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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its instructions is at *www.irs.gov/form990pf*.

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016

Name of foundation
Paso del Norte Health Foundation

A Employer identification number
74-1143071

Number and street (or P O box number if mail is not delivered to street address) | Room/suite
221 N Kansas St

B Telephone number (see instructions)
(915) 544-7636

City or town, state or province, country, and ZIP or foreign postal code
El Paso, TX 79901

C If exemption application is pending, check here ▶ ☐

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

D 1. Foreign organizations, check here ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

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

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

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)*▶$ 220,848,854

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

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

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

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	40,550			
	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	356,059	356,059		
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	7,111,787			
	b	Gross sales price for all assets on line 6a 67,794,848				
	7	Capital gain net income (from Part IV, line 2)		7,082,346		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	5,114,716	5,072,332	48,869	
	12	**Total.** Add lines 1 through 11	12,623,112	12,510,737	48,869	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	396,601	33,230		401,453
	14	Other employee salaries and wages	813,748		17,772	816,006
	15	Pension plans, employee benefits	325,733	7,203		341,158
	16a	Legal fees (attach schedule)	2,495			2,495
	b	Accounting fees (attach schedule)	39,279	18,840		22,861
	c	Other professional fees (attach schedule)	989,652	453,642		833,446
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	193,664			
	19	Depreciation (attach schedule) and depletion	130,759			
	20	Occupancy	197,521		29,597	182,811
	21	Travel, conferences, and meetings	35,303			35,303
	22	Printing and publications	19,582			19,502
	23	Other expenses (attach schedule)	1,419,703	1,097,321	1,500	225,096
	24	**Total operating and administrative expenses.** Add lines 13 through 23	4,564,040	1,610,236	48,869	2,880,131
	25	Contributions, gifts, grants paid	7,044,780			8,201,245
	26	**Total expenses and disbursements.** Add lines 24 and 25	11,608,820	1,610,236	48,869	11,081,376
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	1,014,292			
	b	**Net investment income** (if negative, enter -0-)		10,900,501		
	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 (a) Book Value	End of year (b) Book Value	(c) Fair Market Value
Assets 1	Cash—non-interest-bearing	97,003	136,583	136,583
2	Savings and temporary cash investments	362,804	1,022,606	1,022,606
3	Accounts receivable ▶ 31,483			
	Less allowance for doubtful accounts ▶	61,823	31,483	31,483
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	27,051	17,226	17,226
10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule)	11,588	18,309	18,309
c	Investments—corporate bonds (attach schedule)	47,827,915		
11	Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)	166,566,480	218,888,168	218,888,168
14	Land, buildings, and equipment basis ▶ 1,334,703			
	Less accumulated depreciation (attach schedule) ▶ 777,845	681,579	556,858	556,858
15	Other assets (describe ▶)	231,931	177,621	177,621
16	**Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	215,868,174	220,848,854	220,848,854
Liabilities 17	Accounts payable and accrued expenses	1,110,008	680,569	
18	Grants payable	10,161,274	7,521,872	
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 ▶)	971,321	1,470,387	
23	**Total liabilities**(add lines 17 through 22)	12,242,603	9,672,828	
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	203,598,321	211,157,026	
25	Temporarily restricted	18,250	10,000	
26	Permanently restricted	9,000	9,000	
	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, bldg , and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds			
30	**Total net assets or fund balances** (see instructions)	203,625,571	211,176,026	
31	**Total liabilities and net assets/fund balances** (see instructions)	215,868,174	220,848,854	

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	203,625,571
2	Enter amount from Part I, line 27a	2	1,014,292
3	Other increases not included in line 2 (itemize) ▶	3	6,536,163
4	Add lines 1, 2, and 3	4	211,176,026
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	211,176,026

