OMB No 1545-0052

2015

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 <u>www.irs.gov/form990pf</u>.

Open to Public Inspection

For	caler	ndar year 2015, or tax y	ear beginning 01-0	01-2015	, a	nd ending 1	2-31-2015	
	e of four	ndation orte Health Foundation				A Employer ide	entification numbe	er
1 4	so del IVO	orte riediti i odiladdoli				74-1143071		
		street (or P O box number if mail is i	not delivered to street address) Room/suite		BTelephone num	ber (see instructions	5)
22	1 N Kans	sas St				(915) 544-7636		
	or town, so, TX	state or province, country, and ZIP o 79901	r foreign postal code	_ I		C If exemption a	application is pending	g, check here 🕨
G Ch	neck all	that apply Initial return Final return Address chan	A mended return	former public charit	у	2. Foreign ord test, check	ganizations, check he ganizations meeting here and attach col	the 85%
		pe of organization √ Sectior 4947(a)(1) nonexempt charita	n 501(c)(3) exempt priva ble trust Other taxa		on		ndation status was t 507(b)(1)(A), chec	
of v	ear <i>(fr</i>	et value of all assets at end rom Part II, col (c), \$ 215,868,174	JAccounting method ☐ Other (specify) (Part I, column (d) must	Cash 🗸 Accr	ual		tion is in a 60-month 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in co instructions))	b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment Income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e schedule)	tc , received (attach	106,93	30			
	2	Check ► ☐ If the foundation attach Sch B	is not required to					
	3	Interest on savings and temp Dividends and interest from s	•	1,144,78	39	1,144,789		
	5a	Gross rents						
	ь	Net rental income or (loss) _						
Revenue	6a	Net gain or (loss) from sale o	fassets not on line 10	11,381,34	12			
	ь	Gross sales price for all asse 27,068,231	ts on line 6a					
Œ	7	Capital gain net income (from	Part IV, line 2)			11,332,380		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and						
	ь	allowances Less Cost of goods sold						
	c	Gross profit or (loss) (attach						
	11	Other income (attach schedu	,	4,995,39	94	4,875,783	93,860	
	12	Total.Add lines 1 through 11	•	17,628,45	55	17,352,952	93,860	
	13	Compensation of officers, dire		467,33		, ,	,	460,650
	14	Other employee salaries and	,	782,73	38	56,581	22,932	710,250
ي	15	Pension plans, employee ben	efits	406,21	.3	14,366		359,153
ารย	16a	Legal fees (attach schedule).						
<u>e</u>	b	Accounting fees (attach sche	edule)	40,62	27			34,185
and Administrative Expenses	С	Other professional fees (atta	ch schedule)	1,206,34	18	449,788		628,111
tive	17	Interest						
Ę.	18	Taxes (attach schedule) (see	e instructions)	95) 3	30			
<u>=</u>	19	Depreciation (attach schedul		133,18	32			
Ξ	20	Occupancy		211,54	13		28,217	196,050
ĕ	21	Travel, conferences, and mee		62,94	14			62,260
ä	22	Printing and publications		14,96	54			14,964
<u> </u>	23	Other expenses (attach sche	dule)	1,264,01	.0	865,947		355,374
Operating	24	Total operating and administ	•					
<u>8</u>		Add lines 13 through 23		4,589,93	88	1,386,682	51,149	2,820,997
0	25	Contributions, gifts, grants pa	aid	7,171,60)1			8,661,636
	26	Total expenses and disbursen 25	nents.Add lines 24 and	11,761,53	39	1,386,682	51,149	11,482,633
	27	Subtract line 26 from line 12		11,701,55		1,550,002	31,143	11,402,000
	a	Excess of revenue over exper	nses and disbursements	5,866,91	.6			
	b	Net investment income (if ne				15,966,270		
	c	Adjusted net income(If negat	ıve, enter -0-)				42,711	

