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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 instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 07-01-2014 , and ending 06-30-2015

Name of foundation
THE HS LOPEZ FAMILY FOUNDATION

A Employer identification number
20-5725952

Number and street (or P O box number if mail is not delivered to street address)
3901 EAST BROADWAY BLVD

Room/suite

B Telephone number (see instructions)
(520) 322-6964

City or town, state or province, country, and ZIP or foreign postal code
TUCSON, AZ 85711

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 1,499,108

J Accounting method ☐ Cash ☑ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	500,000			
	2 Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	8	8		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 **Total.** Add lines 1 through 11	500,008	8	0	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	635	0	0	0
	c Other professional fees (attach schedule)	10	0	0	0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	4,184	0	0	0
	24 **Total operating and administrative expenses.** Add lines 13 through 23	4,829	0	0	0
	25 Contributions, gifts, grants paid	295,240			295,240
	26 **Total expenses and disbursements.** Add lines 24 and 25	300,069	0	0	295,240
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	199,939			
	b **Net investment income** (if negative, enter -0-)		8		
	c **Adjusted net income** (if negative, enter -0-)			0	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	255,203	498,444	498,444
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	955,061	959,271	1,000,664
	14 Land, buildings, and equipment basis ▶			
	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 I)	1,210,264	1,457,715	1,499,108
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)	1,000,000	1,000,000	
	23 **Total liabilities** (add lines 17 through 22)	1,000,000	1,000,000	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	210,264	457,715	
	30 **Total net assets or fund balances** (see instructions)	210,264	457,715	
	31 **Total liabilities and net assets/fund balances** (see instructions)	1,210,264	1,457,715	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	210,264
2	Enter amount from Part I, line 27a	2	199,939
3	Other increases not included in line 2 (itemize) ▶	3	47,512
4	Add lines 1, 2, and 3	4	457,715
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	457,715

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	190,680	756,240	0 252142
2012	122,190	153,138	0 797908
2011	21,296	151,417	0 140645
2010	5,000	159,147	0 031417
2009	8,500	171,082	0 049684

2	**Total** of line 1, column (d)	2	1 271796
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 254359
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	1,139,546
5	Multiply line 4 by line 3	5	289,854
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7	Add lines 5 and 6	7	289,854
8	Enter qualifying distributions from Part XII, line 4	8	295,240

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	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	2014 estimated tax payments and 2013 overpayment credited to 2014 — 6a: 2,000		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c:		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	2,000
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	2,000
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶ 2,000 **Refunded** ▶	11	0

Part VII-A Statements Regarding Activities

			Yes	No
1a	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?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*If the answer is "Yes" to **1a** or **1b,** attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	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			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
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		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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 .*	8b	Yes	
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10	Yes	

Part VII-A Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ THEHSLOPEZFAMILYFOUNDATION ORG

14 The books are in care of ▶ FOUNDATION Telephone no ▶ (520) 322-6964

Located at ▶ 3901 E BROADWAY TUCSON AZ ZIP+4 ▶ 85711

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here . . . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ **15**

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?		Yes	No
		16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(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 ☑ No			
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	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 ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☑ Yes ☐ No			
b	If "Yes," did it have excess business holdings in 2014 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)*	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

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))? ☐ Yes ☑ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No			
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☑ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?	**5b**		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☑ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**6b**		**No**
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	**7b**		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(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				

Total number of other employees paid over $50,000 ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions **3**	
Total. Add lines 1 through 3 ▶	0

Part X **Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, 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	1,006,983
b	Average of monthly cash balances		1b	149,917
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	1,156,900
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	1,156,900
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	17,354
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4		5	1,139,546
6	**Minimum investment return.** Enter 5% of line 5		6	56,977

Part XI **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6		1	56,977
2a	Tax on investment income for 2014 from Part VI, line 5	2a		
b	Income tax for 2014 (This does not include the tax from Part VI)	2b 1,794		
c	Add lines 2a and 2b		2c	1,794
3	Distributable amount before adjustments Subtract line 2c from line 1		3	55,183
4	Recoveries of amounts treated as qualifying distributions		4	0
5	Add lines 3 and 4		5	55,183
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	55,183

Part XII **Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	295,240
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		
a	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	295,240
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	0
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	295,240

