SCANNED AUG 0 5 2019

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

► Do not enter social security numbers on this form as it may be made public Solo

Go to www irs gov/Form990 for instructions and the latest information Department of the Treasury Internal Revenue Service

Ā	For the 2	2017 calen	dar year, or tax year beginning 07	//01/2017	and ending	06/3	0/2018			_
В	Check if a	pplicable	C Name of organization SOUTH	WEST FAIR				D Empl	oyer identification number	
	Address c	hange	Doing business as					186-0	530355	
$\overline{\Box}$	Name cha	ange	Number and street (or P O box if m	ail is not delivered to stre	et address)	Room	/suite		hone number	_
Ħ	Initial retui	-	177 -N CHURCH AVE			110	4	1520	798-1568	
\exists	Final return/t		City or town, state or province, coun	try, and ZIP or foreign no	stal code			1020	7.30 1300	_
H	Amended		TUCSON, AZ 85701	wy, and zir or toreign po	star code			G Gross	s receipts \$ 878,085	
H	Application p		F Name and address of principal offic	or TOHN VOLING	~				return for subordinates? Yes X N	
ш	<i>т</i> фріковион р	rending	177 N CHURCH AVE			37	l l		ordinates included? Yes N	
	<u> </u>									10
	ax-exempt) ∢ (insert no)	4947(a)(1) or	52			ch a list (see instructions)	
			SWFHC.COM X Corporation Trust Ass						nption number	_
_	orm of org			sociationOther ▶	<u> </u>	ear of fo	rmation 1986	<u> </u>	State of legal domicile A	<u>Z</u>
			. •							—
			ribe the organization's mission or mo	st significant activities						
ည	1	ROMOT	E FAIR HOUSING							
Governance	_				·					
ĕ			pox ► ☐ if the organization discont		disposed of m	ore thar	1 25% of its net a	issets	1	_
			oling members of the governing boo					3		<u>_</u>
ර ග			ndependent voting members of the g		•			4		7
Activities &	5 To	tal numbe	er of individuals employed in calenda	ır year 2017 (Part V, lır	ne 2a)			5	6:	
≩	6 To	tal numbe	er of volunteers (estimate if necessar	ry)				6	10	_
ĕ	7a To	tal unrelat	ted business revenue from Part VIII,	column (C), line 12				7a	0	_
	b Ne	t unrelate	d business taxable income from For	m 990-T, line 34				7b	0	<u>.</u>
				Current Year	_					
	8 Co	intribution	s and grants (Part VIII, line 1h)				845,		858,054	
Revenue	9 Pro	ogram ser	vice revenue (Part VIII, line 2g)	500.	19,483	<u>.</u>				
Ver	10 Inv	estment i	ncome (Part VIII, column (A), lines 3							
æ	11 Oth	her reveni	ue (Part VIII, column (A), lines 5, 6d	, 8c, 9c, 10c, and 11e))			424.	548	
	12 To	tal revenu	e – add lines 8 through 11 (must eq	ual Part VIII, column (/	A), line 12)		860,	604.	878,085	•
	13 Gr	ants and	sımılar amounts paid (Part IX, colum	ın (A), lines 1-3)						_
	14 Be	nefits paid	d to or for members (Part IX, columr							
S	15 Sa	laries, oth	er compensation, employee benefits	227.	560,539	<u>.</u>				
Expenses	16a Pro	ofessional	l fundraising fees (Part IX, column (A	A), line 11e)						_
ē	b To	tal fundra	ising expenses (Part IX, column (D)							
யி	17 Otl	her expen	ses (Part IX, column (A), lines 11a-	11d, 11f-24e)			233,		229,942	
	18 To	tal expens	ses Add lines 13-17 (must equal Pa	irt IX, column (A), line	25)		822,		790,481	
		venue les	s expenses Subtract line 18 from li	ne 12		$\Box\Box$	38,	303.	87,604	<u>.</u>
Çes Ces				REC	EIVED	_ B	inning of Curr		End of Year	_
Net Assets of Fund Balanc	20 To	tal assets	(Part X, line 16)			12	493,		582,554	
et As	21 To	tal liabilitie	es (Part X, line 26)	MAY	1 5 2019			507.	50,179	_
		t assets o	es (Part X, line 26) or fund balances Subtract line 21 fro	om line 200		12	444,	<u>771.</u>	532,375	<u>.</u>
		Signan	THE DIOCK		TENI LIT					
			ry, I declare that I have examined this re						y knowledge and bolief, it is	
tru	e, correct,	and compl	ete Declaration of preparer (other than	officer) is based on all in	formation of whi	ch prepa	rer has any knowle	edge /		
٥.	•	5.55	25 25 25					5/10/1	9	
	gn	Ĭ,	e of office				Date	9 1		
Н	ere 🕨	JOHN		E DIRECTOR			 			_
			orint name and title t/Type preparer's name	Tourne				— ₁		
	aid		v rype preparer's name	Preparer's signature			Date	Check	—	
	eparer	1		<u> </u>			L	self-e	mployed	
U	se Only	1					Fır	m's EIN 🕨		_
		Firm's a	address >				Ph	one no		
								-		_
May	the IRS	discuss th	nis return with the preparer shown al	oove? (see instructions	5)				☐ Yes ☐ No	_

ABDO

Part IV Checklist of Required Sched	

			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	. [x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	_
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	445		v
2 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		<u> </u>
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14h		x
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		
•	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	"-		
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	"		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
8	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
9	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

Par	t IV Checklist of Required Schedules (continued)			
			\	
20 -	D. I. I	20-	Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		<u> </u>
b	If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			- 41
^-	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
-	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	ļ	X
25 a			[
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	254		x
26	If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		^
26	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	10		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	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 (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
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			
-4	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	1 24		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N,	31	 	X
J2	Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 52		
•-	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
20	Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		7.5	
	19? Note. All Form 990 filers are required to complete Schedule O	38		ı

Form 990 (2017). SOUTHWEST FAIR HOUSING COUNCIL Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable	6		•	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?	L	1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				1 13 ×
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	61			ر درست
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	Į	2b	X	
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	Ĺ	3b		
4 a	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)?	L	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	į			: 1
	(FBAR)	l.			
