Form 990

Return of Organization Exempt from Income Tax

OMB No. 1545-0047

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

Department	of the	Treasury
Internal Revi	enue :	Service -

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

This Form is Open to Public Inspection

Α	For the 1999 calendar year,	Or tax year period beginning	0ct 1 ,	1999, and ending	ep 30	, 2000
8	Check if:	C Name of organization			D Employer iden	tification Number
	Change of address Please use	Industrial Areas Fo			36- <u>2</u> 334	1627
	Initial return or type.	Number & street (or P.O. box if mai	l is not delivered to street addr)	Room/suite	E. Telephone nui	nber
	Final return See specific	220 West Kinzie Str	eet		(312) 2	245-9211
	Amended return lions.	City, Town or Country	Slate	ZIP + 4	F Check ►	if exemption
	Amended return (required also for state reporting)	Chicago	ΙL	60610	application	is pending
G	Type of organization ► X E	xempt under section 501(c)	3 ∢(insert number)	or ► section 494	7(a)(1) nonexe	mpt charitable trust
	Note: Section 501(c)(3) exec	mpt organizations and 4947(a)((1) nonexempt charitabl	le trusts Must attach	a completed	
				·	<u> </u>	
Н	(a) Is this a group return file	d for affiliates?	Yes X	No I If either box in	H is checked 'Yes,	' enter four-digit group
				exemption nun	nber (GEN) 🟲	
	(b) If 'Yes,' enter the number of aff	filiates for which this return is filed		J Accounting	method: C	ash X Accrual
	(c) Is this a separate return filed by	y an organization covered by a group rul	ing? Yes X	No Other (specify) 🟲	
K	_	rganization's gross receipts are	-	_		
		n 990 package in the mail, it sho				
No	e: Form 990-EZ may be used	d by organizalions with gross re	ceipts less than \$100,00	00 and total assets le	ss than \$250,00	00 at end of year.
Pa	rti 🔯 Revenue, Expen	ises, and Changes in Net	t Assets or Fund Ba	alances (see instru	ctions)	
Ξ		ants, and similar amounts recei			[[
200ff					870.	
9	b Indirect public support			1 b		
0		ons (grants)		1c		
FEB		ough 1c) (attach schedule of co				
بدا		870noncash \$)	870.
$\overline{}$	2 Program service reven	ue including government fees a	ind contracts (from Part	VII, line 93)		1,703,733.
Ш	•	assessments				
2	-	d temporary cash investments .				47,126.
		from securities			5	
SANNED SANNED						
0						
	-	oss) (subtract line 6b from line				
	7 Other investment incor	ne (describe ► <u>See Ot</u>			7	27,364.
	8a Gross amount from sal		(A) Securities	(B) Othe	<u>r</u>	
R				8a		
REVENU		sis and sales expenses		8b		
Ŋ		le)		8c		
E		nbine line 8c, columns (A) and ((B))		8d	
		tivities (attach schedule)		•		
	a Gross revenue (not inc	sluding \$sd on line Ta)	 1	9 a]]	
		other than fundraising expenses				
		other than fundraising expenses om special events (subtract line			9c	
		ry, less returns and allowances				
		ld			 -	
	_	iles of inventory (attach schedule) (subti			10c	
		art VII, line 103)	· ·			
		es 1d, 2, 3, 4, 5, 6c, 7, 8d. 9c, 1				1,779,093.
+	13 Program-services from	n ine 44, column (B))		· · · · · · · · · · · · · · · · · · ·	13	1,509,850.
Σ	14 Management and gené	fal (from line 44, column (C)) .			14	263,730.
即	15 Fundralsing Wolf line	44, column (D))			15	65,648.
s		(attach schedule)				
NA THE THE		nes 16 and 44, column (A))				1,839,228.
7	18 Excess or (deficit) for t	the year (subtract line 17 from li	ine 12)		18	-60,135.
N S		ances at beginning of year (from				1,791,348.
NS EE T		ssets or fund balances (attach				
Ś	-	ances at end of year (combine li				1,731,213.
		A 131 11				5000 (1000)

