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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

2009
Open to Public Inspection

Intern	al Rever	nue Service Ine organization may have to use a copy of this return to satisf	∍utè.	Inspection				
A F B cap	or the	e 2009 calendar year, or tax year beginning and end	ding					
Вс	heck if oplicable	Please C Name of organization EXTENSION ATTACHED		D Employer ide	ntifica	tion number		
		use ins						
<u> </u>	Addres	print or SOUTHWEST RESEARCH & INFORMATION CENT	ER		1	50040		
<u> </u>]Name]chang]Initial	Doing Business As		23-7159949				
느	_retum		om/suite					
느	Termin ated Amend	Instruc-POST OFFICE BOX 4524			5-2	62-1862		
<u> </u>	∟retum	City or town, state or country, and ZIP + 4		G Gross receipts \$		902,546.		
<u> </u>	Applic tion pendir			H(a) Is this a gro				
		F Name and address of principal officer:DON HANCOCK		for affiliates		Yes X No		
		SAME AS C ABOVE	H(b) Are all affiliate					
1 1		empt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527				t. (see instructions)		
		te: ► WWW.SRIC.ORG forganization X Corporation Trust Association Other ►	1 . ٧	H(c) Group exem				
	rt I	TIME	State of legal domicile NM					
- Fe		DEC TECHN	TCA	T				
e e	1	Briefly describe the organization's mission or most significant activities: SRIC PASSISTANCE TO COMMUNITIES ON ENERGY AND NA	TOVI	T. PESCURC	FC	Li		
Activities & Governance		Check this box If the organization discontinued its operations or disposed						
Ver		Number of voting members of the governing body (Part VI, line 1a)	i oi illore	than 25% of its n	3	ns. 9		
ဗိ		Number of independent voting members of the governing body (Part VI, line 1b)			4	9		
ತ		Total number of employees (Part V, line 2a)			5			
iţie		Total number of volunteers (estimate if necessary)			6	10		
cţi		Total gross unrelated business revenue from Part VIII, column (C), line 12			7a	219.		
ď		Net unrelated business taxable income from Form 990-T, line 34			7ь	0.		
				Prior Year	<u> </u>	Current Year		
	8	Contributions and grants (Part VIII, line 1h)		839,71	6.	836,019.		
Revenue			·	86,47		58,098.		
eve		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4- and 10 VIII, column (A) lines 3, 4- and 10 VIIII, column (A) lines 3, 4- and 10 VIII, column (A) lines 3, 4- an		11,14		5,686.		
۳ ا		Other revenue (Part VIII column (A) lines 5 6d 85 9c 10c and 11e)		4,63		2,119.		
ສ		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		941,96	2.	901,922.		
ر د د الآ		Grants and similar amounts paid (Part IX, column (A), lines (13)		46,99	2.	99,879.		
9		Benefits paid to or for members (Part IX, column (A), line 4)						
ອ ວ່ອ [15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		225,24	8.	307,468.		
S E	16a	Professional fundraising fees (Part IX, column (A), line 11e)						
DCC €	b	Total fundraising expenses (Part IX, column (D), line 25) 1,325	•					
, <u>"</u>	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		646,58		443,651.		
<u>"</u>	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		918,82		850,998.		
2	19	Revenue less expenses. Subtract line 18 from line 12		23,13	3.	50,924.		
Fund Balances			Beg	inning of Current Y		End of Year		
asse asse	20	Total assets (Part X, line 16)	<u> </u>	587,18		633,804.		
E SE	21	Total liabilities (Part X, line 26)	<u> </u>	39,74		35,443.		
蕰	22	Net assets or fund balances. Subtract line 21 from line 20		547,43	6.	598,361.		
Pa	rt II	Signature Block						
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stall and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any ki		nd to the best of my kno	/wiedge a	and belief, it is true, correct,		
		1.46		11/9	1			
Sign	- 1	Signature of officer			/ ''			
Here	•	, and the second		Date				
		DON HANCOCK, ADMINISTRATOR Type or print name and title				.		
		I Data	Che	ck if P	reparer's	identifying number		
Paid		Preparer's signature	self-		ee instru	ctions)		
Prepa	arer's	Firm's name (or LAWRENCE TAUB COUNSELLOR AT LAW P		EIN >		····································		
Use (Only	yours if self-employed), 1447 SEVILLE ROAD	~	LIN				
		address, and ZIP+4 SANTA FE, NEW MEXICO 87505-4647		Phone no	>			
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		Francis		X Yes No		
	1 02-04		rate inst	ructions.		Form 990 (2009)		
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24