5 a	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?	ļ	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible as charitable contributions?	-	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
,	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c)				
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?	}-			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	ŀ	7a 7b	_	<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-	-15		
·	required to file Form 8282?		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	o	70	,	<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requ	ured?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	ľ		-	
	sponsoring organization have excess business holdings at any time during the year?	ľ	8		
9	Sponsoring organizations maintaining donor advised funds		_		
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	[9b		
10	Section 501(c)(7) organizations Enter				1
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter			-	.
а	Gross income from members or shareholders				١, ١
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them)				_
12 a	Section 4947(a)(1) non-exempt charitable trusts Is the organization filing Form 990 in lieu of Form 1041?	Ļ	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1			
а	Is the organization licensed to issue qualified health plans in more than one state?	-	13a		
la.	Note See the instructions for additional information the organization must report on Schedule O]	\cdot	ļ
b	Enter the amount of reserves the organization is required to maintain by the states in which				ļ
_	the organization is licensed to issue qualified health plans Enter the amount of resource on head				i
с 14 а	Enter the amount of reserves on hand Did the organization receive any payments for indeer tanging sequence during the tay year?				
b	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<u> </u>	14a	-+	X
	100, model income to the report these payments? If two, provide an explanation in Schedule O		14b		

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.

3000	ion A. Governing Body and Management				,
	ı			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a	7			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O	_			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				
_	any other officer, director, trustee, or key employee?		2	_	X
3	Did the organization delegate control over management duties customarily performed by or under the direct		_		l
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	İ	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint				
	one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		~		.,
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		•		
_	the year by the following			~ ***	
a	The governing body?		8a	X	7
9 9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		8b		X
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		v
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)				X
	ion but ondice (the established and international code)			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	1	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11 a		m?	11a	X	l
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12 a	Did the organization have a written conflict of interest policy? If "No," go to line 13	İ	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to con-	iflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				
	describe in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approval by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16 a					
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		-	,	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				
	organization's exempt status with respect to such arrangements?		16b		•
ect	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶AZ				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1 (Section 501(c)(3	s only)			
	available for public inspection. Indicate how you made these available. Check all that apply				
	Own website Another's website Upon request Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest poli	cy, and			
	financial statements available to the public during the tax year				
	manda distante divanda e to the public during the tax year				

R	6-	n	5	3	n	3	5	5	Page	7

			~~~~~
Form 990 (2017) . SOUTHWEST	FATR	HOUSTNG	COUNCIL

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

	·	
_	0) 1 (0) 1 - 1 1 0 1	
- (	Check if Schedule O contains a response or note to any line in this Part VII	
_	check in concadic o contains a respense of mote to any into in time i art vii	
	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	 

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definintion 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

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

Greek this box in restrict the organization in			3	(C						,
(A)	(B)	•		Posi				(D)	(E)	(F)
Name and Title	Average	(do o				than or	ne.	Reportable	Reportable	Estimated
Name and The	hours per	1 `				is both		compensation	compensation from	amount of
	week (list any	ı				or/truste		from	related	other
	hours for	0 =	1			,		the	organizations	compensation
	related	혈호	Stit	Officer	Key employee	ng figh	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ecto	L to	q	due	est oye	ĕ	(W-2/1099-MISC)		organization
	line)	4 🛱	nafi		ōy	e com				and related organizations
		Individual trustee or director	Institutional trustee		ě	Pen				organizations
		"	ee			Highest compensated employee				
				<u> </u>		ä	_			
(1) SOUTHWEST FAIR HOUSING	40	İ								
EXECUTIVE DIRECTOR	1 20	х		x				67,796.		14,150.
(2) MARCOS YSMAEL	1							, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,
PRESIDENT		X		x						
(3) JEAN-PAUL GENET	1						_			
VICE PRESIDENT		X		X	ĺ					
(4) DIA BARNEY	1									
SECRETARY		X		X	<u> </u>					
(5) ERNESTO GARCIA	1									
TREASURER		X		X						
(6) JENIFER THORNTON	1									
PAST DIRECTOR		X			<u> </u>					
(7) GLORIA VASQUEZ	1									
PAST DIRECTOR		X								
(8)										
					<u> </u>					
(9)										
<del>,</del>		ļ	<u> </u>	<u> </u>	<u> </u>					
(10)										
722	<del> </del>	ļ	<u> </u>	_	<del> </del>	$\vdash \vdash$				
(11)	-	-								
(42)	-		₩	_		<del>  </del>				
(12)		-								
(12)	<del> </del>	<b> </b>	├—	-	┼	$\vdash \vdash \vdash$				<u> </u>
(13)	-	1								
(14)	<del>-</del>	<del>                                     </del>	<del> </del>	-		-				<u> </u>
(17)	-	-								
UYA		<u> </u>		J	<u> </u>	1	L	l		Form <b>990</b> (2017)
UIA										rom <b>330</b> (2017)

Part VII Section A. Officers, Directors, Tru	istees, Ke	y Em _l	ploy	/ees	s, a	nd Hi	ighe	est Compensa	ted Employee	s (continued)
				(C						
(A)	(B)	Position						(D)	(E)	(F)
Name and title	Average	i '				than o		Reportable	Reportable compensation from	Estimated amount of
	hours per week (list any	ł		•		is both		compensation from	related	other
	hours for	office	$\overline{}$		,	or/trust	<del></del> -	the	organizations	compensation
	related	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	(W-2/1099-MISC)	from the organization
	organizations below dotted	ndividual i	ution	4	mpl	est c	ď	(W-2/1099-MISC)		and related
	line)	า้าเ	ai tr		oye	) mp				organizations
		tee	uste			ens				
			e			ated				
(15)										
(16)										
	ļ <u>.</u>				_		<u> </u>			<u> </u>
(17)										
(40)					<b> </b>	-				
(18)										
(19)	<del>                                     </del>	-		$\vdash$	<del> </del>		╁			
		-								
(20)										
				L	L		<u> </u>			
(21)										
					<u> </u>		<u> </u>	<b>_</b>		
(22)		-				1				
(23)		ļ			├	-	-	1		<del></del>
(23)		-								
(24)		1	┢		$\vdash$	<del> </del>	╁╌	1		
		1								
(25)										
	]		<u>L</u>		<u></u>	<u></u>	بِــــ			
1b Sub-total								67,796.		14,150.