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				55,183
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009 135				
b From 2010				
c From 2011 14,033				
d From 2012 114,693				
e From 2013 156,816				
f **Total** of lines 3a through e	285,677			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ $ 295,240				
a Applied to 2013, 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 2014 distributable amount				55,183
e Remaining amount distributed out of corpus	240,057			
5 Excess distributions carryover applied to 2014	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	525,734			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount —see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				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 applied on line 5 or line 7 (see instructions)	135			
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a	525,599			
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011 14,033				
c Excess from 2012 114,693				
d Excess from 2013 156,816				
e Excess from 2014 240,057				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon **a** "Assets" alternative test—enter **(1)** Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "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					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

CZARINA M LOPEZ
3901 E BROADWAY BLVD
TUCSON,AZ 85711
(520) 322-6994

b The form in which applications should be submitted and information and materials they should include

LETTER WITH THE GRANT APPLICATION FORM

c Any submission deadlines

JUNE 1 AND DECEMBER 1

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

N/A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				295,240
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	8	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		8	0
13 **Total.** Add line 12, columns (b), (d), and (e)					13 8

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

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

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

****** | 2015-10-06 | ******

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
LORETTA PETO				P00084187

Firm's name ▶ PETO & COMPANY CPA'S PLLC — Firm's EIN ▶ 20-5936744

Firm's address ▶ 3320 N CAMPBELL AVE SUITE 200 TUCSON, AZ 85719 — Phone no (520) 326-0496

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
HUMBERTO S LOPEZ 3901 E BROADWAY BLVD TUCSON,AZ 85711	PRESIDENT/TREASURER 1 00	0	0	0
CZARINA M LOPEZ 3901 E BROADWAY BLVD TUCSON,AZ 85711	SECRETARY 1 00	0	0	0
OMAR MIRELES 3901 E BROADWAY BLVD TUCSON,AZ 85711	TREASURER 1 00	0	0	0
ILIANA M LOPEZ 3901 E BROADWAY BLVD TUCSON,AZ 85711	DIRECTOR 1 00	0	0	0
STEPHEN P COUIG 3901 E BROADWAY BLVD TUCSON,AZ 85711	DIRECTOR 1 00	0	0	0
IOVANNA COUIG 3901 E BROADWAY BLVD TUCSON,AZ 85711	DIRECTOR 1 00	0	0	0
AMY MIRELES 3901 E BROADWAY BLVD TUCSON,AZ 85711	DIRECTOR 1 00	0	0	0

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000).