	990 (2009) SOUTHWEST RESEARCH & INFORMATION CENTER 23-7159949 Page 2
Pa	rt III Statement of Program Service Accomplishments
1	Bnefly describe the organization's mission. SOUTHWEST RESEARCH AND INFORMATION CENTER IS A MULTI-CULTURAL
	ORGANIZATION WORKING TO PROMOTE THE HEALTH OF PEOPLE AND COMMUNITIES,
	PROTECT NATURAL RESOURCES, ENSURE CITIZEN PARTICIPATION, AND SECURE
	ENVIRONMENTAL AND SOCIAL JUSTICE NOW AND FOR FUTURE GENERATIONS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	277 241
4a	(Code:) (Expenses \$ 377,241. including grants of \$) (Revenue \$ 419,563.
	SRIC PROVIDES DIRECT TECHNICAL ASSISTANCE TO DOZENS OF COMMUNITIES IN
	NEW MEXICO REGARDING RESOURCE DEVELOPMENT, AIR AND WATER QUALITY, HEALTH, NUCLEAR WASTE STORAGE AND TRANSPORTATION, ENVIRONMENTAL IMPACT
	ASSESMENT, AND RELATED MATTERS. THE ORGANIZATION ALSO IS INVOLVED WITH
	VARIOUS COALITIONS AND NETWORKS THAT PROMOTE RENEWABLE RESOURCE
	DEVELOPMENT, ENVIRONMENTAL PROTECTION, AND ENVIRONMENTAL JUSTICE.
	SRIC'S PUBLICATION, VOICES FROM THE EARTH IS DISTRIBUTED TO MORE THAN
	2,500 INDIVIDUALS AND ORGANIZATIONS. THE WEBSITE, WWW.SRIC.ORG PROVIDES
	EXTENSIVE INFORMATION ABOUT MANY ENVIRONMENTAL AND HEALTH ISSUES.
4b	(Code:) (Expenses \$ 142,320. including grants of \$ 9,500.) (Revenue \$ 122,352.
	THE NUCLEAR WATCH NEW MEXICO PROJECT THROUGH COMPREHENSIVE RESEARCH,
	PUBLIC EDUCATION AND EFFECTIVE CITIZEN ACTION PROMOTES SAFETY AND
	ENVIRONMENTAL PROTECTION; DIVERSIFICATION AWAY FROM NUCLEAR WEAPONS
	PROGRAMS; GREATER ACCOUNTABILITY AND CLEANUP IN THE NATIONWIDE NUCLEAR
	WEAPONS COMPLEX; AND CONSISTENT U.S. LEADERSHIP TOWARD A WORLD FREE OF
	NUCLEAR WEAPONS. A NEWSLETTER IS DISTRIBUTED TO MORE THAN 1,600 PEOPLE
	AND THE WEBSITE WWW.NUKEWATCH.ORG PROVIDES EXTENSIVE INFORMATION ABOUT
	NUCLEAR ISSUES.
4c	(Code:) (Expenses \$ 111,316. including grants of \$ 5,276.) (Revenue \$ 128,026.)
	THE COALITION FOR CLEAN AFFORDABLE ENERGY PROJECT INCLUDES 14
	ENVIRONMENTAL, ENERGY, AND HEALTH ORGANIZATIONS TO PROMOTE THE
	DEVELOPMENT OF RENEWABLE ENERGY SOURCES SUCH AS SOLAR, WIND,
	GEOTHERMAL, AND BIOMASS; PROMOTE ENERGY EFFICIENCY; REDUCE GREENHOUSE
	GAS EMISSIONS AND OTHER POLLUTANTS; AND TO DO SO IN A CREDIBLE,
	RESPONSIBLE, AND AFFORDABLE MANNER THAT BENEFITS ALL NEW MEXICANS. THE
	COALITION REPRESENTS MORE THAN 20,000 INDIVIDUALS FROM THROUGHTOUT NEW
	MEXICO IN PROCEEDINGS BEFORE THE PUBLIC REGULATION COMMISSION.
4d	Other program services. (Describe in Schedule O)
	(Expenses \$ 152,014. Including grants of \$ 85,103.) (Revenue \$ 166,078.)
4e	Total program service expenses ▶\$ 782,891.
	Form 44 0 /2000

SOUTHWEST RESEARCH & INFORMATION CENTER

23-7159949

Page 3

Pa	rt 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?	2	Х	
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? If "Yes," complete Schedule C, Part II	4	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	<u> </u>	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		Х
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	ľ		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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 term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable .	11	X	<u>ļ </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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.			
•	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.			
•	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. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
_	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	х	1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
-16	-Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
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	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
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

SOUTHWEST RESEARCH & INFORMATION CENTER

23-7159949

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2º 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 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
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) and 501(c)(4) 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		Х
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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	ļ	<u>X</u>
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	ŀ		
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash 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		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> X</u>
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		<u>X</u> .
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
. 35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		<u> X</u>
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		<u>X</u>
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		<u> X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	لــــا	<u>X</u>
		Form	990 (2	2009)

Form 990 (2009) SOUTHWEST RESEARCH & INFORMATION CENTER
Part V Statements Regarding Other IRS Filings and Tax Compliance

23-7159949

Page 5

	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	US Information Returns. Enter -0- if not applicable	.		-
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable)		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]		
	(gambling) winnings to prize winners?	1c	X	
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	7		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X]
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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	1	Х
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and	1		
	Financial Accounts.			
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		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ľ
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	ľ		
а	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	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	L	
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]		
е	Did the organization, during the year, 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
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		N/A
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	ļ	N/A
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			Nì 7 K
	at any time during the year?	8		N/A
9	Sponsoring organizations maintaining donor advised funds.			NI / A
а	Did the organization make any taxable distributions under section 4966?	9a		N/A
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		-N7A
0	Section 501(c)(7) organizations. Enter:	-		
	Initiation fees and capital contributions included on Part VIII, line 12	4		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
1	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	-		
	amounts due or received from them.)	-		
	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	<u> </u>		
		Form	990 (2009)

743960 30604043 SOUTHWEST RESEARCH & INFORMATION CENTER Form 990 (2009) 23-7159949 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 in Schedule O. See instructions. Section A. Governing Body and Management Yes No 9 1a Enter the number of voting members of the governing body 9 b Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the aovernina body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8b 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 in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b X Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 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? X a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NM Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request ☐ Own website X Another's website 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: DON HANCOCK - 505-262-1862

Form 990 (2009)

NM

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STANFORD, S.E., ALBUQUERQUE,