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	Publicly-traded Securities			
b	Passthrough - capital gain			
c	Partnership distrib exceeding basis			
d	Less K-1 Cap Gain UBTI reported on 990-T			
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	60,771,267		60,683,061	88,206
b	7,001,422			7,001,422
c	22,159			22,159
d	29,441			-29,441
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				88,206
b				7,001,422
c				22,159
d				-29,441
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	7,082,346
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))
2015	11,341,939	223,495,854	0 05075
2014	10,269,943	228,472,631	0 04495
2013	8,901,914	211,857,056	0 04202
2012	5,527,498	191,861,971	0 02881
2011	6,878,819	190,386,788	0 03613

2	**Total** of line 1, column (d)	2	0 202657
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 040531
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	215,987,294
5	Multiply line 4 by line 3	5	8,754,181
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	109,005
7	Add lines 5 and 6	7	8,863,186
8	Enter qualifying distributions from Part XII, line 4	8	11,087,414

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)**

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	109,005
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	
3	Add lines 1 and 2.			3	109,005
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-			5	109,005
6	Credits/Payments				
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	134,000		
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	134,000
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	24,995
11	Enter the amount of line 10 to be **Credited to 2017 estimated tax** ▶	**Refunded** ▶		11	24,995

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?.	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?.	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ ________ **(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		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?.	4a	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?.	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶TX			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

		Line	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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶www pdnhf org

14 The books are in care of ▶Marcela Garcia VP of Finance Telephone no ▶(915) 544-7636

Located at ▶221 N Kansas St Ste 1900 El Paso TX ZIP+4 ▶79901

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

		Line	Yes	No
16	At any time during calendar year 2016, 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		No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

			Line	Yes	No
1a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☑ Yes ☐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		No
	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 2016?		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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	☐ 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		No
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 2016 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 2016).*		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 2016?		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** No

Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?. ☑ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53 4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. ☐ Yes ☑ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. . . **6b** No

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . **7b** No

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	**(e)** Expense account, other allowances
See Additional Data Table				

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

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
Michael Kelly 221 N Kansas St Ste 1900 El Paso, TX 79901	VP Programs 40 00	138,380	28,405	
Enrique Mata 221 N Kansas St Ste 1900 El Paso, TX 79901	Sr Program Officer 40 00	113,842	25,160	
Sylvia Soto 221 N Kansas St Ste 1900 El Paso, TX 79901	Dir of Operations 40 00	77,573	15,739	
Ida Ortegon 221 N Kansas St Ste 1900 El Paso, TX 79901	Dir Communications 40 00	76,343	18,365	
Juanita Galaviz 221 N Kansas St Ste 1900 El Paso, TX 79901	Program Admin 40 00	72,340	14,648	

Total number of other employees paid over $50,000. ▶ 4

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
AON Hewitt Investment Consulting Inc 39584 Treasury Center Chicago, IL 60601	Investment consult	241,943
Invesco 1555 Peachtree Street NE Suite 1 Atlanta, GA 30309	Investment mgmt	138,895
Healthy Communities Institute PO Box 201322 Dallas, TX 75320	Consulting-Website	122,500
Meadows Mental Health Policy 2800 Swiss Ave Dallas, TX 75204	Consulting-Tech	111,746
TriWest Group 4450 Arapahoe Ave Ste 100 Boulder, CO 80303	Consulting-Evaluat	142,313
Total number of others receiving over $50,000 for professional services. . . . . ▶		6

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 REALIZE is a unique leadership experience to address regional health needs The Executive Program includes assessments, two off-site experiences, executive coaching, and at least five cohort connect learning sessions It was founded on a transformational leadership model and has graduated 60 participants The Board Program includes trainings for nonprofits board members in the Region	185,775
2 The Regional Health Plan Program is a special leadership project to develop a "Regional Strategic Framework " The development and launch of the Healthy Paso del Norte website healthypasodelnorte org is a strategic tool in the development for a Regional Strategic Framework The website provides health, economic, demographic, and other data for organizational strategic planning, goal setting, and proposal writing It also allows easy access to funding opportunities, promising practice programs, and current health events within the region Schools, hospitals, health departments, chambers of commerce, non-profit organizations, and many other groups can use the Healthy Paso del Norte website to investigate and document the health status of the Paso del Norte region	157,055
3 El Paso Behavioral Health Consortium is an initiative working to improve the El Paso community behavioral health system The Consortium's aim is to build ongoing collaboration where all partners are welcome, empowered, and unified to achieve a behavioral health system where people have access to the services they need, where and when they need them The Foundation is a neutral facilitator for the Consortium The Foundation's Senior Program Officer serves as the Executive Director for the Consortium	228,640
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 . . . . ▶	

