Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

For calendar year 2011, or tax year beginning , 2011, and ending ,

Name of foundation: Con Alma Health Foundation, Inc.

A Employer identification number: 85-0484396

Number and street (or P O box number if mail is not delivered to street address): 144 Park Ave | Room/suite:

B Telephone number (see the instructions): (505) 438-0776

City or town: Santa Fe | State: NM | ZIP code: 87501-1833

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: [X] 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, column (c), line 16)* ►$ 23,156,523.

J Accounting method ☐ Cash [X] 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))*

	Line	(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 (att sch)	398,725.			
	2 Ck ► ☐ if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	948.	948.		
	4 Dividends and interest from securities	734,814.	734,814.		
	5a Gross rents				
	b Net rental income or (loss)		L-6a Stmt		
	6a Net gain/(loss) from sale of assets not on line 10	1,271,302.			
	b Gross sales price for all assets on line 6a 8,214,123.				
	7 Capital gain net income (from Part IV, line 2)		1,271,302.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances 16,192.				
	b Less Cost of goods sold 21,790.				
	c Gross profit/(loss) (att sch)	-5,598.			
	11 Other income (attach schedule)				
	12 **Total.** Add lines 1 through 11	2,400,191.	2,007,064.		
OPERATING AND ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc	114,069.	28,517.		85,467.
	14 Other employee salaries and wages	228,887.	57,222.		188,012.
	15 Pension plans, employee benefits	32,999.	8,250.		24,749.
	16a Legal fees (attach schedule)	2,113.	528.		1,585.
	b Accounting fees (attach sch)	48,164.	24,082.		24,082.
	c Other prof fees (attach sch)	317,868.	0.		317,868.
	17 Interest	0.	0.		0.
	18 Taxes (attach schedule)(see instrs) See Line 18 Stmt	62,789.	8,609.		19,442.
	19 Depreciation (attach sch) and depletion	31,659.	7,915.		
	20 Occupancy	18,988.	4,747.		14,241.
	21 Travel, conferences, and meetings	34,026.	8,507.		25,520.
	22 Printing and publications	5,428.			5,428.
	23 Other expenses (attach schedule) See Line 23 Stmt	195,675.	121,766.		66,016.
	24 **Total operating and administrative expenses.** Add lines 13 through 23	1,092,665.	270,143.		772,410.
	25 Contributions, gifts, grants paid	426,353.			526,738.
	26 **Total expenses and disbursements.** Add lines 24 and 25	1,519,018.	270,143.		1,299,148.
	27 Subtract line 26 from line 12:				
	a **Excess of revenue over expenses and disbursements**	881,173.			
	b **Net investment income** (if negative, enter -0-)		1,736,921.		
	c **Adjusted net income** (if negative, enter -0-)				

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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	194,006.	669,640.	669,640.
	2	Savings and temporary cash investments	1,546,124.	1,456,779.	1,456,779.
	3	Accounts receivable ► 24,107.			
		Less allowance for doubtful accounts ► 0.	6,380.	24,107.	24,107.
	4	Pledges receivable ► 0.			
		Less· allowance for doubtful accounts ► 0.	0.	0.	0.
	5	Grants receivable	0.	0.	0.
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)	0.	0.	0.
	7	Other notes and loans receivable (attach sch) ► 0.			
		Less allowance for doubtful accounts ► 0.	0.	0.	0.
	8	Inventories for sale or use	0.	0.	0.
	9	Prepaid expenses and deferred charges	7,251.	2,550.	2,550.
	10a	Investments – U S and state government obligations (attach schedule)	0.	0.	0.
	b	Investments – corporate stock (attach schedule)	22,741,827.	20,136,964.	20,136,964.
	c	Investments – corporate bonds (attach schedule)	0.	0.	0.
	11	Investments – land, buildings, and equipment basis ► 0.			
		Less accumulated depreciation (attach schedule) ► 0.	0.	0.	0.
	12	Investments – mortgage loans	0.	0.	0.
	13	Investments – other (attach schedule)	0.	0.	0.
	14	Land, buildings, and equipment basis ► 1,107,946.			
		Less accumulated depreciation (attach schedule) ► 241,640.	870,021.	866,306.	866,306.
	15	Other assets (describe ► Interest receivable)	262.	177.	177.
	16	**Total assets** (to be completed by all filers – see the instructions Also, see page 1, item I)	25,365,871.	23,156,523.	23,156,523.
LIABILITIES	17	Accounts payable and accrued expenses	62,922.	63,981.	
	18	Grants payable	241,489.	141,104.	
	19	Deferred revenue	0.	0.	
	20	Loans from officers, directors, trustees, & other disqualified persons	0.	0.	
	21	Mortgages and other notes payable (attach schedule)	0.	0.	
	22	Other liabilities (describe ►)	0.	0.	
	23	**Total liabilities** (add lines 17 through 22)	304,411.	205,085.	
NET ASSETS OR FUND BALANCES		**Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.** ► [X]			
	24	Unrestricted	776,864.	756,044.	
	25	Temporarily restricted	20,784,596.	18,695,394.	
	26	Permanently restricted	3,500,000.	3,500,000.	
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► [ ]			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	**Total net assets or fund balances** (see instructions)	25,061,460.	22,951,438.	
	31	**Total liabilities and net assets/fund balances** (see instructions)	25,365,871.	23,156,523.	