c Total from continuation sheets to Pa	art VII, Sec	tion	A					67.706		14 150
d Total (add lines 1b and 1c)  2 Total number of individuals (including	hut not limi	ted to	the		liete	nd abo	OVA)	67,796.	more than \$10	14,150.
reportable compensation from the orga			· iiic	)3C	11310	cu abi	ove,	who received	more man pro-	0,000 01
										Yes No
3 Did the organization list any former office	er, director	, or tr	uste	ee,	key	empl	loye	e, or highest c	ompensated	
employee on line 1a? If "Yes," comple	te Schedule	e J fo	r su	ch i	ndıv	⁄ıdual				_3 X
4 For any individual listed on line 1a, is the		•								he
organization and related organizations g	reater than	\$150	,000	02	lf	"Yes,	" co	mplete Sched	ule J for such	
individual								aroloted erasa		4 X
5 Did any person listed on line 1a received for services rendered to the organization							-	_	zation of individ	
Section B. Independent Contractors	11 163,	comp	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1160	iule 5	101	such person		5 X
Complete this table for your five highest	compensa	ted in	dep	end	lent	contr	acto	ors that receive	ed more than \$1	100,000 of
compensation from the organization Re										
tax year (A)	······							(B)	<u> </u>	(C)
Name and business address								Description of	services	Compensation
							_			
							$\bot$	. <u></u>		
							<del> </del>			. <u></u>
							+			
2 Total number of independent contractors	s (including	hut r	ot l	ımıt	ed f	to the	S	isted above) w	ho	
received more than \$100,000 of comper								.Stoc doove, w		

	Ţ	Check if Schedule O contains	s a response or no	te to any line in this	Part VIII			П
1					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a				,	
ts, Grants Amounts	b	Membership dues	1b		]			• • • • • • • • • • • • • • • • • • •
s, G	С	Fundraising events	1c					. 4
Gıfts, ilar An		Related organizations	1d		1			ं भूरी
	е	Government grants (contribut	ions) 1e	852,779.			1	١
tributions, Giff Other Similar		All other contributions, gifts, g		<u> </u>	•			
but the		and similar amounts not include	· I	5,275.				
Contributions, and Other Sim	g	Noncash contributions include	ed in lines 1a-1f \$	<u> </u>		,		
Cont	h	Total. Add lines 1a-1f		<b>•</b>	858,054.			l i
<u> </u>				Business Code				
Program Service Revenue	2a	CONTRACT/PROJE	CT REVEN	900099	19,483.	19,483.		
Rev	b						<del></del>	
lce.	С							
Ser	d							
a	е							
. go	f	All other program service reve	enue					
ď.	g	Total. Add lines 2a-2f		<b>•</b>	19,483.	: -	,,,	. (
	3	Investment income (including	dividends, interest	1				
		and other similar amounts)		•				
	4	Income from investment of tax	x-exempt bond pro	ceeds				
	5	Royalties	<b>&gt;</b> _					
			(ı) Real	(ii) Personal	-			,
	ба	Gross rents			V. V.	, ,,,	*,,,,,	
	b	Less rental expenses			*	141.4 a angala	· 600 cm (c)	1.0
	С	Rental income or (loss)		<u></u>				
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other	*1			
		assets other than inventory						1
	b	Less cost or other basis						
		and sales expenses				ŀ		· · · · · · · · · · · · · · · · · · ·
	С	Gain or (loss)						<u>'</u>
	đ	Net gain or (loss)						
a					•	•	,	
enne	8a	Gross income from fundraising	ng					
ě		events (not including \$						1
Other Rever		of contributions reported on lin	ne 1c)					
ţ.		See Part IV, line 18	а					!
0	b	Less direct expenses	b					 
	С	Net income or (loss) from fun-	draising events	<u> </u>				
	9 a	Gross income from gaming a	ctivities		•			
		See Part IV, line 19	а					
	b	Less direct expenses	b					
	С	Net income or (loss) from gar	ning activities	<u> </u>				
	10 a	Gross sales of inventory, less	;		] .		ı	į į
		returns and allowances	а		]	1		
	b	Less cost of goods sold	b				·	
	С	Net income or (loss) from sale	es inventory	<b>&gt;</b>				
		Miscellaneous Revenue		Business Code	,			
	11 a	MISCELLANEOUS	INCOME	900099	548.			548.
	b		· · · · · · · · · · · · · · · · · · ·					
	С		<del></del>					_
	d	All other revenue						
	e			<b>•</b>	548.		•	pd .