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	4.3.5	End of	
	Cash—non-interest-bearing	(a) Book Value 122,04	+	ook Value 97,003	(c) Fair Market Value 97,003
1	-	454,29	+	362,804	362,804
2	Savings and temporary cash investments	434,29	1	302,804	302,804
3	Less allowance for doubtful accounts	185,76	,	61,823	61,823
	· · · · · · · · · · · · · · · · · · ·	183,70	1	01,823	01,823
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				_
ots e cts	Prepaid expenses and deferred charges	27,99	0	27,051	27,051
9 10a	Investments—U S and state government obligations (attach	2,,55	1	27,031	27,031
∢ ™	schedule)				
b	Investments—corporate stock (attach schedule)	24,08	4 % J	11,588	11,588
С	Investments—corporate bonds (attach schedule)	47,677,98	1 🥦	47,827,915	47,827,915
11	Investments—land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)	177,694,18	2 🔧	166,566,480	166,566,480
14	Land, buildings, and equipment basis ►1,332,844				
	Less accumulated depreciation (attach schedule) ▶ 651,265	795,83	+=	681,579	681,579
15	Other assets (describe >)	206,93	4 🕦	231,931	231,931
16	Total assets (to be completed by all filers—see the				
	instructions Also, see page 1, item I)	227,189,11		215,868,174	215,868,174
17	Accounts payable and accrued expenses	832,60	+	1,110,008	
ر 18	Grants payable	11,651,31	0	10,161,274	
Š 19	Deferred revenue				
를 20	Loans from officers, directors, trustees, and other disqualified persons				
음 21	Mortgages and other notes payable (attach schedule)		100.1		
22	Other liabilities (describe	647,52	+=	971,321	
23	Total liabilities(add lines 17 through 22)	13,131,44	3	12,242,603	
S.	Foundations that follow SFAS 117, check here				
24 25 26 26	and complete lines 24 through 26 and lines 30 and 31.	214 022 66		202 500 221	
[24	Unrestricted	214,033,66 15,00		203,598,321 18,250	
සි 25 = 26	Temporarily restricted	9,00		9,000	
[26 도	,	3,00	9	9,000	
	Foundations that do not follow SFAS 117, check here				
20 02	and complete lines 27 through 31.				
Assets 28 29 29	Capital stock, trust principal, or current funds				
S 28 29	Retained earnings, accumulated income, endowment, or other funds				
30 Zet	Total net assets or fund balances(see instructions)	214,057,66	8	203,625,571	
Z 30 31	Total liabilities and net assets/fund balances(see instructions)	227,189,11	+	215,868,174	
Part II		227,103,11	<u> </u>	213,000,174	
	Total net assets or fund balances at beginning of year—Part II, column	2 (2) June 20 (must	aroo		
1	with end-of-year figure reported on prior year's return)	* **	-	. 1	214,057,668
2	Enter amount from Part I, line 27a			. 2	5,866,916
3	Other increases not included in line 2 (itemize)		 •• <u>*</u> _j	3	288,500
4	Add lines 1, 2, and 3			. 4	220,213,084
5	Decreases not included in line 2 (itemize) ▶		 	5	16,587,513
6	Total net assets or fund balances at end of year (line 4 minus line 5)—			. 6	203,625,571
	The state of the s				m 990-PF (2015)

the Part VI instructions

Part IV Capital Gains and Losses for Tax on Investment Income

		: kınd(s) of property sold (e g , re use, or common stock, 200 shs	•	P—Purchase		ate acquired	Date sold (d) (mo , day, yr)
			1120 00 /	(b) D—Donation	(0)	, чау, үг	(u) (mo , du y , y i)
1 a	Publicly-traded securities						
b	Passthrough K-1 Capita			P			
С .	Partnership distrib exce						
d	Equipment no longer bei			P			
е	BlueCrest Capital Manag			Р	20:	11-12-23	2015-07-01
(e	e) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale			or (loss) (f) minus (g)
a	16,570,8	302		13,186,84	5		3,383,957
b	7,452,8	374					7,452,874
С	117,9	980					117,980
d				4	1		-44
e	2,877,6	513		2,500,000			377,613
Со	mplete only for assets show	wing gain in column (h) and owne	d by the foundation	on 12/31/69		Gains (Col	(h) gain minus
(i)	F M V as of 12/31/69	A djusted basis (j) as of 12/31/69		ess of col (ı) col (j), ıf any	(I)		t less than -0-) or from col (h))
а							3,383,957
b							7,452,874
С							117,980
d							-44
e							377,613
	ın Part I, line 8	I, line 8, column (c) (see instru		• • •	3		
Part	V Qualification Und	ler Section 4940(e) for R	educed Tax on	Net Investme	nt In	come	
If section	on $4940(d)(2)$ applies, leave e foundation liable for the se	ate foundations subject to the se ve this part blank ection 4942 tax on the distributa ualify under section 4940(e) Do	able amount of any	year in the base pe		·	├ Yes 🗸 No
1 En	ter the appropriate amount	ın each column for each year, se	ee instructions befo	re making any ent	ries		
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar		((d) Distributio (col (b) divided	n ratio
	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
	2010	6,836,451		174,910,308			0 03909
2 3		<i>.</i> o for the 5-year base period—div	vide the total on line	e 2 by 5, or by	2		0 190994
	•	foundation has been in existence ncharitable-use assets for 2015	•	_	3		0 038199
4			,	_	4		223,495,854
5	' '				5		8,537,318
6		ent income (1% of Part I, line 27	*	<u> </u>	6		159,663
7		uana fram Dark VII. lung 4			7		8,696,981
8	Enter qualifying distribut	ions from Part XII, line 4			8		11.501.602

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

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.