SOUTHWEST RESEARCH & INFORMATION CENTER

23-7159949

Page 7

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

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. Use Schedule J-2 if additional space is needed.
- 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. See 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if the organization did not o	ompensate ar	y cu	rren	t off	icer	, dire	ecto	r, or trustee.		
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	all 1	that	арр	ly)	compensation	compensation	amount of
	per	Ę						from	from related	other
	week	alb	_	İ		D E		the organization	organizations (W-2/1099-MISC)	compensation from the
		Ste	age a			Suga		(W-2/1099-MISC)	(***271099*141130)	organization
		로	onal t		aş de	S 8	İ	(** = *********************************		and related
		ndividual trustee or director	Institutional trustee	Officer	Кеу етрвоуев	Highest compensated employee	orme			organizations
ESTHER YAZZIE-LEWIS		-	_	0	Ľ	T 6	<u> </u>			
DIRECTOR/PRES	1.00	X		Х				0.	0.	0.
MANUEL PINO	1000			••						
DIRECTOR/V.P.	1.00	X		x				0.	0.	0.
JULIE STEPHENS		<u> </u>								
DIRECTOR	1.00	Х						0.	0.	0.
SANDRA SIMONS-AILES						 				
DIRECTOR/SEC & TREAS	1.00	Х		Х				0.	0.	0.
SYLVIA LEDESMA										
DIRECTOR	1.00	X						0.	0.	0.
ROBERT NOFCHISSEY										<u> </u>
DIRECTOR	1.00	X						0.	0.	0.
JUDITH ESPINOSA										
DIRECTOR	1.00	Х						0.	0.	0.
CANDACE HEAD-DYLLA	1									
DIRECTOR	1.00	X						0.	0.	0.
ANN WATSON										_
DIRECTOR	1.00	X						0.	0.	0.
									-	
		\vdash		-						
										· -
	1				_					
-										
				İ				İ		
	<u> </u>									

932007 02-04-10

									ATION CENTER			949	P	age 8
Par	VII Section A. Officers, Directors, Tru	ustees, Key Er	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	yees (continued)				
	(A) (B) Name and title Average hours				Pos	C) ition that	app	ıly)	(D) Reportable compensation	(E) Reportable compensation		an	(F) stimate nount	of
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MI	าร	com fr org and	other opensation the anizated related anization	ation e tion ted
		<u> </u>					-							
					<u>. </u>									
	,													
1 b	Total Total number of individuals (including but in compensation from the organization ▶	ot limited to th	ose	liste	ed al	bove	e) wh	no re	eceived more than \$100	0,000 in reportab	0 . le			0.
3	Did the organization list any former officer,	director or tru	stee	, ke	y em	ploy	yee,	or h	nighest compensated e	mployee on			Yes	No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	ım of reportabl							•	the organization		3		Х
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched	accrue comper	nsatı	on f						rices rendered to		5		X
Sec 1	ion B. Independent Contractors Complete this table for your five highest co	-			nt c	ontr	acto	rs t	hat received more than	\$100,000 of con	npensa		rom	
	the organization. NONE (A)								(B)			(C		
	Name and business	adoress							Description of s	services		omper	nsatioi	<u>n</u>
			·		<u> </u>					-				
								-						
2	Total number of independent contractors (i		ot lir	nıted	d to	_		sted	above) who received n	nore than		···		
	\$100,000 in compensation from the organiz	ation >				(<u>, </u>					Form 9	990 (2	2009)

		·		SEARCH &	INFORMATIO	N CENTER	23-7159	949 Page 9
Pa	rt VII	Statement of Reve	nue		(A)	(B)	(C)	(D) Revenue
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
gra	b	Membership dues	1b					
am am	c	Fundraising events	1c					
igi lar	d	Related organizations	1d					
S,E	е	Government grants (contribut	tions) 1e					
e ti	f	All other contributions, gifts, gran	nts, and					
들됨		similar amounts not included abo	ove 1f	836,019.				
25	9	Noncash contributions included in lines	s 1a-1f \$		006 010			
2 6	h	Total. Add lines 1a-1f		>	836,019.			
		CONCUERTNO DEED	~	Business Code		E4 226		
<u>i</u>		CONSULTING FEES		541900	54,236.	54,236. 3,862.		
e e		PUBLISHING, SALE	ES, PRINT	511120	3,862.	3,862.		
E S	С.	·						
Program Service Revenue	d							
P.	e	All other program service reve	20110					
	,	Total. Add lines 2a-2f	ciide		58,098.			
\neg	3	Investment income (including	dividends inter		00,000			
		other similar amounts)	,	>	5,686.			5,686.
	4	Income from investment of ta	x-exempt bond	oroceeds ►				•
	5	Royalties .		•				
		·	(i) Real	(II) Personal				,
	6 a	Gross Rents	2,524.					
	b	Less: rental expenses	624.					,
i	c	Rental income or (loss)	1,900.	•				
	d	Net rental income or (loss)		<u> </u>	1,900.			1,900.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
İ		Gain or (loss)		<u> </u>			İ	`
		Net gain or (loss)						
Other Revenue	ва	Gross income from fundraisin including \$	g events (not					
<u>۾</u>		contributions reported on line	1c). See					
<u>ē</u>		Part IV, line 18	а					
ਰੀ		Less: direct expenses	b					
-		Net income or (loss) from fund	•					· · · · · · · · · · · · · · · · · · ·
}	9 a	Gross income from gaming ad			ĺ			
- 1		Part IV, line 19	a					
		Less: direct expenses	b	•				
i		Net income or (loss) from gan						
	IU a	Gross sales of inventory, less and allowances						
	.	Less: cost of goods sold	a b					
İ		Net income or (loss) from sale	_					
f		Miscellaneous Revenu		Business Code				
	11 a			561439	219.	†	219.	
	ь							
	c						-	
-	d	All other revenue						
	е	Total. Add lines 11a-11d		<u> </u>	219.			
	12_	Total revenue. See instructions			901,922.	58,098.	219.	7,586.
93200 02-04-	10							Form 990 (2009)

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) but are not required to complete columns (B), (C), and (D).