	12	Total revenue. See instructi	one	•	878.085	19.483		548

## Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to an Do not include amounts reported on lines 6b, 7b, 8b, 9b,	(A)	(B)	(C)	(D)
and 10b of Part VIII	I otal expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				*
2 Grants and other assistance to domestic				
individuals See Part IV, line 22	_			
3 Grants and other assistance to foreign organizations,				
foreign governments, and foreign individuals. See Part IV,				
lines 15 and 16				• '
Benefits paid to or for members				
5 Compensation of current officers, directors, trustees,	j	Ī	İ	
and key employees	83,527.	83,527.		, ·
6 Compensation not included above, to disqualified persons				
(as defined under section 4958(f)(1)) and persons			1	
described in section 4958(c)(3)(B)	380,678.	380,600.	78.	
7 Other salaries and wages				<u></u>
Pension plan accruals and contributions (include section				
401(k) and 403(b) employer contributions)	8,951.	8,951.		
9 Other employee benefits	53,679.	54,417.	-738.	
10 Payroll taxes	33,704.	33,704.		
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal		22.050		
C Accounting	34,021.	20,858.	13,163.	· ··-
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
9 Other (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O)	17,203.	3,647.	13,556.	
12 Advertising and promotion	2,473.	1,713.	760.	
13 Office expenses	18,234.	12,736.	5,498.	
14 Information technology				
15 Royalties	60 100	FO C14	1 514	
16 Occupancy 17 Travel	60,128.	58,614.	1,514.	
110101	48,773.	48,400.	373.	<del></del>
r dymente of travel of characteriment expenses for any				
federal, state, or local public officials  19 Conferences conventions and meetings	6 117	6 044	72	
comercines, containing, and modulings	6,117.	6,044.	73.	<del></del>
<ul><li>21 Payments to affiliates</li><li>22 Depreciation, depletion, and amortization</li></ul>	3 040		2 040	
23 Insurance	3,949. 3,560.		3,949. 3,560.	
	3,360.		3,360.	
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount	•			•
·				a.
exceeds 10% of line 25, column (A) amount, list line 24e		4 .		
expenses on Schedule O)  a EQUIP. REPAIR MAINT.	30,949.	33,079.	-2,130.	
b MISCELLANEOUS	1,939.	132.	1,807.	
© DUES AND SUBSCRIPTIONS	2,596.	576.	2,020.	
d DOES AND SOBSCRIPTIONS	2,390.		2,020.	
c All other expenses		<del></del>		
25 Total functional expenses Add lines 1 through 24e	790,481.	746,998.	43,483.	
26 Joint costs Complete this line only if the organization	190,401.	120,330.	33,303.	·
reported in column (B) joint costs from a combined				
i i i				
educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	1			
UYA				Form <b>990</b> (201

	Check if Schedule O contains a response or note to any line in this Part X		<del></del>	
		(A) Beginning of year		(B) End of year
				· · · · · · · · · · · · · · · · · · ·
'	Cash — non-interest-bearing	225,312.	1	191,819
1	Savings and temporary cash investments	·	2	
;	Pledges and grants receivable, net	231,222.	3	338,803
4			4	4,028
!	Loans and other receivables from current and former officers, directors, trustees, key employees,		-	
	and highest compensated employees Complete Part II of Schedule L		5	· · · · · · · · · · · · · · · · · · ·
-   6	, , , , , , , , , , , , , , , , , , , ,			•
1	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary employees'			
,	beneficiary organizations (see instructions)		<u>  </u>	
	Complete Part II of Schedule L	······································	6	
<b>[</b> ]	Notes and loans receivable, net		7	
۱ ۱	Inventories for sale or use	<del></del>	8	
- 1	Prepaid expenses and deferred charges	20,305.	9	22,798
11	a Land, buildings, and equipment cost or		1	
	other basis Complete Part VI of Schedule D 10a 55, 856.		<i>:</i>	
	b Less accumulated depreciation 10b 30,750.	16,439.	10c	25,106
1.	Investments — publicly traded securities		11	
1:	· ·		12	
1:	Investments — program-related See Part IV, line 11		13	<del></del>
14	•		14	
1:	Other assets See Part IV, line 11	<del></del>	15	
10	Total assets Add lines 1 through 15 (must equal line 34)	493,278.	16	582,554
17	Accounts payable and accrued expenses	48,507.	17	50,179
11	' '		18	
19			19	
2 2	Tax-exempt bond liabilities		20	
2	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
2:	Loans and other payables to current and former officers, directors, trustees, key employees,		-	
<u> </u>	highest compensated employees, and disqualified persons. Complete Part II of Schedule L.	<del></del>	22	
2	3 Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
2	, , , , , , , , , , , , , , , , , , , ,		-	<del></del>
	not included on lines 17-24) Complete Part X of Schedule D	·	25	
2		<u>48,507.</u>	26	50,179
3	Organizations that follow SFAS 117 (ASC 958), check here		-	
	through 29, and lines 33 and 34		_	
2		444,771.	27	532,375
ב   נ			28	
2 2			29	
2 2 2 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete			
5 [	lines 30 through 34.		-	
3 3	, , , , , , , , , , , , , , , , , , , ,	<del></del>	30	<u> </u>
3 3	3, 1,		31	
3   3	Retained earnings, endowment, accumulated income, or other funds		32	
3	Total net assets or fund balances	444,771.	33	532,375
<b>Z</b>   3.	Total liabilities and net assets/fund balances	493,278.	34	<u>582,554</u>

		ST FAIR HOUSING C	OUNCIL	86-	<u>053035</u>	5 P	age 12
Pari	XI Reconciliation	of Net Assets					
	Check if Schedule O	contains a response or note to any	line in this Part XI	·			<u> </u>
1	Total revenue (must equa	Part VIII, column (A), line 12)		1	<u> </u>	18,C	<u>)85.</u>
2	Total expenses (must equ	ıal Part IX, column (Λ), lıne 25)		2	79	0,4	181.
3	Revenue less expenses S	Subtract line 2 from line 1		3	8	37,6	504.
4	Net assets or fund balance	es at beginning of year (must equal	Part X, line 33, column (A))	4	44	14,7	771.
5	Net unrealized gains (loss	es) on investments		5 '			
6	Donated services and use	of facilities		6			
7	Investment expenses			7			
8	Prior period adjustments			8			
9	Other changes in net asse	ets or fund balances (explain in Sche	edule O)	9			
10	Net assets or fund balance	es at end of year Combine lines 3 th	hrough 9 (must equal Part X, line				
	33, column (B))			10	53	32,3	37 <u>5</u> .