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

. Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

►TX

If "Yes," complete Part XIV

and addresses

8h

9

10

Yes

No

No

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	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 ▶			
B-				
Pal	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		V	
1-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly)		Yes	No
Ia	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	İ	! 	
	a disqualified person? Yes ✓ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	İ		
	(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	İ		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	İ		
	ıf 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)			
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			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes ✓ No	 	 	l I
L	If "Yes," list the years > 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to allyears listed, answer "No" and attach statement—see instructions)	2b		No
С	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015)	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	L	No

orm	990-PF (2										Page (
Pai	rt VII-B	Statements Rega	rdi	ng Activities for	Wh	ich Form 4720	May	Be Required (Cont	inue	d)	
5a	-	year did the foundation		•							
	(1) Carry	on propaganda, or othe	rwise	e attempt to influenc	e leg	ıslatıon (section 49	45(e))? Tes 🔽	No	!!	ļ
		nce the outcome of any		•		, ,		,			
	on, dır	ectly or indirectly, any	vote	r registration drive?.	•		•	· · · · TYes	No	!!	ļ
	(3) Provid	le a grant to an individu	al fo	r travel, study, or otl	nersi	milar purposes?		☐ Yes 🔽	No	!!	ļ
		le a grant to an organiza						∍ed · · · · · · ✓ Yes □			
	(5) Provid	le for any purpose other	thai	n religious, charitabl	e, sc	ientific, literary, or			NO		
		tional purposes, or for t						1 .65 14	No		ļ
b	·	. , ,		•				exceptions described in			
	-			•	-			instructions)?	•	5b	No
	Organizat	ions relying on a curren	t not	tice regarding disast	eras	sistance check her	e		_	1 1	
_	If the ans	wer is "Yes" to question	. 5 - /	(4) does the foundat	ion c	laim exemption from	, tha			1 1	1
٠								· · · · · 🗸 Yes 🗆			
							•	√ Yes	No		ļ I
e-	•	ttach the statement requ		, ,		` ,					
6 a		undation, during the yea I benefit contract?		•	-						
	•							· · · Tyes		 	
b			ır, pa	ay premiums, directi	yorı	ndirectly, on a perso	onal t	penefit contract?	•	6b	No
		6b, file Form 8870		L - 6					_		
	•	ne during the tax year, v				·		1 .65 14	i		ļ
b								he transaction?		7b	No
Pai		Information Abou and Contractors	t Of	ficers, Directors	s, Tr	ustees, Founda	tioi	n Managers, Highly	Paid	Empl	loyees,
1		icers, directors, trustee	s, fo	undation managers a	ınd t	heir compensation (see i	nstructions).			
				Title, and average	(6)	Compensation(If		(d)			
	(a) Nar	ne and address		hours per week		not paid, enter	١ .	Contributions to			e account,
			(b)	devoted to position		-0-)		mployee benefit plans deferred compensation	(e) (Julier ai	llowances
See.	A dditional I	Data Table						·			
			1								
2	Compensat	ion of five highest-paid	em	ployees (other than	those	included on line 1-	-see	instructions). If none, en	ter"N	ONE."	
		(a)		Title, and aver	age			Contributions to	_	_	
Nar		ess of each employee p	aıd	hours per we		(c) Compensation	n	employee benefit plans and deferred		•	e account, Ilowances
	mor	e than \$50,000		(b) devoted to pos	ition			(d) compensation			
1ıch	ael Kelly			VP Programs		131	,865	27,499			
	N Kansas 9 aso,TX 79	St Ste 1900 901		40 00							
nrıc	que Mata			Sr Program Officer		110	,014	25,233			
221	N Kansas S	St Ste 1900		40 00							
ΙPa	aso,TX 79	901									
Sylv	ıa Soto			Dir of Operations		73	,910	19,389			
	N Kansas S aso,TX 79	St Ste 1900 901		40 00							
da	Ortegon			Dir Communication	s	73	,393	20,433			
	N Kansas 9 aso,TX 79	St Ste 1900 901		40 00							
uan	ıta Galavız			Program Admin		70	,233	15,623			
	N Kansas S aso,TX 79	St Ste 1900 901		40 00							
		other employees hald o	wer	\$50.000		<u> </u>		<u> </u>			