HUMBERTO S LOPEZ
CZARINA M LOPEZ

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY,OK 73123	NONE	501(C)3	TO FIGHT AGAINST CANCER	1,000
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY,OK 73123	NONE	501(C)3	TO FIGHT AGAINST CANCER	1,000
AMERICAN RED CROSS 2025 E STREET NW WASHINGTON,DC 20006	NONE	501(C)3	TO PROVIDE COMFORT AND HOPE IN TIMES OF NEED	1,000
ARA PARSEGHIAN MEDICAL RESEARCH FOUNDATION 4729 E SUNRISE DRIVE 327 TUCSON,AZ 85718	NONE	501(C)3	TO FUND LABS IN THE UNITED STATES	1,000
ARIZONA CHILDREN ASSOCIATION 2700 S 8TH AVE TUCSON,AZ 85713	NONE	501(C)3	TO PROTECT CHILDREN, EMPOWER YOUTH, AND STRENGTHEN FAMILIES	3,000
ARIZONA THEATRE COMPANY 400 EAST VAN BUREN STREET SUITE 720 PHOENIX,AZ 85004	NONE	501(C)3	TO SUPPORT PLAYS, AND EDUCATION PROGRAMS	1,000
ARIZONA THEATRE COMPANY 400 EAST VAN BUREN STREET SUITE 720 PHOENIX,AZ 85004	NONE	501(C)3	TO CONTRIBUTE TO WE HAVE A MATCH CAMPAIGN	25,000
ARIZONA THEATRE COMPANY 400 EAST VAN BUREN STREET SUITE 720 PHOENIX,AZ 85004	NONE	501(C)3	TO SUPPORT PLAYS, AND EDUCATION PROGRAMS	2,000
BENEDICTINE SISTERS OF PERPETUAL ADORATION 800 N COUNTRY CLUB ROAD TUCSON,AZ 85716	NONE	501(C)3	THE SEVENTH ANNUAL "NONE'S" BALL	500
BLAIR CHARITY GROUP PO BOX 65331 TUCSON,AZ 85728	NONE	501(C)3	TO DEVELOP YOUTH AND YOUND ADULTS OF SOUTHERN AZ	500
CASA DE LA LUZ FOUNDATION 7740 N ORACLE ROAD TUCSON,AZ 85704	NONE	501(C)3	2014 FALL APPEAL FUND	1,000
CASA HOGAR MADRE CONCHITA PO BOX 1622 NOGALES,AZ 85628	NONE	501(C)3	FOR YOUTH DEVELOPMENT	10,000
CASTANEDA MUSEUM 3550 E THIMBLEW PEAK TUCSON,AZ 85718	NONE	501(C)3	TO STUDY AND EXHIBIT WORLD'S ETHNIC AND FOLK COSTUME	500
CATHOLIC COMMUNITY SERVICES 140 W SPEEDWAY BLVD SUITE 230 TUCSON,AZ 85705	NONE	501(C)3	TO HELP CHILDREN, FAMILIES, AND INDIVIDUALS LIVE WITH INDEPENDENCE AND DIGNITY	1,000
CATHOLIC COMMUNITY SERVICES 140 W SPEEDWAY BLVD SUITE 230 TUCSON,AZ 85705	NONE	501(C)3	RENTAL OF VAN FOR TRANSPORTATION	3,500
Total . . . . . ▶ **3a**				295,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CATHOLIC COMMUNITY SERVICES 140 W SPEEDWAY BLVD SUITE 230 TUCSON,AZ 85705	NONE	501(C)3	TABLE OF 10 DONATION	5,000
CATHOLIC COMMUNITY SERVICES OF SOUTHERN AZ 140 W SPEEDWAY BLVD SUITE 230 TUCSON,AZ 85705	NONE	501(C)3	FOR VAN RENTAL	3,500
CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE,MD 21201	NONE	501(C)3	TO ASSIST IMPOVERISHED AND DISADVANTAFES PEOPLE	1,140
CHALLENGER MIDDLE SCHOOL 100 EAST ELVIRA TUCSON,AZ 85756	NONE	501(C)3	TO DEVELOP LIFE-LONG LEARNERS	3,600
COALICION DE DERECHOS HUMANOS 225 E 26TH ST SOUTH TUCSON,AZ 85713	NONE	501(C)3	TO CHANGE AND PROMOTE JUSTICE	500
COMMUNITY FOOD BANK OF SOUTHERN ARIZONA 3003 SOUTH COUNTRY CLUB ROAD TUCSON,AZ 85726	NONE	501(C)3	TO PROVIDE EMERGENCY FOOD IN TIMES OF NEED	2,500
COMMUNITY FOOD BANK OF SOUTHERN ARIZONA 3003 SOUTH COUNTRY CLUB ROAD TUCSON,AZ 85726	NONE	501(C)3	THE SEVENTH ANNUAL "NONE'S" BALL	1,000
DOCTORS WITHOUT BORDERS 333 7TH AVENUS NEW YORK,NY 10001	NONE	501(C)3	TO PROVIDE ASSISTANCE TO POPULATIONS IN DISTRESS	1,000
DOMINICAN SCHOOL OF PHILOSOPHY 2301 VINE STREET BERKELEY,CA 94708	NONE	501(C)3	TO PROVIDE EDUCATION	500
DOMINICAN SCHOOL OF PHILOSOPHY AND THEOLOGY 2301 VINE STREET BERKELEY,CA 94708	NONE	501(C)3	LENTEN APPEAL	1,000
ECHOING HOPE RANCH 8344 S HEREFORD ROAD HEREFORD,AZ 85615	NONE	501(C)3	ART BARN PROJECT	3,000
EL RIO FOUNDATION 839 W CONGRESS TUCSON,AZ 85745	NONE	501(C)3	TO PROVIDE QUALITY HEALTH CARE	1,000
EOHSJ 4901 MARENA BLVD SUITE 106 SAN DIEGO,CA 92117	NONE	501(C)3	APPEAL FROM HOLY ORDER	1,000
