** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

A For the 2025 calendar year, or tax year beginning **and ending**

B Check if applicable: Address change; Name change; Initial return; Final return/ termin-ated; Amended return; Applica-tion pending

C Name of organization
Paso del Norte Community Foundation
Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 221 N. Kansas St
Room/suite 1900

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

F Name and address of principal officer: Tracy Yellen
same as C above

D Employer identification number 46-1997449

E Telephone number 915-544-7636

G Gross receipts $ 31,585,610.

H(a) Is this a group return for subordinates? Yes [X] No

H(b) Are all subordinates included? Yes No
If "No," attach a list. See instructions

H(c) Group exemption number

I Tax-exempt status: [X] 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527

J Website: www.pdnfoundation.org

K Form of organization: [X] Corporation Trust Association Other

L Year of formation: 2013 **M** State of legal domicile: TX

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: See Schedule O

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	10
6	Total number of volunteers (estimate if necessary)	6	68
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	3,814.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	2,533.

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	13,487,918.	28,923,061.
9	Program service revenue (Part VIII, line 2g)	1,687.	1,292.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,834,586.	2,643,902.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-5,307.	-40,444.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,318,884.	31,527,811.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,243,644.	20,690,910.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	615,661.	699,758.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) 63,385.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	408,633.	5,167,144.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	19,267,938.	26,557,812.
19	Revenue less expenses. Subtract line 18 from line 12	-3,949,054.	4,969,999.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	34,023,018.	37,771,021.
21	Total liabilities (Part X, line 26)	7,577,531.	6,384,762.
22	Net assets or fund balances. Subtract line 21 from line 20	26,445,487.	31,386,259.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here

Electronically Filed
Signature of officer Date

Tracy Yellen, Chief Executive Officer
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
Kurt Coburn	Kurt Coburn	11/11/26		P01638285

Firm's name Blazek & Vetterling
Firm's EIN 76-0269860

Firm's address 2900 Weslayan, Suite 200
Houston, TX 77027
Phone no. 713-439-5739

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:
PdNCF supports the philanthropic goals of individuals, families, corporations, foundations and nonprofit organizations to improve education, health, social services, economic development, and quality of life in the Paso del Norte region.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 20,088,482. including grants of $ 15,467,073.) (Revenue $ 1,292.)
The Foundation facilitates giving and grantmaking for a wide-range of charitable causes, working with individuals, corporations, foundations and nonprofit organizations through Donor-Advised and Agency/Designated Funds. Our Health Funds further the impact of the Foundation and nonprofit organizations working to improve health in the region.

4b (Code:) (Expenses $ 2,561,800. including grants of $ 2,421,642.) (Revenue $)
The Foundation supports the nonprofit sector through several meaningful programs such as El Paso Giving Day, an online day of giving intended to inspire a culture of giving and to engage new and younger donors; the Nonprofit Conference, a program designed to foster professional development and networking among nonprofit sector leaders; an Internship Program structured to provide paid college-level interns to nonprofits at no cost; and educational courses to grow targeted skill sets among nonprofit leaders.

4c (Code:) (Expenses $ 3,307,206. including grants of $ 2,802,195.) (Revenue $)
The Foundation supports charitable projects in partnership with fund partners to improve the quality of life in the region and also responds to immediate community needs such as natural disasters, coats for needy children, supporting community response and resilience.

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses 25,957,488.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	X	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	175		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	**2b**	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	**3b**	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**		X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		X
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		X
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.	**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	**15**		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	**17**		

Part VI Governance, Management, and Disclosure. *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI X

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	18		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed None

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

Marcela Garcia - 915-544-7636

221 N. Kansas St, Ste 1900, El Paso, TX 79901

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Tracy Yellen	15.00									
Chief Executive Director	25.50			X				0.	271,626.	52,441.
(2) Marcela Garcia	20.00									
VP of Finance	20.50			X				0.	186,811.	38,128.
(3) Mimi Short	40.00									
VP of Development	0.00			X				152,987.	0.	18,857.
(4) Jana L. Renner	0.40									
Senior Program Officer	39.60					X		0.	101,777.	22,998.
(5) Diana Rodriguez	17.20									
Board Secretary	22.80			X				0.	61,039.	18,124.
(6) Ernesto Avila	1.00									
Chair	0.00	X		X				0.	0.	0.
(7) Linda Troncoso	1.00									
Vice Chair	0.00	X		X				0.	0.	0.
(8) L. Federick Francis	1.00									
Immediate Past Chair	0.00	X		X				0.	0.	0.
(9) Estuardo Alvelais	1.00									
Board Member	1.00	X						0.	0.	0.
(10) Perry Barber	1.00									
Board Member	1.00	X						0.	0.	0.
(11) Lisa Budtke	1.00									
Board Member	1.00	X						0.	0.	0.
(12) Richard Castro	1.00									
Board Member	0.00	X						0.	0.	0.
(13) Ruben Chavez	1.00									
Board Member	0.00	X						0.	0.	0.
(14) Julio Chiu (thru. 6/25)	1.00									
Board Member	0.00	X						0.	0.	0.
(15) Jacobo Chiu (from 6/25)	1.00									
Board Member	0.00	X						0.	0.	0.
(16) Leonard Goodman III	1.00									
Board Member	1.00	X						0.	0.	0.
(17) Will Harvey	1.00									
Board Member	1.00	X						0.	0.	0.