32

	ot include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21	99,879.	99,879.		
2	Grants and other assistance to individuals in		- · -		
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	222 406	222 621	15 065	
	Other salaries and wages	238,496.	222,631.	15,865.	
	Pension plan contributions (include section 401(k)	7 500	6 000	1 500	
	and section 403(b) employer contributions)	7,500.	6,000.	1,500.	
	Other employee benefits	43,227.	35,514.	7,713.	· · · · · · · · · · · · · · · · · · ·
	Payroll taxes	18,245.	17,031.	1,214.	
	Fees for services (non-employees):				
	Management	42,347.	42,347.		
	Legal	10,816.	42,341.	10,816.	
	Accounting	22,086.	22,086.	10,010.	
	Lobbying	22,000.	22,000.		
	Professional fundraising services See Part IV, line 17				
	Investment management fees	238,141.	238,141.		
•	Other Advertising and promotion	230,141.	230,141.		
	Advertising and promotion Office expenses	11,433.	10,369.	1,064.	
	Information technology	11,133.	10,303.	1,001.	
	Royalties				-
	Occupancy	8,941.	6,855.	2,086.	
	Travel .	44,591.	44,275.	316.	
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	1,220.		1,220.	
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	5,374.		5,374.	
	Insurance				
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	,	".		
	PROFESSIONAL FEES	0.			
	TELEPHONE	12,213.	5,938.	6,275.	
	REPRODUCTION AND PRINTI	11,452.	11,424.	28.	
-	MISCELLANEOUS	8,733.	7,408.		1,325
	INSURANCE	7,362.	4,517.	2,845.	
	All other expenses	18,942.	8,476.	10,466.	
	Total functional expenses. Add lines 1 through 24f	850,998.	782,891.	66,782.	1,325
_	Joint costs Check here ▶ ☐ If following		1		
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation			<u> </u>	

Form 990 (2009) SOUTHWEST RESEARCH & INFORMATION CENTER 23-7159949 Page 11

Part X | Balance Sheet (A) Beginning of year End of year 1 Cash · non-interest-bearing 1 288,887. 325,784. 2 2 Savings and temporary cash investments 116,427. 70,702. Pledges and grants receivable, net 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 6 Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 3,022. 3,136. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 300,492. 10a basis, Complete Part VI of Schedule D 143,585. 156,797. 156,907. 10b **b** Less: accumulated depreciation 10c 11 Investments - publicly traded securities 11 77,275. 22,050. 12 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 587,183. 633,804. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 39,747. 35,443. Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees. highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities. Complete Part X of Schedule D 25 39,747. 35,443. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 382,741. 137,695. 356,332. 27 Unrestricted net assets 27 215,029. 28 28 Temporarily restricted net assets 27,000. 27,000. Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 33 547,436. 33 598,361. Total net assets or fund balances 587,183. 633,804. 34 Total liabilities and net assets/fund balances

<u>Form</u>	990 (2009) SOUTHWEST RESEARCH & INFORMATION CENTER 23-715	9949	Pag	ge 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
ь	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Зь		

SCHEDULE A (Form 990 or 990-EZ)

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.

Open to Public

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

SOUTHWEST RESEARCH & INFORMATION CENTER 23-7159949

Pa	rt E	Reason	for Public Cha	rity Status (All organiz	zations mu:	st comple	ete this par	t.) See ins	tructions.			-	
The	organ	zation is not a	a private foundation	because it is: (For lines	1 through 1	11, check	only one b	oox.)					
1				es, or association of chur).				
2		A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E)								
3				ital service organization	-		n 170(b)(1)	(A)(iii).					
4		•	•	operated in conjunction)(b)(1)(A)(i	ii). Enter th	ne hospital's	s name	e.
		city, and stat		•		•				•	•		
5		•		benefit of a college or u	niversity ov	wned or c	perated by	a govern	mental un	t describe	d in		
		-	(b)(1)(A)(iv). (Comp		,			• • •					
6			•	nent or governmental uni	t described	d in sectio	on 170(b)(1)(A)(v).					
7	$\overline{\mathbf{X}}$		-	ceives a substantial part					or from the	general n	ublic descr	ibed in	1
		_	(b)(1)(A)(vi). (Comple	•	or no supp		2 90 10111111	ornar armi		gonora, p	45110 40001		•
8				section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	\Box	-		ceives: (1) more than 33		•	from contr	ibutions, n	nembersh	p fees, and	d gross rec	eints f	rom
				nctions - subject to certa							-		
				taxable income (less sec							-		
			509(a)(2). (Complet			.,			, c. g.			.,	•
10				perated exclusively to te	st for publi	c safetv.	See section	on 509(a)(4).				
11		-	-	perated exclusively for the		•				v out the c	ourposes of	one o	or
		-	•	ations described in secti		•				•	•		
				organization and compl				,					
		а П Туре	_	- -1			ctionally in	tegrated		d 🔲	Type III - O	ther	
е				at the organization is not			•	•	r more dis				n
		-	=	than one or more publicly		•	•	•					
f			=	tten determination from		-							
			rganization, check t				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,					
g			•	organization accepted ar	nv aift or co	ontributio	n from anv	of the foll	owing per	sons?			
_		_		directly controls, either al			-					Yes	No
				upported organization?	· ·		•		`,	. ,	11g(i)		
		-		n described in (i) above?							11g(ii)		
			=	a person described in (i) o		, ?					11g(iii)		
h		- <u>1</u>		about the supported or									
			•	, ,	,	. ,							
/i\	Name	of supported	(ii) EIN	(iii) Type of	(iv) is the o	roanization	(v) Did yo	u notify the	(vi) is	the	(vii) Amo	ount of	
۱۰,		inization	(11) 2.114	organization (described on lines 1-9	in col (1) lis	ted in you	r organizat	ion in col	organizatii (i) organiz		supp		
	- 3			above or IRC section	governing o	document?	(i) of you	r support?	US	2			
				(see instructions))	Yes	No	Yes	No	Yes	No			
	-												
							1						
									1				
												-	
				1	<u> </u>		-		L				
					<u> </u>			<u> </u>					