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

and Contractors (continued)		
3 Five highest-paid independent contractors for professional se		(-) C
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
AON Hewitt Investment Consulting Inc	Investment consult	148,705
39584 Treasury Center Chicago,IL 60601		
	Investment memt	126 210
State Street	Investment mgmt	126,218
One Lincoln Street 34th Floor Boston, MA 02111		
Gagen MacDonald LLC	Strategic planning	117,100
35 East Wacker Dr Ste 2350 Chicago,IL 60601		
MetWest	Investment mgmt	113,202
865 South Figueroa St Suite 1800 Los Angeles CA, CA 90017		
Invesco	Investment mgmt	126,618
1555 Peachtree St NE Ste 1800 Atlanta, GA 30309		
Total number of others receiving over \$50,000 for professional se	rvices	9
Part IX-A Summary of Direct Charitable Activitie	·	
List the foundation's four largest direct charitable activities during the tax year. In	nclude relevant statistical information such as the number of	Funance
organizations and other beneficiaries served, conferences convened, research pa	pers produced, etc	Expenses
1REALIZE is a unique leadership experience to address region assessments, two off-site experiences, executive coaching, a It was founded on a transformational leadership model and ha for 2015	nd at least five cohort connect learning sessions	280,010
The development and launch of the Healthy Paso del Norte we in the development for a Regional Strategic Framework. The wand other data for organizational strategic planning, goal setti access to funding opportunities, promising practice programs. Schools, hospitals, health departments, chambers of commercing groups can use the Healthy Paso del Norte website to investigation.	ebsite provides health, economic, demographic, ng, and proposal writing It also allows easy , and current health events within the region ce, non-profit organizations, and many other	02.400
del Norte region		83,190
3 El Paso Behavioral Health Consortium is an initiative working health system. The Consortium's aim is to build ongoing colla empowered, and unified to achieve a behavioral health system need, where and when they need them. The Foundation is a ne Foundation's Senior Program Officer serves as the Executive	boration where all partners are welcome, n where people have access to the services they utral facilitator for the Consortium The	71,172
4	Britage for the Gollsortium	, 1,1,2
Part IX-B Summary of Program-Related Investm	lents (see instructions)	
Describe the two largest program-related investments made by the foundation	<u>`</u>	A mount
1	adming the tax year on lines I and I	Amount
<u>*</u>		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
-		

1

3

5

4

5

1

5

Part XI

190.838.993

35,784,165

226,899,344

226,899,344

223,495,854

11,174,793

11,174,793

159,663

122,094

11,015,130

11,137,224

11,137,224

11,482,633

11,501,602

11,341,939

Form **990-PF** (2015)

159,663

18,969

3,403,490

276,186

1a

1h

1c

1d

2 3

4

5

1

2c

3

4

5

6

7

1a

1h

2

За

3b

4

5

159,663

art X	Minimum	Investment	Return

(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		

a Average monthly fair market value of securities.

purposes

Fair market value of all other assets (see instructions). .

Reduction claimed for blockage or other factors reported on lines 1a and

1e

1c (attach detailed explanation).

2

Subtract line 2 from line 1d. . . .

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

2a

2b

Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

check here ► and do not complete this part.)

1 2a Tax on investment income for 2015 from Part VI, line 5.

Add lines 2a and 2b.

Income tax for 2015 (This does not include the tax from Part VI). . . 3 Distributable amount before adjustments Subtract line 2c from line 1. . . .

Recoveries of amounts treated as qualifying distributions. . . .

6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

7

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

Program-related investments—total from Part IX-B. 2 A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Ŀ	Undistributed Income (see instru	ctions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	Сограз	rears prior to 2014	2014	11,137,224
	Undistributed income, if any, as of the end of 2015				,,
	Enter amount for 2014 only			11,028,027	
	Total for prior years 20, 20, 20			· ' '	
	Excess distributions carryover, if any, to 2015				
a					
	From 2011				
	From 2012				
	From 2013				
е	From 2014				
f	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part				
	XII, line 4 > \$11,501,602				
а	Applied to 2014, but not more than line 2a			11,028,027	
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 2015 distributable amount				473,575
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	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)				
4	tax has been previously assessed Subtract line 6c from line 6b Taxable amount				
u	—see instructions				
e	Undistributed income for 2014 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 2015				10,663,649
7	A mounts 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 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
LO	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
	<u> </u>			Form	9 90-PF (2015

or	m 990-PF (2015)					Page 1 (
	Part XIV Private Operating Founda	itions (see instru	uctions and Part	: VII-A, question	9)	
la	If the foundation has received a ruling or dete foundation, and the ruling is effective for 2015			. •		
b	Check box to indicate whether the organization	n is a private opera	tıng foundatıon de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	•	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(5)
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	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					
а	"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					
Pa	art XV Supplementary Information	(Complete this	part only if th	e organization	had \$5,000 o	r more in
	assets at any time during the				. ,	
L a	Information Regarding Foundation Managers: List any managers of the foundation who have before the close of any tax year (but only if the					ation
b	List any managers of the foundation who own 1 ownership of a partnership or other entity) of v		•		large portion of the	?
	ownership of a partitership of other entity) of v	men the loundation	1103 u 10 /0 01 gr	acer merese		
2	Information Regarding Contribution, Grant, G					
	Check here ►	on makes gifts, gran				
a	The name, address, and telephone number or	email address of th	e person to whom	applications shoul	d be addressed	
Ь	The form in which applications should be subr	mitted and informati	on and materials (they should include	:	
c	Any submission deadlines					
d	d Any restrictions or limitations on awards, suc factors	h as by geographic	al areas, charitabl	e fields, kinds of in	stitutions, or other	

