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For calendar year 2015, or tax year beginning 07-01-2015 , and ending 06-30-2016

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	
City or town, state or province, country, and ZIP or foreign postal code TUCSON, AZ 85711		B Telephone number (see instructions) (520) 322-6964	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		C If exemption application is pending, check here ☐ D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 987,830		J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	

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))	Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	362,771			
	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	10,193	10,193		
	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				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	35,650	0	0	
	12 Total. Add lines 1 through 11	408,614	10,193	0	
	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).	1,944	0	0	0
	c Other professional fees (attach schedule)				
	17 Interest	75,618	0	0	0
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings.	838	0	0	838
	22 Printing and publications				
	23 Other expenses (attach schedule).	3,405	0	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	81,805	0	0	838
	25 Contributions, gifts, grants paid	369,240			369,240
	26 Total expenses and disbursements. Add lines 24 and 25	451,045	0	0	370,078
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-42,431			
	b Net investment income (if negative, enter -0-)		10,193		
	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	498,444	166,131	166,131
	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)	0	354,771	273,906
	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)	959,271	447,382	547,793
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)			
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,457,715	968,284	987,830
	17	Accounts payable and accrued expenses		5,000	
	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	548,000	
	23	Total liabilities (add lines 17 through 22)	1,000,000	553,000	
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	457,715	415,284	
	30	Total net assets or fund balances (see instructions)	457,715	415,284	
	31	Total liabilities and net assets/fund balances (see instructions)	1,457,715	968,284	

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)	1 457,715
2	Enter amount from Part I, line 27a	2 -42,431
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 415,284
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	6 415,284

Part IV

Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (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			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) 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))
2014	295,240	1,139,546	0 259086
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

2	Total of line 1, column (d).	2	1 481198
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 296240
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	1,224,300
5	Multiply line 4 by line 3.	5	362,687
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	102
7	Add lines 5 and 6.	7	362,789
8	Enter qualifying distributions from Part XII, line 4.	8	370,078

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	102
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	102
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	102
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	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	1,898
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ☐ 1,898 Refunded ☐	11	0

Part VII-A Statements Regarding Activities

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?		Yes	No
1a				No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b		No
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 ☐ \$ _____ (2) On foundation managers ☐ \$ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T</i>	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? <i>If "Yes," complete Part II, col (c), and Part XV</i>	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? <i>If "No," attach explanation</i>	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	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? Website address ►THEHSLOPEZFAMILYFOUNDATION.ORG	13	Yes	
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 2015, 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? 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 ►	16	Yes	No

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)? Organizations relying on a current notice regarding disaster assistance check here. ►		1b	Yes	
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 2015?		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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ 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 2015 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).		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 2015?		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		
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
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
<i>If "Yes" to 6b, file Form 8870</i>			
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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) 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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) 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	913,020
b	Average of monthly cash balances.	1b	329,924
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,242,944
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	1,242,944
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	18,644
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,224,300
6	Minimum investment return. Enter 5% of line 5.	6	61,215

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	61,215
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	102
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	102
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	61,113
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	61,113
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	61,113

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	370,078
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	370,078
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	102
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	369,976

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				61,113
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				14,033
c From 2012.				114,693
d From 2013.				156,816
e From 2014.				240,057
f Total of lines 3a through e.	525,599			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 370,078				
a Applied to 2014, 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 2015 distributable amount.				61,113
e Remaining amount distributed out of corpus	308,965			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	834,564			
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 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 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 2010 not applied on line 5 or line 7 (see instructions). . .	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	834,564			
10 Analysis of line 9				
a Excess from 2011. . . .				14,033
b Excess from 2012. . . .				114,693
c Excess from 2013. . . .				156,816
d Excess from 2014. . . .				240,057
e Excess from 2015. . . .				308,965

Part XIV

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b

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

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Part XV

1

Contributed more than 2% of the total contributions received by the foundation
 (or have contributed more than \$5,000) (See section 507(d)(2))

10% or more of the stock of a corporation (or an equally large portion of the stock of a partnership) in which the foundation has a 10% or greater interest

2

contributions to preselected charitable organizations and does not accept or make gifts, grants, etc. (see instructions) to individuals or organizations under

E-mail address of the person to whom applications should be addressed

mitted and information and materials they should include

ORM

as by geographical areas, charitable fields, kinds of institutions, or other

Part XV

Supplementary Information(continued)

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

Recipient	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
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			▶ 3a	369,240
b Approved for future payment				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

[illegible]

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.			