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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<u>Total</u>

Schedule A (Form 990 or 990 EZ) 2009 SOUTHWEST RESEARCH & INFORMATION CENTER 23-7159949 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)

Se	ction A. Public Support								
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	673,805.	818,838.	764,759.	839,716.	836,019.	3933137.		
2	Tax revenues levied for the organ-								
	ızatıon'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	673,805.	818,838.	764,759.	839,716.	836,019.	3933137.		
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)						890,166.		
	Public support. Subtract line 5 from line 4						3042971.		
	ction B. Total Support	<u> </u>		-					
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total 3933137.		
	Amounts from line 4	673,805.	818,838.	764,759.	839,716.	836,019.	3933137.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties	7 600	20 007	16 666	11 145	0 010	64 455		
	and income from similar sources	7,629.	20,807.	16,666.	11,145.	8,210.	64,457.		
9	Net income from unrelated business								
	activities, whether or not the	60	506	202	200	0.10	1 -00		
	business is regularly carried on	62.	586.	323.	398.	219.	1,588.		
10	Other income. Do not include gain								
	or loss from the sale of capital		1 015	0.650			4 454		
	assets (Explain in Part IV.)		1,815.	2,659.			4,474.		
	Total support. Add lines 7 through 10								
	Gross receipts from related activities,		•		. !	12	498,570.		
13	First five years. If the Form 990 is for		first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	,		
Sec	organization, check this box and stop ction C. Computation of Publ	ic Support Per	rcentage						
				-l (0)		44	76.00 %		
	Public support percentage for 2009 (I	• • • • • • • • • • • • • • • • • • • •	•	olumn (t)) .		14			
	Public support percentage from 2008			line 40 and line 4	4 22 4/204	15			
	33 1/3% support test - 2009. If the o stop here. The organization qualifies				4 IS 33 1/3% of m	ore, cneck this box	Kano ►X		
					no 15 to 22 1/20/	b!/4b-	· · · · · · · · · · · · · · · · · · ·		
U	33 1/3% support test - 2008. If the o				ine 15 is 33 1/3%	or more, check thi	s box		
170	and stop here. The organization qual	•	• •		10 16a ar 16b ar				
174	10% -facts-and-circumstances test								
	and if the organization meets the "fact					t Iv now the organ	ization		
L	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
0									
	more, and if the organization meets the				•		▶ —		
1.0	organization meets the "facts-and-circ								
18	Private foundation. If the organization	<u>п ою поселеска г</u>	oox on line 13, 16a	1, 100, 1/a, or 1/b					
					ocne	dule A (Form 990	OI 990-EZ) 2009		

Sch	edule A (Form 990 or 990-EZ) 2009 art III Support Schedule for (Decemizations	Described in	Section FOO/s	<u> </u>		Page 3
So	ction A. Public Support	Jigariizations	Described in	Section Susta	(Complete on	y if you checked the b	ox on line 9 of Part I
_		(a) 2005	(L) 2006	(-) 0007	(-0.0000	4.1.0000	(0 Takal
	endar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
•	membership fees received. (Do not						
	Include any "unusual grants.")					1	
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						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513					1	
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				İ		
	the organization without charge						
6	Total. Add lines 1 through 5			ļ		<u> </u>	
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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			<u> </u>	<u> </u>	**	
	Public support (Subtract line 7c from line 6) ction B. Total Support				1		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2009	(a) 2000	40 Total
9	Amounts from line 6	(a) 2003	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(f) Total
-	Gross income from interest.						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						:
(Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in 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 IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here						▶□
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2009 (I	• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		15	%
16	Public support percentage from 2008					16	%
	ction D. Computation of Inves					Т	
	Investment income percentage for 20	•		ne 13, column (f))		17	%
18	Investment income percentage from	=	<u>=</u> '			[18]	%
19a	33 1/3% support tests - 2009. If the						7 is not
	more than 33 1/3%, check this box at						. ▶□
t	33 1/3% support tests - 2008. If the						and
20	line 18 is not more than 33 1/3%, che					-	
20	Private foundation. If the organization	n dia not check a l	oox on line 14, 19	a, or 190, check th		nstructions hedule A (Form 99)	0 or 000 EZ 0000
					20	nedule A (Form 99)	o or aan-ET) 5008

932023 02-08-10

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

Internal Hevenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Inspection of the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), then

 Section 5 	501(c)(4), (5), or (6) organiza	ations: Complete Part III.			
Name of orga	anization			Emp	oloyer identification number
		ST RESEARCH & IN			23-7159949
Part I-A	Complete if the or	ganization is exempt und	er section 501(c	c) or is a section 527 of	organization.
1 Provide	a description of the organi	zation's direct and indirect politic	al campaign activities	s in Part IV.	
2 Political	expenditures			. •	\$
3 Volunte	er hours				
					=
Part I-B	Complete if the or	ganization is exempt und	er section 501(c	:)(3)	,
1 Enter th	e amount of any excise tax	incurred by the organization und	ler section 4955	. •	\$
2 Enter th	e amount of any excise tax	incurred by organization manage	ers under section 495	5 5 ▶ \$	\$
3 If the or	ganization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
-	orrection made?				☐ Yes ☐ No
	describe in Part IV.				
Part I-C	Complete if the or	ganization is exempt und	er section 501(c	s), except section 501	<u>(c)(</u> 3).
1 Enter th	e amount directly expende	d by the filing organization for se-	ction 527 exempt fun	ction activities	\$
2 Enter th	e amount of the filing orgar	nization's funds contributed to ot	her organizations for	section 527	
exempt	function activities			. ▶	\$
3 Total ex	empt function expenditure	s. Add lines 1 and 2. Enter here a	nd on Form 1120-PO	L,	
line 17b				▶ \$	\$ <u></u>
4 Did the	filing organization file Form	1120-POL for this year?			Yes No
		mployer identification number (El	•	-	• •
	-	the amount paid from the filing or	-		
		ivered to a separate political orga	anization, such as a s	eparate segregated fund or	a political action committee
(PAC). II	additional space is neede	d, provide information in Part IV.	-, · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				Turius. Il florie, effici -0	delivered to a separate
					political organization.
					If none, enter -0
			ļ		
			İ		
				1	