Part XV Supplementary Information(continued)

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

			<u> </u>	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	/////odire
a Paid during the year See attachment for details State and zipcode entered for efiling purposes,TX 79901	N/A		See attached	8,661,636
Total			▶ 3a	8,661,636
b Approved for future payment See attachment for details State and zipcode entered for efiling purposes, TX 79901	N/A		See attached	3,988,218
Total			▶ 3b	3,988,218
				Form 990-PF (2015)

Form 990-	PF (2015) I-A Analysis of Income-Produc	ing Activitie	es			Page 12
	s amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
J	n service revenue	(a) Business code	(b)	(c) Exclusion code	(d) A mount	Related or exempt function income (See
a Admini	strative svc fees					instructions) 23,343
	ZE program					42,300
c Rental						28,217
d						
_	and contracts from government agencies					
3 Interes	rship dues and assessments					
4 Divider	nds and interest from securities			14	1,144,789	
	ntal income or (loss) from real estate					
a Debt-	financed property					
	ebt-financed property					
	ntal income or (loss) from personal					
	ty					
	nvestment income					
	r (loss) from sales of assets other than ory	F35000	40.063	10	44 222 200	
	ome or (loss) from special events	525990	48,962	18	11,332,380	
	profit or (loss) from sales of inventory					
	prome or (1033) from sures or inventory					
11 Other r	revenue a Interest from					
	partnership	535000	25.754	14	54,322	
	rough K-1 Income	525990	25,751	. 14	4,821,461	
	al Add columns (b), (d), and (e).		74,713		17,352,952	93,860
	dd line 12, columns (b), (d), and (e)		<u>'</u>		13	
	orksheet in line 13 instructions to verify					
Part XVI	-B Relationship of Activities to					
Line No. ▼	Explain below how each activity for wh the accomplishment of the foundation's instructions)					
1 a	Represents revenue from providing admi Exchange (PdNHIE) and Paso del Norte			ganızatıons Paso d	el Norte Health In	formation
1 b	The goal of the REALIZE experience is t the regions health Customized for the P twenty executives the opportunity for inc	o inspire alread aso del Norte re	y effective leaders	nine leadership att		
1 c	Income from rental of office space to affi				dation's conferenc	e room to
10	members of the community	macca organizat	ions i diffizz diff	and the roun	addion 5 comercine	C 100111 C
-						
-						
	<u> </u>					

Pa	rt XVI	Information R Noncharitable					rans	sactions	and Relationships With			
		rganızatıon dırectly or ı	ndırectly e	ngage i	n any of t	the followi			r organization described in n 527, relating to political		Yes	No
0	rganızat	tions?										
аT	ransfers	s from the reporting fou	ndation to a	a nonch	arıtable e	exempt or	ganız	atıon of				
(1a(1)		No		
_ · ·								1a(2)		No		
		ansactions								41.44		l
_	-			-						1b(1)		No
-	•	hases of assets from a								1b(2)		No
-	-	tal of facilities, equipme	•							1b(3)		No
-	-	nbursement arrangemei 1s or loan guarantees.					• •			1b(4) 1b(5)		No No
-	-	rmance of services or n								1b(6)		No
-	-		·		-					1c		No
d I	f the ans f the goo	swer to any of the above ods, other assets, or se	e is "Yes," ervices give rangement,	comple en by th show ir	te the fol e reporti n column	lowing scl ng founda (d) the va	hedule tion I alue o	e Column (If the founda	(b) should always show the fair mark ation received less than fair mark , other assets, or services receiv	arket va et value		
(a) L	ine No	(b) Amount involved	(c) Name	of noncha	ırıtable exe	empt organiz	zation	(d) Des	scription of transfers, transactions, and sh	arıng arra	ingemer	ıts
d [escrībe∈ √ No	undation directly or indi d in section 501(c) of t complete the following (a) Name of organizatio	he Code (o		n section	•	3)) or	in section!	xempt organizations 527?	·	es	
Sig	the Info		and belief, i	ıt ıs true	e, correct				I gaccompanying schedules and st on of preparer (other than taxpays			
Hei	_ I	*****				2016-						
		Signature of officer or t	trustee			Date						
		Print/Type preparer's Jody Blazek	name	Prepar	er's Sıgn	ature						
Paid Pre Use	parer	Firm's name ► Blazek & Vetterling	I									
Onl		Firm's address ► 2900 Weslayan Suite	200 Hous	 ton, ⊤X	77027	 5132						