Part	XII Financial State	ments and Reporting					
	Check if Schedule O	contains a response or note to any	line in this Part XII				
						Yes	No
1	Accounting method used	to prepare the Form 990 🔲 Cash	Accrual Other				
	If the organization change	ed its method of accounting from a pi	rior year or checked "Other," explain in Sch	edule O			
2 a	Were the organization's fi	nancial statements compiled or revie	ewed by an independent accountant?		2a	X	
	If "Yes," check a box belo	w to indicate whether the financial st	tatements for the year were compiled or revi	ewed on a separate		:	
	basis, consolidated basis,	or both				١,	_
	X Separate basis		Both consolidated and separate b	asis	,,,,,		
t,	Were the organization's fi	nancial statements audited by an inc	dependent accountant?		2b	X	
	If "Yes," check a box belo	w to indicate whether the financial st	tatements for the year were audited on a se	parate basis, consolida	ated	T	1
	basis, or both				<b> </b>	<b>*</b>	`
	X Separate basis	Consolidated basis	Both consolidated and separate b	asıs		· +"	ή .
Ç	If "Yes" to line 2a or 2b, d	oes the organization have a committe	ee that assumes responsibility for oversight			٠ سِـ ا	1

2c

За

3b

X

Form **990** (2017)

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Schedule O

the Single Audit Act and OMB Circular A-133?

#### 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 and the section for the complete of the organization of the complete of the organization of the complete of the organization of the complete of the organization of the complete of the complete of the organization of the complete of the organization of the complete of the organization of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the

2017

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 or Form 990-EZ.

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

Inspec

iamo	e or tr	ne organization					Employer identification	number
SO	UTE	WEST FAIR HOUSING	COUNCIL				86-0530355	
	rt I	Reason for Public Cha		organizations must	comple	te this pa	art ) See instructio	ns.
		anization is not a private founda						. 1
1	ň	A church, convention of church	nes or association	on of churches descri	bed in se	ction 17	0(b)(1)(A)(i). 4	1 +
2		A school described in <b>section</b>						/ 1
_	_			•				
3	_	A hospital or a cooperative hos						(C.:) Catacatha
4	$\Box$	A medical research organization		onjunction with a nost	oltal desc	ribed in s	section 170(b)(1)(A)	(III). Enter the
_	_	hospital's name, city, and state	· ———	<del></del>	·····		·· · · · · · · · · · · · · · · · · · ·	
5	$\sqcup$	An organization operated for the		ollege or university ow	ned or o	perated b	y a governmental ui	nit described in
		section 170(b)(1)(A)(iv). (Con	nplete Part II)					
6		A federal, state, or local govern	nment or govern	mental unit described	lın secti	on 170(b	)(1)(A)(v).	
7	X	An organization that normally i	receives a substa	antial part of its suppo	ort from a	a governr	nental unit or from t	he general public
		described in section 170(b)(1)	(A)(vi). (Compl	ete Part II)				
8		A community trust described in	n section 170(b)	)(1)(A)(vi). (Complete	Part II)			
9	$\overline{\Box}$	An agricultural research organi				perated in	n conjunction with a	land-grant college
	_	or university or a non-land-gra-						
		university		(4	,		-, - <b>,</b> ,	<b></b>
10		An organization that normally	receives (1) mo	re than 33 1/3% of its	support	from cont	tributions members	hin fees, and gross
		receipts from activities related	to its exempt fur	nctions-subject to cer	tain exce	ptions, a	nd (2) no more than	33 1/3% of its
		support from gross investment	: income and unr	related business taxat	ole incom	ie (less s	ection 511 tax) from	businesses
11		acquired by the organization a An organization organized and						
	$\vdash$	An organization organized and	•	•	-			out the nurneses o
12	Ш	one or more publicly supported	•	<del>-</del>			•	• •
			•					
	_	the box in lines 12a through 12		*	• •		•	•
ŧ	3 ∟	Type I. A supporting organiz	•	•				
		the supported organization(s	•	• • • •	ct a majo	ority of the	e directors or trustee	es of the supporting
		organization You must com	•					
ŀ	o L	Type II. A supporting organiz	•				•	• • •
		control or management of the			e same p	ersons th	nat control or manag	ge the supported
		organization(s) You must co	omplete Part IV	, Sections A and C.				
•	: [	Type III functionally integra	ated. A supportir	ng organization opera	ted in co	nnection	with, and functionall	y integrated with,
		its supported organization(s)	(see instructions	s) You must comple	te Part I'	V, Sectio	ons A, D, and E.	
•	d [	☐ Type III non-functionally in	tegrated. A sup	porting organization of	perated	in connec	ction with its support	ted organization(s)
		that is not functionally integra	ated The organi	zation generally must	satisfy a	distribut	ion requirement and	an attentiveness
		requirement (see instructions	s) You must co	mplete Part IV, Secti	ions A a	nd D, and	d Part V.	