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Shea Herman	1.00									
Board Member	1.00	X						0.	0.	0.
(19) Josh Hunt	1.00									
Board Member	0.00	X						0.	0.	0.
(20) Richard Moore	1.00									
Board Member	1.00	X						0.	0.	0.
(21) Caroline North	1.00									
Board Member	0.00	X						0.	0.	0.
(22) Lisa Peisen	1.00									
Board Member	0.00	X						0.	0.	0.
(23) Judy Robison	1.00									
Board Member	0.00	X						0.	0.	0.
(24) Patty Russell	1.00									
Board Member	0.00	X						0.	0.	0.
1b Subtotal								152,987.	621,253.	150,548.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								152,987.	621,253.	150,548.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 1

		Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Jordan Foster Construction, LLC 7700 CF Jordan Dr, El Paso, TX 79912	Construction	670,726.
Leo Villareal Studio Inc, 4014 1st Ave Ste 603 #27, Brooklyn, NY 11232	Art exhibition svcs	370,396.
Ellen F. Ordaz dba EFO LLC 6006 N. Mesa, Ste 903, El Paso, TX 79912	Media/marketing & design svcs	132,349.
Pedro Arturo Ramirez Veliz, Chontalpa #1588, Ciudad Jurez, Chihuahua, MEXICO	Construction	108,275.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 4

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	21,146.				
	d Related organizations	1d	527,000.				
	e Government grants (contributions)	1e	575,038.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	27,799,877.				
	g Noncash contributions included in lines 1a-1f	1g	$ 10,818,820.				
	h **Total.** Add lines 1a-1f			28,923,061.			
Program Service Revenue			**Business Code**				
	2a Support fees		900099	1,292.	1,292.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f			1,292.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			362,655.		-8,084.	370,739.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real / (ii) Personal				
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	7a	2,281,247.				
	b Less: cost or other basis and sales expenses	7b	0.				
	c Gain or (loss)	7c	2,281,247.				
	d Net gain or (loss)			2,281,247.		11,898.	2269349.
	8a Gross income from fundraising events (not including $ 21,146. of contributions reported on line 1c). See Part IV, line 18	8a	17,355.				
	b Less: direct expenses	8b	57,799.				
	c Net income or (loss) from fundraising events			-40,444.			-40,444.
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			**Business Code**				
	11a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d						
	12 **Total revenue.** See instructions			31,527,811.	1,292.	3,814.	2599644.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	18,561,142.	18,561,142.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	634,768.	634,768.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,495,000.	1,495,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	171,845.	101,388.	56,709.	13,748.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	389,065.	114,542.	241,271.	33,252.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	28,185.	6,000.	20,210.	1,975.
9 Other employee benefits	69,796.	11,519.	47,333.	10,944.
10 Payroll taxes	40,867.	15,609.	21,866.	3,392.
11 Fees for services (nonemployees):				
a Management				
b Legal	8,568.		8,568.	
c Accounting	6,665.		6,665.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	11,754.		11,754.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	13,300.		13,300.	
12 Advertising and promotion	32,189.	10,944.	21,245.	
13 Office expenses	22,227.	5,338.	16,815.	74.
14 Information technology	65,862.	21,355.	44,507.	
15 Royalties				
16 Occupancy				
17 Travel	12,013.	4,306.	7,707.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	8,044.	2,735.	5,309.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,334.	1,169.	2,165.	
23 Insurance	2,465.	838.	1,627.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Agency fund expenses	4,965,741.	4,965,741.		
b Community relations	10,185.	3,463.	6,722.	
c Dues & memberships	4,797.	1,631.	3,166.	
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	26,557,812.	25,957,488.	536,939.	63,385.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	3,667,164.	1	6,734,031.
	2	Savings and temporary cash investments	3,250,405.	2	3,207,451.
	3	Pledges and grants receivable, net	8,030,152.	3	6,428,041.
	4	Accounts receivable, net	58,075.	4	126,606.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	53,669.	9	195,389.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 100,821.			
	b	Less: accumulated depreciation — 10b: 66,907.	2,529,529.	10c	33,914.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	16,434,024.	12	20,810,219.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	0.	15	235,370.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	34,023,018.	16	37,771,021.
Liabilities	17	Accounts payable and accrued expenses	192,361.	17	225,937.
	18	Grants payable	7,379,491.	18	6,158,825.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5,679.	25	0.
	26	**Total liabilities.** Add lines 17 through 25	7,577,531.	26	6,384,762.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	12,639,936.	27	21,672,353.
	28	Net assets with donor restrictions	13,805,551.	28	9,713,906.
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	26,445,487.	32	31,386,259.
	33	Total liabilities and net assets/fund balances	34,023,018.	33	37,771,021.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	31,527,811.
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,557,812.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,969,999.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	26,445,487.
5	Net unrealized gains (losses) on investments	5	-29,227.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	31,386,259.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

Name of the organization
Paso del Norte Community Foundation

Employer identification number
46-1997449

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	29598058.	24311203.	20899267.	13487918.	28923061.	117219507
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	29598058.	24311203.	20899267.	13487918.	28923061.	117219507
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						25253451.
6 **Public support.** Subtract line 5 from line 4.						91966056.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
7 Amounts from line 4	29598058.	24311203.	20899267.	13487918.	28923061.	117219507
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	142,391.	294,969.	560,472.	768,736.	362,655.	2129223.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		3,655.	131,225.	30,779.	2,533.	168,192.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						119516922

12 Gross receipts from related activities, etc. (see instructions) 12 23,957.

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2025 (line 6, column (f), divided by line 11, column (f)) 14 76.95 %

15 Public support percentage from 2024 Schedule A, Part II, line 14 15 80.54 %

16a **33 1/3% support test - 2025.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support test - 2024.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% -facts-and-circumstances test - 2025.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10% -facts-and-circumstances test - 2024.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2025 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2024 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2025** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2024** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2025.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2024.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