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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2009

·	COLUMNIA DE COLUMNIA DE COLUMNIA DE COLUMNIA DE COLUMNIA DE COLUMNIA DE COLUMNIA DE COLUMNIA DE COLUMNIA DE CO	DECEADOU 6	THORMARTON	CENTED 22 7	150040
Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org			INFORMATION p. 501(c)(3) and file		159949 Page 2
(election under sec	-	ipi dilder sectio			
	ation belongs to an affilia	ated group.			
	ation checked box A and	• .	visions apply		
Limi	its on Lobbying Expenditures" means amour	ditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (a	rass roots lobbying)		0.	
b Total lobbying expenditures to infl				22,086.	
c Total lobbying expenditures (add I	· ·	, (direct leady ing)	Ì	22,086.	
d Other exempt purpose expenditur	•		Ì	827,587.	
e Total exempt purpose expenditure			•	849,673.	
f Lobbying nontaxable amount. Ent	-		h columns.	152,451.	
If the amount on line 1e, column (a)	or (b) is: The lobb	ying nontaxable am	ount is:		
Not over \$500,000	20% of th	he amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,000	plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,000	plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,000	plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	00.			
g Grassroots nontaxable amount (er	•		-	38,113.	
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	•		[0.	
j If there is an amount other than ze		ne 1i, did the organiza	ation file Form 4720	_	¬ (¬
reporting section 4911 tax for this				<u> </u>	Yes No
	4-Year Aver zations that made a se blumns below. See the		do not have to comp		
	Lobbying Expend	ditures During 4-Yea	r Averaging Period		-
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	168,309.	168,232.	162,718.	152,451.	651,710.
b Lobbying ceiling amount (150% of line 2a, column(e))					977,565.
c Total lobbying expenditures	23,106.	42,135.	16,600.	22,086.	103,927.
d Grassroots nontaxable amount	42,077.	42,058.	40,680.	38,113.	162,928.
e Grassroots celling amount (150% of line 2d, column (e))					244,392.

1,000.

Schedule C (Form 990 or 990-EZ) 2009

1,500.

500.

f - Grassroots lobbying expenditures

						CENTER23-7159949	Page 3
Part II-B	Complete if the org	anization is exe	mpt under se	ctic	on 501(c)(3) and ha	s NOT filed Form 5768	
	lelection under sect	tion 501(h))					

		(a))	(t	o)
		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)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	ļ			
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
į.	Other activities? If "Yes," describe in Part IV				
J	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not 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? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501(c)(5) or so	ction	
1,61	501(c)(6).	011 50 1 (0)(J), UI SE	Cuois	
				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?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? .		3		
1	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Dues, assessments and similar amounts from members	rt III-A, IIn	e 3 is ai	nswered	
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).	cal			
а	Current year		2a		
ь			2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		-
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				-
	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; an	nd Part II-B, li	ne 1ı. Also	, complete	this part
or a	ny additional information.				
					
				 :	_
					.
				_	

Schedule C (Form 990 or 990-EZ) 2009

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

,	SOUTHWEST RESEARCH		-		<u>23-715994</u>	9
Pa	t I Organizations Maintaining Donor Advis	ed Funds or O	her Similar Fund	s or Accounts	. Complete if the	
	organization answered "Yes" to Form 990, Part IV, Iir	ne 6.				
			advised funds	(b) Funds a	nd other accounts	 S
1	Total number at end of year			-		
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)		-			
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	Lumbing that the ac-	oto bold in dener adu	and funds		
3	_	-		sea iunas	Yes	□ No
6	are the organization's property, subject to the organization's	-	· ·		res	NO
6	Did the organization inform all grantees, donors, and donor	_	•	•		
	for charitable purposes and not for the benefit of the donor	or donor advisor, o	r for any other purpose	conterring		
Pa	impermissible private benefit?	<u> </u>		D 11/ 1 7	Yes _	No
				Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization	` —	i'''			
	Preservation of land for public use (e.g., recreation or	pleasure)	Preservation of an his			
	Protection of natural habitat	<u> </u>	Preservation of a cer	tified historic struc	ture	
_	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qual	ified conservation of	ontribution in the form	of a conservation	easement on the	last
	day of the tax year.			 		
				Held	i at the End of the T	ax Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements			2b		
c	Number of conservation easements on a certified historic st	ructure included in	(a)	2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06		2d		
3	Number of conservation easements modified, transferred, re	eleased, extinguish	ed, or terminated by th	e organization dur	ing the tax	
	year ▶					
4	Number of states where property subject to conservation ea	asement is located				
5	Does the organization have a written policy regarding the pe	eriodic monitoring, i	nspection, handling of			
	violations, and enforcement of the conservation easements	it holds?		•	Yes [No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing cor	servation easements o	during the year		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conserva	ation easements during	the year ▶ \$		<u> </u>
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requi	rements of section 170)(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?				Yes [No
9	In Part XIV, describe how the organization reports conservat	tion easements in it	s revenue and expense	e statement, and b	palance sheet, and	d
	include, if applicable, the text of the footnote to the organization					
	conservation easements.			•	· ·	
Pa	t III Organizations Maintaining Collections of	of Art, Historica	al Treasures, or O	ther Similar A	ssets.	
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8	•			
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its re	venue statement and b	alance sheet work	s of art, historical	
	treasures, or other similar assets held for public exhibition, e	education, or resear	ch in furtherance of pu	blic service, provid	de, in Part XIV, the	e text of
	the footnote to its financial statements that describes these	items.				
ь	If the organization elected, as permitted under SFAS 116, to	report in its reveni	e statement and balar	nce sheet works of	art, historical trea	asures,
	or other similar assets held for public exhibition, education,	or research in furth	erance of public service	e, provide the follo	wing amounts rela	ating to
	these items:		·	•	_	J
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$		
	(ii) Assets included in Form 990, Part X			▶ s		
2	If the organization received or held works of art, historical tre	easures, or other su	nilar assets for financia		· · ·	
_	the following amounts required to be reported under SFAS 1	•		, p		
а	Revenues included in Form 990, Part VIII, line 1			> \$		
b	Assets included in Form 990, Part X			<u> </u>		
~						