•	e [	Check this box if the organize	ation received a	written determination	from the	IRS that	it is a Type I, Type	II, Type III
	_	functionally integrated, or Ty					• • • • • • • • • • • • • • • • • • • •	, ,,
1	f E	Enter the number of supported of	•	, , , , , , , , , , , , , , , , , , , ,	Ū	•		
•		Provide the following information		orted organization(s)				
		Name of supported organization	(II) EIN	(III) Type of organization	(IV) is the (	organization	(v) Amount of monetary	(vi) Amount of
	• • •		(,	(described on lines 1-10	listed in you	urgoverning		other support (see
				above (see instructions))	docu	ment?	instructions)	instructions)
					Yes	No		
						1.1.5		
A)								
						<del> </del>		
B)								
					·			
C)					<u> </u>	]		
			<del></del>		<del> </del>	<del> </del>		
D)						1		
			<del> </del>	<del></del>	ļ			
E)					ł	1		
			Little Charles a 180		War a series	\$100 me . 5 . 7 1/4		
[nt:	ai		1 は、1500年 1376年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 1882年 18824 18824 18824 18824 18824 18824 18824 18824 18824 18824 18824 1	I MANAGEMENT OF THE PROPERTY OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STATE O	121 70	1 7 短纸品牌设备	I .	

Schedule A (Form 990 or 990-EZ) 2017 SOUTHWEST FAIR HOUSING COUNCIL 86-0530355 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support (c) 2015 (d) 2016 (e) 2017 (f) Total Calendar year (or fiscal year beginning in) (a) 2013 **(b)** 2014 Gifts, grants, contributions. membership fees received (Do not include any "unusual grants") 860,931. 749,694. 734,488. 845,680. 858,054. 4,048,847 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 860,931.749,694.734,488.845,680.858,054.4,048,847. Total. Add lines 1 through 3 The portion of total contributions by person (other governmental unit publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support Subtract line 5 from line 4 048,847. Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2015 (d) 2016 (e) 2017 (a) 2013 **(b)** 2014 (f) Total 860,931.749,694.734,488.845,680.858,054.4,048,847. Amounts from line 4 7 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources 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 5.944. (Explain in Part VI) 5.577. 2.424. 548. 22,325.  $\overline{\mathbf{s}}$ 

11	Total support. Add lines 7 through 10		. 4	1,071,1	72.
12	Gross receipts from related activities, etc. (see instructions)	12			
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year	r as a	section 5	01(c)(3)	
	organization, check this box and stop here				▶ □
ecti	on C. Computation of Public Support Percentage				
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14		99.	45%
15	Public support percentage from 2016 Schedule A, Part II, line 14	15		99.4	<b>47</b> %
16a	33 1/3 % support test-2017. If the organization did not check the box on line 13, and line 14 is 33	1/3 %	or more,	check th	IS
	box and stop here. The organization qualifies as a publicly supported organization			1	<b>X</b>
b	33 1/3 % support test-2016. If the organization did not check a box on line 13 or 16a, and line 15	ıs 33	1/3 % or r		_
	check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization			1	▶ □
17a	10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a,	or 16	6b, and lin	ne 14 is	_
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies a	d stop	here. Ex	xplain in	
	organization	12 a h	ublicly Su	pported	
<b>L</b>		401	47		<b>▶</b> ∐
b	10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a				
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this bo Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization				
	supported organization	quan	illes as a	publicly	
18				•	
10	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, chec instructions	K this	oox and		
	Instructions				<u> </u>
YA	Sch	redule	A (Form 990	) or 990-EZ	) 2017

Part	Support Schedule for Organiz					\	
	<ul> <li>Complete only if you checked the</li> </ul>	<b>\</b>					der Part II
	If the organization fails to qualify	under the te	ests listed belo	ow, please co	mplete Part I	1.) /	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017/	(f) Total
1	Gifts, grants, contributions, and membership fees	\					
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities	1					
	furnished in any activity that is related to the	\					
	organization's tax-exempt purpose		ļ <u>.</u>			·	
3	Gross receipts from activities that are not an	1	Ŋ				
	unrelated trade or business under section 513		<del>\</del>				
4	Tax revenues levied for the			Ì			
	organization's benefit and either paid						
	to or expended on its behalf		<del></del>	ļ	/		
5	The value of services or facilities			_	7		
	furnished by a governmental unit to the						
	organization without charge		<u> </u>				
6	Total. Add lines 1 through 5		<b></b>				
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons		1	/			
Ь	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000		1	1			
	-			<b>\</b>	<b>\</b>		
	or 1% of the amount on line 13 for the year Add lines 7a and 7b		<del>                                     </del>	<del></del>			
с 8			· /	<del>  \</del>			
0	Public support. (Subtract line 7c from line 6)			\	· ·	, , ,	
Socti	on B. Total Support	<u></u>	/	<del>                                     </del>	1		
	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 201,5	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	(4) 20.9	(0)2014	(0)20.0	(4) 2010	(6) 2017	1) 10.01
	Gross income from interest, dividends,		<del></del>	<del>                                     </del>			
	payments received on securities loans, rents			\ \			
	royalties, and income from similar sources			\			
b	Unrelated business taxable income (less/	/			\		
	section 511 taxes) from businesses			}	\		
	acquired after June 30, 1975		1				
С	Add lines 10a and 10b				\		
11	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 VI )						
13	Total support. (Add lines 9, 10c, 11,					l I	
	and 12)						
14	First five years. If the Form 990 is for the	-	n's first, second	, third, fourth,	or fifth tax yea	r as a section 5	501(c)(3)
	organization check this box and stop he						<u> </u>
	on C. Computation of Public Suppo			-10		<del></del>	
15	Public support percentage for 2017 (line	• • •	•		(1))	15\	<u>%</u>
16	Public support percentage from 2016			10		16	<u>%</u>
<u>Secti</u>	on D. Computation of Investment In Investment income percentage for 2017			l by line 12 co	lump (f)\	17	0/
18	Investment income percentage from 20			•	iuiiii (1 <i>))</i>	18	<u>%</u>
19a	33 ¹ / ₃ % support test–2017. If the organ				and line 15 is		
134	line 17 is not more than 331/3%, check this						
b	33 1/3 % support test–2016. If the organi		•			_	\
D	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d						

#### Part IV Supr

**Supporting Organizations** 

Section A. All Supporting Organizations

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

			Yes	NO
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		<u> </u>
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	 3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			,
	"Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	_		
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			`
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)		·	
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			l
	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	<u> </u>		
	was accomplished (such as by amendment to the organizing document)	5a		L
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
_	designated in the organization's organizing document?	5b		ļ
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<del> </del> -
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			١.