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Myrna J Deckert	CEO	183,871	38,338	9,022
221 N Kansas St Ste 1900 El Paso,TX 79901	40 00			
Jon Law	President	139,054	27,357	
221 N Kansas St Ste 1900 El Paso,TX 79901	40 00			
Marcela Garcia	VP of Finance	144,413	24,660	
221 N Kansas St Ste 1900 El Paso,TX 79901	40 00			
Carolyn L Mora	Board Chair	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Jose Pneto	Vice Chair	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Alan R Abbott	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Sandra Sanchez Almanzan	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Robert B Ash	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Sharon Butterworth	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Guadalupe Pita de La Vega	Director 3 50	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 30			
Bruce H Esterline	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Allan M Goldfarb	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Michael Miles	Director 3 50	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Marina Monsisvais	Director 3 50	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Hector Retta	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Judy Robison	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Lisa J Saenz	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			
Benjamin Torres-Barron	Director	0		
221 N Kansas St Ste 1900 El Paso,TX 79901	3 50			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491312004216
TY 2015 Accounting Fees Sche	dule		
Name:	Paso del Norte Hea	ilth Foundation	
EIN:	74-1143071		
Software ID:	15000324		
Software Version:	2015v2.0		

Software Version: 2015v2.0									
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					
Audit and tax compliance	40,627	0	0	34,185					

efile GRAPHIC pr	int - DO N	OT PROCESS	As Filed Data	-				DLN: 934	91312004216
Note: To capture	the full co	ntent of this d	locument, plea	se select landsca	ape mode (11" x 8.5	") when printin	ng.		
TY 2015 Dep	preciatio	n Schedule							
		Name: F	Paso del Norte	Health Foundation	on				
		EIN: 7	74-1143071						
	So	ftware ID: 1	15000324						
	Softwar	e Version: 2	2015v2.0						
Description of	Date	Cost or Other	Prior Years'	Computation Method	Rate /	Current Year's	Net Investment	Adjusted Net	Cost of Goods

Software Version: 2015v2.0										
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included	
Leasehold improvements	2001-01-01	963,751	332,564	SL	10 0000	98,855				
Machinery & equipment	2001-01-01	100,491	168,390	SL	5 0000	12,085				
Furniture & fixtures	2001-01-01	244,366	106,598	SL	7 0000	22,018				
Software	2001-01-01	24,236	22,448	SL	3 0000	224				

DLN: 93491312004216

EIN: 74-1143071

LIV. 74-11430

Software ID: 15000324

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Software Version: 2015v2.0 Name Date How Date Purchaser **Gross Sales** Basis Basis Sales Total Accumulated Sold Price Method Depreciation A cquired A cquired Name Expenses (net) Passthrough K-1 Capital Gain 7,452,874 Cost 7,452,874 Partnership distrib exceeding Purchase 117,980 Cost 117,980 basis Equipment no longer being used Purchase 44 Cost -44 BlueCrest Capital Management 2011-12 Purchase 2015-07 2,877,613 2,500,000 Cost 377,613

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491312004216						
TY 2015 Investments Corporate Bonds Schedule									
Name:	Paso del Norte Health Fo	undation							
EIN:	74-1143071								
Software ID:	15000324								
Software Version:	2015v2.0								
Name of Bon	d .	End of Year Book	End of Year Fair						

PIMCO Moderate Duration Fund

TCW/MetWest Intermediate Duration Fund

Value

23,399,183

Market Value

23,399,183

24,428,732

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491312004216
TY 2015 Investments Corporate	Stock Sched	ule	
Name: Pa	ıso del Norte Hea	lth Foundation	
EIN : 74	l-1143071		
Software ID: 15	5000324		
Software Version: 20)15v2.0		
Name of Stock		End of Year Book Value	End of Year Fair Market Value
28 shs Krispy Kreme Doughnuts		27	71 271

728 shs Exterran Holdings Inc.

27 shs Archrock inc stock

5,842

5,475

TV 2015	Invoctments	_	Othor	Scho	dula

DLN: 93491312004216

Book Value

758,566

1,552,177

5,302,500

657,328

424,582

72,699

147,907

321,028

758,566

1,552,177

5,302,500

657,328

424,582

72,699

147,907

321,028

End of Year Fair Market Value

Commonfund Capital Venture Partners VIII

Commonfund Cap Venture Partners IX, LP

Metropolitan Real Estate Secondaries & C

GSO European Senior Debt Feeder Fund LP

Quantum Energy Partners VI

Quantum Parallel Partners VI-C, LP

Golub Capital

Amberbrook VII, LP

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 15000324 Software Version: 2015v2 0

Software	version:	201502.0
Category/	Item	

	LIMA		Market Value
SSgA U.S. Total Market Index SL CTF	FMV	61,474,382	61,474,382
MSCI Canada Index Non-Lending QP CTF	FMV	3,038,971	3,038,971
SSgA MSCI Canada Small Cap Index SL CTF	FMV	494,814	494,814
SSgA MSCI EAFE Index SL CTF	FMV	37,834,231	37,834,231
MSCI EAFE Small Cap Index Sec. Lending	FMV	5,973,680	5,973,680
MSCI Emerging Markets Small Cap Index NL	FMV	10,559,008	10,559,008
SSgA MSCI Emerging Markets Index SL CTF	FMV	1,745,848	1,745,848
TIFE Pealty and Pecources Partners I II	EM\/	170 336	170 336