Rait 1132 Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	Tayon NOAN	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)		<u> </u>			ATT TO THE TOTAL PARTY.
	(cash \$		u .		Street Section 1	
	non-cash \$)	22				
23	Specific assistance to individuals (attach sch)	23			ASTROPOLICE	
24	Benefits paid to or for members (attach sch)	24			建筑的地域	
25	Compensation of officers, directors, etc	25	124,966.	62,483.	46,862.	15,621.
26	Other salaries and wages	26	854,363.	787,282.	50,311.	16,770.
27	Pension plan contributions	27	106,216.	95,594.	7,966.	2,656.
28	Other employee benefits	28	152,916.	76,458.	57,343.	19,115.
29	Payroll taxes	29	62,917.	53,479.	7,078.	2,360.
30	Professional fundraising fees	30_				
31	Accounting fees	31	12,500.	0.	12,500.	0.
32	Legal fees	32	2,300.	0.	2,300.	· 0 .
33	Supplies	33				
34	Telephone	34	40,429.	27,088.	10,006.	3,335.
35	Postage and shipping	35	21,508.	10,754.	10,754.	0.
36	Occupancy	36	46,324.	23, 162.	17,371.	5,791.
37	Equipment rental and maintenance	37	8,784.	1,318.	7,466.	0.
38	Printing and publications	38				
39	Travel	39	202,256.	202,256.	0.	0.
40	Conferences, conventions, and meetings	40	5,489.	2,745.	2,744.	0.
41	Interest	41				
42	Depreciation, depletion, etc (attach schedule)	42	3,188.	0.	3,188.	0.
43	Other expenses (itemize): a	43a				
E	CONSULTING FEES	43 b	114,800.	114,800.	0.	0.
	PROV FOR UNCOLL. REC.	43 c	17,745.	17,745.	0.	0.
	BOOKS/SUBSCRIPTIONS	43 d	13,613.	13,613.	0.	0.
	See Other Expenses Stmt	43 e	48,914.	21,073.	27,841.	0.
44		44	1,839,228.	1,509,850.	263,730.	65,648.
						
Repo	orting of Joint Costs — Did you report in c ational campaign and fundraising solicitati	olumn ion?	(B) (program services)	any joint costs from a c	ombined -	Yes X No
	s.' enter (i) the aggregate amount of these				mount allocated to prog	
\$., ,,		to management and ge			e amount allocated
. –	ndraising \$					o amount amounts
	訓練 Statement of Program Serv	ice A	ccomplishments	 -	·	
	is the organization's primary exempt purp			RGANIZATION/DE	/ELOP	Program Service Expenses
All o	ganizations must describe their exempt pr	urpose				(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
clien izalio	ganizations must describe their exempt p is served, publications Issued, etc. Discus ins & section 4947(a)(1) nonexempt charit	s achie able tr	evements that are not m usts must also enter the	leasurable. (Section 501 amount of grants & all	(c)(3) & (4) organ- ocations to others.)	4947(a)(1) trusts; but optional for others.)
	TRAINING SEMINARS AND CON					
	ORGANIZATIONS.	_ _			·	
				·	·	
		-	(Grants and	i allocations \$	`;	1,509,850.
ь						<u></u>
					·	
				. ~	·- -	
			(Grants and	l allocations \$		
c				- 4110 00 110110 \$		
•				·	·	
			(Grants and	allocations \$		•
d			(5:0110 0110		 }	
-		- - -				
		 -		·	·	
			Grants and	allocations \$		
e	Other program services			allocations \$		
	Total of Program Service Expenses (sho					1.509.850.

Part IV器 Balance Sheets (See instructions)