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	178,815,248
b	Average of monthly cash balances.	1b	527,482
c	Fair market value of all other assets (see instructions).	1c	39,933,711
d	**Total** (add lines 1a, b, and c).	1d	219,276,441
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	
3	Subtract line 2 from line 1d.	3	219,276,441
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	3,289,147
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	215,987,294
6	**Minimum investment return.** Enter 5% of line 5.	6	10,799,365

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	10,799,365
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	109,005		
b	Income tax for 2016 (This does not include the tax from Part VI).	2b			
c	Add lines 2a and 2b.			2c	109,005
3	Distributable amount before adjustments Subtract line 2c from line 1.			3	10,690,360
4	Recoveries of amounts treated as qualifying distributions.			4	572,150
5	Add lines 3 and 4.			5	11,262,510
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	11,262,510

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	11,081,376
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	6,038
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	11,087,414
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	109,005
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4.	6	10,978,409

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				11,262,510
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			10,663,649	
b Total for prior years 20___ , 20___ , 20___				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f **Total** of lines 3a through e.				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ $ 11,087,414				
a Applied to 2015, but not more than line 2a			10,663,649	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				423,765
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016 *(If an amount appears in column (d), the same amount must be shown in column (a))*				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b Taxable amount —see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				10,838,745
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)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .				
9 **Excess distributions carryover to 2017.** Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2012. . . .				
b Excess from 2013. . . .				
c Excess from 2014. . . .				
d Excess from 2015. . . .				
e Excess from 2016. . . .				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2016	**(b)** 2015	**(c)** 2014	**(d)** 2013	
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))

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

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

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

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

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

c Any submission deadlines

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

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 attachment for details State and zipcode entered for efiling purposes, TX 79901	N/A		See attached	8,201,245
Total . . . . ▶ **3a**				8,201,245
b *Approved for future payment*				
See attachment for details State and zipcode entered for efiling purposes, TX 79901	N/A		See attached	8,045,698
Total . . . . ▶ **3b**				8,045,698

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
a Administrative svc fees					17,772
b REALIZE program					1,500
c Rental income					29,597
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .			14	356,059	
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	525990	29,441	18	7,082,346	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a Passthrough K-1 Income	525990	-6,489	14	5,072,332	4
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .		22,952		12,510,737	48,873

13 **Total.** Add line 12, columns (b), (d), and (e). 13 12,582,562

(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)
1a	Represents revenue from providing administrative services to the affiliated organizations of Paso del Norte Health Information Exchange (PdNHIE) and Paso del Norte Charitable Foundation (PDNCF)
1b	The goal of the REALIZE experience is to inspire already effective leaders to become transformational leaders for the benefit of the regions health Customized for the Paso del Norte region and built on nine leadership attributes, REALIZE offers a cohort of twenty executives the opportunity for individualized leadership growth over fifteen months
1c	Income from rental of office space to the affiliated organizations of PdNHIE and PDNCF and the Foundation's conference room to members of the community

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

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

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

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

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

b If "Yes," complete the following schedule

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

Sign Here

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

******	2017-11-09	******	May the IRS discuss this return with the preparer shown below (see instr)? ☑ **Yes** ☐ **No**
Signature of officer or trustee	Date	Title	

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☑	PTIN
Jody Blazek				P00072674
Firm's name ▶ Blazek & Vetterling				Firm's EIN ▶
Firm's address ▶ 2900 Weslayan Suite 200 Houston, TX 770275132				Phone no (713) 439-5739