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Schedule D (Form 990) 2009

		ST RESEARC								Page 2
	t III Organizations Maintaining C									
3	Using the organization's acquisition, access	ion, and other record	ds, chec	ck any of the	following the	at are a s	ignificant	use of its	collection	items
	(check all that apply)		. —							
a	Public exhibition	C			hange progr	ams				
Ь	Scholarly research	•	نــا ﴿	Other			_			
С	Preservation for future generations									
4	Provide a description of the organization's c							ose in Par	t XIV.	
5	During the year, did the organization solicit of					er sımıla	r assets		_	
	to be sold to raise funds rather than to be m								_ Yes	No_
Pai	t IV Escrow and Custodial Arran		ete if or	ganization ai	nswered "Ye	s" to For	m 990, Pa	art IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	r contribution	ns or other a	ssets not	ıncluded		_	
	on Form 990, Part X?								Yes	L∐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:						
									Amount	
c	Beginning balance						1c			
d	Additions during the year				_		1d			
е	Distributions during the year	ů.					1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	217			_			Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	•								
Par	t V Endowment Funds. Complete	f the organization ar	nswered	'Yes' to Fo	rm 990, Parl	IV, line 1	10.			
		(a) Current year	(b) i	Prior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance .						***************************************			,
b	Contributions			,		'	-		, ,	
c	Net investment earnings, gains, and losses							***************************************		***************************************
ď	Grants or scholarships				İ .					· · · · · · ·
	Other expenditures for facilities				 					
·	and programs									
•	Administrative expenses			 -			······································	***************************************		
	End of year balance		<u> </u>		-			14.7		
	•				<u> </u>	t		•••••	Ĺ	
2	Provide the estimated percentage of the year Board designated or quasi-endowment	r end balance neid a								
	Permanent endowment		_%							
D		%								
C		%								
Ja	Are there endowment funds not in the posse	ession of the organiz	ation th	at are neid a	na aaministe	erea tor t	ne organiz	zation	Г.	
	by:									Yes No
	(i) unrelated organizations								3a(i)	
_	(ii) related organizations						-		3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	•							3b	
4	Describe in Part XIV the intended uses of the									
Par	· · · · · · · · · · · · · · · · · · ·					10.				
	Description of investment	(a) Cost or o			or other		ccumulate	ed	(d) Book	value
		basis (investr		- basis	(other)	de	oreciation			
1a	Land		<u>221.</u>							2,221.
b	Buildings	106,	125.	ļ	_	L	58,9	58.	47	,167.
C	Leasehold improvements			ļ						
d	Equipment		767.				84,6	27.		140.
e	Other	12,	<u>379.</u>	<u> </u>						2,379.
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colui	mn (B), line 1	0(c))				156	907.

Schedule D (Form 990) 2009

	ESEARCH & IN		CENTER 2	23-7159949 Page 3
Part VII Investments - Other Securities. Se	e Form 990, Part X, line 1	2.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of va	
Financial derivatives Closely-held equity interests				
Other ENDOWMENT INVESTMENT ACCOUNT	26,211	. COST		·
INVESTMENT	51,064			
THE THE THE TENT	31,004			
		_		
				
Total (Col /h) must sound form 000. Part V. sol /B) line 10 \	77,275			·····
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ► Part VIII Investments - Program Related. S				
		13.	(c) Method of va	aluation:
(a) Description of investment type	(b) Book value		Cost or end-of-year r	
		<u> </u>		
		-		
			· · · · · ·	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶				
Part IX Other Assets. See Form 990, Part X, line				
(a)	Description			(b) Book value
				<u> </u>
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X,				<u> </u>
1. (a) Description of liability	iine 25.	(b) Amount		
Federal income taxes		(S) / Amount		
Teachar moonic taxes			\dashv	
			_	
Tabel (Caluma (b) must a mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be mad 5 are 2000 Dad V (caluma (b) must be must be mad 5 are 2000 Dad V (caluma (b) must be must	05)		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 2. FIN 48 Footpote in Part XIV, provide the text of the foot		n financial et ata	note that reports the	organization la linkultur for
2. FIN 48 Footnote. In Part XIV, provide the text of the footuncertain tax positions under FIN 48.	mote to the organization?	s ilitariciai stateme	янь настеропѕ те	organization's liability for
932053 02-01-10			s	chedule D (Form 990) 2009
02 01 10			0	