	benefited by one or more of its supported organizations, (ii) individuals that are part of the charitable class  benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			<del>  -</del> -
•	(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 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	<u> </u>		<del></del>
_	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	-n	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		Paradoran
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	·	_ ~
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			<del>                                     </del>
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			-
	determine whether the organization had excess business holdings )	10b		

Part	V Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	ļ		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
b	A family member of a person described in (a) above?	11a	<del> </del>	<del> </del>
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11b 11c	<del> </del>	<del> </del>
	on B. Type I Supporting Organizations	1116		L
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		ļ	
	controlled the organization's activities. If the organization had more than one supported organization,	l ·	1	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
		1_		
2	Did the organization operate for the benefit of any supported organization other than the supported	l	ļ	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Secti	on C. Type II Supporting Organizations		<u> </u>	Щ
<u> </u>	on o. Type it oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			 
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	-	''	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	,		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2		1	<del>                                     </del>	-
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-		•
-	significant voice in the organization's investment policies and in directing the use of the organization's		, .	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
<u>Secti</u>	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstru	ctions	s)
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see	ınstru	ctions
2	Activities Test Answer (a) and (b) below.		Voc	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	$\Box$	163	110
а	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>		}	}
	those supported organizations and explain how these activities directly furthered their exempt purposes,		١.	
	how the organization was responsive to those supported organizations, and how the organization determined	"		
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	_2b	<u> </u>	<u> </u>
3	Parent of Supported Organizations Answer (a) and (b) below.	1	\ \ \ .	( )
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	—	<del> </del>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	-	<b>-</b>
	or no supported organizations in Tes, describe in Fair vi the role played by the organization in this regard	LOU		

)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trus	t on Nov 20, 1970 (explain	ın Part VI
See instructions. All other Type III non-functionally integrated supporting o	rgar	nzations must complete Se	ctions A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)  7 Other expenses (see instructions)	6		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount	10	(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			,
Average monthly value of securities	1a		
<b>b</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)		gartin (f. 1905) Santana and Santana and San	)
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	***************************************	
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6	Adjust y a del fore following page of the delivery global y and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second seco	
7 Recoveries of prior-year distributions	7	- A.A. populopular y A.A. and a management of the second	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		>d.	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	,	
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	•	
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions)	ly in	tegrated Type III supportin	g organization (see

Fe	ш	y Type III Non-runctionally integrated 303(a)(	3) Supporting Orga	nzations (continued)	<u>/</u>
Se	cti	on D - Distributions			Current Year
	1	Amounts paid to supported organizations to accomplish	exempt purposes		re,
	2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
	3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	, ,
	4	Amounts paid to acquire exempt-use assets	,		-
	5	Qualified set-aside amounts (prior IRS approval required	) ,		,,
-	6	Other distributions (describe in Part VI) See instructions			
-	7	Total annual distributions. Add lines 1 through 6			
	8	Distributions to attentive supported organizations to whic (provide details in Part VI) See instructions	h the organization is re	sponsive	,
	9	Distributable amount for 2017 from Section C, line 6	ş		
1	0	Line 8 amount divided by Line 9 amount		1	
	Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1		Distributable amount for 2017 from Section C, line 6	的是是非洲的		
2		Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI) See instr			
3		Excess distributions carryover, if any, to 2017	<b>独杂是自己为为</b>	SEASON SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE SERVICE	<b>《李月記》第1822年197</b>
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	d	From 2015	<b>新疆之外,在北部</b> 公司	N. P. O'PHARM PROCESS	
٠.,	e	From 2016		PARTIES WENTER	
	f	Total of lines 3a through e	-	<b>第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十</b>	<b>为其构成,自然发育的意义</b>
	g	Applied to underdistributions of prior years	<b>建设工作的</b>		的最大的数据中心。 10.14
	h	Applied to 2017 distributable amount	AND THE PROPERTY OF THE	Visit APP IN LARES.	