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	25,061,460.
2	Enter amount from Part I, line 27a	2	881,173.
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	25,942,633.
5	Decreases not included in line 2 (itemize) ► Unrealized losses	5	2,991,195.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	22,951,438.

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 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a	Publicly traded securities	P		
b				
c				
d				
e				

	(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	8,214,123.		6,942,821.	1,271,302.
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
a				1,271,302.
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** 1,271,302.

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 the 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 (column (b) divided by column (c))
2010	1,019,445.	22,319,803.	0.045674
2009	1,873,922.	19,678,057.	0.095229
2008	2,692,440.	24,115,833.	0.111646
2007	2,521,855.	28,182,702.	0.089482
2006	1,777,387.	28,161,030.	0.063115

2	**Total** of line 1, column (d)	2	0.405146
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	0.081029
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	23,430,595.
5	Multiply line 4 by line 3	5	1,898,558.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	17,369.
7	Add lines 5 and 6	7	1,915,927.
8	Enter qualifying distributions from Part XII, line 4	8	1,327,091.

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 instructions)

1 a 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 instrs)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☐ and enter 1% of Part I, line 27b			1	34,738.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (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	34,738.
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	34,738.
6 Credits/Payments:				
a 2011 estimated tax pmts and 2010 overpayment credited to 2011	6a	25,500.		
b Exempt foreign organizations – tax withheld at source	6b			
c Tax paid with application for extension of time to file (Form 8868)	6c	9,238.		
d Backup withholding erroneously withheld	6d			
7 Total credits and payments. Add lines 6a through 6d			7	34,738.
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	0.
10 **Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ►			10	0.
11 Enter the amount of line 10 to be Credited to 2012 estimated tax ►		Refunded ►	11	

Part VII-A Statements Regarding Activities

		Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1b		X
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		X
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? *If 'Yes,' attach a detailed description of the activities*	2		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If 'Yes,' attach a conformed copy of the changes*	3		X
4a Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If 'Yes,' attach the statement required by General Instruction T*	5		X
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	X	
7 Did the foundation have at least $5,000 in assets at any time during the year? *If 'Yes,' complete Part II, column (c), and Part XV*	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► NM - New Mexico			
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? *If 'Yes,' complete Part XIV*	9		X
10 Did any persons become substantial contributors during the tax year? *If 'Yes,' attach a schedule listing their names and addresses*	10		X

Part VII-A Statements Regarding Activities (continued)

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ► www.conalma.org

14 The books are in care of ► Candace Hintenach Telephone no ► (505) 994-8939

Located at ► 3912 St. Andrews Dr. SE Rio Rancho NM ZIP + 4 ► 87124

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

			Yes	No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 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
1 a	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 2011?	1c		X
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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? ☐ 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 2011 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 2011.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		X

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 509(a)(1), (2), or (3), or section 4940(d)(2)? (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** X

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax 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
Pamelya Herndon, Esq. 144 Park Ave. Santa Fe NM 87501	President 1.00	0.	0.	0.
Erin Bouquin, M.D. 144 Park Ave. Santa Fe NM 87501	Vice Pres 1.00	0.	0.	0.
Steve Gaber 144 Park Ave. Santa Fe NM 87501	Treasurer 1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc		112,350.	8,988.	0.