lote:	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45 Cash – non-interest-bearing		45	
	46 Savings and temporary cash investments	1,158,549.	46	894,478
	47 a Accounts receivable			
	b Less: allowance for doubtful accounts		47 c	 _
	48a Pledges receivable		}	
	b Less: allowance for doubtful accounts		48 c	
	49 Grants receivable	317,585.	49	216,725
,	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach schedule) 51 a		30 -	
	b Less: allowance for doubtful accounts		51 c	
~ I	52 Inventories for sale or use	·- <u>-</u>	52	
	53 Prepaid expenses and deferred charges	45,536.	53	46,960
	54 Investments – securities (attach schedule)	234,834.	54	497,008
	55a Investments — land, buildings, & equipment: basis . 55a	254,054.		457,000
1			} }	
l	b Less: accumulated depreciation (attach schedule)		55 c	
	56 Investments – other (attach schedule)		56	
	57a Land, buildings, and equipment: basis 57a 41, 148.			
	↓ 			
-	b Less: accumulated depreciation (attach schedule)	11,347.	57c	12,001
1 ,	58 Other assets (describe ► See Line 58 Stmt)	293,323.	58	312,863
	59 Total assets (add lines 45 through 58) (must equal line 74)	2,061,174.	59	1,980,035
1	60 Accounts payable and accrued expenses	56,000.	60	78,398
1	61 Grants payable		61	
	52 Deferred revenue	46,167.		78,089
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
1	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)	95,000.		70,000
1	35 Other liabilities (describe ► <u>See Line 65 Stmt</u>)	72,659.		22,335
	66 Total liabilities (add lines 60 through 65)	269,826.		248,822
Org	ganizations that follow SFAS 117, check here - X and complete lines 67			
	through 69 and lines 73 and 74.			
67	Unrestricted	1,693,021.	67	1,731,213
68 69	Temporarily restricted	98,327.	68	0
69	•	 	69	
Orq	panizations that do not follow SFAS 117, check here 🕨 🔲 and complete lines			
	70 through 74 .]	
70	Capital stock, trust principal, or current funds		70	
- 1 7 1	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds	 	72	
72	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	1,791,348.	73	1,731,213
74		2,061,174.	74	1,980,035

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Form 990 (1999)

If 'Yes,' attach schedule - see instructions.

Par	t.VI. Under Information (See specific instructions.)		Yes					
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		批题 X				
77	7 Were any changes made in the organizing or governing documents but not reported to the IRS?							
	If 'Yes,' attach a conformed copy of the changes.			121				
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?								
b If 'Yes,' has it filed a tax return on Form 990-T for this year?								
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79	W.T.	X				
80 a	a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a	8.25	<u>認起</u> X				
ı	Market and the second s	oua	5.E.3	1000				
	and check whether it is exempt or nonexempt.	ł	32					
01 -	Enter the amount of political expenditures, direct or indirect, as described in the instructions 81 a 0.		1					
	Did the organization file Form 1120-POL for this year?	81 ь	77.574	X				
	7	0.5	10.48.6	100				
	a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	112513	X				
	olf 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.)			22				
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a						
t	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	_X_					
84 a	a Did the organization solicit any contributions or gifts that were not tax deductible?	84 a	N 100 100 100 100 100 100 100 100 100 10	X				
t	of 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84Ь	3.633	TO C				
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85 a						
Ŀ	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85 b	!					
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.							
c	Dues, assessments, and similar amounts from members	!	31.3	Syd (
c	Section 162(e) lobbying and political expenditures]		$ X _{x}^{2}$				
	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	1						
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)]	3.3	45.85				
	Does the organization elect to pay the Section 6033(e) tax on the amount in 85f?	85 g	"					
ł	If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible tobbying and political expenditures for the following tax year?	85 h						
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			認為				
	line 12	J	1.0	**				
t	Gross receipts, included on line 12, for public use of club facilities							
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders			4				
ŀ	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			18.8				
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations Sections 301.7701-2 and 301.7701-3?		2013					
	If 'Yes,' complete Part IX	88	13 ⁷ -8 2 2	X				
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: Section 4911 ► 0.; Section 4912 ► 0.; Section 4955 ► 0.] '						
b	o 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any Section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b		х				
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958			0.				
c	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.				
90 a	List the states with which a copy of this return is filed F ILLINOIS							
	Number of employees employed in the pay period that includes March 12, 1999 (see instructions)	90Ь		11				
91	The books are in care of > Industrial Areas Found. Telephone number > (312) 245-	9211						
	Located at > 220 West Kinzie St., Chicago IL ZIP + 4 > 6061	0	. .					
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in fleu of Form 1041 — Check here		1	► []				
	and enter the amount of tax-exempt interest received or accrued during the tax year	_	_	_				

