	ngage in any of the fo her than section 501(	ollowing with c)(3) organiz	any oth :ations)	er organization or in section 5	1 27,			. ,
a Transfei	rs from the reporting	foundation to	a noncharitable exem	ot organizati	ion of:			• -	. [	
(1) Cas	•	<b>3</b>						1 a (1)	÷	X
	er assets							1 a (2)		X
` ,	ansactions:							3 (2)	-	<u> </u>
	es of assets to a no	ncharitable eve	mnt organization					1 b (1)	-	v
` ,			ble exempt organizati	ion				1 b (1)		X
` '	ital of facilities, equi		. •	1031				<u> </u>		
٠,,		• •	assets			•		1 b (3)		X
• •	mbursement arrange							1 b (4)		X
	ns or loan guarante			.1.1				1 b (5)		X
			p or fundraising solic					1 b (6)		X
c Sharing	or racinties, equipm	nent, mailing its	ts, other assets, or pa	аю етрюуев	35			1 c		<u>X</u>
the good any tran	ls, other assets, or sense ensaction or sharing	ervices given by tarrangement, sh	complete the following the reporting foundation now in column (d) the	if the found value of the	lation red goods,	ceived less than other assets, o	fair market va or services red	lue in ceived		
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exempt org	anization	(d)	Description of trans	sfers, transactions	s, and sharing arrar	ngement	.\$
N/A										
_										
	_									
		<u> </u>								
						·				
						- · · · · · · · · · · · · · ·				
	•									
describe	undation directly or in ed in section 501(c) complete the follow	of the Code (of	d with, or related to, on ther than section 501(	e or more tax (c)(3)) or in s	-exempt section !	organizations 527?		Yes	X	No
<del></del>	) Name of organiza		(b) Type of o	rganization	$\overline{}$	(c)	Description o	of relationship		
N/A	,		(=) .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>		- (0,	,			
								***		
			-							
	<del>-</del>		-				-			
Sign Here	Mh	are that I have exam on of preparer (other	ned this return, including action taxpayer) is based on a	companying sche	_ <b></b>	HAIRMAN	the best of my kneedge	May the this return preparer (see inst	RS disc n with the shown to ructions)	russ ne below
Signa	ature of officer or truste		Date		Titl				Yes	No
Paid	Print/Type preparer's not GERALD H. B	ame EAL	Preparer's Suman		$\mathcal{I}$	G-18-/	Check self-employe	PTIN PO0022	2549	
Preparer	Firm's name	HBL CPAS,	P.C.				Firm's EIN ► 8	6-0360084		
Use Only	-		RANT RD. STE.	200						
,	-		85712				Phone no (	520) 886-	3181	
BAA	<del>'</del>							Form <b>99</b>		
									\	,,-)

# 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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of the organization		Linployer identification namber
LAPAN MEMORIAL SUNSHINE FOUN	DATION, INC	88-0192311
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 pri	vate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) or	ganization can check boxes for both the General Rule and a	Special Rule See instructions
General Rule    X   For an organization filing Form 990, 990-property) from any one contributor Comp	EZ, or 990-PF that received, during the year, contributions to lete Parts I and II See instructions for determining a contrib	taling \$5,000 or more (in money or utor's total contributions
Special Rules		
□ under sections 509(a)(1) and 170(b)(1)(A)(vi	501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup ), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 the year, total contributions of the greater of (1) \$5,000 or ( 990-EZ, line 1 Complete Parts I and II	I, 16a, or 16b, and that
during the year, total contributions of mor	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the term of the following that received the theorem of the the	f from any one contributor, literary, or educational
during the year, contributions exclusively \$1,000 If this box is checked, enter here charitable, etc., purpose. Do not complet	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for religious, charitable, etc., purposes, but no such contribute the total contributions that were received during the year for e any of the parts unless the <b>General Rule</b> applies to this organical test, contributions totaling \$5,000 or more during the year	itions totaled more than an <i>exclusively</i> religious, ganization bec <u>a</u> use
Caution: An organization that is not covered 990-PF), but it must answer 'No' on Part IV.	by the General Rule and/or the Special Rules does not file S line 2, of its Form 990, or check the box on line H of its Forr the filing requirements of Schedule B (Form 990, 990-EZ, or	schedule B (Form 990, 990-EZ, or n 990-EZ or on its Form 990-PF,