FLORENCE IMMIGRANT & REFUGEE RIGHTS PO BOX 654 FLORENCE,AZ 85132	NONE	501(C)3	TO PROVIDE FREE LEGAL SERVICES	1,000
FOX TUCSON THEATRE FOUNDATION PO BOS 1008 TUCSON,AZ 85702	NONE	501(C)3	DONATION FOR GALA	2,500
Total . . . . . ▶ **3a**				295,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FRESH START WOMEN'S FOUNDATION 1130 E MCDOWELL RD PHOENIX,AZ 85006	NONE	501(C)3	TO CONTRIBUTE TO FRESH START FASHION GALA	5,000
GABRIEL'S ANGELS 3849 E BROADWAY BLVD 292 TUCSON,AZ 85716	NONE	501(C)3	2015 TUCSON "UNLEASH THE LOVE" FUNDRAISER	1,000
GOSPEL RESCUE MISSION PO BOX 28813 TUCSON,AZ 85726	NONE	501(C)3	TO SERVE THE HOMELESS AND NEEDY	1,000
GOSPEL RESCUE MISSION PO BOX 28813 TUCSON,AZ 85726	NONE	501(C)3	TO SERVE THE HOMELESS AND NEEDY	400
HABITAT FOR HUMANITY TUCSON 3501 N MOUNTAIN AVE TUCSON,AZ 85705	NONE	501(C)3	TO PROVIDE SOLUTION TO CRISIS OF POVERTY HOUSING	1,000
IZI AZI FOUNDATION DBA FELICIA'S FARM 5995 E GRANT ROAD SUITE 200 TUCSON,AZ 85712	NONE	501(C)3	GENERAL OPERATING	1,000
JOB PATH INC 655 N ALVERNON WAY TUCSON,AZ 85711	NONE	501(C)3	TO PROVIDE SKILLS TRAINING FOR QUALITY EMPLOYMENT	500
JOHN C LINCOLN HEALTH FOUNDATION 9100 N 2ND STREET SUITE 101 PHOENIX,AZ 85020	NONE	501(C)3	GOLD BALL	5,000
LA FRONTERA MARIACHI FESTIVAL 504 W 29TH STREET TUCSON,AZ 85713	NONE	501(C)3	TO PROVIDE TRANSPORTATION AND MEALS FOR STUDENTS	400
LIVE THE SOLUTION 1517 N WILMOT RD 130 TUCSON,AZ 85712	NONE	501(C)3	TO PREPARE HIGH SCHOOL STUDENTS FOR COLLEGE	9,600
MAKE WAY FOR BOOKS 3955 E FORT LOWELL ROAD SUITE 114 TUCSON,AZ 85712	NONE	501(C)3	TO GIVE ALL CHILDREN THE CHANCE TO READ AND SUCCEED	1,000
METROPOLITAN EDUCATION COMMISSION 930 E BROADWAY BLVD TUCSON,AZ 85719	NONE	501(C)3	REGIONAL COLLEGE ACCESS CENTER'S STUDENT AMBASSADOR PROGRAM	2,000
MR STEVE ZABILSKISOCIETY OF ST VINCENT DE PAUL PO BOX 29074 PHOENIX,AZ 85038	NONE	501(C)3	TO END POVERTY	500
NATIONAL FABRY DISEASE FOUNDATION 4301 CONNECTICUT AVENUE NW SUITE 404 WASHINGTON,DC 20008	NONE	501(C)3	TO PROVIDE SUPPORT AND ASSISTANCE TO PEOPLE WITH FABRY DISEASE	1,000
NEWMAN SUSTAINING BOARD PO BOX 70225 ORO VALLEY,AZ 85737	NONE	501(C)3	TO BE THE PRESENCE OF JESUS CHRIST ON THE CAMPUS OF UNIVERSITY OF ARIZONA	1,000
Total . . . . . ▶ **3a**				295,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PICTURE ROCKS COMMUNITY CENTER 6691 N SANDARIO ROAD TUCSON,AZ 85743	NONE	501(C)3	DONATION FOR BUILDING	8,000
PIMA COMMUNITY COLLEGE FOUNDATION 4905C E BROADWAY BLVD TUCSON,AZ 85709	NONE	501(C)3	A PIECE OF MY HEART	2,500
POVERELLO HOUSE PO BOX 50782 TUCSON,AZ 85703	NONE	501(C)3	TO PROVIDE A PLACE FOR HOMELESS	1,000
PRIMAVERA 151 W 40TH STREET TUCSON,AZ 85713	NONE	501(C)3	PROVIDE PATHWAYS FOR POVERTY	1,000
REACHOUT WOMEN'S CENTER 2648 N CAMPBELL TUCSON,AZ 85719	NONE	501(C)3	TO PROVIDE POSITIVE OPTIONS FOR IMPORTANT LIFE CHOICES	1,000
REACHOUT WOMEN'S CENTER 2648 N CAMPBELL TUCSON,AZ 85719	NONE	501(C)3	TO PROVIDE POSITIVE OPTIONS FOR IMPORTANT LIFE CHOICES	500
SAINT CYRIL OF ALEXANDRIA ROMAN CATHO 4725 E PIMA ST TUCSON,AZ 85712	NONE	501(C)3	TO PROVIDE EDUCATION	2,500
SALPOINTE 1545 EASH COPPER STREET TUCSON,AZ 85719	NONE	501(C)3	TO BUILD LEADERS AND LEGACY	25,000
SAN MIGUEL HIGH SCHOOL 6601 S SAN FERNANDO ROAD TUCSON,AZ 85756	NONE	501(C)3	TO SPONSOR FOR THE 10TH ANNIVERSARY CELEBRATION	10,000
SAN MIGUEL HIGH SCHOOL 6601 S SAN FERNANDO ROAD TUCSON,AZ 85756	NONE	501(C)3	TO SUPPORT TEACHER SALARIES	5,000
SARSEF 3247 N CHRISTMAS AVE TUCSON,AZ 85716	NONE	501(C)3	TO EMPOWER SOUTHERN AZ'S K-12 STUDENTS	3,000