Form 990 (1999) Industrial Areas				36-2334	627 Page 6
Harta II Analysis of Income 4 foda		business income	 	ection 512, 513, or 514	(5)
Enter gross amounts unless otherwise indicated.	(A) Business code	(8) Amount	(C) Exclusion code	(D)	(E) Related or exempt function income
93 Program service revenue: a Sponsoring Organ.					
b Fees c					1,703,733.
d	-				
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments	ļ	- 			
95 Interest on savings & temporary cash invmnts .	<u> </u>		14	47,126.	
96 Dividends & interest from securities	2015/99/02/02/02		35/4/93 in the 1977 miles of		विकास का विकास का विकास की कार की कार की कार की
97 Net rental income or (loss) from real estate: a debt-financed property			- Harris Barrell	1888 Shares History Course	A TO THE CONTRACTOR OF THE PROPERTY OF THE PARTY OF THE P
b not debt-financed property					
98 Net rental income or (loss) from pers prop		_ 	 	 	
99 Other investment income			18	27,364.	
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events	<u> </u>		 	ļ	
102 Gross profit or (loss) from sales of inventory	San the Charles of the	tige deposit to a service of the ser	A COSTONIO DE LA CONTRACTOR DE LA CONTRA	The south of the said of the s	<u>र स्ट्रा करा देवसम्बद्धाः स्ट्राप्ट</u>
103 Other revenue: ab	44 CONTACTOR (18 18 18 18 18 18 18 18 18 18 18 18 18 1	ta giri yili daga ka galaya a karara ka a ka a ka a ka ka ka ka ka ka ka ka	1000m.400m.400m	Colling of the Collin	<u> </u>
c		· · · - · · · - · · · - · · · · · · · · · · ·	 		
d	\ 				
e					
104 Subtotal (add columns (B), (D), and (E))	在这种的		THEFT	74,490.	1,703,733.
105 Total (add line 104, columns (B), (D),				······ <u> </u>	1,778,223.
Note: (Line 105 plus line 1d, Part I, should eq					
Relationship of Activities t					
Line No. Explain how each activity for which of the organization's exempt purp	th income is re oses (other tha	ported in column (E) o in by providing funds f	f Part VII contril or such purpose	outed importantly to the s).	accomplishment
936 ENABLED THE FOUNDATIO					
FOR THE SOLUTION OF P	ROBLEMS 0	F AMERICAN IND	<u>USTRIAL</u> AF	REAS.	
		_ 			
		_ 			
					
		 		 -	
					_
Part IX @ Information Regarding Tax	<u>rable Subsic</u>	<u>liaries and Disreg</u>	arded Entitie	S (See instructions.)	N/A
(A)	(B)	(C)	(D)	(E)
Name, address, and EIN of corporation, partnership, or disregarded entity	Percentage ownership int		activities	Total income	End-of-year assets
partitional prior disregulated criticy	OWNERSKIP III	%	 -	income.	433013
	-	%			
		%			· - · - · -
		%			
		g accompanying ed on all informa	schedules and states	ments, and to the best of my kn er has any knowledge. (See kns	owledge and belief, it is ructions.)
			F	- Presilent M	grun V. Wurll
		Ďa	ate	Type or Print Name and	l Title
			Date /		er's SSN cr PTIN

Department of the Treasury Internal Revenue Service

Schedule A¹ (Form 990)

Organization Exempt Under Section 501(c)(3)

1999

IRS use only - Do not write or staple in this space.

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust Supplementary Information — (See separate instructions.)

OMB No. 1545-0047

Must be completed by the above organizations ar	nd attached to their Form 99	0 or 9	990-EZ.	,	
Name of the Organization				Employer (dentification)	Number
Industrial Areas Foundation	and Daild Franciscope O	11	Then Officers	36-2334627	
Partil 公園 Compensation of the Five High (See instructions, List each one, If there	est Paid Employees O e are none, enter 'None.')	tner	inan Officers,	Directors, and	rustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position		(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ERNEST CORTES JR.		_			
CHICAGO, ILL 60610	SUPERVISOR	_60	110,000.	212.	0.
LARRY MCNEIL		ı			
CHICAGO, ILL 60610	SUPERVISOR	_60	100,200.	133.	0.
ARNOLD GRAF					
CHICAGO, ILL 60610	SUPERVISOR	60	105,000.	223.	0.
MICHAEL GECAN					
CHICAGO, ILL 60610	SUPERVISOR	60	95,000.	116.	0.
JAMES_DRAKE					
CHICAGO, ILL 60610	SUPERVISOR	60	85,000.	O.	0.
Total number of other employees paid over \$50,000	<u> </u>	4	76.12.20.16.21		
Rart II Compensation of the Five High (See instructions. List each one (whether	est Paid Independent (er individuals or firms). If the	Contere ar	tractors for Pro e none, enter 'None	fessional Servic	ces
(a) Name and address of each independent contra	actor paid more than \$50,000	0	(b) Type	of service	(c) Compensation
NONE					
			-		
					