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
Amy Donafrio 144 Park Ave. Santa Fe NM 87501	Asst Director 40.00	59,237.	4,937.	0.
Jackie Alshawabkeh 144 Park Ave. Santa Fe NM 87501	Administrator 32.00	50,590.	5,347.	0.
0				
0				
0				
Total number of other employees paid over $50,000			►	None

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 ►		None

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 The Foundation is partnering with Grantmakers in Health (GIH) for the GIH State Grant Writing Assistance Fund, which provides grantwriters to the state of NM to apply for federal funds to implement Healthcare Reform.	15,000.
2 With support from the W.K. Kellogg Foundation, the Foundation is planning a community engagement and capacity building strategy in Bernalillo, Dona Ana, San Juan and McKinley Counties to influence Health Care Reform implementation.	300,000.
3 The Foundation receives support from the Robert Wood Johnson Foundation/ Northwest Health Foundation for the Partnership in Nursing initiative (PIN6) designed to increase the diversity of the nursing workforce in NM.	20,033.
4 With support from the McCune Charitable Foundation, the Foundation convened a conference on health insurance exchanges, in cooperation with and organized by the RWJF UNM Office of Community Health.	5,000.

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 ►	

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	21,937,200.
b	Average of monthly cash balances	1b	1,850,206.
c	Fair market value of all other assets (see instructions)	1c	0.
d	**Total** (add lines 1a, b, and c)	1d	23,787,406.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	23,787,406.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	356,811.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	23,430,595.
6	**Minimum investment return.** Enter 5% of line 5	6	1,171,530.

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	1,171,530.
2a	Tax on investment income for 2011 from Part VI, line 5	2a	34,738.		
b	Income tax for 2011 (This does not include the tax from Part VI.)	2b			
c	Add lines 2a and 2b			2c	34,738.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	1,136,792.
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	1,136,792.
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	1,136,792.

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	1,299,148.
b	Program-related investments — total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	27,943.
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	1,327,091.
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	1,327,091.

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 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7					1,136,792.
2 Undistributed income, if any, as of the end of 2011.					
a Enter amount for 2010 only				0.	
b Total for prior years 20___, 20___, 20___					
3 Excess distributions carryover, if any, to 2011					
a From 2006	155,629.				
b From 2007	1,170,205.				
c From 2008	1,495,080.				
d From 2009	895,555.				
e From 2010	0.				
f Total of lines 3a through e		3,716,469.			
4 Qualifying distributions for 2011 from Part XII, line 4. ► $ 1,327,091.					
a Applied to 2010, 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)		367,533.			
d Applied to 2011 distributable amount					959,558.
e Remaining amount distributed out of corpus		0.			
5 Excess distributions carryover applied to 2011 *(If an amount appears in column (d), the same amount must be shown in column (a).)*		177,234.			177,234.
6 **Enter the net total of each column as indicated below:**					
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		3,906,768.			
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 2010 Subtract line 4a from line 2a Taxable amount – see instructions				0.	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012					0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)		367,533.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)		0.			
9 **Excess distributions carryover to 2012.** Subtract lines 7 and 8 from line 6a		3,539,235.			
10 Analysis of line 9					
a Excess from 2007	781,067.				
b Excess from 2008	1,495,080.				
c Excess from 2009	895,555.				
d Excess from 2010	0.				
e Excess from 2011	367,533.				

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling ►

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

	Tax year	Prior 3 years			
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
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))

None

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

None

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 of the person to whom applications should be addressed

Con Alma Health Foundation, Inc. - Grant Making Committee
144 Park Ave.
Santa Fe NM 87501 (505) 438-0776

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

Grant information may be obtained at www.conalma.org

c Any submission deadlines

See website for grant schedule.

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

Grants are awarded to qualified 501(c)3 organizations serving the healthcare needs of New Mexicans.