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-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
Myrna J Deckert 221 N Kansas St Ste 1900 El Paso, TX 79901	CEO (Jan 2016) 40 00	34,129	4,493	739
Tracy J Yellen 221 N Kansas St Ste 1900 El Paso, TX 79901	CEO (Jan-Y/E) 40 00	193,573	21,091	
Jon Law 221 N Kansas St Ste 1900 El Paso, TX 79901	President 40 00	22,899	5,264	
Marcela Garcia 221 N Kansas St Ste 1900 El Paso, TX 79901	VP Finance 40 00	146,000	29,305	
Jose Prieto 221 N Kansas St Ste 1900 El Paso, TX 79901	Board Chair 3 50	0		
Sharon Butterworth 221 N Kansas St Ste 1900 El Paso, TX 79901	Vice Chair 3 50	0		
Alan R Abbott 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Robert B Ash 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Guadalupe Pita de La Vega 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Bruce H Esterline 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Rick Francis 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Allan M Goldfarb 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Ruben Guerra 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Michael Miles 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Marina Monsisvais 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		

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

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
Richard Moore 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Carolyn L Mora 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Hector Retta 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Judy Robison 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Lisa J Saenz 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		
Benjamin Torres-Barron 221 N Kansas St Ste 1900 El Paso, TX 79901	Director 3 50	0		

TY 2016 Accounting Fees Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Audit and tax compliance	39,279	18,840	0	22,861

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Depreciation Schedule

Name: Paso del Norte Health Foundatıon

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Descrıption of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciatıon	Computation Method	Rate / Lıfe (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
Leasehold ımprovements	2001-01-01	963,751	431,419	SL	10 0000	98,885			
Machınery & equipment	2001-01-01	100,491	180,475	SL	5 0000	12,889			
Furnıture & fıxtures	2001-01-01	250,404	128,616	SL	7 0000	18,327			
Software	2001-01-01	20,057	22,672	SL	3 0000	658			

TY 2016 Investments Corporate Stock Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Name of Stock	End of Year Book Value	End of Year Fair Market Value
364 shs Exterran Holdings Inc.	8,699	8,699
728 shs Archrock, Inc.	9,610	9,610

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TY 2016 Investments - Other Schedule

Name: Paso del Norte Health Foundation
EIN: 74-1143071
Software ID: 16000303
Software Version: 2016v3.0

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SSgA U.S. Total Market Index SL CTF	FMV	61,104,928	61,104,928
MSCI Canada Index Non-Lending QP CTF	FMV	3,615,425	3,615,425
SSgA MSCI Canada Small Cap Index SL CTF	FMV	646,703	646,703
SSgA MSCI EAFE Index SL CTF	FMV	36,098,596	36,098,596
MSCI EAFE Small Cap Index Sec. Lending	FMV	5,832,133	5,832,133
MSCI Emerging Markets Small Cap Index NL	FMV	1,819,005	1,819,005
SSgA MSCI Emerging Markets Index SL CTF	FMV	11,661,755	11,661,755
TIFF Realty and Resources Partners I, LL	FMV	142,596	142,596
TIFF Partners III, LLC	FMV	63,119	63,119
RCP Fund VII, LP	FMV	2,298,093	2,298,093
Pantheon Europe Fund IV, LP	FMV	302,732	302,732
Pantheon USA Fund VI, LP	FMV	2,421,307	2,421,307
Pantheon Europe Fund V A, LP	FMV	954,122	954,122
Metropolitan Real Estate Partners VII, L	FMV	959,390	959,390
Oaktree Emerging Markets Equity	FMV	5,168,129	5,168,129
Apollo Credit Opportunity Fund III LP	FMV	3,469,694	3,469,694
Oaktree Senior Loan Fund, LP	FMV	7,735,499	7,735,499
Invesco Core Real Estate-U.S.A. LP	FMV	12,906,577	12,906,577
Commonfund Cap Private Eq Partners VII	FMV	1,969,250	1,969,250
Commonfund Capital Venture Partners VIII	FMV	657,775	657,775
Commonfund Cap Venture Partners IX, LP	FMV	1,604,861	1,604,861
Golub Capital	FMV	5,375,313	5,375,313
Metropolitan Real Estate Secondaries & C	FMV	2,373,114	2,373,114
Quantum Energy Partners VI	FMV	1,466,786	1,466,786
Quantum Parallel Partners VI-C, LP	FMV	177,815	177,815
Amberbrook VII, LP	FMV	836,014	836,014
GSO European Senior Debt Feeder Fund LP	FMV	805,446	805,446
SSgA Mortgage Backed	FMV	15,099,584	15,099,584
SSgA Asset Backed	FMV	1,158,360	1,158,360
SSgA Intermediate US Government Bond	FMV	17,484,780	17,484,780

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SSgA Intermediate US Credit	FMV	11,704,748	11,704,748
Ironsides Partnership Fund	FMV	146,296	146,296
Ironsides Direct	FMV	828,223	828,223

TY 2016 Land, Etc. Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	250,404	146,943	103,461	103,462
Machinery and Equipment	100,491	81,446	19,045	19,045
Improvements	963,751	530,303	433,448	433,447
Miscellaneous	20,057	19,153	904	904

TY 2016 Legal Fees Schedule

Name: Paso del Norte Health Foundation
EIN: 74-1143071
Software ID: 16000303
Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal fees	2,495	0	0	2,495

TY 2016 Other Assets Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Beneficial Interest in Life Ins Policy	161,327	177,621	177,621

TY 2016 Other Expenses Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Advertising	2,540			2,566
Bank charges	4,005			4,005
Dues & subscriptions	33,772	1,500		32,272
Equipment and furnishings	2,742			2,993
Equipment rental	8,887			8,887
Food & beverage	19,020	25		18,460
Foundation relations	8,657			9,836
Income allocable to PDNCF pooled invest	34,542	34,768		
Insurance	24,910			24,910
Maintenance & repairs	79,691			84,557

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Office supplies	20,219			20,362
Parking validation	7,514			7,514
Passthrough K-1 expenses	1,155,261	1,060,758		
Postage	2,077	205		1,350
Staff development	6,486		1,500	4,730
Telephone	9,380	65		2,654

TY 2016 Other Income Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Administrative svc fees	17,772		17,772
Passthrough K-1 Income	5,065,847	5,072,332	
REALIZE program	1,500		1,500
Rental income	29,597		29,597

TY 2016 Other Increases Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Description	Amount
Prior year grants returned	572,150
Rescinded grants	1,514,198
Unrealized appreciation in value of investment	4,449,815

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TY 2016 Other Liabilities Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Description	Beginning of Year - Book Value	End of Year - Book Value
Investments held for affiliate	782,357	1,197,513

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TY 2016 Other Professional Fees Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment management fees	453,642	453,642	0	0
Other professional services	84,889	0	0	75,309
Program consultants	441,583	0	0	748,599
Translation services	9,538	0	0	9,538

TY 2016 Taxes Schedule

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Excise tax on investment income	193,664			

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

2016

Name of the organization	**Employer identification number**
Paso del Norte Health Foundation	74-1143071

Organization type (check one)

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

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

Name of organization
Paso del Norte Health Foundation

Employer identification number
74-1143071

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	Paso del Norte Charitable Fdn 221 N Kansas St Ste 1900 El Paso, TX 79901	$ 10,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
2	City of El Paso 300 North Campbell El Paso, TX 79901	$ 20,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
3	University Medical Center El Paso 4815 Almeda Ave El Paso, TX 79998	$ 5,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization	**Employer identification number**
Paso del Norte Health Foundation	74-1143071

Part II **Noncash Property**

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization
Paso del Norte Health Foundation

Employer identification number
74-1143071

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