- **a** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental supported organization. *Describe in* **Part VI** *how you supported a governmental supported organization (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a, 3b, and 3c below.**			
a	Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? *If "Yes," provide details in* **Part VI.**	**3a**		
b	Did the organization direct the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	**3b**		
c	Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in* **Part VI.**	**3c**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3.	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	**5**	
6 **Total annual distributions.** Add lines 1 through 5.	**6**	
7 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	**7**	
8 Distributable amount for 2025 from Section C, line 6	**8**	
9 Line 7 amount divided by line 8 amount	**9**	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2025**	**(iii) Distributable Amount for 2025**
1 Distributable amount for 2025 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2025 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2025			
a From 2020			
b From 2021			
c From 2022			
d From 2023			
e From 2024			
f **Total** of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2025 distributable amount			
i Carryover from 2020 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2025 from Section D, line 6: $			
a Applied to underdistributions of prior years			
b Applied to 2025 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2026.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2021			
b Excess from 2022			
c Excess from 2023			
d Excess from 2024			
e Excess from 2025			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

** PUBLIC DISCLOSURE COPY **

Schedule B (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] 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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization: Paso del Norte Community Foundation

Employer identification number: 46-1997449

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		$ 914,550.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 732,807.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 1,500,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 14,000,270.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
5		$ 1,726,892.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6		$ 1,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

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
7		$ 627,791.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8		$ 700,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

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
4	Publicly traded securities	$ 10,312,504.	11/15/25
		$	
		$	
		$	
		$	
		$	
		$	

Name of organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

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 info. once.) $

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

SCHEDULE D
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Paso del Norte Community Foundation

Employer identification number
46-1997449

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	65	323
2	Aggregate value of contributions to (during year)	18,629,927.	13,214,139.
3	Aggregate value of grants from (during year)	14,206,691.	24,718,251.
4	Aggregate value at end of year	21,706,486.	9,679,773.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] Yes [ ] No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- [ ] Preservation of land for public use (for example, recreation or education)
- [ ] Preservation of a historically important land area
- [ ] Protection of natural habitat
- [ ] Preservation of a certified historic structure
- [ ] Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a	Total number of conservation easements 2a	
b	Total acreage restricted by conservation easements 2b	
c	Number of conservation easements on a certified historic structure included on line 2a 2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 $ _____

(ii) Assets included in Form 990, Part X $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 $ _____

b Assets included in Form 990, Part X $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,705,429.	2,702,560.	1,152,478.		
b Contributions	32,014.		1,500,000.	1,278,955.	
c Net investment earnings, gains, and losses	241,663.	129,827.	107,706.	-55,386.	
d Grants or scholarships	69,946.	62,126.	57,624.	71,091.	
e Other expenditures for facilities and programs					
f Administrative expenses		64,832.			
g End of year balance	2,909,160.	2,705,429.	2,702,560.	1,152,478.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %
b Permanent endowment 84.8100 %
c Term endowment 15.1900 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations? 3a(i)		X
(ii) Related organizations? 3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		28,942.	22,778.	6,164.
e Other		71,879.	44,129.	27,750.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				33,914.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) Investments pooled with		
(B) PDNHF	20,810,219.	End-of-Year Market Value
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	20,810,219.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	31,495,891.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-29,228.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	9,062.		
e	Add lines 2a through 2d			2e	-20,166.
3	Subtract line 2e from line 1			3	31,516,057.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	11,754.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	11,754.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	31,527,811.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	26,546,058.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	26,546,058.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	11,754.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	11,754.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	26,557,812.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, line 4:
The Foundation's endowment includes four individual funds that were established with donor-restricted contributions to support quality of life in the Paso del Norte region. The Endowment is subject to the Texas Uniform Prudent Management of Institutional Funds Act (TUPMIFA), which provides guidelines for prudent spending in the absence of explicit donor stipulations. This fund is being administered in accordance with explicit donor stipulations.

Part XI, Line 2d - Other Adjustments:
El Paso Opera Foundation revenue 9,062.

Part XIII Supplemental Information *(continued)*

SCHEDULE F (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] **Yes** [ ] **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
North America - Canada and Mexico, but not the United States	0	0	Grantmaking		1,495,000.
3 a Subtotal	0	0			1,495,000.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			1,495,000.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule F (Form 990) (Rev. 12-2024)**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America - Canada and Mexico, but not the United States	Agency Grant	1495000.	Wire	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3

3 Enter total number of other organizations or entities 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)*	☐ Yes	☒ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)*	☐ Yes	☒ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)*	☐ Yes	☒ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)*	☐ Yes	☒ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)*	☐ Yes	☒ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)*	☐ Yes	☒ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, Line 2:
The Foundation receives a written report from grantees in Mexico and makes site visits to follow-up on grant-funded programs.

Part I, line 3:
The Foundation follows the accrual accounting method.

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of nongovernment grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 Reimagine! (event type)	(b) Event #2 (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	38,501.			38,501.
	2 Less: Contributions	21,146.			21,146.
	3 Gross income (line 1 minus line 2)	17,355.			17,355.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	6,996.			6,996.
	7 Food and beverages	17,356.			17,356.
	8 Entertainment				
	9 Other direct expenses	33,447.			33,447.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				57,799.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-40,444.

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization $ _____ and the amount of gaming revenue retained by the third party $ _____

c If "Yes," enter the name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation $ _____

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Paso del Norte Community Foundation

Employer identification number
46-1997449

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Downtown Deck Plaza Foundation 221 N Kansas St, Ste 1900 El Paso, TX 79901	99-5013536	501(c)(3)	315,000.	0.			Grant
Loretto Academy in El Paso 1300 Hardaway St El Paso, TX 79903	74-1282698	501(c)(3)	221,250.	0.			Grant/Donor Advised Grant
Texas Tech Foundation Inc. 5001 El Paso Dr, Mail Stop 51019 El Paso, TX 79905	75-6043842	501(c)(3)	12,280,250.	0.			Grant/Donor Advised Grant
The EPC Museum PO Box 272 El Paso, TX 79943	81-1822589	501(c)(3)	239,944.	0.			Grant/Donor Advised Grant
El Paso Children's Hospital Foundation - 303 N Oregon, Ste 1200 - El Paso, TX 79901	81-2298318	501(c)(3)	35,429.	0.			Grant/Donor Advised Grant
Ballroom Cultural Arts Foundation PO Box 1661 Marfa, TX 79843	20-0126402	501(c)(3)	25,000.	0.			Donor Advised Grant

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 141.