	dule D (Form 990) 2009 SOUTHWEST RESEARCH & INFORM				159949 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fina	ncial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		901,922.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		850,998.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		50,924.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		_8		1.
9	Total adjustments (net). Add lines 4 through 8	-	9	•	1.
10 Dat	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Statements.		10) oti imp	50,925.
		IIIS WILLI NEV	enue per r	1 1	929,913.
1	Total revenue, gains, and other support per audited financial statements	•	•	1	929,913.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 . 1		ł	
a	Net unrealized gains on investments	2a		-	
Ь	Donated services and use of facilities	2b		-	
C	Recoveries of prior year grants	2c	27 267	-	
d	Other (Describe in Part XIV)	2d	27 , 367.	1 !	27 267
_	Add lines 2a through 2d		-	2e	27,367. 902,546.
3	Subtract line 2e from line 1			3	902,546.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4624	-[
ь	Other (Describe in Part XIV.)	4b	<624.	P	-604
C	Add lines 4a and 4b			4c	<624.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	Mark Francisco		5	901,922.
***************************************	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents with Exp	enses per	1 . 1	
1	Total expenses and losses per audited financial statements			1	878,988.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 - 1			
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b	 -	-	
C	Other losses .	2c	22 267	-	
d	Other (Describe in Part XIV.)	2d	27,367.	1 1	0.5.065
_	Add lines 2a through 2d			2e	27,367.
3	Subtract line 2e from line 1	•		3	851,621.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b	<623.	P	
С	Add lines 4a and 4b			4c	<623.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	850,998.
	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,				
	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl	ete this part to pr	ovide any add	ditional inf	formation.
PAF	T XII - LINE 4B- DIRECT RENT EXPENSE (624)				
DAE	T XIII - LINE 4B - DIRECT RENT EXPENSE (62	4.			
1111	T ATT - BIND 4D - DIRECT RENT EXPENSE (02				
PAF	T XIII - LINE 4B - ROUNDING ERROR 1				
PAF	T XII LINE 2D - ADMINISTRATIVE FEES 27,367	· · · · · · · · · · · · · · · · · · ·			
PAF	T XIII LINE 2D - ADMINISTRATIVE FEES - 27,	367			
					-
_					
				Schedule	D (Form 990) 2009

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49

ջ Employer identification number 23-7159949 Open to Public, Inspection 2009 X Yes 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 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. INFORMATION CENTER SOUTHWEST RESEARCH & General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990) Part I

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	United States. C	omplete if the orga	inization answered "Y	es* to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government (b) EIN (c) IRC section (d) Amount of non-cash or government assistance	(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash assistance		Mario Schedule Fri (Form 350) ii additional space is needed (if) Method of (g) Description of (h) Purpose FMV, appraisal, other)	(h) Purpose of grant or assistance
REGIONAL DEVELOPMENT CORPORATION 2209 MIGUEL CHAVEZ RD SANTA FE, NM 87505	74-2805791	501(C)(3)	5,276.	0			PROJECT SUPPORT
HEALTH SECURITY FOR NEW MEXICANS CAMPAIGN - PO BOX 2606 - CORRALES, NM 87048	n/a	n/a	10,465.	0			PROJECT SUPPORT
JUSTICE, ACCESS, SUPPORT & SOLUTIONS FOR HEALTH - 1608 ISLETA, SW - ALBUQUERQUE, NM 87105	42-1753563	501(C)(3)	23,275.	0.			PROJECT SUPPORT
KALPULLI IZKALLI 1028 ANN SW ALBUQUERQUE, NM 87105	n/a	n/a	51,363.	0			PROJECT SUPPORT
TRI-VALLEY CARES 2582 OLD FIRST STREET LIVERMORE, CA 94550	94-3101687	501(C)(3)	9,500.	0.			PROJET SUPPORT
	-						
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	nd government or	ganizations					~ ~

Schedule I (Form 990) 2009

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

27

SOUTHWEST RESEARCH & INFORMATION CENTER

Schedule I (Form 990) 2009

Part III

30804032

Page 2

23-7159949

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed BUDGET ARE REVIEWED AND APPROVED BEFORE ANY FUNDS ARE DISBURSED. REPORTING Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. SUBMITTED PROPOSED PROJECT. SCOPE OF WORK AND REVIEWED TO CONFIRM SCOPE OF WORK PERFORMED AND FUNDS (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients 2: (a) Type of grant or assistance LINE PART I, FROM RECIPIENTS IS PROPERLY EXPENDED SCHEDULE I, Part IV

Schedule I (Form 990) 2009

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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOUTHWEST RESEARCH & INFORMATION CENTER

Employer identification number 23-7159949

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
(CONTINUED) URANIUM IMPACT ASSESSMENT, AND NUCLEAR SAFETY AND
ENVIRONMENTAL EDUCATION AND INFORMATION TO THE PUBLIC.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
PROVIDE INFORMATION TO COMMUNITY MEMBERS ON NUMEROUS HEALTH &
ENVIRONMENTAL TOPICS
EXPENSES \$ 152014. INCLUDING GRANTS OF \$ 85103. REVENUE \$ 166078.
FORM 990, PART VI, SECTION A, LINE 8B: THERE IS NO COMMITTEE WITH
AUTHORITY TO ACT FOR THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11: THE TREASURER ON BEHALF OF THE
BOARD REVIEWS FORM 990 BEFORE FILING. A COPY IS AVAILABLE AT THE NEXT
SCHEDULED BOARD MEETING.
FORM 990, PART VI, SECTION B, LINE 12C: MONITOR AND ENFORCE THROUGH
DISCLOSURE AND BOARD DISCUSSION.
FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION SET BY BOARD, WITH
SALARY LEVEL BELOW USUAL AND CUSTOMARY LEVELS, THEREFORE NO OUTSIDE PARTIES
CONSULTED.
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST