EXTENDED TO MAY 15, 2025

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form, as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

Form **990-EZ** (2023)

A	For the	e 2023 calendar year, or tax year beginning JUL 1, 202	2	, and ending	TITAT	3 0	2024	
	Check if applicate			, and chang			ntification number	
_					Cuihio	y c i iue	HUHVAUVII HUIIIDEI	
H		ress change	TNIMECO	TMV	26		26603	
F		ne change Number and street (or P.O. box if mail is not delivered to street address			∠ b · E Teleph			
F	□Final	return/ FOO E DADDIDAL CE	ooj	HOUIII/SUILE			92-3220	
H	termi	inated OU9 E RADBURN ST	lο					
H		MITOCONT NO 05704	IG		F Group Exemption			
		cation pending TUCSON, AZ 85704			Numb		144	
		nting Method: Cash X Accrual Other (specify)			H Check		if the organization is	
	Websi				1	-	to attach Schedule B	
		xempt status (check only one) — $X = 501(c)(3) = 501(c)(0)$ (inser		947(a)(1) or 527	(Form	990).		
		of organization: X Corporation Trust Association	Other					
		nes 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200				Φ.	111 071	
		n (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ	Fund Bal	ances (see the instri	uotiono fo	\$ r Dart I)	111,971.	
P	art I							
	1	Check if the organization used Schedule 0 to respond to any question in this					82,333.	
	1	Contributions, gifts, grants, and similar amounts received				1		
	2	Program service revenue including government fees and contracts				2	20,000.	
	3	Membership dues and assessments		OIIDDII D		3	E 040	
	4	Investment income		CHEDOFE O		4	5,840.	
	5a	· · · · · · · · · · · · · · · · · · ·						
	1	1						
	C	Gain or (loss) from sale of assets other than inventory (subtract line 5b from lin	e 5a)			5c		
	6	Gaming and fundraising events:						
ne	a		1.	I				
Revenue	1.	\$15,000)		<u> </u>				
Re	b	Gross income from fundraising events (not including \$		ntributions				
	1	from fundraising events reported on line 1) (attach Schedule G if the sum of suc	۱	1 2 6	04			
	1	gross income and contributions exceeds \$15,000)		3,6	74.			
		Less: direct expenses from gaming and fundraising events	6c	2,4			1 000	
		Net income or (loss) from gaming and fundraising events (add lines 6a and 6b a		ne 6c)	[6d	1,228.	
		Gross sales of inventory, less returns and allowances						
			7b					
	C	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		OHEDIT E C		7c	104	
	8	Other revenue (describe in Schedule 0)				8	104.	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				9	109,505.	
	10	Grants and similar amounts paid (list in Schedule 0)				10		
	11	Benefits paid to or for members			····· [11	00 200	
ses	12	Salaries, other compensation, and employee benefits			····· [12	80,386.	
Expenses	13	Professional fees and other payments to independent contractors				13	16,210.	
Ϋ́	14	Occupancy, rent, utilities, and maintenance				14	1 070	
_	15	Printing, publications, postage, and shipping	·····	15	1,278.			
	16	Other expenses (describe in Schedule 0)			·····	16	3,540.	
	17	Total expenses. Add lines 10 through 16				17	101,414.	
ţ	18					18	8,091.	
SSe	19	Net assets or fund balances at beginning of year (from line 27, column (A))					102 012	
Net Assets	1.	(must agree with end-of-year figure reported on prior year's return)		IGHEDH = C		19	183,013.	
Š	20	Other changes in net assets or fund balances (explain in Schedule 0)				20	9,365.	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20			. :	21	200,469.	

For Paperwork Reduction Act Notice, see the separate instructions.

2.00

2.00

Form **990-EZ** (2023)

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JIM KISER

CHRISTOPHER AHEARN

DIRECTOR

Part V

26-0026603

Page 3

instructions for Part V.) Check if the organization used Sch. O to respond to any question in this Part V X Yes No Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each X 33 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended X documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? Х N/A b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Х 35c Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," Х 36 complete applicable parts of Schedule N **37a** Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file Form 1120-POL for this year? Х 37b 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made X 38a in a prior year and still outstanding at the end of the tax year covered by this return? **b** If "Yes," complete Schedule L, Part II, and enter the total amount involved Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on line 9 **b** Gross receipts, included on line 9, for public use of club facilities N/A 40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 0. **0** • ; section 4912 **0** • ; section 4955 **b** Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Х c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 **d** Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T Х NONE List the states with which a copy of this return is filed THE ORGANIZATION 908-392-3220 42 a The organization's books are in care of Telephone no. Located at: 509 E RADBURN ST, TUCSON, AZ 85704 b At any time during the calendar year, did the organization have an interest in or a signature or other authority Yes No over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b X If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside the United States? Х If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year N/AYes No 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Х 44a b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead X 44b X c Did the organization receive any payments for indoor tanning services during the year? 44c d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation 44d 45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions

Other Information (Note the Schedule A and personal benefit contract statement requirements in the

Form	n 990-EZ (2023)	SOU	THWES'	r cente	R FOI	R ECON	OMIC I	NTEGRI	ГΥ		26-0	00266	03	ı	Page 4
															Yes	No
46		-		-	ndirectly, in po		•									
D	If "Yes," (complete S	Schedule (C, Part I		- O I								46		X
Pa	art VI		-		anizations	-		101 50			la la a da o l'oc	50				
					ations must a sed Schedule	-			-							
		OHECK II	trie orga	inzation us	sed Ochleddie	O to resp	Jona to arry	questionin	unstartvi .						Yes	No
47	Did the o	rganizatior	n engage	in lobbying	activities or hav	e a section	n 501(h) elec	tion in effect o	luring the tax v	ear?						
		-					. ,							47	X	
48	Is the or	ganization :	a school	as described	in section 170	(b)(1)(A)(i	ii)? If "Yes," c	omplete Sche	dule E					48		Х
49 a	Did the o	rganizatior	n make ar	ny transfers	to an exempt n	on-charital	ble related or	ganization?						49a		Х
b	If "Yes," \	vas the rela	lated orga	nization a se	ction 527 orga	nization? .								49b		
50	Complete	this table	e for the o	rganization's	five highest c	ompensate	d employees	(other than o	fficers, director	rs, truste	es, and key e	employee	s) who ea	ch red	ceived	more
	than \$10				e organization.	If there is r	none, enter "N			_		Len				
		((a) Name	and title of e	ach employee				age hours devoted to	(C)	Reportable nsation (Forms	contrib	Ith benefits, outions to) Estim ount of	
					NTON:	r Ta			sition	W-2/	1099-MISC/ 099-NEC)	plans, a	ree benefit nd deferred		npens	
					NON	IE.				-	100 1120)	comp	ensation			
														\vdash		
										+						
f					er \$100,000											
51					five highest co		d independer	nt contractors	who each rece	ived mor	e than \$100	,000 of c	ompensat	ion fr	om the	Э
				, enter "None					/1	\ T 6			(-) 0			-
	(a)	vame and i	business	address of e	ach independe	ni contract	lor		(D) Type of	Service		(c) U	ompe	nsatio	n
							*									
					actors each re	-										
52		•			A? Note: All se	,	, , ,						T	Ye		No
Unde		d Schedul			examined this							et of my				
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Sig	ın	Signature	6201 officer									Date				
He		KEL	LY G	RIFFI	TH, EXE	CUTIV	VE DIR	ECTOR								
		Type or p	print name a	and title												
		Print/Ty	ype prepa	rer's name		Preparer	's signature		Date		Check	_	PTIN			
Pai	id					DocuSigned			1/15/2	025	self- emplo	yed				
	eparer				N, CPA		ldington			.023			P001			
	e Only	Firm's n			GTON &			-			Firm's EIN		5-101			•
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Form **990-EZ** (2023)

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

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.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY

Employer identification number

				ER FOR ECONO				0-0020003
Pa	rt I	Reason for Public (Charity Status.	All organizations must o	omplete tl	his part.) S	ee instructions.	
he	organ	ization is not a private found	ation because it is: (For lines 1 through 12, o	check only	one box.)		
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1)(A)(i).	
2		A school described in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)			
3		A hospital or a cooperative)(b)(1)(A)(i	ii).	
4		A medical research organiz					-	the hospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a co	llege or university owner	d or opera	ted by a q	overnmental unit describ	ped in
		section 170(b)(1)(A)(iv). (C		,		, ,		
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).	
	X	An organization that norma	•				` '	nublic described in
•		section 170(b)(1)(A)(vi). (Co	•	That part of its support	ioiii a gov	Ciriiriciitai	unit of from the general	public accorded in
8		A community trust describe		1\(\Delta\(\vi)\) (Complete Par	+ 11 \			
9	一	An agricultural research org				ed in coni	inction with a land-grant	college
·		or university or a non-land-g				-	_	-
		university:	jiunt conege of ugne	altare (600 motraotiono).	. Lintor tino	marrio, ori	y, and state of the coneg	JO 01
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its sup	port from	contributio	ons membership fees a	nd gross receipts from
		activities related to its exem						
		income and unrelated busin		•				•
		See section 509(a)(2). (Cor		(1000 000tloff of Ftax) in	om baome	ooco aoqe	med by the organization	antor danc do, 1070.
11		An organization organized a		ively to test for public sa	afety See	section 50	19(a)(4)	
12		An organization organized a	•	•	•			e purposes of one or
		more publicly supported or	•	•	•		•	
		lines 12a through 12d that						
а		Type I. A supporting orga	• •			•	, ,	, aivina
_		the supported organization	· ·	•	•	•		
		organization. You must c			,,			
b		Type II. A supporting orga	-		tion with it	ts support	ed organization(s), by ha	avina
_		control or management o	•					-
		organization(s). You mus					g	
С		Type III functionally inte			in connec	tion with.	and functionally integrat	ed with.
		its supported organization	-					,
d		Type III non-functionally		•				ization(s)
		that is not functionally int	=				• • • • • •	* *
		requirement (see instructi	-		•		•	
е		Check this box if the orga	•	-				
		functionally integrated, or					31 / 31 / 31	
f	Ente	er the number of supported o						
g	Pro۱	vide the following information	about the supporte	d organization(s).				
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)

Schedule A (Form 990) 2023 SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Page 2

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.)

Sed	tion A. Public Support	, noted below, pied					
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	,	,	,	,	,	()
	membership fees received. (Do not						
	include any "unusual grants.")	76,669.	108,643.	114,937.	113,505.	82,333.	496,087.
2	Tax revenues levied for the organ-						
	ization'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		100 110	111	110		404
4	Total. Add lines 1 through 3	76,669.	108,643.	114,937.	113,505.	82,333.	496,087.
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,						E2 72E
_	column (f)						52,735. 443,352.
	Public support. Subtract line 5 from line 4. etion B. Total Support						443,332.
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	(f) Total
	Amounts from line 4	(a) 2019 76,669.	(b) 2020 108,643.	(c) 2021 114, 937.	(d) 2022 113,505.	(e) 2023 82,333.	(f) Total 496,087.
	Gross income from interest.	7070031	100,0131	111/33/1	113/3031	02/3331	130,007
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	406.	627.	741.	1,004.	5,840.	8,618.
9	Net income from unrelated business		-		,		, , , , , ,
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	3,608.	14,529.	305.	203.	104.	18,749.
11	Total support. Add lines 7 through 10						523,454.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	47,601.
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				0.4 50
	Public support percentage for 2023 (I					14	84.70 %
	Public support percentage from 2022					15	86.34 %
16a	33 1/3% support test - 2023. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the c	•		,		,	
4-	and stop here. The organization qual						
1/a	10% -facts-and-circumstances tes	-					
	and if the organization meets the fact		ŕ	-	•	vi now the organiz	auon
L	meets the facts-and-circumstances to	-		* * * * * * * * * * * * * * * * * * * *	-	17a, and line 15 is	10% or
10	10% -facts-and-circumstances tes	-					1U70 UI
	more, and if the organization meets the organization meets the facts-and-circle				-		
12	Private foundation. If the organization		-				

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Page 3

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.)

Se	ction A. Public Support	· · · · · ·	,				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	<u> </u>					
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to			1			
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	1	1	•	1
	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6				-		
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b		1	-	1	1	1
11	Net income from unrelated business activities not included on line 10b,			1			
	whether or not the business is						
12	regularly carried on Other income. Do not include gain			1	+		
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)				+		
	Total support. (Add lines 9, 10c, 11, and 12.)				1	F04(-)(0) : :	<u> </u>
14	First 5 years. If the Form 990 is for the	•				. , . ,	lion,
Se	check this box and stop here ction C. Computation of Publ						<u></u>
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022					16	
	ction D. Computation of Inves					1 .~ 1	70
	Investment income percentage for 20)	17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box a						
k	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation If the organization						

Schedule A (Form 990) 2023

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Page 4

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

- 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.
- 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).
- **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.
- **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.
- 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.
- **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.
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 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).
- 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.
- **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.**
- 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.
- 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.
 - **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.)

		Yes	No
	4		
	1		
	2		
	За		
	Ja		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	0		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	401		
dulo	10b A (Form	n 000	2023

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Page 6 Schedule A (Form 990) 2023 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 4 Add lines 1 through 3. Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): 1a a Average monthly value of securities **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): Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035. 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, column A) 1 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. 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6

Lheck here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2023

instructions).

7 Excess distributions carryover to 2024. Add lines 3j

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Page 7 Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 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 Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2023 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 **b** From 2019 **c** From 2020 **d** From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder, Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.

Schedule A (Form 990) 2023

and 4c.

8 Breakdown of line 7:
 a Excess from 2019
 b Excess from 2020
 c Excess from 2021
 d Excess from 2022
 e Excess from 2023

Schedule A	(Form 990) 2023	SOUTHWEST	CENTER	FOR	ECONOMIC	INTEGRITY	26-0026603	Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	rmation. Provide th I, 2, 3b, 3c, 4b, 4c, 5a lines 2 and 3; Part IV,	e explanations , 6, 9a, 9b, 9c , Section E, lin	s require , 11a, 11 es 1c, 2	ed by Part II, line 10 Ib, and 11c; Part I' a, 2b, 3a, and 3b;	D; Part II, line 17a or V, Section B, lines 1 Part V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Section , Section B, line 1e; Pa	ı C.

332028 12-21-23 Schedule A (Form 990) 2023

SCHEDULE C (Form 990) **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name o	of orga	nization			E	mployer identification number
			ST CENTER FOR E			26-0026603
Part	I-A	Complete if the org	janization is exempt un	der section 501(c)	or is a section 52	27 organization.
2 Pc	olitical	campaign activity expendit	ation's direct and indirect polit ures gn activities			
Part	I-B	Complete if the org	janization is exempt un	der section 501(c)	(3).	
1 Er	nter the	amount of any excise tax	incurred by the organization ur	nder section 4955		\$0.
			incurred by organization mana			
3 If t	the org	anization incurred a sectio	n 4955 tax, did it file Form 472	O for this year?		Yes No
4a W	as a co	orrection made?				Yes No
_	1	describe in Part IV.		-l		-04/-1/01
Part		<u>-</u>	janization is exempt un		<u> </u>	· · · · ·
			by the filing organization for s	•	***************************************	\$
			ization's funds contributed to c			*
						\$
						¢
4 Di	e I/D	iling organization file Form	1120-POL for this year?			[⊅] Yes
			mployer identification number (
ma co	ade pa ontribut	yments. For each organiza	tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	aid from the filing organize a separate political org	zation's funds. Also en anization, such as a se	ter the amount of political
		(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om (e) Amount of political
		(a) Name	(b) Address	(C) EIN	filing organization funds. If none, enter	's contributions received and

					CONOMIC INT		
P	art II-A	Complete if the org	ganization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under
		section 501(h)).					
Α	Check	if the filing organiza	ation belongs to an affi	lliated group (and list ir	Part IV each affiliated	group member's nam	e, address, EIN,
		expenses, and sha	re of excess lobbying	expenditures).			
В	Check	if the filing organiza	ation checked box A a	nd "limited control" pro	ovisions apply.		
			ts on Lobbying Expe ditures" means amou	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1	la Total lob	bying expenditures to infl	uence public opinion ((grassroots lobbying)		2,939.	
		bying expenditures to infl				2,109.	
	c Total lob	bying expenditures (add I		5,048.			
		cempt purpose expenditur	98,832.				
	e Total ex	empt purpose expenditure	es (add lines 1c and 1d	d)		103,880.	
		g nontaxable amount. Ent		20,776.			
	If the am	ount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		
	not over	· \$500,000,					
	over \$50	00,000 but not over \$1,000	ess over \$500,000.				
	over \$1,	000,000 but not over \$1,5	ess over \$1,000,000.				
	over \$1,	500,000 but not over \$17,	,000,000, \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
	over \$17	7,000,000,	\$1,000,	000.			
	5,194.						
h Subtract line 1g from line 1a. If zero or less, enter -0-						0.	
	i Subtrac	t line 1f from line 1c. If zero	o or less, enter -0			0.	
	j If there	s an amount other than ze	ero on either line 1h or	line 1i, did the organiza	ation file Form 4720	_	
	reportin	g section 4911 tax for this	year?			L	Yes No
			4-Year Ave	eraging Period Under	Section 501(h)		
		(Some organizations t		• •	•	of the five columns b	elow.
			<u> </u>	ate instructions for li			
			Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
		Calendar year al year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2	2a Lobbyin	g nontaxable amount	17,492.	17,032.	22,895.	20,776.	78,195.
	•	g ceiling amount of line 2a, column(e))					117,293.
	c Total lob	obying expenditures	6,862.	5,406.	3,127.	5,048.	20,443.
		ots nontaxable amount	4,373.	4,258.	5,724.	5,194.	19,549.
		ots ceiling amount of line 2d, column (e))					29,324.

2,701.

1,667.

3,096.

Schedule C (Form 990) 2023

2,939.

f Grassroots lobbying expenditures

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description

Schedule C (Form 990) 2023

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
i	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c	(5), or se	ection	
	501(c)(6).	• •			
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section			ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3, is
	answered "Yes."		` '	•	
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
c					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
			4		
5	expenditures next year? Taxable amount of lobbying and political expenditures. See instructions		5		
	t IV Supplemental Information		3		
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	lict\. Dort I	I A lines 1	and 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.	isi, raiti	1-A, III 165 1	anu 2 (566	
	RT II-A, LINE 1C				
	TI II, DING IC				
πтι	ME RELATED TO LOBBYING IN THE 2024 STATE LEGISLATIV	ים כדכי	STON O	N CON	STIMED
	TE REDATED TO DODDIING IN THE 2024 STATE DEGISERITY	יטמט מ	STOM O	IN COIN	OMER
ודם	NANCIAL PROTECTION ISSUES AND SMALL DOLLAR INTEREST	ם אתם	CADC	AND ()M
F 11	NAMED AND PROTECTION 1880ES AND SMADD DOUBLA INTEREST	KAIE	CAPS,	MIND ()II
בי או	DIV CUTIDUOOD EDIICAMTON AND MUE DIMA COIMMY 'DIMA E	י עד סגי	בטנוכא ש	TON	
ĿАl	RLY CHILDHOOD EDUCATION AND THE PIMA COUNTY 'PIMA E	чигі і	DUCAT	TON	
סם מ	OCDAM CCUOIADCUIDC'				
FK(OGRAM SCHOLARSHIPS'.				

(b)

SCHEDULE 0 (Form 990)

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 the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

SOUTHWEST CENTER FOR ECONOMIC INTEGRITY

Employer identification number 26-0026603

SOUTHWEST CENTER FOR ECONOMIC IN	TEGRITY	26-0	026603
FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INC	COME:		
DESCRIPTION OF PROPERTY:			AMOUNT:
INTEREST INCOME			3,421.
DIVIDEND INCOME			2,419.
TOTAL INCLUDED ON FORM 990-EZ, LINE 4			5,840.
FORM 990-EZ, PART I, LINE 8, OTHER REVENUE:			
DESCRIPTION OF OTHER REVENUE:			AMOUNT:
MISC INCOME			104.
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:			
DESCRIPTION OF OTHER EXPENSES:			AMOUNT:
INSURANCE			2,000.
MISC			1,540.
TOTAL TO FORM 990-EZ, LINE 16			3,540.
FORM 990-EZ, PART I, LINE 20, CHANGES IN NET ASSI	ETS:		
CHANGES IN NET ASSETS OR FUND BALANCES:			AMOUNT:
UNREALIZED GAIN			9,365.
FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES	:		
DESCRIPTION	BEG. OF	YEAR	END OF YEAR
ACCOUNTS PAYABLE	3	,516.	3,536.
ACCRUED EXPENSES		702.	653.
DEFERRED REVENUE	10	,000.	18,333.
TOTAL TO FORM 990-EZ, LINE 26	14	,218.	22,522.

Schedule O (Form 990) 2023	Page 2
Name of the organization SOUTHWEST CENTER FOR ECONOMIC INTEGRITY	Employer identification number 26-0026603
FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - EDUCATION	IAL/CHARITABLE
ANTI-POVERTY WORK.	
FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEF	
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FU	
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONT	
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMI	UMS, DIRECTLY,
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.	

Schedule O (Form 990) Page 2

Employer identification number Name of the organization SOUTHWEST CENTER FOR ECONOMIC INTEGRITY 26-0026603 Part IV | List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (see the instructions for Part IV.) (b) Average hours per week devoted to (d) Health benefits. (e) Estimated (C) Reportable contributions to employee benefit plans, and deferred compensation (Forms W-2/1099-MISC) amount of other (a) Name and title position compensation (If not paid, enter -0-) compensation LIZ RABAGO EX DIRECTOR 2.00 0. 0. 0.