3 Enter total number of other organizations listed in the line 1 table ..... 1.

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Congregation Bnai Zion 805 Cherry Hill Ln El Paso, TX 79912	74-1143021	501(c)(3)	55,000.	0.			Donor Advised Grant
Buckner International 12377 Merit Dr Ste Dallas, TX 75251	75-0891443	501(c)(3)	10,000.	0.			Donor Advised Grant
Chabad Lubavitch of El Paso 6516 Escondido Dr El Paso, TX 79912	74-2934744	501(c)(3)	25,000.	0.			Donor Advised Grant
Children's Grief Center of El Paso 2616 Montana Ave El Paso, TX 79903	74-2770329	501(c)(3)	5,500.	0.			Donor Advised Grant
Church of Christ PO Box 1332 Pecos, TX 79772	74-6013805	501(c)(3)	50,000.	0.			Donor Advised Grant
Dell Childrens Foundation 1345 Philomena St Austin, TX 78723	20-0468031	501(c)(3)	50,000.	0.			Donor Advised Grant
El Pasoans Fighting Hunger Food Bank - 9451 Plaza Cir - El Paso, TX 79927	45-2893839	501(c)(3)	18,000.	0.			Donor Advised Grant
God of Hope, Inc PO Box 372 Winona Lake , IN 46590	32-0307921	501(c)(3)	10,000.	0.			Donor Advised Grant
Holocaust Museum Houston 5401 Caroline St Houston, TX 79902	76-0331398	501(c)(3)	10,000.	0.			Donor Advised Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jewish National Fund 78 Randell Ave Rockville Center, NY 11570	13-1659627	501(c)(3)	50,000.	0.			Donor Advised Grant
Junior League of El Paso, Inc. 6100 Dew Dr El Paso, TX 79912	74-1469506	501(c)(3)	107,892.	0.			Donor Advised Grant
Lee & Beulah Moore Childrens Home 1100 Cliff St El Paso, TX 79922	74-1329373	501(c)(3)	8,500.	0.			Donor Advised Grant
Make a Wish Foundation of North Texas - 5430 LBJ Fwy, Ste 260 - Dallas, TX 75240	75-1889666	501(c)(3)	52,500.	0.			Donor Advised Grant
Mount Sinai Congregation dba Temple Mount Sinai - 4408 North Stanton St - El Paso, TX 79902	74-1152583	501(c)(3)	6,800.	0.			Donor Advised Grant
Mustard Seed Cafe 201 E Sunset Rd El Paso, TX 79922	45-3982247	501(c)(3)	12,000.	0.			Donor Advised Grant
Northwest Church of Christ 6059 Azle Ave Fort Worth, TX 76135	75-1338531	501(c)(3)	25,000.	0.			Donor Advised Grant
Paso del Norte Children's Development Center - 1101 E Schuster Ave - El Paso, TX 79902	74-1312313	501(c)(3)	6,000.	0.			Donor Advised Grant
Proyecto Santo Nio 260 Sombra Verde Anthony, NM 88021	87-1287947	501(c)(3)	10,000.	0.			Donor Advised Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ronald McDonald House Charities of El Paso - 300 E California Ave - El Paso, TX 79902	74-2257357	501(c)(3)	16,500.	0.			Donor Advised Grant
St. Frances Xavier Cabrini Catholic Church - 12200 Vista Del Sol - El Paso, TX 79936	74-6000751	501(c)(3)	13,500.	0.			Donor Advised Grant
Texas Cultural Trust Councils 901 Mopac Expy Austin, TX 78746	74-2778878	501(c)(3)	13,500.	0.			Donor Advised Grant
The Warm Place 809 Lipscomb St Fort Worth, TX 76104	75-2220859	501(c)(3)	10,000.	0.			Donor Advised Grant
YWCA El Paso del Norte Region 1600 Brown St El Paso, TX 79902	74-1109650	501(c)(3)	12,600.	0.			Donor Advised Grant
University of Texas at El Paso 500 W University Ave El Paso, TX 79968	74-6000813	Govt	4,426,250.	0.			Donor Advised Grant/Agency Grant
El Paso Pro Musica Foundation PO Box 13328 El Paso, TX 79913	23-8382605	501(c)(3)	46,000.	0.			Donor Advised Grant/Agency Grant
Boys & Girls Club of El Paso 801 S Florence El Paso, TX 79901	74-1145974	501(c)(3)	262,000.	0.			Donor Advised Grant/Agency Grant
FEMAP Foundation 1400 Hardaway, Ste 210 El Paso, TX 79903	74-2646952	501(c)(3)	109,000.	0.			Donor Advised Grant/Agency Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
El Paso Child Guidance Center 2701 E Yandell El Paso, TX 79903	74-1204335	501(c)(3)	115,000.	0.			Agency Grant
Amigo Airsho Inc 2000 Wyoming Ave El Paso, TX 79903	74-2158817	501(c)(3)	320,000.	0.			Agency Grant
Amor por Juarez 333 N Oregon St, 2nd Floor El Paso, TX 79901	74-1839536	501(c)(3)	10,299.	0.			Agency Grant
Braden Aboud Memorial Foundation 5024 Doniphan, Unit 2 El Paso, TX 79932	20-8743683	501(c)(3)	8,000.	0.			Agency Grant
CASA of El Paso, Inc. 221 N Kansas St, Ste 1501 El Paso, TX 79901	74-1950407	501(c)(3)	50,000.	0.			Agency Grant
Creative Kids 504 San Francisco Ave El Paso, TX 79901	74-2910251	501(c)(3)	13,500.	0.			Agency Grant
El Paso Center for Children 2200 N Stevens El Paso, TX 79930	74-1695944	501(c)(3)	20,000.	0.			Agency Grant
El Paso Independent School District - 1014 N Stanton St - El Paso, TX 79902	74-6000769	Govt	14,687.	0.			Agency Grant
Emergence Health Network 201 E Main St, Ste 600 El Paso, TX 79901	74-1596159	501(c)(3)	9,915.	0.			Agency Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kiwanis Clubs of El Paso Charitable Foundation - 5169 Del Valle PL - El Paso, TX 79932	26-3649296	501(c)(3)	22,200.	0.			Agency Grant