Listed at Cost or

SSgA MSCI EAFE Index SL CTF	FMV	37,834,231	37,834,231
MSCI EAFE Small Cap Index Sec. Lending	FMV	5,973,680	5,973,680
MSCI Emerging Markets Small Cap Index NL	FMV	10,559,008	10,559,008
SSgA MSCI Emerging Markets Index SL CTF	FMV	1,745,848	1,745,848
TIFF Realty and Resources Partners I, LL	FMV	170,336	170,336

MSCI EAFE Small Cap Index Sec. Lending	FMV	5,973,680	5,973,680
MSCI Emerging Markets Small Cap Index NL	FMV	10,559,008	10,559,008
SSgA MSCI Emerging Markets Index SL CTF	FMV	1,745,848	1,745,848
TIFF Realty and Resources Partners I, LL	FMV	170,336	170,336
TIFF Partners II, LLC	FMV	12,541	12,541
TIFF Partners III, LLC	FMV	126,276	126,276

TIFF Realty and Resources Partners I, LL	FMV	170,336	170,336
TIFF Partners II, LLC	FMV	12,541	12,541
TIFF Partners III, LLC	FMV	126,276	126,276
RCP Fund VII, LP	FMV	1,757,620	1,757,620
Pantheon Europe Fund IV, LP	FMV	483,230	483,230
Pantheon USA Fund VI, LP	FMV	2,967,954	2,967,954

TIFF Partners III, LLC	FMV	126,276	126,276
RCP Fund VII, LP	FMV	1,757,620	1,757,620
Pantheon Europe Fund IV, LP	FMV	483,230	483,230
Pantheon USA Fund VI, LP	FMV	2,967,954	2,967,954
Pantheon Europe Fund V A, LP	FMV	1,190,494	1,190,494
Metropolitan Real Estate Partners VII, L	FMV	1,291,646	1,291,646

Oaktree Emerging Markets Equity	FMV	4,527,154	4,527,154
Apollo Credit Opportunity Fund III LP	FMV	2,724,128	2,724,128
Oaktree Senior Loan Fund, LP	FMV	6,958,445	6,958,445
Invesco Core Real Estate-U.S.A. LP	FMV	11,945,010	11,945,010

ounded Emerging Flarkets Equity	1114	1,527,151	1,527,13
Apollo Credit Opportunity Fund III LP	FMV	2,724,128	2,724,128
Oaktree Senior Loan Fund, LP	FMV	6,958,445	6,958,445
Invesco Core Real Estate-U.S.A. LP	FMV	11,945,010	11,945,010
Commonfund Cap Private Eq Partners VII	FMV	2,053,925	2,053,925

FMV

FMV

FMV

FMV

FMV

FMV

FMV

FMV

efile GRAPHIC print - DO NOT PRO	CESS As Filed Da	ta -	DLN	93491312004216
TY 2015 Land, Etc. Schedule				
Na	me: Paso del Nort	e Health Foundatı	on	
	EIN: 74-1143071			
Software	ID: 15000324			
Software Vers	sion: 2015v2.0			
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair
		Depreciation		Market Value
Furniture and Fixtures	244,366	128,616	115,750	115,750
Furniture and Fixtures Machinery and Equipment	244,366 100,491		115,750 31,934	
	•	128,616		115,750

TY 2015 Other Assets Schedu	le		
Name:	Paso del Norte Hea	lth Foundation	
EIN:	74-1143071		
Software ID:	15000324		

DLN: 93491312004216

70,604

70,604

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Deferred compensation

Software Version: 2015v2	2.0		
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Beneficial Interest in Life Ins Policy	152,129	161,327	161,327

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491312004216
TY 2015 Other Decreases Sch	edule	
Name:	Paso del Norte Health Foundation	
EIN:	74-1143071	
Software ID:	15000324	
Software Version:	2015v2.0	
De	scription	Amount
Unrealized decline in value of investme	nts	16,587,513

7,056

9,696

TY 2015 Other Expenses Schedule

Staff development

Telephone

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 15000324

Software Version: 2015v2.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Advertising	2,622			2,596
Bank charges	3,018			3,018
Dues and memberships	31,766	1,500		30,352
Equipment and furnishings	3,956			3,667
Facility and equipment rentals	9,371			9,371
Food & beverage	25,644			24,171
Foundation relations	128,197			127,038
Inc alloc to PdNF - pooled invest	26,449	26,354		
Insurance	23,736	66		23,736
Maintenance & repairs	94,012			89,195
Office supplies	13,752			13,456
Parking validation	9,822			9,822
Passthrough K-1 expenses	871,461	837,845		
Postage	2,338	138		2,200