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 statement x x NM 87501		x	x	526,737.
Total			► **3a**	526,737.
***b** Approved for future payment*				
See Statement x x NM 87501		x	x	141,104.
Total			► **3b**	141,104.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income (a) Business code	Unrelated business income (b) Amount	Excluded by section 512, 513, or 514 (c) Exclusion code	Excluded by section 512, 513, or 514 (d) Amount	(e) 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			14	948.	
4 Dividends and interest from securities			14	734,814.	
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			18	1,271,302.	0.
9 Net income or (loss) from special events					-5,598.
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)				2,007,064.	-5,598.

13 **Total.** Add line 12, columns (b), (d), and (e) **13** 2,001,466.

(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.)
9	Grantee recognition event

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	1 a (1)		X
(2) Other assets	1 a (2)		X
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1 b (1)		X
(2) Purchases of assets from a noncharitable exempt organization	1 b (2)		X
(3) Rental of facilities, equipment, or other assets	1 b (3)		X
(4) Reimbursement arrangements	1 b (4)		X
(5) Loans or loan guarantees	1 b (5)		X
(6) Performance of services or membership or fundraising solicitations	1 b (6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1 c		X

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

► Nolmes F. [signature] | 05/11/12 | ► Executive Director

Signature of officer or trustee | Date | Title

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self employed	PTIN
Farley Vener	Farley Vener	5/15/12		

Firm's name ► HINKLE & LANDERS PC | Firm's EIN ►

Firm's address ► 2500 9TH ST NW ALBUQUERQUE NM 87102 | Phone no (505) 883-8788

TEEA0503 07/15/11

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► **Attach to Form 990, Form 990-EZ, or Form 990-PF**

OMB No 1545 0047

2011

Name of the organization	**Employer identification number**
Con Alma Health Foundation, Inc.	85-0484396

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, $5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules

☐ For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than $1,000. 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 of $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 Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization: Con Alma Health Foundation, Inc.

Employer identification number: 85-0484396

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Grantmakers in Health 1100 Connecticut Ave NW Ste. 1200 Washington DC 20036	$ 15,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
2	Kellogg Foundation One Michigan Ave East Battle Creek MI 49017	$ 300,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
3	Robert Wood Johnson Foundation PO Box 2316 Princeton NJ 08543-2316	$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
4	McCune Foundation 345 East Alameda St Santa Fe NM 87501-2229	$ 32,500.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)

Form 990-PF Part I, Line 6a	Net Gain or Loss From Sale of Assets	2011

Name	Employer Identification Number
Con Alma Health Foundation, Inc.	85-0484396

Asset Information:

Description of Property: Publicly traded securities
Date Acquired: various — How Acquired: Purchased
Date Sold: various — Name of Buyer: various
Sales Price: 8,214,123. — Cost or other basis (do not reduce by depreciation): 6,942,821.
Sales Expense: 0. — Valuation Method: Fair Market Value
Total Gain (Loss): 1,271,302. — Accumulation Depreciation:

Description of Property
Date Acquired. — How Acquired
Date Sold. — Name of Buyer
Sales Price — Cost or other basis (do not reduce by depreciation)
Sales Expense: — Valuation Method
Total Gain (Loss): — Accumulation Depreciation

Description of Property
Date Acquired — How Acquired.
Date Sold. — Name of Buyer
Sales Price — Cost or other basis (do not reduce by depreciation)
Sales Expense. — Valuation Method
Total Gain (Loss) — Accumulation Depreciation.

Description of Property
Date Acquired — How Acquired
Date Sold — Name of Buyer
Sales Price — Cost or other basis (do not reduce by depreciation)
Sales Expense — Valuation Method
Total Gain (Loss) — Accumulation Depreciation

Description of Property.
Date Acquired — How Acquired
Date Sold — Name of Buyer
Sales Price. — Cost or other basis (do not reduce by depreciation)
Sales Expense — Valuation Method.
Total Gain (Loss). — Accumulation Depreciation.

Description of Property
Date Acquired: — How Acquired
Date Sold — Name of Buyer
Sales Price — Cost or other basis (do not reduce by depreciation)
Sales Expense: — Valuation Method
Total Gain (Loss) — Accumulation Depreciation

Description of Property
Date Acquired — How Acquired
Date Sold — Name of Buyer
Sales Price — Cost or other basis (do not reduce by depreciation)
Sales Expense — Valuation Method
Total Gain (Loss) — Accumulation Depreciation

Description of Property
Date Acquired. — How Acquired
Date Sold — Name of Buyer
Sales Price: — Cost or other basis (do not reduce by depreciation)
Sales Expense: — Valuation Method
Total Gain (Loss). — Accumulation Depreciation.