North American Development Bank 203 South St Marys, Ste 300 San Antonio, TX 78205	74-2728255	n/a	48,769.	0.			Agency Grant
St. Matthew Parish School 400 W Sunset El Paso, TX 79912	74-2964595	501(c)(3)	8,000.	0.			Agency Grant
Workforce Solutions Borderplex, Inc. - 304 Texas, Ste 1400 - El Paso, TX 79901	74-2911834	501(c)(3)	10,000.	0.			Agency Grant
El Paso Museum of Art Foundation 1 Arts Festival Plaza El Paso, TX 79901	74-2889827	501(c)(3)	2,802,195.	0.			Agency Grant
2nd Chance 4 Kids, Inc. 4760 Preston Rd, Ste 244-266 Frisco, TX 75034	46-3201571	501(c)(3)	10,087.	0.			El Paso Giving Day Grant
915 Tree Keeper 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	10,095.	0.			El Paso Giving Day Grant
Abara 1228 Wyoming Ave El Paso, TX 79902	84-3036435	501(c)(3)	16,314.	0.			El Paso Giving Day Grant
ACTion Programs for Animals 537 N Solano Dr Las Cruces, NM 88001	27-0234541	501(c)(3)	5,907.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Amor Por Juarez 500 W Overland Ave, Ste 250 El Paso, TX 79901	46-1997449	501(c)(3)	12,300.	0.			El Paso Giving Day Grant
Animal Rescue League of El Paso Inc. - 7256 La Junta Dr - Canutillo, TX 79835	74-2729189	501(c)(3)	28,979.	0.			El Paso Giving Day Grant
Annunciation House PO Box 11189 El Paso, TX 79995	74-1152529	501(c)(3)	22,640.	0.			El Paso Giving Day Grant
Apple Tree Creative Center Inc 3945 Doniphan Park Cir, Ste C El Paso, TX 79922	74-1839536	501(c)(3)	5,269.	0.			El Paso Giving Day Grant
Armed Services YMCA El Paso 7060 Comington St El Paso, TX 79930	36-3274346	501(c)(3)	5,346.	0.			El Paso Giving Day Grant
Basketball in the Barrio 333 N Oregon St, 2nd Floor El Paso, TX 79901	74-1839536	501(c)(3)	31,555.	0.			El Paso Giving Day Grant
Big Brothers Big Sisters of El Paso - 1724 Wyoming - El Paso, TX 79902	74-1970973	501(c)(3)	11,798.	0.			El Paso Giving Day Grant
Books Are Gems 7744 North Loop, Ste B El Paso, TX 79915	56-2380561	501(c)(3)	7,548.	0.			El Paso Giving Day Grant
BorderRAC 6055 Threadgill Ave El Paso, TX 79924	74-2741968	501(c)(3)	6,247.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boys & Girls Clubs of El Paso 801 S Florence St El Paso, TX 79901	74-1145974	501(c)(3)	30,474.	0.			El Paso Giving Day Grant
Candlelighters Of The El Paso Area 1400 Hardaway St, Ste 206 El Paso, TX 79903	74-2243283	501(c)(3)	7,422.	0.			El Paso Giving Day Grant
CASA of El Paso 221 N Kansas St, Ste 1501 El Paso, TX 79901	74-1950407	501(c)(3)	22,646.	0.			El Paso Giving Day Grant
Cathedral High School 1309 N Stanton St El Paso, TX 79902	74-1362540	501(c)(3)	51,078.	0.			El Paso Giving Day Grant
Catholic Foundation for the Diocese of El Paso - 499 St Matthews St, Bldg G - El Paso, TX 79907	74-2983483	501(c)(3)	11,120.	0.			El Paso Giving Day Grant
Celebration of Our Mountains PO Box 920603 El Paso, TX 79902	36-4920453	501(c)(3)	8,741.	0.			El Paso Giving Day Grant
Center Against Sexual and Family Violence - 580 Giles Rd - El Paso, TX 79915	74-1945924	501(c)(3)	17,559.	0.			El Paso Giving Day Grant
Centro Santa Catalina 1400 Hardaway, Ste 112 El Paso, TX 79903	74-2996070	501(c)(3)	19,428.	0.			El Paso Giving Day Grant
Child Crisis Center of El Paso 2100 N Stevens El Paso, TX 79930	74-2055761	501(c)(3)	20,207.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Children's Grief Center of El Paso 11625 Pellicano, Ste B El Paso, TX 79936	74-2770329	501(c)(3)	15,474.	0.			El Paso Giving Day Grant
Christian Women's Job Corps of El Paso - 900 Arizona Ave - El Paso, TX 79902	26-0028689	501(c)(3)	6,744.	0.			El Paso Giving Day Grant
Ciudad Nueva Community Outreach 810 N Campbell St El Paso, TX 79902	20-0806957	501(c)(3)	13,863.	0.			El Paso Giving Day Grant
Compadres Therapy, Inc. 3800 N Mesa, Ste A-2 El Paso, TX 79902	46-0726204	501(c)(3)	15,937.	0.			El Paso Giving Day Grant
Conservation Society of El Paso-CSEP - 5925 Silver Springs Dr, Ste D - El Paso, TX 79912	74-6064341	501(c)(3)	13,078.	0.			El Paso Giving Day Grant
Creative Kids 504 San Francisco Ave El Paso, TX 79901	74-2910251	501(c)(3)	31,570.	0.			El Paso Giving Day Grant
Desert Spoon Food Hub 1714 Yandell, Unit B El Paso, TX 79902	47-5382731	501(c)(3)	6,826.	0.			El Paso Giving Day Grant
El Paso Baptist Clinic 2700 N Piedras St El Paso, TX 79930	20-3046801	501(c)(3)	11,591.	0.			El Paso Giving Day Grant
El Paso Center for Children 2200 N Stevens St El Paso, TX 79930	74-1695944	501(c)(3)	33,079.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