	ı	Carryover from 2012 not applied (see instructions)	<b>学院公司等域。整理</b>	<b>阿罗加斯文学。福兴</b> 和	<b>《经验》(数字)数据</b>
	j`.	Remainder Subtract lines 3g, 3h, and 3i from 3f		<b>对公司,"数据为为股份的</b> "	AND PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE P
4		Distributions for 2017 from Section D, line 7			
<u> </u>	а	Applied to underdistributions of prior years	等国际概念部分解决		
ı	b	Applied to 2017 distributable amount	华最级285000000000000000000000000000000000000	THE RESIDENCE	
-	ć	Remainder Subtract lines 4a and 4b from 4		定是打擊的學者的認	<b>的观象企业发展工作的影响</b>
5		Remaining underdistributions for years prior to 2017, if			
		any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions		,	
			APALTAL SEL LAN MEST	Description Control	
6		Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7	1	Excess distributions carryover to 2018. Add lines 3j and 4c	1246 - 4 483 m. 483 4 183 184 184 184 184 184 184 184 184 184 184		
8		Breakdown of line 7	44 164 (199-14)		
	a	Excess from 2013			MANUAL SALVES
	b	Excess from 2014			
	<del>Z</del> C	Excess from 2015			
	d	Excess from 2016			
	<del>-</del>	Excess from 2017			

#### 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No 1545-0047
2017
Open to Public Inspection

Employer identification number Name of the organization SOUTHWEST FAIR HOUSING COUNCIL 86-0530355 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible Yes No private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day Held at the End of the Tax Year of the tax year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes ☐ No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 **▶** \$ Assets included in Form 990, Part X

Equipment

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

Other

25,106

Schedule D (Form 990) 2017

Part VII	Complete if the organization ans		n 990, Part IV, lin	e 11b See Form	990, Part X, line 12
	(a) Description of security or category (including name of security)		(b) Book value	(c) Met	thod of valuation d-of-year market value
(1) Financial	derivatives				
(2) Closely-h	eld equity interests				
(3) Other		·		<u> </u>	
(A)				<del> </del>	
(B)				ļ <u> </u>	
(C)			<del>                                     </del>	<del> </del>	
(D)			<del></del>		
(E) (F)		<del></del>		<del></del>	
(G)			<u> </u>		
(H)	<del></del>	····			
<del></del>	nn (b) must equal Form 990, Part X, col (B)	line 12 ) ▶			
Part VIII	Investments — Program Relate		·•	<u>.</u>	
	Complete if the organization ans		n 990, Part IV, lin	e 11c See Form	990, Part X, line 13
	(a) Description of investment		(b) Book value	, ,	thod of valuation d-of-year market value
(1)					
(2)					
(3)			ļ <u> </u>		
(4)					
(5)			<u> </u>		
(6)			<del>                                     </del>	<del> </del>	
(7)			<del> </del>	<del></del>	
(8)			<del> </del>	<del></del>	
(9)	nn (b) must equal Form 990, Part X, col (B)	line 13 1 ▶		·	
Part IX	Other Assets.		J	<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Complete if the organization ans	wered "Yes" on Forn	n 990. Part IV. lin	e 11d See Form	990. Part X. line 15
		(a) Description	<u> </u>		(b) Book value
(1)			<del> </del>		
(2)					
(3)					
(4)					······································
(5)					<u> </u>
(6)		<del></del>			
(7)			•		
(8)					
(9)	nn (b) must equal Form 990, Part X, col (B)	line 15 )			· · · · · · · · · · · · · · · · · · ·
Part X	Other Liabilities.				<del></del>
, are A	Complete if the organization ans line 25	wered "Yes" on Forr	n 990, Part IV, lın	e 11e or 11f See	Form 990, Part X,
1,	(a) Description of liability	(b) Book value	<del></del>	<del> , .</del>	*
	Il income taxes	(B) BOOK Value		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(2)	woome taxes	<del></del>		4	
(3)		<del> </del>	'		
(4)				ne de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	
(5)			, ,		,
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(7)				,	
(8)					1, 2
(9)	1			1 1 5 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	mn (b) must equal Form 990, Part X, col (B)	<del></del>	- ÷	That is a second of the	Kar King Sart
2 Liability for	r uncertain tax positions. In Part XIII, provide	the text of the footnote to t	he organization's finan	cial statements that rep	orts the organization's

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Schedule D (Form 990) 2017

1	Complete if the organization answered "Yes" on Form  Total revenue, gains, and other support per audited financial statements		1	878,085.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		<del> </del>	
~ a	Net unrealized gains (losses) on investments	2a	1.	
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
e	Add lines 2a through 2d	L	2e	
3	Subtract line 2e from line 1		3	878,085
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
С	Add lines 4a and 4b	<del></del>	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1		5	878,085
art	Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form			n.
1	Total expenses and losses per audited financial statements	<u> </u>	1	790,481.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII )	2d		
e	Add lines 2a through 2d	<del></del>	2e	
3	Subtract line 2e from line 1		3	790,481.
1	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
С	Add lines 4a and 4b		4c	
			<u> </u>	
vide	Total expenses Add lines 3 and 4c.(This must equal Form 990, Part I, line Supplemental Information.  the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	790,481.
a <b>rt</b> vide	XIII Supplemental Information.	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
lri vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
lri vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
lri vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
lri vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
iri vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
iri vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
a <b>rt</b> vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	
i <b>rt</b> vide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, Part	V, line 4, Part X, line 2	

Schedule D (Form 990) 2017 SOUTHWEST FAIR HOUSING	COUNCIL 86-0530355 Page 5
Part XIII Supplemental Information (continued)	
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#### SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ.

▶ Go to www irs gov/Form990 for the latest information

2017
Open to Public Inspection

Name of the organization  SOUTHWEST FAIR HOUSING COUNCIL						Employer identification number 86-0530355	
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Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
SOUTHWEST FAIR HOUSING COUNCIL	86-0530355
Part VI Line 11b	
FORM 990 IS DISTRIBUTED TO THE BOARD OF DIRECTORS ONCE F	ILED.
Part VI Line 11b	
THE EXECUTIVE DIRECTOR AND FINANCE DIRCTOR COMPILE AND F	ŒVIEW
Part VI Line 19	
DOCUMENTS ARE AVAILABLE UPON REQUEST AND ARE LOCATED AT	THE AGENCY OFFICE
Part VI Line 19	
ALSO FORM 990 IS AVAILABLE ON GUIDESTAR	
Part IX Line 11g	
OTHER PROF SERVICES Total expenses - \$17203 00 Program service expenses - \$3647 00 Mgmt and general expenses -	\$13556 00 Fundraising expenses - \$0 00
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