Form 990-PF, Page 1, Part I, Line 18
Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Payroll taxes	25,923.	6,481.		19,442.
Excise taxes	34,738.	0.		0.
Foreign taxes	2,128.	2,128.		0.
Total	62,789.	8,609.		19,442.

Form 990-PF, Page 1, Part I, Line 23
Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Advertising	64.			64.
Bank charges	570.			570.
Contract labor	22,000.			14,107.
Contributions	7,500.			7,500.
Dues & subscriptions	8,377.	2,094.		6,283.
Equipment & software	9,617.	2,404.		7,213.
Equipment maint/rental	10,193.	2,548.		7,645.
Insurance	8,344.	2,086.		6,258.
Investment fees	108,028.	108,028.		0.
Meals	2,875.	359.		2,516.
Office expense	14,095.	3,524.		10,571.
Postage & delivery	2,440.	610.		1,830.
Security	453.	113.		340.
Website	1,119.	0.		1,119.
Total	195,675.	121,766.		66,016.

Form 990-PF, Page 6, Part VIII, Line 1
Information about Officers, Directors, Trustees, Etc.

(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
Person [ ] Business [X] Robert Archuleta 144 Park Ave. Santa Fe NM 87501	Secretary 1.00	0.	0.	0.
Person [ ] Business [X] Gayle Dine' Chacon, M.D. 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Marcie Chavez 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Patricia Collins 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1 Continued

Information about Officers, Directors, Trustees, Etc.

(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
Person [ ] Business [X] Louis J. Luna 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Seferino Montano 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Juan Oropesa 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Eliu Romero, Esq. 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Benny Shendo 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Sara Ann Stevens 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] James Summers 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Juan Vigil 144 Park Ave. Santa Fe NM 87501	Trustee 1.00	0.	0.	0.
Person [ ] Business [X] Dolores Roybal 144 Park Ave. Santa Fe NM 87501	Ex. Director 40.00	112,350.	8,988.	0.
Total		112,350.	8,988.	0.

Explanation Statement

Form/Line: Form 990-PF, Page 9, Part XIII Line 4c

Explanation of: Undistributed Income - Election to Treat Distribution as Out of Corpus

THE CON ALMA HEALTHCARE FOUNDATION HEREBY ELECTS, PURSUANT TO TREASURY REG. SECTION 53.4942(A)-3(D)(2) AND THE INSTRUCTIONS FOR FORM 990-PF, PART XIII, LINE 4C, TO TREAT $367,533 OF ITS QUALIFYING DISTRIBUTIONS

Explanation Statement Continued

Form/Line: Form 990-PF, Page 9, Part XIII Line 4c
Explanation of: Undistributed Income - Election to Treat Distribution as Out of Corpus

FOR THE TAXABLE YEAR ENDING DECEMBER 31, 2011 AS DISTRIBUTIONS OUT OF CORPUS IN CONNECTION WITH THE "PASS THROUGH" REQUIREMENTS IMPOSED UPON THE FOUNDATION UNDER TREASURY REG. SECTION 53.4942(A)-3(C). THIS REDUCTION IN CORPUS REPRESENTS DISTRIBUTIONS MADE TO THE FOUNDATION DURING THE YEAR ENDED DECEMBER 31, 2011 BY THE FOLLOWING DONORS:
THE KELLOGG FOUNDATION ($300,000)
GRANTMAKERS IN HEALTH ($15,000)
THE ROBERT WOOD JOHNSON FOUNDATION ($20,033)
THE MCCUNE FOUNDATION ($32,500)

Statement 1
Page 1, Part I, Line 1

		(a) Revenue Per Books
Grant income	$	397,500
Contributions		1,225
Total	$	398,725

Statement 2
Page 1, Part I, Line 10

		(a) Revenue Per Books
Gross sales - Proceeds from event ticket sales	$	16,192
Cost of Goods sold - Direct costs of event		(21,790)
Total	$	(5,598)

Statement 3
Page 1, Part I, Line 16a

		(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal expense - Consultations with Attorneys	$	2,113	528	-	1,585
Total	$	2,113	528	-	1,585