El Paso Center for Diabetes 3641 Mattox El Paso, TX 79925	74-1759410	501(c)(3)	29,156.	0.			El Paso Giving Day Grant
El Paso Child Guidance Center 2701 East Yandell El Paso, TX 79903	74-1204335	501(c)(3)	16,311.	0.			El Paso Giving Day Grant
El Paso Children's Hospital Foundation - 303 N Oregon, Ste 1200 - El Paso, TX 79901	81-2298318	501(c)(3)	15,161.	0.			El Paso Giving Day Grant
El Paso Holocaust Museum & Study Center - 715 N Oregon - El Paso, TX 79902	74-2667556	501(c)(3)	19,990.	0.			El Paso Giving Day Grant
El Paso Human Services, Inc 1001 Montana El Paso, TX 79902	74-2322589	501(c)(3)	6,437.	0.			El Paso Giving Day Grant
El Paso ISD Education Foundation PO Box 20100 El Paso, TX 79998	46-1997449	501(c)(3)	16,404.	0.			El Paso Giving Day Grant
El Paso Leadership Network 11457 Lake Nasser El Paso, TX 79936	84-4071871	501(c)(3)	5,896.	0.			El Paso Giving Day Grant
El Paso Matters 500 W Overland, Ste 200 El Paso, TX 79901	83-4301968	501(c)(3)	17,923.	0.			El Paso Giving Day Grant
El Paso Opera PO Box 5106 El Paso, TX 79953	74-2648245	501(c)(3)	24,610.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
El Paso Special Needs Education Center - Every Little Blessing - 7930 N Mesa, Ste B-7 - El Paso, TX 79932	81-4384519	501(c)(3)	7,731.	0.			El Paso Giving Day Grant
El Paso TNR 3800 N Mesa, Ste A-2 El Paso, TX 79902	83-3093317	501(c)(3)	16,709.	0.			El Paso Giving Day Grant
El Paso Villa Maria 920 S Oregon St El Paso, TX 79901	77-0621343	501(c)(3)	9,522.	0.			El Paso Giving Day Grant
El Paso Zoo Fund 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	15,787.	0.			El Paso Giving Day Grant
El Pasoans Fighting Hunger Food Bank - 9541 Plaza Cir - El Paso, TX 79927	45-2893839	501(c)(3)	22,886.	0.			El Paso Giving Day Grant
Emerging Women of Impact 209 Noble St El Paso, TX 79901	46-1997449	501(c)(3)	5,500.	0.			El Paso Giving Day Grant
Estrella del Paso (formerly Diocesan Migrant & Refugee Services) - 2400 East Yandell Dr - El Paso, TX 79903	74-2723627	501(c)(3)	24,198.	0.			El Paso Giving Day Grant
Family Service of El Paso 6040 Surety Dr El Paso, TX 79905	74-1152612	501(c)(3)	10,565.	0.			El Paso Giving Day Grant
First Presbyterian School 1340 Murchison Dr El Paso, TX 79902	74-1143070	501(c)(3)	5,507.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Friends of El Paso Animal Services PO Box 272 El Paso, TX 79943	74-1839536	501(c)(3)	24,580.	0.			El Paso Giving Day Grant
Friends of the Organ Mountains-Desert Peaks - 211 N Water St - Las Cruces, TX 88001	27-5027211	501(c)(3)	5,818.	0.			El Paso Giving Day Grant
GiGi's Playhouse El Paso 750 Sunland Park Dr El Paso, TX 79912	35-2523225	501(c)(3)	6,822.	0.			El Paso Giving Day Grant
Girl Scouts of the Desert Southwest - 9700 Girl Scout Way - El Paso, TX 79924	74-1189693	501(c)(3)	5,845.	0.			El Paso Giving Day Grant
Green Hope Project 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	7,610.	0.			El Paso Giving Day Grant
Habitat for Humanity El Paso 8500 Dyer, Ste 82 El Paso, TX 79904	74-2226271	501(c)(3)	27,065.	0.			El Paso Giving Day Grant
Hope Border Institute 499 St Matthews St El Paso, TX 79907	47-2575199	501(c)(3)	13,860.	0.			El Paso Giving Day Grant
Humane Society of El Paso, Inc. 4991 Fred Wilson Ave El Paso, TX 79906	74-1156430	501(c)(3)	48,946.	0.			El Paso Giving Day Grant
Insights Science Discovery 4120 Rio Bravo, Ste 117 El Paso, TX 79902	74-2073654	501(c)(3)	6,386.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Junior Achievement of the Desert Southwest - El Paso - 200 Bartlett, Ste 104 - El Paso, TX 79912	74-1565161	501(c)(3)	8,508.	0.			El Paso Giving Day Grant
Junior League of El Paso, Inc. 6100 Dew Dr El Paso, TX 79912	74-1469506	501(c)(3)	5,273.	0.			El Paso Giving Day Grant
Kelly Center for Hunger Relief 915 N Florence El Paso, TX 79902	27-4507018	501(c)(3)	14,016.	0.			El Paso Giving Day Grant
Kids Excel El Paso, Inc. PO Box 920144 El Paso, TX 79902	20-1783383	501(c)(3)	17,545.	0.			El Paso Giving Day Grant
La Nube STEAM Discovery Center PO Box 472 El Paso, TX 79943	81-1822589	501(c)(3)	26,018.	0.			El Paso Giving Day Grant
Las Americas Immigrant Advocacy Center - 1500 E Yandell - El Paso, TX 79902	74-2472774	501(c)(3)	13,423.	0.			El Paso Giving Day Grant
Law N Paws 11609 Spencer Dr El Paso, TX 79936	81-5166423	501(c)(3)	11,257.	0.			El Paso Giving Day Grant
Make-A-Wish El Paso 801 N El Paso St, Ste 200 El Paso, TX 79902	75-1889666	501(c)(3)	15,163.	0.			El Paso Giving Day Grant