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

1 of

1 of Part 1

Name of organization

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

Employer identification number 88-0192311

Part 1	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JUNE ROSEMARY WOODMAN PO BOX 85130 TUCSON, AZ 85754	\$ <u>18,000.</u>	Person X  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PATRICIA LAPAN CHARITABLE LEAD TR  4320 E PINNACLE RIDGE PL  TUCSON, AZ 85718	\$1,219,592 <u>.</u>	Person X  Payroll  Noncash X  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <b>-</b>	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )

1 to

88-0192311

of Part II

Name of organization

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	ace is n	eeded	
(a) No. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
<u>2</u>	U.S. EQUITIES			<del> </del>
		\$	1,217,837.	5/05/14
(a) No. from Part I	(b)  Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$		
(a) No. from Part I	(b)  Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$		
(a) No. from Part I	(b)  Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$	<b></b>	
(a) No. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		s		
BAA	Sche	dule B (F	orm 990, 990-EZ, o	or 990-PF) (2014)

of Part III

Name of organization
LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

Employer identification number 88-0192311

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8) or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions) Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (a) No. from Part I (c) Use of gift (d) Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (a) No. from (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (a) No. from (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

BAA

<b>2014</b> `	FEDERAL STATEMENTS	PAGE 1
LAPA	N MEMORIAL SUNSHINE FOUNDATION, INC	88-019231
STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		
OTHER INVESTMENT INCOME	REVENUE INVES	NET (C) STMENT ADJUSTED COME NET INCOME  7,908. 5 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES		
LEGAL FEES		(C) (D) DJUSTED CHARITABLE PURPOSES  \$ 1,874.  0. \$ 1,874.
STATEMENT 3 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING FEES		(C) (D) DJUSTED CHARITABLE F INCOME PURPOSES  \$ 1,423.  0. \$ 1,423.
STATEMENT 4 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
INVESTMENT FEES - PARTNERSE	PER BOOKS INCOME NE	(C) (D) DJUSTED CHARITABLE T INCOME PURPOSES  0. \$ 0.

20	1	4
		-

# **FEDERAL STATEMENTS**

PAGE 2

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

88-0192311

STATEMENT 5	
FORM 990-PF, PART I, LINE 1	8
TAXES	

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX ON INVESTMENTS	TOTAL	\$ 81. \$ 81.	\$ 81. \$ 81.	\$ 0.	\$ 0.

#### STATEMENT 6 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK AND INVESTMENT FEES CONTRACT LABOR MENTOR STIPENDS OTHER EXPENSES	\$ 494. 6,380. 15,734. 456.	\$ 112.		\$ 382. 6,380. 15,734.
STUDENT INCENTIVES SUPPLIES	2,751. 9,259. TOTAL \$ 35,074.	\$ 112.	<u>\$ 0.</u>	2,751. 4,630. \$ 29,877.

#### STATEMENT 7 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKETVALUE
CHARLES SCHWAAB EQUITIES RBC EQUITIES	MKT VAL	\$ 336,086.	\$ 336,086.
	MKT VAL	1,550,839.	1,550,839.
	TOTAL	\$ 1,886,925.	\$ 1,886,925.

#### STATEMENT 8 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

CORPORATE BONDS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKET VALUE
CHARLES SCHWAB FIXED INCOME RBC FIXED INCOME	MKT VAL MKT VAL	\$ 50,219. 146,110.	\$ 50,219. 146,110.
	TOTAL	\$ 196,329.	\$ 196,329.

#### FEDERAL STATEMENTS

PAGE 3

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

88-0192311

**STATEMENT 9** FORM 990-PF, PART II, LINE 13 **INVESTMENTS - OTHER** 

	VALUATION METHOD	BOOK VALUE	FAIR MARKETVALUE
OTHER PUBLICLY TRADED SECURITIES	_		
CHARLES SCHWAB BOND FUNDS	MKT VAL	\$ 45,358.	\$ 45,358.
MAVIN INCOME FUND LTD	COST TOTAL	0. \$ 45,358.	0. \$ 45,358.

**STATEMENT 10** FORM 990-PF, PART III, LINE 3 OTHER INCREASES

UNREALIZED GAIN ON INVESTMENTS

533,762. 533,762. TOTAL \$

**STATEMENT 11** FORM 990-PF, PART III, LINE 5 **OTHER DECREASES** 

BOOK/TAX DIFFERENCE

1,013. TOTAL \$ 1.013.