[illegible]

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.		
▶	*****	2017-01-10	*****
	Signature of officer or trustee	Date	Title

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

May the IRS discuss this return with the preparer shown below

(see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name LORETTA PETO	Preparer's Signature	Date 2017-01-10	Check if self-employed ☐	PTIN P00084187
	Firm's name ▶ CLIFTONLARSONALLEN LLP			Firm's EIN ▶ 41-0746749	
	Firm's address ▶ 5255 EAST WILLIAMS CIRCLE STE 5000 TUCSON, AZ 85711			Phone no (520) 790-3500	

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

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

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	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
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN CANCER RELAY FOR LIFE 1476 BRISTOL DR NOGALES,AZ 85621	NONE	PC	TO FIGHT AGAINST CANCER	500
AMERICAN CANCER SOCIETY 1636 N SWAN RD STE 151 TUCSON,AZ 85712	NONE	PC	TO HELP PEOPLE WITH CANCER	2,000
AMERICAN HEART ASSOCIATION PO BOX 50085 PRESCOTT,AZ 86304	NONE	PC	TO SUPPORT 2016 TUCSON HEART & STROKE BALL	30,000
ANGEL CHARITY FOR TUCSON PO BOX 14225 TUCSON,AZ 85732	NONE	PC	TO IMPROVE THE QUALITY OF LIFE FOR CHILDREN	10,000
ARIZONA CENTER OF INTEGRATIVE MEDICINE 111 NORTH CHERRY AVENUE TUCSON,AZ 85721	NONE	PC	FOR INNOVATIVE MEDICINE CLINICAL CARE, RESEARCH, AND EDUCATION PROJECTS	2,500
ARIZONA CHAMBER FOUNDATION 3200 N CENTRAL AVE PHOENIX,AZ 85012	NONE	PC	TO ENSURE ECONOMIC GROWTH AND PROSPERITY FOR ALL ARIZONANS	5,000
ARIZONA THEATER COMPANY 343 S SCOTT AVENUE TUCSON,AZ 85701	NONE	PC	TO SUPPORT ATC'S ABILITY TO BRING THE MAGIV OF THEATRE TO ARIZONA COMMUNITIES	3,500
BOYS TO MEN 9587 TROPICO DRIVE LA MESA,CA 91941	NONE	PC	TO EXPAND NEW SCHOOLS AND HELP FATHERLESS TEENAGE BOYS	500
CASA DE LOS NINOS INC 1101 N 4TH AVENUE TUCSON,AZ 85705	NONE	PC	TO PROVIDE CARE FOR CHILDREN IN THE CRISIS SHELTER	10,000
CASA HOGAR MADRE CONCHITA FOUNDATION PO BOX 40021 TUCSON,AZ 85717	NONE	PC	TO TAKE CARE OF GIRLS WITHOUT FAMILIES	10,000
CATHOLIC COMMUNITY SERVICES OF SOUTHERN ARIZONA 140 W SPEEDWAY BLVD SUITE 230 TUCSON,AZ 85705	NONE	PC	TO HELP OFFSET SOME EXPENSES OF EVENT	5,000
CHICANOS POR LA CAUSA INC 2550 E FORT LOWELL ROAD TUCSON,AZ 85716	NONE	PC	TO PROVIDE ASSISTANCE TO DISADVANTAGED INDIVIDUALS	1,000
COMMUNITY FOOD BANK OF SOUTHERN ARIZONA PO BOX 551 TUCSON,AZ 85702	NONE	PC	TO HELP END HUNGER	1,000
COMMUNITY FOOD BANK 3003 S COUNTRY CLUB RD TUCSON,AZ 85726	NONE	PC	TO FIGHT HUNGER	2,500
COVENANT HOUSE PO BOX 96708 WASHINGTON,DC 20090	NONE	PC	TO HELP HOMELESS CHILDREN	90
Total ▶ 3a				369,240

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

Recipient	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
Name and address (home or business)				
a Paid during the year				
DIAPER BANK OF SOUTHERN ARIZONA 1050 SOUTH PLUMER AVENUE TUCSON,AZ 85719	NONE	PC	TO PROVIDE SUFFICIENT SUPPLY OF DIAPERS FOR SOUTHERN ARIZONA'S INFANTS, DISABLED AND ELDERLY	1,000
DM50 PO BOX 32919 TUCSON,AZ 85751	NONE	PC	TO SUPPORT THE AIRMEN WHO PROTECT OUR FREEDOM	300
DOMINICAN SCHOOL OF PHILOSOPHY & THEOLOGY 2301 VINE STREET BERKELEY,CA 94708	NONE	PC	TO OFFER EDUCATION TO DOMINICANS	500
EL RIO FOUNDATION 839 WEST CONGRESS STREET TUCSON,AZ 85745	NONE	PC	TO IMPROVE THE HEALTH OF THE COMMUNITY THROUGH AFFORDABLE, QUALITY HEALTH CARE	1,000
EMERGE CENTER AGAINST DOMESTIC ABUSE 2545 E ADAMS ST TUCSON,AZ 85716	NONE	PC	TO CHANGE THE LIVES OF FAMILIES WHO HAVE EXPERIENCED ABUSE	2,500
EMPOWERMENT SYSTEMS INC 2066 W APACHE TRAIL BLVD SUITE 166 APACHE JUNCTION,AZ 85120	NONE	PC	TO SUPPORT A DEDICATED COORDINATOR POSITION, CAPACITY-BUILDING TRAINING, COMMUNITY EVENTS AND OUTREACH	5,000
FLORENCE CRITTENTON OF ARIZONA 715 WEST MARIPOSA STREET PHOENIX,AZ 85013	NONE	PC	TO HELP YOUNG WOMEN BECOME SELF-SUFFICIENT ADULTS	2,500
FLORENCE IMMIGRANT PO BOX 654 FLORENCE,AZ 85132	NONE	PC	TO PROVIDE FREE LEGAL AND SOCIAL SERVICES TO IMMIGRANT DETAINEES IN ARIZONA	500
FLORENCE IMMIGRANT PO BOX 654 FLORENCE,AZ 85132	NONE	PC	TO PROVIDE FREE LEGAL SERVICES	950
FLORIDA CENTER FOR INVESTIGATIVE REPORTING PO BOX 7129 ST PETERSBURG,FL 33734	NONE	PC	TO SUPPORT TUCSON SENTINEL COM, A SECTION 501(C)(3) ORGANIZATION	5,000
GAITWAY-INDIVIDUAL ACHIEVEMENT ASSOCIATION 7447 E 22ND STREET TUCSON,AZ 85710	NONE	PC	TO PROVIDE SUPPORT FOR INDIVIDUALS WITH MOTOR SKILL DISORDERS THROUGH CONDUCTIVE EDUCATION	5,400
GIRL SCOUTS OF SOUTHERN ARIZONA 4300 E BROADWAY BLVD TUCSON,AZ 85711	NONE	PC	TO ENGAGE LOW-INCOME LATINA GIRLS IN THE GIRL SCOUT LEADERSHIP EXPERIENCE	5,000
GLOBAL COMMUNITY COMMUNICATIONS ALLIANCE 4 WILL ROGERS LANCE TUBAC,AZ 85640	NONE	PC	TO OFFER LOW COST AND PRO-BONO LEGAL SERVICES AND EDUCATION TO LOW INCOME RESIDENTS OF SANTA CRUZ AND PIMA COUNTY	5,000
GOSPEL RESCUE MISSION 326 W 28TH ST TUCSON,AZ 85713	NONE	PC	TO PROVIDE THANKSGIVING DINNER TO HOMELESS PEOPLE	1,000
GOSPEL RESCUE MISSION PO BOX 28813 TUCSON,AZ 85726	NONE	PC	TO PROVIDE A PLACE FOR HOMELESS AND HUNGRY PEOPLE	1,100
Total ▶ 3a				369,240

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

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JOB PATH 655 N ALVERNON WAY TUCSON,AZ 85711	NONE	PC	TO HELP PEOPLE WITH DEVELOPMENTAL DISABILITIES	10,000
KNIGHTS OF COLUMBUS 5150 N VALLEY VIEW ROAD TUCSON,AZ 85718	NONE	PC	TO SUPPORT RETIRED PRIETS AND COS OF EDUCATING FUTURE PRIESTS	5,000
LUGO CHARITIES INC PO BOX 26363 TUCSON,AZ 85726	NONE	PC	TO PURCHASE 500 NEW BICYCLES FOR EVENT BIKE IN A BOX	250
MARCH OF DIMES FOUNDATION 3550 N CENTRAL AVE STE 610 PHOENIX,AZ 85012	NONE	PC	TO SUPPORT THE 5TH ANNUAL SIGNATURE CHEFS AUCTION	7,500
MARCH OF DIMES FOUNDATION 7290 E BROADWAY BLVD STE 142 TUCSON,AZ 85710	NONE	PC	TO HELP SOUTHERN ARIZONA'S MOMS & BABIES	7,500
MENTOR KIDS USA 15300 N 90TH STREET 200 SCOTTSDALE,AZ 85260	NONE	PC	TO EMPOWER YOUTH FACING TOUGH LIFE CHALLENGES	5,000
MOBILE MEALS OF TUCSON 4803 E 5TH ST SUITE 209 TUCSON,AZ 85711	NONE	PC	TO HELP ELDERLY AND DISABLED ADULTS TO CONTINUE LIVING INDEPENDENTLY	11,000
NAMI SOUTHERN ARIZONA 6122 W 22ND ST TUCSON,AZ 85711	NONE	PC	TO IMPROVE THE QUALITY OF LIFE FOR ALL THOSE AFFECTED BY MENTAL ILLNESS	1,000
NAVY SEAL FOUNDATION 1619 D STREET VIRGINIA BEACH,VA 23455	NONE	PC	TO IMPROVE HEALTH AND WELFARE, AND EMPOWER AND EDUCATE NAVY SEALS AND THEIR FAMILIES	1,000
NEWMAN SUSTAINING BOARD PO BOX 70225 ORO VALLEY,AZ 85737	NONE	PC	TO BE THE PRESENCE OF JESUS CHRIST ON THE CAMPUS OF UNIVERSITY OF ARIZONA	1,000
NOGALES UNIFIED SCHOOL DISTRICT PO BOX 5000 NOGALES,AZ 85628	NONE	PC	TO PROVIDE FUNDING FOR SCHOOL UNIFORMS AND SUPPLIES	5,000
PIMA AIR MUSEUM 5000 E VALENCIA RD TUCSON,AZ 85756	NONE	PC	TO PRESERVE TITAN II MISSILE SITE	1,000
PIMA COMMUNITY COLLEGE FOUNDATION 4905 E BROADWAY BLVD TUCSON,AZ 85709	NONE	PC	TO PROMOTE ACADEMIC EXCELLENCE AMONG LATINO STUDENTS	5,000
PIMA COMMUNITY COLLEGE FOUNDATION 4905C E BROAWAY BLVD TUCSON,AZ 85709	NONE	PC	TO HELP PCC STUDENTS ACHIEVE THEIR EDUCATIONAL GOALS	600
PIMA COUNTY PARKLANDS FOUNDATION 931 W WHITE ACACIA PLACE TUCSON,AZ 85704	NONE	PC	FOR CHRISTINA TAYLOR GREEN PARK	1,000
Total ▶ 3a				369,240

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				
POVERELLO HOUSE PO BOX 50782 TUCSON,AZ 85703	NONE	PC	TO PROVIDE HOSPITALITY TO HOMELESS MEN	500
RINCONUNIVERSITY MARCHING BAND ASSOC PO BOX 57151 TUCSON,AZ 85732	NONE	PC	TO SUPPORT RUHS MARCHING BAND	250
RONALD MCDONALD HOUSE PO BOX 40725 TUCSON,AZ 85717	NONE	PC	TO SUPPORT THE OPERATIONS OF RONALD MCDONALD HOUSE CHARITIES OF SOUTHERN ARIZONA	10,000
SALPOINTE CATHOLIC HIGH SCHOOL 1545 E COPPER ST TUCSON,AZ 85719	NONE	PC	TO EDUCATE STUDENTS IN THEIR FAITH AND PERSONAL GROWTH	25,000
SOUTHERN ARIZONA CHILDREN'S ADV CTR INC 2329 EAST AJO WAY TUCSON,AZ 85713	NONE	PC	TO STOP THE CYCLE OF CHILD ABUSE	5,000
ST ANDREW'S CHILDREN'S CLINIC PO BOX 67 GREEN VALLEY,AZ 85622	NONE	PC	TO PROVIDE CARE TO CHILDREN WHO LIVE IN MEXICO	6,000
ST AUGUSTINE CATHOLIC HIGH SCHOOL 8800 E 22ND STREET TUCSON,AZ 85710	NONE	PC	TO SUPPORT THE 6TH ANNUAL WESTERN BBQ DINNER	1,000
ST LUKE'S HOME 615 E ADAMS ST TUCSON,AZ 85705	NONE	PC	TO PROVIDE HOUSING AND MEALS FOR ELDERLS	1,000
ST MICHAEL THE ARCHANGEL ROMAN CATHOLIC CHURCH 270 E HUNT HIGHWAY SUITE 16 328 SAN TAN VALLEY,AZ 85143	NONE	PC	TO PROVIDE RELIGIOUS EDUCATION TO CHILDREN	1,000
STEVEN M GOOTTER FOUNDATION PO BOX 64583 TUCSON,AZ 85728	NONE	PC	TO HELP WITH SUDDEN CARDIAC DEATH RESEARCH	5,000
THE LEUKEMIA & LYMPHOMA SOCIETY 3877 N 7TH ST SUITE 300 PHOENIX,AZ 85014	NONE	PC	TO FIGHT AGAINST BLOOD CANCERS	3,500
THE MARSHALL HOME FOR MEN 3314 S 16TH AVE TUCSON,AZ 85713	NONE	PC	TO PROVIDE LOW COST ASSISTED LIVING TO MEN	1,000
THE PRIMAVERA FOUNDATION INC 151 W 40TH ST TUCSON,AZ 85713	NONE	PC	TO HELP MEMBERS OF COMMUNITY STABILIZE THEIR LIVING SITUATIONS, IMPORVE THEIR SKILLS, FIND WORK AND BUILD SUSTAINABLE FINANCIAL FUTURES	2,500
THE SALVATION ARMY PO BOX 43790 TUCSON,AZ 85733	NONE	PC	TO PROVIDE FOOD,UTILITY AND RENT ASSISTANCE	3,500
THE TIA FOUNDATION PO BOX 36203 PHOENIX,AZ 85067	NONE	PC	TO BRING ACCESS TO HEALTH CARE TO THE POOREST OF TH EPOOR MEXICAN FARMERS	2,500
Total ▶ 3a				369,240

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

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
TMC FOUNDATION 5301 E GRANT ROAD TUCSON,AZ 85712	NONE	PC	FOR THE NEW WOMEN'S CENTER THAT PROVIDES OUTSTANDING CARE FOR WOMEN	25,000
TU NIDITO 3922 N MOUNTAIN AVE TUCSON,AZ 85719	NONE	PC	TO CREATE A COMMUNITY OF ACCEPTANCE AND UNDERSTANDING REGARDING CHILDREN IN GRIEF	10,000
TUCSON BOTANICAL GARDENS 2150 N ALVERNON WAY TUCSON,AZ 85712	NONE	PC	TO PROMOTE RESPONSIBLE AND APPROPRIATE USE OF PLANTS AND WATER	1,000
TUCSON HISPANIC CHAMBER OF COMMERCE 823 E SPEEDWAY BLVD TUCSON,AZ 85719	NONE	PC	DONATION FOR SCHOLARSHIPS	5,000
UAFUAPRESENTS 888 N EUCLID AVE RM 203 TUCSON,AZ 85721	NONE	PC	TO PROVIDE SUPPORT FOR EXCELLENT ARTS PROGRAMMING	5,000
UC SAN DIEGO FOUNDATION 9500 GILMAN DRIVE 0940 LA JOLLA,CA 92093	NONE	PC	TO SUPPORT THE DANON DISEASE RESEARCH FUND	50,000
UNIVERSITY OF ARIZONA FOUNDATION PO BOX 210109 TUCSON,AZ 85721	NONE	PC	TO SUPPORT ONE YOUNG WORLD/B2 SUMMI9T	5,000
UNIVERSITY OF ARIZONA PO BOX 210108 TUCSON,AZ 85721	NONE	PC	TO SUPPORT THE DEPARTMENT OF ACCOUNTING	15,000
UNIVERSITY OF SOUTH FLORIDA FOUNDATION 4202 E FOWLER AVE CPR107 TAMPA,FL 33620	NONE	PC	FOR CANCER CELL BIOLOGY AND BIOCHEMISTRY RESEARCH FUND	1,000
WESTERN DOMINICAN PROVINCE 5877 BIRCH COURT OAKLAND,CA 94618	NONE	PC	TO PREACH AND TEACH FOR THE SALVATION OF SOULS	500
WESTERN DOMINICAN PROVINCE 5877 BIRCH COURT OAKLAND,CA 94618	NONE	PC	TO PROCLAIM THE GOSPEL OF JESUS CHRIST	500
WESTERN DOMINICAN PROVINCE 5877 BIRCH COURT OAKLAND,CA 94618	NONE	PC	TO SUPPORT 800TH JUBILEE OF THE ORDER OF PREACHERS	800
WOMEN'S FOUNDATION OF SOUTHERN ARIZONA 1661 N SWAN RD SUITE 150 TUCSON,AZ 85712	NONE	PC	TO ACHIEVE SOCIAL, POLITICAL AND ECONOMIC CHANGE THAT EMPOWERS WOMEN AND GIRLS	500
Total ▶ 3a				369,240

TY 2015 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	1,944	0	0	0

TY 2015 Investments Corporate Stock Schedule**Name:** THE HS LOPEZ FAMILY FOUNDATION**EIN:** 20-5725952

Name of Stock	End of Year Book Value	End of Year Fair Market Value
E-TRADE NORTHSTAR ASSET MANAGEMENT GROUP INC.	190,379	160,113
E-TRADE NORHTSTAR REALTY EURPOE CORP	30,860	24,170
E-TRADE NORTHSTAR REALTY FINANCE CORP	133,532	89,623

TY 2015 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	157	157
CENTER STREET LENDING	FMV	447,225	547,636

TY 2015 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	532	0	0	0
ADVERTISING	50	0	0	0
FEDERAL TAXES	1,835	0	0	0
STATE TAXES	778	0	0	0
MISCELLANEOUS	210	0	0	0

TY 2015 Other Income Schedule**Name:** THE HS LOPEZ FAMILY FOUNDATION**EIN:** 20-5725952

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CENTER STREET LENDING MP IV, LLC	35,650		0

TY 2015 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	548,000

TY 2015 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

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

2015

Name of the organization THE HS LOPEZ FAMILY FOUNDATION	Employer identification number 20-5725952
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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 33¹/₃% 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
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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		\$ 354,771	Person ☐
	HUMBERTO S AND CZARINA M LOPEZ 3901 E BROADWAY BLVD		Payroll ☐
	TUCSON, AZ 85711		Noncash ☒ (Complete Part II for noncash contributions)
2		\$ 8,000	Person ☒
	VIRGINIA LEE CLEMENTS PO BOX 27506		Payroll ☐
	TUCSON, AZ 85726		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
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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
1	15,682 SHARES OF NORTHSTAR ASSET MGMT FROUP INC COM	\$ 190,379	2015-12-31
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	2,613 SHARES OF NORTHSTAR REALTY EUROPE CORP COM	\$ 30,860	2015-12-31
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	7,841 SHARES OF NORTHSTAR REALTY FINANCE CORP COM	\$ 133,532	2015-12-31
(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
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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
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