		<u>-</u> – –			
					· · · · · · · · · · · · · · · · · · ·
				•	
Total number of others receiving over	N	ONE			

Sche	dule	Nule A (Form 990) 1999 Industrial Areas Foundation	36-2334627		Page 2
Pàr	tilli	III Statements About Activities		Ye	s No
1	to i	Ouring the year, has the organization attempted to influence national, state, or local legislatio to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities	·····	1	X M最初
	Org org lob	Organizations that made an election under section 501(h) by filing Form 5768 must complete organizations checking 'Yes,' must complete Part VI-B and attach a statement giving a detaile lobbying activities.	Part VI-A. Other ed description of the		
	wit	During the year, has the organization, either directly or indirectly, engaged in any of the follov trustees, directors, officers, creators, key employees, or members of their families, or with an with which any such person is affiliated as an officer, director, trustee, majority owner, or prin	icipal beneficiary:		
а	Sa	Sale, exchange, or leasing of property?		2a	X_
b	Ler	Lending of money or other extension of credit?		2b	X
С	Fu	Furnishing of goods, services, or facilities?		2c	X
d	Pa	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	See.Pt.V.,.Fm.990.	2d X	
e	Tra	Transfer of any part of its income or assets?		2e	x_
		If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.	-		
		Does the organization make grants for scholarships, fellowships, student toans, etc?			X
		Do you have a section 403(b) annuity plan for your employees?	182	4a ราชนอล์	X ************************************
b 	Att or	Attach a statement to explain how the organization determines that individuals or organization or loans from it in furtherance of its charitable programs qualify to receive payments. (See ins	ns receiving grants structions.)		
Rar	tilV	Reason for Non-Private Foundation Status (See instructions.)			
	orga	rganization is not a private foundation because it is (please check only One applicable box):			
5	\vdash	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	-	A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)			
7	\vdash	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
8			· >/A\/iii\ Enter the bounitelfs was	مالم منام	_
9	L_	A medical research organization operated in conjunction with a hospital. Section 170(b)(1 and state ►)(A)(III). Enter tite nospital 5 ftal	ine, ciç	/ 1
10		An organization operated for the benefit of a college or university owned or operated by a (Also complete the Support Schedule in Part IV-A.)	governmental unit. Section 170	(b)(1)(A)(iv).
11 a		An organization that normally receives a substantial part of its support from a government Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	tal unit or from the general publi	íc.	
11 b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part	IV-A.)		
12	X	An organization that normally receives: (1) more than 33-1/3% of its support from contribution activities related to its charitable, etc, functions — subject to certain exceptions, and from gross investment income and unrelated business taxable income (less section 511 to organization after June 30, 1975. See section 509(a)(2). (Also complete the Support School	(2) no more than 33-1/3% of its	suopo	eípts rt
13		An organization that is not controlled by any disqualified persons (other than foundation in described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they mee section 509(a)(3).)	nanagers) and supports organiza t the test of section 509(a)(2). (\$	ations See	
		Provide the following information about the supported organization	lons. (See instructions.)		
		(a) Name(s) of supported organization(s)	(b)	Line no	umber ove
		•		_	
		_ 			
	_		1	_	
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See i	nstructions.)		

Part IV:A: Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

									
begi	ndar year (or fiscal year nning in)	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total			
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,744.	2,408.		8,900.	13,052.			
-	Membership fees received	2,11,1	2, 100.						
			<u>'</u>						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the		1 703 673	1 710 744	1 770 707	C 054 000			
	organization's charitable, etc, purpose	1,662,100.	1,702,572.	1,710,744.	1,779,392.	6,854,808.			
18	Gross income from interest, dividends, amounts received from payments on securities loans (Section 512(a)(5)), rents, royalties, and unrelated business taxable income (less Section 511 taxes) from businesses acquired by the organization after June 30, 1975	59,637.	67,102.	_66,838.	54,522.	248,099.			
19	Net income from unrelated business activities not included in fine 18								
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.								
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets								
23	Total of lines 15 through 22		1,772,082.	1,777,582.	1,842,814.	7,115,959.			
	Line 23 minus line 17		69,510.		63,422.	261,151.			
25	Enter 1% of line 23		17,721.			THE PROPERTY WAY			
26	Organizations described on lines			olumn (e), line 24		NO. T. SEPP. STANDARD			
b	Attach a list (which is not open to person (other than a government 1998 exceeded the amount shown	o public inspection) sh al unit or publicly supp n in line 26a. Enter th	owing the name of ar ported organization) v e sum of all these exc	nd amount contributed whose total gifts for 19 cess amounts	i by each 995 through ▶ 26₺				
	Total support for Section 509(a)(column (e)		▶ 26c				
c	Add: Amounts from column (e) fo			19	 .				
		22		26 b					
	Public support (line 26c minus lin								
	Public support percentage (line 2		ed by line 26c (denon	ninator))	261	%			
	Organizations described on line								
	For amounts included in lines 15, amounts received in each year from	om, each 'disqualified	person.' Enter the su	im of such amounts for	or each year:				
	(1998)	(1997)	 (1996)		- (1995)	·			
	(1998) (1997) (1996) (1995) b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:								
	·(1998)	(1997)	(1996)		_ (1995)				
С	Add: Amounts from column (e) fo	r lines: 15 _	13,052.	16					
	17 <u>6,</u>	<u>854,808.</u> 20	·	21	► 27c	6,867,860.			
d	(1998) Add: Amounts from column (e) fo 17 6, Add: Line 27a total Public support (line 27c total mini	an	d line 27b total :		▶ 27d				
е	Public support (line 27c total mine	us line 27d total)			▶ 27e	6,867,860.			
t	Total support for section 509(a)(2	!) test: Enter amount o	on line 23, column (e)) ► <u> 27† </u>	,115,959.				
g	Public support percentage (line 2	27e (numerator) divid	ed by line 27f (denom	ninator))					
h	Investment income percentage (I	ine 18, column (e) (nı	imerator) divided by	line 27f (denominator	r)) ► 27 h	3.49 %			

.,uI	(To be completed Only by schools that checked the box on line 6 in Part IV)	N/A		
_		• _	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	W 3750	1 mass
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30_		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
•	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			
	Does the organization maintain the following:	220		
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	 -	- -
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
•	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	[
	d Copies of all material used by the organization or on its behalf to solicit contributions?			
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			
	Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?	33a		
	b Admissions policies?	33 b		
(c Employment of faculty or administrative staff?	33 c	<u> </u>	
	d Scholarships or other financial assistance?	33d		<u> </u>
	e Educational policies?	33e		<u></u>
	g Athletic programs?	33 <i>f</i>		
•	n Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
	a Does the organization receive any financial aid or assistance from a governmental agency?			
ŀ	Has the organization's right to such aid ever been revoked or suspended?	34b		ا المواجعية
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.		物化	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation	35		

00	3 4 4 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
Par	t:VI-A Lobbying Ex (To be complet	xpenditures by Ele ed Only by an eligible o	cting Public Chari	lies (See instru orm 5768)	uctions.))		_	N/A
)	e organization belongs ou checked 'a' above an		sions apply.			- -		
		imits on Lobbying				Affiliate	a)		(b) To be completed
		'expenditures' means	•	ed.)		Affiliate	ed grou lals	p 	for all electing organizations
36	Total lobbying expendit		•			<u> </u>			
37	Total lobbying expendite		• •			<u> </u>			<u></u> _
38	Total lobbying expendite								<u> </u>
39	Other exempt purpose	•							
40	Total exempt purpose e	•	•		. 40	Park of the Contract	112.7-275	10 . 4 66	The same of the state of the st
41	Lobbying nontaxable an		-		1				
	If the amount on line 40		lobbying nontaxable a		Ì		77.5%	易	
	Not over \$500,000]	21.2	137	44	
	Over \$500,000 but not over \$1		-			THE C	رين الموسون		
	Over \$1,000,000 but not over \$				41_	Thankerse ison	्रकेन्द्रसम्बद्धाः	11:00	PERSONAL CONTRACTOR CO
	Over \$1,500,000 but not over \$		· · · · · · · · · · · · · · · · · · ·		İ		મેં પુંચલોને છે. જો સામે		
40	Over \$17,000,000				40	33.543		() (V	100 PM
42	Grassroots nontaxable :	•							<u></u>
43 44	Subtract line 42 from line Subtract line 41 from line								
***	Caution: If there is an a				- 44	1610年80	V(4.5%)	559	
	Caudon, in there is an a						-Fire to the	1.00° a	1873 1985
	(Some organ	nizations that made a se	Averaging Period ection 501(h) election de the instructions for li	o not have to co	omplete	(h) all of the fi	ve colu	mns	below.
			Lobbying Expen	ditures During	4 -Year	Averaging I	Period		
	Calendar year (or fiscal year beginning in) ►	(a) 1999	(b) 1998	(c) 1997			d) 996		(e) Total
45	Lobbying nontaxable amount							_	
46	Lobbying ceiling amount (150% of line 45(e))				等等				
47	Total lobbying expenditures								
48	Grassroots non- taxable amount	Library Control Control	and the second of the second of the		e This			• (* a -	
49 	Grassroots ceiling amount (150% of line 48(e))								
	Grassroots lobbying expenditures	}	· · · · · · · · · · · · · · · · · · ·						
Rar	tVI-B Lobbying A	ctivity by Nonelecti only by organizations that	ing Public Charitie	S	t-untin-	a \			
						_		_	
Durir atten	ng the year, did the organ npt to influence public op	nization attempt to influe pinion on a legislative m	ence national, state or l atter or referendum, th	local legislation, rough the use o	, includi f:	ng any	Yes	No	Amount
a	Volunteers							X	
b	Paid staff or manageme	ent (include compensation	on in expenses reported	d on lines c thro	ough h.)			X	
-	: Media advertisements		• • • • • • • • • • • • • • • • • • • •					X	<u></u>
	Mailings to members, le						├ —}-	X	
	Publications, or published						$\vdash \rightarrow$	X	<u> </u>
	Grants to other organiza							X	
	Direct contact with legis	_		_			\vdash	X.	
	Rallies, demonstrations,						30-8723 62	X	
ſ	Total lobbying expenditu	ıres (add iines c througi	ип) «				TARRES	- (** :	<u> </u>
	If 'Yes' to any of the abo	ove, also allach a stater	ment giving a detailed of	lescription of th	e lobby	ino activitie	5 .		•

| Rart VIII | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did th	e reporting organization Code (other than section	directly or in 501(c)(3) c	ndirectly engage in any of the following	ng with any other organization described ling to political organizations?	in sectio	n 501	(c)		
			o a noncharitable exempt organization		!	Yes	No		
	51 a (i)		X						
• • •					a (ii)		X		
	transactions:								
		ets with a ni	oncharitable exempt organization		b (i)		Х		
	(ii)Purchases of assets from a noncharitable exempt organization								
							X		
	(iv)Reimbursement arrangements								
							X		
						-	X		
			=				X		
d If the	answer to any of the abo	ve is 'Yes.'	complete the following schedule. Col	umn (b) should always show the fair ma	arket valu	e of			
the go	ods, other assets, or ser	vices given angement, st	by the reporting organization. If the co	umn (b) should always show the fair ma organization received less than fair mar oods, other assets, or services received	ket value i	in			
(a)	(b) Amount involved	1	(c) noncharitable exempt organization	(d)			——— Ic		
Line no.	Amount involved	Name of	Horichantable exempt organization	Description of transfers, transactions, and	anarmy arrai	agennem	.5		
				<u> </u>					
	<u> </u>	<u> </u>	····						
				<u> </u>					
	<u> </u>	<u> </u>							
		<u> </u>							
			<u> </u>						
	<u> </u>	<u> </u>		<u> </u>					
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	<u> </u>					
			<u> </u>			_			
									