ST ANDREWS CHILDREN'S CLINIC PO BOX 67 GREEN VALLEY,AZ 85622	NONE	501(C)3	FUNDING FOR ROUNDTRIP FLIGHTS	1,000
ST ANDREWS CHILDREN'S CLINIC PO BOX 67 GREEN VALLEY,AZ 85622	NONE	501(C)3	TO HELP MEET THE NEEDS OF CHILDREN	1,000
ST ANDREW'S CHILDREN'S CLINIC PO BOX 67 GREEN VALLEY,AZ 85622	NONE	501(C)3	TO HELP MEET THE NEEDS OF CHILDREN	1,000
ST ANDREW'S CHILDREN'S CLINIC PO BOX 67 GREEN VALLEY,AZ 85622	NONE	501(C)3	TO HELP MEET THE NEEDS OF CHILDREN	2,000
Total . . . . . ▶ **3a**				295,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ST ELIZABETH'S HEALTH CENTER 140 W SPEEDWAY SUITE 100 TUCSON,AZ 85705	NONE	501(C)3	SMILES AHEAD PROGRAM	5,000
ST LUKE'S HOME 615 E ADAMS STREET TUCSON,AZ 85705	NONE	501(C)3	TO PROVIDE CARE AND WELL-BEING OF ELDERS	2,000
STEELE CHILDREN'S RESEARCH CENTER PO BOX 245073 TUCSON,AZ 85724	NONE	501(C)3	TO RESEACH CAUSES AND DEVELOP CURES FOR CHILDHOOD ILLNESSES	25,000
SUSD FOUNDATION (SUNNYSIDE) 2238 E FINTER ROAD TUCSON,AZ 85706	NONE	501(C)3	BACK TO BASICS FLEXIBLE GRANT PROGRAM	3,000
THE ANASAZI FOUNDATION 850 WEST ELLIOT ROAD 101 TEMPE,AZ 85284	NONE	501(C)3	TO HELP TROUBLES TEENAGERS AND FAMILIES	5,000
THE FLORENCE IMMIGRANT AND REFUGEE RIGHTS PROJECT PO BOX 654 FLORENCE,AZ 85132	NONE	501(C)3	TO PROVIDE FREE LEGAL SERVICES AND RELATED SOCIAL SERVICES FOR IMMIGRATION	1,000
THE MARSHALL HOME FOR MEN 3314 S 16TH AVENUE TUCSON,AZ 85713	NONE	501(C)3	TO PROVIDE CARE TO THE ELDERLY AND DISABLED	1,000
THE SALVATION ARMY 1001 N RICHEY BLVD TUCSON,AZ 85716	NONE	501(C)3	TO PROVIDE PROGRAMS FOR YOUNG PEOPLE	1,000
THE SALVATION ARMY 1001 N RICHEY BLVD TUCSON,AZ 85716	NONE	501(C)3	TO PROVIDE VITAL SERVICES TO CHILDREN AND SENIOR CITIZEN	1,000
THE SALVATION ARMY 1001 N RICHEY BLVD TUCSON,AZ 85716	NONE	501(C)3	TO HELP HOMELESS PEOPLE	1,000
THE SALVATION ARMY 1001 N RICHEY BLVD TUCSON,AZ 85716	NONE	501(C)3	TO HELP HOMELESS PEOPLE	1,000
THE SALVATION ARMY BOOK BONANZA 1001 N RICHEY BLVD TUCSON,AZ 85716	NONE	501(C)3	TO PROVIDE BOOKS FOR UNDERPRIVILEGED CHILDREN	1,000
TMM FAMILY SERVICES 1500 N COUNTRY CLUB ROAD TUCSON,AZ 85716	NONE	501(C)3	TO PROVIDE EDUCATIONAL EQUIPMENT	1,000
TOP DOG 9420 E GOLF LINKS RD STE 108-355 TUCSON,AZ 85730	NONE	501(C)3	TO ASSIST DISABLED INDIVIDUALS	1,000
TUCSON HISPANIC CHAMBER OF COMMERCE 823 E SPEEDWAY BLVD TUCSON,AZ 85719	NONE	501(C)3	JOSE CANCHULA GOLF FIESTA	600
Total . . . . . ▶ **3a**				295,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
TUCSON HISPANIC CHAMBER OF COMMERCE 823 E SPEEDWAY BLVD TUCSON,AZ 85719	NONE	501(C)3	CONTRIBUTION TOWARDS EDUCATION SCHOLARSHIPS	5,000
TUCSON HISPANIC CHAMBER OF COMMERCE 823 E SPEEDWAY BLVD TUCSON,AZ 85719	NONE	501(C)3	TO SERVE THE BUSINESS COMMUNITY	5,000
TUSD EDUCATIONAL ENRICHMENT FOUNDATION 3809 E THIRD STREET TUCSON,AZ 85716	NONE	501(C)3	INTERSCHOLASTIC PARTICIPATION FEE ASSISTANCE PROGRAM	3,000
UC SAN DIEGO FOUNDATION 9500 GILMAN DRIVE LA JOLLA,CA 92093	NONE	501(C)3	DANON DISEASE RESEARCH FUND	50,000
UNIVERSITY OF ARIZONAMEL AND ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH PO BOX 245163 TUCSON,AZ 85724	NONE	501(C)3	GASTRIC CANCER PREVENTION	1,000
WESTERN DOMINICAN PROVINCE 5877 BIRCH COURT OAKLAND,CA 94618	NONE	501(C)3	TO PROCLAIM THE GOSPEL OF JESUS CHRIST	1,000
WESTERN DOMINICAN PROVINCE 5877 BIRCH COURT OAKLAND,CA 94618	NONE	501(C)3	TO TRACH AND PREACH THE GOSPEL OF CHRIST	500
YOUTH ON THEIR OWN 1660 N ALVERNON WAY TUCSON,AZ 85712	NONE	501(C)3	TO PREVENT HIGH SCHOOL DROP OUT	5,000
Total . . . . . ▶ **3a**				295,240