Statement 4
Page 1, Part I, Line 16b

Accounting		(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Bookeeping	$	27,910	13,955	-	13,955
Payroll & misc services		1,576	788		788
Audit & Tax		18,678	9,339	-	9,339
Total	$	48,164	24,082	-	24,082

Statement 5
Page 1, Part I, Line 16b

Other professional fees		(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Information technology services	$	7,319	-	-	7,319
Public relations		6,104	-		6,104
Professional contracts - grants		304,445	-	-	304,445
Total	$	317,868	-	-	317,868

Statement 6
Page 1, Part I, Line 19
Page 2, Part II, Line 14

		(a) Basis	(b) Accum. Depreciation	(c) Book Value	(d) Fair Market Value
Furniture & fixtures	$	37,890	37,868	22	22
Machinery & equipment		64,089	54,647	9,442	9,442
Building		886,988	149,147	737,841	737,841
Land		119,000	-	119,000	119,000
Total	$	1,107,967	241,662	866,305	866,306

		(e) Annual Depreciation
Furniture & fixtures	$	5,413
Machinery & equipment		3,753
Building		22,493
	$	31,659

Statement 7
Page 2, Part II, Line 10b

Corporate Stock	Valuation Method		Book Value	Fair Market Value
Equity securities	Market Value	$	5,263,863	5,263,863
Other Assets (REITs)	Market Value		67,651	67,651
Mutual funds	Market Value		14,805,450	14,805,450
		$	20,136,964	20,136,964

Form 990PF, Page 11, Part XV, Line 3a
Recipients Paid in 2011

Con Alma Health Foundation, 85-0484396

Name and Address	Donee Relationship	Foundation Status of Recipient	Purpose of Grant	Person or business	Amount
Global Education Fund 551 W. Cordova, #144 Santa Fe, NM 87505	N/A	509(a)(1)	HEALTHCARE	Business	$ 1,000
Hispanics in Philanthropy 55 2nd St , Suite 1500 San Fancisco, CA 94105	N/A	509(a)(1)	HEALTHCARE	Business	10,000
New Mexico Information Commons Project Santa Fe Community Foundation PO Box 1827 Santa Fe, NM 87504-1827	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Open Hands PO Box 4625 Santa Fe, NM 87502	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Policy Connections West PO Box 5962 Santa Fe, NM 87502	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Women's Health Services 901 West Alameda, Suite 25 Santa Fe, NM 87501	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Santa Fe Partners in Education PO Box 23374 Santa Fe, NM 87502	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Council on Foundations 2121 Crystal Dr , Suite 700 Arlington, VA 22202-3706	N/A	509(a)(1)	HEALTHCARE	Business	2,760
Alamo Navajo School Board PO Box 907 Magdalena, NM 87825	N/A	Tribal Government	HEALTHCARE	Business	45,000
New Mexico Highlands University, Inc Ben Lujan Institute for Leadership & Public Policy PO Box 9000 Las Vegas, NM 87701	N/A	509(a)(1)	HEALTHCARE	Business	40,000
Rio Grande Community Development Corporation 318 Isleta SW Albuquerque, NM 87105	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	20,000
Los Alamos National Laboratory Foundation 1112 Plaza del Norte Espanola, NM 87532	N/A	509(a)(1)	HEALTHCARE	Business	15,000
New Mexico Center on Law and Poverty 720 Vassar Drive NE Albuquerque, NM 87106	N/A	509(a)(1)	HEALTHCARE	Business	40,000
New Mexico State University Foundation PO Box 300001 Las Cruces, NM 88003	N/A	509(a)(1)	HEALTHCARE	Business	40,000

Name and Address	Donee Relationship	Foundation Status of Recipient	Purpose of Grant	Person or business	Amount
Datil Area Community Advisory Board PO Box 221 Datil, NM 87821	N/A	509(a)(1)	HEALTHCARE	Business	8,000
DNA-Peoples Legal Services, Inc PO Box 306 Window Rock, AZ 86515-0000	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Embrace, Inc PO Box 4425 Roswell, NM 88202	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Earth Care International 1235 Siler Rd Suite D Santa Fe, NM 87507-0000	N/A	509(a)(1)	HEALTHCARE	Business	10,000
East Central Ministries, Inc 123 Vermont NE Albuquerque, NM 87108-0000	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Breast Cancer Resource Center New Mexico Community Foundation 502 West Cordova Rd, Ste 1 Santa Fe, NM 87505	N/A	509(a)(1)	HEALTHCARE	Business	10,000
First Nations Community HealthSource 5608 Zuni Rd SE Albuquerque, NM 87108	N/A	509(a)(1)	HEALTHCARE	Business	7,000
Future Foundations Family Center 551 E Washington Grants, NM 87020	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Health Action New Mexico PO Box 460 Bernalillo, NM 87004	N/A	509(a)(1)	HEALTHCARE	Business	5,000
New Mexico Center for Nursing Excellence 3200 Carlisle NE, Suite 205 Albuquerque, NM 87110	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Sanctuary Zone PO Box 932 Estancia, NM 87016	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Partnership for Community Action 1020 Lomas NW, Suite 1 Albuquerque, NM 87102	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Option Inc 200 N Dalmont St Hobbs, NM 88240-8427	N/A	509(a)(1)	HEALTHCARE	Business	10,000
Policy Connections West PO Box 5962 Santa Fe, NM 87502	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Southwest Care Center 649 Harkle Road Santa Fe, NM 87505	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	5,000

Name and Address	Donee Relationship	Foundation Status of Recipient	Purpose of Grant	Person or business	Amount
Alzheimer's Association, NM Chapter 9500 Montgomery Blvd NE, Suite 121 Albuquerque, NM 87111	N/A	509(a)(1)	HEALTHCARE	Business	7,800
Amigos del Valle PO box 4057 Fairview, NM 87533	N/A	509(a)(1)	HEALTHCARE	Business	9,360
Boys and Girls Club del Norte PO box 972 Chimayo, NM 87522	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	11,700
Cancer Services of New Mexico PO Box 51735 Albuquerque, NM 87181-1735	N/A	509(a)(1)	HEALTHCARE	Business	11,700
Planned Parenthood of New Mexico 719 San Mateo NE Albuquerque, NM 87108	N/A	509(a)(1)	HEALTHCARE	Business	15,600
El Centro Family Health PO Box 158 Espanola, NM 87532	N/A	509(a)(1)	HEALTHCARE	Business	11,700
Family Strengths Network (FSN) 1990 Diamond Drive Los Alamos, NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	5,343
Sage Cottage School, Inc 142 Meadow Lane Los Alamos, NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	3,900
Los Alamos Family Council 1505 15th Street, Suite C Los Alamos, NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	15,600
Los Alamos First Born Program Los Alamos Medical Center Hospital Auxiliary 3917 West Road Los Alamos, NM 87544	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	15,600
Los Alamos Juvenile Justice Advisory Board PO Box 4716 Los Almos, NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	14,040
New Mexico Suicide Intervention Project PO Box 6004 Santa Fe, NM 87502	N/A	509(a)(1)	HEALTHCARE	Business	11,700
Self Help 2390 North Road Los Alamos NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	15,600
Los Alamos Visiting Nurse Service, Inc 116 Central Park Square Los Alamos , NM 87544	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	8,334
Total				3a $	526,737

Form 990PF, Page 11, Part XV, Line 3b
Recipients Approved for Future Payment

Name and Address	Donee Relationship	Foundation Status of Recipient	Purpose of Grant	Person or business	Amount
Adaptive Ski Program 1595 Comino La Canada Santa Fe, NM 87501	N/A	509(a)(1)	HEALTHCARE	Business	1,950
Alzheimer's Association, New Mexico Chapter 9500 Montgomery Blvd NE, Ste 121 Albuquerque, NM 87777	N/A	509(a)(1)	HEALTHCARE	Business	7,800
Amigos del Valle PO Box 4057 Fairview, NM 87533	N/A	509(a)(1)	HEALTHCARE	Business	5,850
Boys and Girls Club del Norte PO Box 972 Chimayo, NM 87522	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	5,850
Cancer Services of New Mexico PO Box 51735 Albuquerque, NM 87181-1735	N/A	509(a)(1)	HEALTHCARE	Business	5,850
La Clinica del Pueblo de Rio Arriba PO Box 250 Tierra Amarilla, NM 87575	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	4,115
Family Strengths Network (FSN) 1990 Diamond Drive Los Alamos, NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	2,402
Los Alamos Family Council 1505 15th Street, Suite C Los Alamos, NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	3,900
Las Cumbres Community Services 404 Hunter Street Espanola, NM 87532	N/A	509(a)(1)	HEALTHCARE	Business	7,800
Los Alamos Heart Council 1505 15th St , Suite C Los Almos, NM 87544-0479	N/A	509(a)(1)	HEALTHCARE	Business	7,800
New Mexico Suicide Intervention Project PO Box 6004 Santa Fe, NM 87502	N/A	509(a)(1)	HEALTHCARE	Business	5,850
Tewa Women United PO Box 397 Santa Cruz, NM 87567	N/A	509(a)(1)	HEALTHCARE	Business	3,900
University of New Mexico Foundation 700 Lomas Blvd NE, Suite 108 Albuquerque, NM 87131	N/A	509(a)(1)	HEALTHCARE	Business	7,737
Self Help 2390 North Road Los Alamos NM 87544	N/A	509(a)(1)	HEALTHCARE	Business	7,800

Form 990PF, Page 11, Part XV, Line 3b, cont'd
Recipients Approved for Future Payment

Con Alma Health Foundation, 85-0484396

Name and Address	Donee Relationship	Foundation Status of Recipient	Purpose of Grant	Person or business	Amount
African American Health Network New Mexico Conference of Churches PO Box 606 Bernalillo, NM 87004-0606	N/A	509(a)(1)	HEALTHCARE	Business	7,500
Catron County Grassroots Behavioral Health Group PO Box 221 Datil, NM 87821	N/A	509(a)(1)	HEALTHCARE	Business	2,500
Center of Protective Environment 909 South Florisa Ave Alamogordo, NM 88310	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Embrace, Inc PO Box 4425 Roswell, NM 88202	N/A	509(a)(1)	HEALTHCARE	Business	7,500
Farm to Table 618 B Paseo del Peralta Santa Fe, NM 87501	N/A	509(a)(1)	HEALTHCARE	Business	7,500
Five Sandoval Indian Pueblos, Inc 1043 Highway 313 Bernalillo, NM 87004-6912	N/A	509(a)(1)	HEALTHCARE	Business	3,750
Las Cumbres Community Services 404 Hunter Street Espanola, NM 87107	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Move the Mountain Leadership Center, Inc 1908 Tierra Vida Place Albuquerque, NM 87107	N/A	509(a)(1)	HEALTHCARE	Business	3,750
National Vetrans Wellness & Healing Center in Angel Fire PO Box 460 Angel Fire, NM 87710-0805	N/A	509(a)(1)	HEALTHCARE	Business	2,500
New Mexico Alliance for Children PO Box 1729 Alto, NM 88312-1729	N/A	509(a)(1)	HEALTHCARE	Business	5,000
New Mexico Public Health Association PO Box 26433 Albuquerque, NM 87125	N/A	509(a)(2) under 170(b)(1)(A)(vii)	HEALTHCARE	Business	7,500
Senior Citizens' Law Office 4317 Lead Acenue SE, Suite A Albuquerque, NM 87108	N/A	509(a)(1)	HEALTHCARE	Business	5,000
Total				3b $	141,104

Form **8868** (Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ► [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing *(e-file).* You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ► [ ]

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions Con Alma Health Foundation, Inc.	Employer identification number (EIN) or [X] 85-0484396
File by the due date for filing your return See instructions	Number, street, and room or suite number If a P O box, see instructions 144 Park Ave	Social security number (SSN) [ ]
	City, town or post office, state, and ZIP code For a foreign address, see instructions Santa Fe	NM 87501-1833

Enter the Return code for the return that this application is for (file a separate application for each return) 04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Candace Hintenach

Telephone No ► (505) 994-8939 FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ____ If this is for the whole group, check this box ► [ ] . If it is for part of the group, check this box ► [ ] and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for

► [X] calendar year 20 11 or

► [ ] tax year beginning ________, 20 ___, and ending ________, 20 ___

2 If the tax year entered in line 1 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	**3a**	$ 34,738.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	**3b**	$ 25,500.
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	**3c**	$ 9,238.

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