			· · · · · · · · · · · · · · · · · · ·						
		<u> </u>		<u> </u>					
			iliated with, or related to, one or mor ther than section 501(c)(3)) or in sec	e tax-exempt organizations tion 527?	► [] Ye:	s [X]	No		
b If 'Yes	s,' complete the following	schedule:		,					
	(a) Name of organization		(b) Type of organization	(c) Description of relation	shin				
			Type of organization	Bescription of relation					
									
									
									
				 					
									
									
				 					
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	· · · · · · · · · · · · · · · · · · ·								
				 					
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	 		<u> </u>	 					
									
									
									
			<u></u>	<u> </u>					

Form 990, Page 1, Line 7 Other Investment Income Sta	atement			
Other investment income (de GAIN ON GOVERNMENT S UNREALIZED GAIN ON S	ECURITIES		25,304. 2,060.	
Total			27,364.	
Form 990, Page 2, Part II, Lin	ne 43	·	·····	
Other expenses (itemize)	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
INSURANCE TEMPORARY STAFF NATIONAL TRAINING	779. 7,032. 41,103.	522. 0. 20.551.	257. 7,032. 20,552.	0. 0. 0.
Total	48,914.	21,073.	27,841.	0.
Form 990, Page 3, Part IV, Li Investments - Securities Stat				
Line 54 – Investments - Securities:			Beginning of Year	End of Year
EXXON CORP. (210 SHARES) FEDERAL HOME LOAN MTG. CORP. DISCOUNT NOTE			15,934. 218,900.	18,713. 478,295.
Total			234,834.	497,008.

 (a)
 (b)
 (c)

 Cost/Other Basis
 Accumulated Depreciation
 Book Value

 FURNITURE & EQUIPMENT
 41,148.
 29,147.
 12,001.

Total _____41,148. ____29,147. ____12,001.

Form 990, Page 3, Part IV, Line 58 Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
CASH SURRENDER VALUE OF OFFICER AND FACULTY LIFE INSURA SECURITY DEPOSITS OTHER MISC. ASSETS	NCE 292,300. 830.	311,647. 830.

Total . 293,323. 312,863.

Form 990, Page 3, Part IV, Line 65 Other Liabilities Statement

Line 65 - Other Liabilities:	Beginning of Year	End of Year
CUSTODIAL OBLIGATIONS	72,659.	22,335.
Total	72,659.	22,335.

Form 990, Page 4, Part V List of Officers, Etc. Statement

(A) Name and address	(B) Title and average hours week devoted to position		(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
		_			
MARVIN D. WURTH CHILMARK, MA 02535	PRESIDENT	5_	0.	0.	0.
D. BARRY MENUEZ POUGHKEEPSIE, NY 12603 MSGR. JOHN J. EGAN	VICE PRES	5	0.	0.	0.
CHICAGO, IL 60604 DR. JEAN ELSHTAIN	TREASURER	5	0.	O.	0.
NASHVILLE, TN 37215 SIDNEY PERLSTADT	SECRETARY_	5_	0.	0.	0.
CHICAGO, IL 60611 REV. HAYES ROCKWELL	MEMBER	5	0.	0.	0.
ST. LOUIS, MO 63103 THOMAS J. BOODELL, JR	MEMBER	5	0.	0.	0.
CHICAGO, IL 60601 EDWARD T. CHAMBERS	MEMBER	5	0.	0.	0.
CHICAGO, IL 60610	EXEC DIR	<u>65</u>	124,966.	9,397.	0.

Total <u>124,966.</u> <u>9,397.</u>

Supporting Statement of:

Form 990 p 3/Line 64b, column (A)

Description	Amount
FRIARS OF THE ATONEMENT SISTERS OF CHARITY, MT. ST. VINCENT	50,000. 25,000.
SISTERS OF DIVINE COMPASSION SISTERS OF NOTRE DAME	10,000.

Supporting Statement of:

Form 990 p 3/Line 64b, column (8)

Description	Amount
FRIARS OF THE ATONEMENT	50,000.
SISTERS OF DIVINE COMPASSION	10,000.
SISTERS OF NOTRE DAME	10,000.
T-1-1	70.000