Medical Center of the Americas Foundation - 5130 Gateway Blvd East, Ste 110 - El Paso, TX 79905	20-8314979	501(c)(3)	16,230.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mustard Seed Cafe 201 E Sunset Rd El Paso, TX 79922	45-3982247	501(c)(3)	9,248.	0.			El Paso Giving Day Grant
NAMI El Paso 201 East Main St, Ste 600 El Paso, TX 79901	74-2377105	501(c)(3)	14,831.	0.			El Paso Giving Day Grant
Operation Noel 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	8,606.	0.			El Paso Giving Day Grant
Opportunity Center for the Homeless - 1208 Myrtle Ave - El Paso, TX 79901	74-2634199	501(c)(3)	8,508.	0.			El Paso Giving Day Grant
Paso del Norte Center of Hope PO Box 31397 El Paso, TX 79931	47-4472927	501(c)(3)	17,518.	0.			El Paso Giving Day Grant
Paso del Norte Children's Development Center - 1101 E Schuster Ave - El Paso, TX 79902	74-1312313	501(c)(3)	21,376.	0.			El Paso Giving Day Grant
Paso del Norte Trail 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	17,317.	0.			El Paso Giving Day Grant
PBS El Paso 7500 Viscount Blvd, Ste C-33 El Paso, TX 79925	75-6002622	501(c)(3)	19,525.	0.			El Paso Giving Day Grant
Permanencia Voluntaria Film Fund 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	8,307.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pioneers 21 500 West Overland Ave, Ste 230 El Paso, TX 79901	45-0929061	501(c)(3)	12,212.	0.			El Paso Giving Day Grant
Planned Parenthood of Greater Texas - 1061 Chelsea St - El Paso, TX 79903	52-1243220	501(c)(3)	6,295.	0.			El Paso Giving Day Grant
Project Vida 3607 Rivera Ave El Paso, TX 79905	74-2481675	501(c)(3)	14,487.	0.			El Paso Giving Day Grant
Rebuilding Together El Paso 6400 Airport Rd, Bldg A, Ste G El Paso, TX 79925	74-2718788	501(c)(3)	8,537.	0.			El Paso Giving Day Grant
Rescue Runners, Inc. 10124 De Anza Cir El Paso, TX 79925	92-3206415	501(c)(3)	12,810.	0.			El Paso Giving Day Grant
Rio Grande Cancer Foundation 616 N Virginia, Ste D El Paso, TX 79902	23-7105159	501(c)(3)	15,520.	0.			El Paso Giving Day Grant
Scouting America- High Desert Council - 7601 Lockheed Dr - El Paso, TX 79925	85-0102305	501(c)(3)	11,075.	0.			El Paso Giving Day Grant
Second Chance Wildlife Rescue 7800 Doniphan Dr Vinton, TX 79821	46-0968268	501(c)(3)	47,904.	0.			El Paso Giving Day Grant
Segundo Barrio Futbol Club PO Box 522 El Paso, TX 79944	45-3787720	501(c)(3)	14,938.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Senior Citizens Holiday Event and Food Drive Fund - 4805 Louisiana - El Paso, TX 79930	46-1997449	501(c)(3)	5,772.	0.			El Paso Giving Day Grant
Senior Fund 8037 Lockheed Dr, Ste 100 El Paso, TX 79925	46-1997449	501(c)(3)	5,595.	0.			El Paso Giving Day Grant
Southwest Coalition, Inc 1411 Montana El Paso, TX 79902	47-4341538	501(c)(3)	372,964.	0.			El Paso Giving Day Grant
STTE Foundation 2601 N Stanton St A El Paso, TX 79912	83-2821383	501(c)(3)	5,225.	0.			El Paso Giving Day Grant
Sun City Cats 10830 Martin Luther King Jr Blvd, Ste 104 Box 271 - El Paso, TX 79934	99-5013307	501(c)(3)	21,482.	0.			El Paso Giving Day Grant
Tech Frontier 601 N Oregon St, Ste 2 El Paso, TX 79901	46-3572259	501(c)(3)	7,316.	0.			El Paso Giving Day Grant
The ChallengeFoundation El Paso, Inc. (Partner with Loretto Academy) - 4545 S University Blvd - Englewood, CO 80113	84-1480014	501(c)(3)	78,374.	0.			El Paso Giving Day Grant
The Cherry Hill School 805 Cherry Hill Ln El Paso, TX 79912	74-1875194	501(c)(3)	46,609.	0.			El Paso Giving Day Grant
The Evelyn Solis Foundation 12532 Sun Spirit Dr El Paso, TX 79938	88-3388946	501(c)(3)	7,650.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Frontera Land Alliance 3800 N Mesa St, Ste A2-258 El Paso, TX 79902	42-1645381	501(c)(3)	34,845.	0.			El Paso Giving Day Grant
The J Center for Early Learning 4408 North Stanton El Paso, TX 79902	82-1309633	501(c)(3)	46,570.	0.			El Paso Giving Day Grant
The Jazz Exchange 10805 Tony Jacklin Dr El Paso, TX 79935	92-2725573	501(c)(3)	7,145.	0.			El Paso Giving Day Grant
The Underserved Communities Foundation - 975 Lomaland Dr - El Paso, TX 79907	86-3385400	501(c)(3)	10,719.	0.			El Paso Giving Day Grant
Tom Lea Institute 513 W San Antonio Ave El Paso, TX 79901	27-0223160	501(c)(3)	5,489.	0.			El Paso Giving Day Grant
United Way of El Paso County 100 N Stanton, Ste 500 El Paso, TX 79901	74-1291051	501(c)(3)	17,527.	0.			El Paso Giving Day Grant
What Remains 221 North Kansas St, Ste 1900 El Paso, TX 79901	46-1997449	501(c)(3)	30,329.	0.			El Paso Giving Day Grant
YMCA of El Paso Texas 810 Wyoming El Paso, TX 79902	74-1109880	501(c)(3)	8,334.	0.			El Paso Giving Day Grant
Youth Opera of El Paso 1004 Chiricahua Dr El Paso, TX 79912	47-4015852	501(c)(3)	6,682.	0.			El Paso Giving Day Grant