**STATEMENT 12** FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION** 

NAME OF GRANT PROGRAM:

N/A

NAME:

LUCY KIN

CARE OF:

LAPAN COLLEGE CLUB

STREET ADDRESS: CITY, STATE, ZIP CODE: 1121 N CAMINO DE JUAN

TELEPHONE:

TUCSON, AZ 85745

(520) 360-9881

E-MAIL ADDRESS:

FORM AND CONTENT:

RESUME, PROOF OF ACADEMIC STANDING AND FINANCIAL NEED

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: MAY 1ST OF EACH YEAR

ALL SCHOLARSHIPS PAID DIRECTLY TO UNIVERSITIES FOR

TUITION. PREFERENCE IS GIVEN TO PIMA COUNTY, AZ RESIDENTS.

# **FEDERAL STATEMENTS**

PAGE 4

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

88-0192311

#### STATEMENT 13 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT
GRAND CANYON UNIVERSITY 3300 W CAMELBACK RD PHOENIX, AZ 85017	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	<b>)</b> \$	16,057.
UNIVERSITY OF ARIZONA PO BOX 210066 TUCSON, AZ 85721	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	)	49,661.
PIMA COMMUNITY COLLEGE 4905 E BROADWAY BLVD TUCSON, AZ 85709	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	D	49,746.
ART INSTITUTE OF TUCSON 5099 E GRANT RD, STE 100 TUCSON, AZ 85712	NONE	N/A	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	1,558.
CORNELL COLLEGE 600 1ST ST SW MT VERNON, IA 52314	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	2,716.
TUCSON UNIFIED SCHOOL DISTRICT 1010 E 10TH ST TUCSON, AZ 85719	NONE	PUBLIC	SUPPORT		29,284.
CONCORD LAW SCHOOL 1015 WINDWARD RIDGE PARKWAY ALPHARETTA, GA 30005	NONE	N/A	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	3,553.
UNIVERSITY OF NEW MEXICO N/A ALBUQUERQUE, NM 87131	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	370.
CARLETON COLLEGE 1 N COLLEGE ST NORTHFIELD, MN 55057	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	1,202.
BOWDOIN COLLEGE 3725 COLLEGE ST BRUNSWICK, ME 04011	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	1,463.
NORTHERN ARIZONA UNIVERSITY S SAN FRANCISCO ST FLAGSTAFF, AZ 86011	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	5,700.
ARIZONA STATE UNIVERSITY 411 N CENTRAL AVE PHOENIX, AZ 85004	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	4,210.
ST JOHN'S COLLEGE 1160 CAMINO CRUZ BLANCA SANTA FE, NM 87505	NONE	PUBLIC	SCHOLARSHIPS AN EDUCATIONAL EXPENSES	D	2,853.

# **FEDERAL STATEMENTS**

PAGE 5

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

88-0192311

238,482.

TOTAL \$

#### STATEMENT 13 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
PIMA COUNTY SCHOOLS 200 N. STONE AVE TUCSON, AZ 85701	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	\$ 10,000
ALL WAYS UP FOUNDATION 5800A HANNUM AVENUE, SUITE 100 CULVER CITY, CA 90230	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	40,000
KAPLAN TEST TUTORING 1303 E UNIVERSITY BLVD STE 5 TUCSON, AZ 85719	NONE	PUBLIC	EDUCATION - TUTORING	3,899
ANGEL CHARITY FOR CHILDREN, INC. P.O. BOX 14225 TUCSON, AZ 85732	NONE	PUBLIC	ORGANIZATION SUPPORT	5,000
UNICEF 6242 E SPEEDWAY BLVD TUCSON, AZ 85712	NONE	PUBLIC	HUMANITARIAN	5,500
TUCSON MAGIC 2921 E AVENIDA PORTICO TUCSON, AZ 85716	NONE	PUBLIC	SUPPORT OF EXTRACURRICULAR ACTIVITIES	2,000
UNIVERSIDAD AUTONOMA DE BAJA CA , BAJA CALIFORNIA 02002 MEXICO	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	422
UNIVERSIDAD DE MEXICALI , BAJA CALIFORNIA 02002 MEXICO	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	200
UNIVERSIDAD TECNOLOGICA DE HERMOSILLO , SONORA 26030 MEXICO	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	610
EASTERN NEW MEXICO UNIVERSITY 1500 S AVE K PORTALES, NM 88130	NONE	PUBLIC	SCHOLARSHIPS AND EDUCATIONAL EXPENSES	2,478

### FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

LAPAN MEMORIAL SUNSHINE FOUNDATION, INC

88-0192311

STATEMENT REGARDING PART VII-B, 5(A) (4) AND 5(C)

THE FOUNDATION PROVIDED GRANTS TO STUDENTS, SOME OF WHOM ATTENDED FOR PROFIT EDUCATIONAL AND VOCATIONAL INSTITUTIONS. THE FOUNDATION HAS A POLICY OF CONFIRMING THAT FUNDS FOR TUITION AND RELATED EXPENSES ARE USED BY HAVING STUDENTS SUBMIT TRANSCRIPTS. IF STUDENTS DO NOT SUBMIT PROOF OF COMPLETION THE FOUNDATION FOLLOWS UP WITH THE DONEES TO INSURE UNUSED FUNDS ARE RETURNED.

(Rev January 2014)

#### Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Internal Revenue		►Information about Form 8868 a	nd its instru	ctions is at www.irs.gov/form8868.			
● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							<u>► X</u>
• If you are	e filing for an .	Additional (Not Automatic) 3-Month	n Extension	i, complete only Part II (on page 2 of thi	s form)	)	_
Do not comp	olete Part II un	nless you have already been granted	d an automa	atic 3-month extension on a previously fi	led Fo	rm 8868	
Electronic fill corporation r request an ex Associated V	l <b>ing (e-file)</b> . Yo equired to file tension of time Vith Certain Po	ou can electronically file Form 8868 Form 990-T), or an additional (not to file any of the forms listed in Part I	If you need automatic) or Part II w ist be sent	I a 3-month automatic extension of time 3-month extension of time. You can elec- ith the exception of Form 8870, Information to the IRS in paper format (see instruction	to file tronica Return	(6 months for a ally file Form 88 n for Transfers	368 to
Part.	Automatic	3-Month Extension of Time.	Only sub	omit original (no copies needed).			
A corporation	n required to f	ile Form 990-T and requesting an a	utomatic 6-	month extension - check this box and o	omple	te Part I only	<b>-</b>
All other corp income tax r		luding 1120-C filers), partnerships, i	REMICs, ar	nd trusts must use Form 7004 to request			
	ī.			Enter filer's identif		umber, see ins	
<b>T</b>	Name of exempt	organization or other filer, see instructions	Employ	er identification num	Der (EIN) Or		
Type or print							
<b>F</b> ······		MORIAL SUNSHINE FOUNDA and room or suite number If a PO box, see in	88-0192311 Social security number (SSN)				
File by the due date for			Suuctions		Social Security Homber (SSIN)		
filing your return See		PINNACLE RIDGE PLACE st office, state, and ZIP code. For a foreign addr.	ess, see instru	ctions	l		
instructions	THESON	AZ 85718					
	TIOCSON,	NZ 03710				<del></del> -	
Enter the Re	turn code for	the return that this application is for	(file a sep	arate application for each return)			04
Application Is For		Return Code	Application Is For				
Form 990 or Form 990-EZ		01	Form 990-T (corporation)	orporation)			
Form 990-BL		02	Form 1041-A	n 1041-A		80	
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T	(trust other th	an above)	06	Form 8870			12
Telephon  If the org  If this is check the	ganization doe for a Group R is box nsion is for.	0) 577-1311	digit Group heck this bo	Exemption Number (GEN)  If and attach a list with the name of the control of the		for the whole g	
until The ex ► X  L 2 If the t	8/15_ tension is for calendar yea tax year beg	, 20 15 , to file the exempt orgathe organization's return for: ar 20 14 or anning , 20 ed in line 1 is for less than 12 month	nization re	turn for the organization named above.	al retu	ırn	
3a If this	application is	for Forms 990-BL, 990-PF, 990-T, 4	1720, or 606		3 a	\$	1,687.
<b>b</b> If this	application is		5069, enter	any refundable credits and estimated	3 Ь		187.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

1,500.

3 c |\$