8,227

9,639

44

EIN: 74-1143071

Software ID: 15000324

Software Version: 2015v2.0

REALIZE program

Rental income

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Administrative svc fees	23,343		23,343
Interest from partnership	54,322	54,322	
Passthrough K-1 Income	4,847,212	4,821,461	

42,300

28,217

DLN: 93491312004216

42,300

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491312004216
TY 2015 Other Increases Sche	dule	
Name:	Paso del Norte Health Foundati	on
EIN:	74-1143071	
Software ID:	15000324	
Software Version:	2015v2.0	
Des	scription	Amount
Change in deferred tax liability		166,406
Returned grants		122,094

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491312004216
TY 2015 Other Liabilities Schee	dule		
Name:	Paso del Norte Health	Foundation	
EIN:	74-1143071		
Software ID:	15000324		
Software Version:	2015v2.0		
Description		Beginning of Year - Book Value	End of Year - Book Value
Investments held for affiliate		128,703	782,357

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491312004216
TY 2015 Other Professional Fed	es Schedule	

60,005

689,800

6,755

Name: Paso del Norte Health Foundation

EIN: 74-1143071

Software ID: 15000324

Software Version: 2015v2.0

Other professional services

Program consultants

Translation services

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment management fees	449,788	449,788	0	0

60,005

561,351

efile GRAPHIC print - DO NO	OT PROCESS	As File	ed Data -		DL	N: 93491312004216
TY 2015 Taxes Schee	dule					
	Name: F	^p aso del	l Norte Hea	ilth Found	dation	
		74-1143		ancin i odin		
So	ftware ID: 1	1500032	<u>'</u> 4			
Software	e Version: 2	2015v2.	0			
Category	Amoun	nt	Net Inve Inco		Adjusted Net Income	Disbursements for Charitable Purposes

30

Tax penalties

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491312004216
Schedule B		Schedu	lle of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	▶ Information ab	out Schedule B (Fo	Form 990, 990-EZ, or 990-PF orm 990, 990-EZ, or 990-PF) an o <u>w irs gov/form990</u>	nd its instructions is at	2015
Name of the organizati Paso del Norte Health I				Employe	er identification number
— — — — — — — — — — — — — — — — — — —	-oulidation			74-114	3071
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)(_)	(enter number) org	anızatıon		
	☐ 4947(a)(1)	nonexempt charita	able trust not treated as a priv	ate foundation	
	527 politica	al organization			
Form 990-PF	√ 501(c)(3)	exempt private fou	ndation		
	4947(a)(1)	nonexempt charit	able trust treated as a private f	oundation	
	501(c)(3)	taxable prıvate fou	ndation		
	_		hat received, during the year, one is I and II See instructions for o	_	
under sections t received from a	509(a)(1) and 170(b)(1	l)(A)(vı), that chec ring the year, total (Form 990 or 990-EZ that met the ked Schedule A (Form 990 or 9 contributions of the greater of (s I and II	990-EZ), Part II, line 13,	16a, or 16b, and that
during the year,		nore than \$1,000 e	r (10) filing Form 990 or 990-Ez x <i>clusively</i> for religious, charita lete Parts I, II, and III		•
during the year, this box is check purpose Do not	contributions exclusive ked, enter here the total complete any of the p	rely for religious, chall contributions that arts unless the Ge	r (10) filing Form 990 or 990-Eznaritable, etc., purposes, but not twere received during the yeaneral Rule applies to this organere during the year	o such contributions tot ar for an <i>exclusively</i> rel anization because it rec	aled more than \$1,000 if ligious, charitable, etc , eived nonexclusively
990-EZ, or 990-PF), but	ıt must answer "No"	on Part IV, line 2, o	e and/or the Special Rules does fits Form 990, or check the boo oes not meet the filing requiren	x on line H of its	

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 spa	ice is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person √
·	Tenet Healthcare Corp PO Box 130300	_	Payroll
		\$ 55,080	│ │ Noncash ┌─
	Dallas, TX753130300		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2			Person
	Paso del Norte Foundation 221 N Kansas St Ste 1900	\$ 10,000	Payroll
	El Paso, TX79901	- 410,000	Noncash
	L17 d30, 1 x / 9 9 0 1		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3			Person 🗸
	Texas Tech Univ Health Science		Payroll —
	3601 4th Street/MS 6271	\$ 10,000	
	Lubbock, TX79430		Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4			Person 🗸
	City of El Paso		Payroll
	300 North Campbell	\$ 20,000	
	El Paso, TX79901	1	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		\$	Payroll
			Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll —
		\$	'
		1	Noncash
			(Complete Part II for noncash contributions)

Employer identification number

Property ns) Use duplicate copies of Part II if additional space is needed (b) ption of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b)	FMV (or estimate)	
(b) otion of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	5	
	FMV (or estimate) (see instructions)	(d) Date received
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(b) otion of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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Schedule B (Form 990, 990-EZ, or 990-PF) (2015)