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ysleta Education Foundation 9600 Sims Dr El Paso, TX 79925	74-2644957	501(c)(3)	23,664.	0.			El Paso Giving Day Grant
YWCA El Paso del Norte Region 1600 Brown St El Paso, TX 79902	74-1109650	501(c)(3)	10,096.	0.			El Paso Giving Day Grant

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Scholarships	321	629,268.	0.		
Grants	1	5,500.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2:
- Grants to Organizations:
The Foundation receives written reports, follows up by email and phone calls, and makes some site visits to grantees receiving funds.

- Grants to Individuals:
The Foundation pays schools directly for most of its scholarship grants with the understanding that if the student fails to meet the eligibility requirements (enrolled for at least 12 hours) or withdraws, any remaining tuition balance is to be refunded to the Foundation.

SCHEDULE J (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☐ Form 990 of other organizations	☐ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) Tracy Yellen	(i)	0.	0.	0.	0.	0.	0.	0.
Chief Executive Director	(ii)	270,246.	0.	1,380.	30,800.	21,641.	324,067.	0.
(2) Marcela Garcia	(i)	0.	0.	0.	0.	0.	0.	0.
VP of Finance	(ii)	184,931.	500.	1,380.	21,406.	16,722.	224,939.	0.
(3) Mimi Short	(i)	136,920.	14,687.	1,380.	16,640.	2,217.	171,844.	0.
VP of Development	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 3:
The CEO is compensated by a related organization, Paso del Norte Health Foundation (PdNHF). PdNHF uses a compensation survey and approval by the board as methods to establish compensation for this position.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

Name of the organization

Paso del Norte Community Foundation

Employer identification number

46-1997449

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	7	10,816,074.	NYSE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (Supplies)	X	8	1,848.	FMV
26	Other (Raffle items)	X	6	898.	FMV
27	Other ( )				
28	Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgment 29 0

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also, complete this part for any additional information.

SCHEDULE O (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Paso del Norte Community Foundation

Employer identification number
46-1997449

Form 990, Part I, Line 1, Description of Organization Mission:
The PdN Community Foundation was established in 2013 to support the philanthropic goals of individuals, families, corporations, foundations and nonprofits to improve education, health, social services, economic development, and quality of life in the PdN region.

Form 990, Part VI, Section B, line 11b:
The Form 990 is provided to the Finance/Audit/IT Committee for review and approval. The Form 990 is also provided to the Board of Directors for approval before submission to the IRS.

Form 990, Part VI, Section B, Line 12c:
Annually, at a board of directors meeting, each board member is provided with a conflict of interest policy form to complete to disclose all relationships and activities that might cause a conflict of interest. Key personnel monitor accounts payable transactions to ensure that the organization and its employees are in compliance with the conflict of interest policy.

Form 990, Part VI, Section B, Line 15:
The top management official's salary was approved by the PdNHF and PdNCF Boards of Directors based on comparability data.

Other officer compensation was approved by the PdNHF and PdNCF Boards of Directors based on comparability data.

Form 990, Part VI, Section C, Line 19:
The organization makes available the governing documents and conflict of interest policy upon written request.

SCHEDULE R (Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Paso del Norte Community Foundation

Employer identification number
46-1997449

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Paso del Norte Trails LLC - 82-3816822 221 N Kansas St, Ste 1900 El Paso, TX 79901	Charitable program	Texas	17,904.	60,401.	Paso Del Norte Community Foundation

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
Paso del Norte Health Foundation - 74-1143071, 221 N Kansas St, Ste 1900, El Paso, TX 79901	Supporting Organization	Texas	501(c)(3)	Line 12a, I	Paso Del Norte Community Foundation	X	
First Light Community Foundation - 47-5322938, PO Box 1977, El Paso, TX 79901	Supporting Organization	Texas	501(c)(3)	Line 12a, I	Paso Del Norte Community Foundation	X	
One Fund El Paso - 84-2696557 Oregon 2nd Floor El Paso, TX 79901	Supporting Organization	Texas	501(c)(3)	Line 12a, I	Paso Del Norte Community Foundation	X	
Downtown Deck Plaza Foundation - 99-5013536 221 N Kansas St, Ste 1900 El Paso, TX 79901	Supporting Organization	Texas	501(c)(3)	Line 12a, I	Paso Del Norte Community Foundation	X	

Part II **Continuation of Identification of Related Tax-Exempt Organizations**

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization? Yes	(g) No
El Paso Opera Foundation - 74-2901653 1218 Yandell Dr El Paso, TX 79902	Supporting Organization	Texas	501(c)(3)	Line 12a, I	Paso Del Norte Community Foundation	X	

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d		X
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o	Sharing of paid employees with related organization(s)	1o	X	
p	Reimbursement paid to related organization(s) for expenses	1p	X	
q	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	Paso del Norte Health Foundation	C	527,000.	Cash
(2)	Paso del Norte Health Foundation	N	110,338.	Cost
(3)	Paso del Norte Health Foundation	O	531,210.	Cost
(4)	First Light Community Foundation	P	5,154.	Cost
(5)	Downtown Deck Plaza Foundation	B	315,000.	Cash
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) NO	(k) Percentage ownership

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.