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TY 2014 Accounting Fees Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	635	0	0	0

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TY 2014 Investments - Other Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
NET LEASE PRIVATE	FMV	664	664
CENTER STREET LENDING	FMV	958,607	1,000,000

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TY 2014 Other Expenses Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES AND FEES	199	0	0	0
ADVERTISING	50	0	0	0
FEDERAL TAXES	3,935	0	0	0

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TY 2014 Other Increases Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Description	Amount
UNRELATED BUSINESS TAXABLE INCOME (LOSS)	47,512

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TY 2014 Other Liabilities Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Description	Beginning of Year - Book Value	End of Year - Book Value
NOTE PAYABLE	1,000,000	1,000,000

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TY 2014 Other Professional Fees Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS	10	0	0	0

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TY 2014 Substantial Contributors Schedule

Name: THE HS LOPEZ FAMILY FOUNDATION

EIN: 20-5725952

Name	Address
HUMBERTO S AND CZARINA M LOPEZ	3901 E BROADWAY BLVD TUCSON,AZ 85711

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Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2014

Name of the organization
THE HS LOPEZ FAMILY FOUNDATION

Employer identification number
20-5725952

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	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
THE HS LOPEZ FAMILY FOUNDATION

Employer identification number
20-5725952

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	HUMBERTO S AND CZARINA M LOPEZ 3901 E BROADWAY BLVD TUCSON, AZ85711	$ 500,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)

Name of organization
THE HS LOPEZ FAMILY FOUNDATION

Employer identification number
20-5725952

Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(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
		$	

Name of organization
THE HS LOPEZ FAMILY FOUNDATION

Employer identification number
20-5725952

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

(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

(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

(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

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee