### Form 990

### Return of Organization Exempt from Income Tax

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

OMB No 1545-0047 2000

Open to Public

	Inter	nai Revenue Service	► The c	rganization may have to use	a copy of this return to s	satisfy state	reporting requirem	rents	inspection
	Α	For the 2000 calenda	ır year, o	or tax year period beginning	0ct 1	, 2000, and	ending Sep 30	00	, 20 01
	D G-ION II approach					oloyer id	entification Number		
		Change of address		ы⊎ Industrial Areas Foundation   36					34627
		Change of name	or print or type	Number & street (or P.O. box if i	mail is not delivered to street ad	dr) Room/suite	E Tele	phone n	umber
		Initial return	See specific	220 West Kinzie St	treet		(3	12)	245-9211
		Final return	instruc dons	City, Town or Country		ite ZIP code	F Chi		if application pending
		Amended return		Chicago	Ţ	L 60610			
						· ·	H and Lare not as	nlicah	le to section 527 orgs
	G	Organization type (check o	nhu nga\ ►	X 501(c) 3 ◀ (insert	no) 527 or 494	ı	is this a group return i	-	
	<u>~</u>			ntions and 4947(a)(1) nonexem			If "yes " enter number		
				ted Schedule A (Form 990 or .		1	Are all affiliates i		
	$\overline{}$	<del></del>			<del></del>		(If 'no,' attach a		
	$\overline{}$	Accounting method		<del></del>	(specify)	—-  <sub>11/4</sub> 5			
	n	_	_	nization's gross receipts are r	•		Is this a separate retuining organization covered by		
		="		eed not file a return with the i	· · · · · · · · · · · · · · · · · · ·	I			
				e in the mail, it should file a i	return without financial d	-	Enter 4-digit group exi		
		Some states require	a compi	ete retum.		L	Check this box if the o	-	
		TOTAL CONTRACTOR					to attach Schedule B (	rom 99	0 or 990-E2)
	<b>7</b> (#			ses, and Changes in No		salances (	see instructions)		<del>,</del>
2				ants, and similar amounts rec	eived	1 1	_	'	
8		<ul> <li>Direct public st</li> </ul>	upport			1a	14,261		
60		<b>b</b> Indirect public	support			1b		. :	
2 8 2002		c Government co				1c		<u>.</u> ] .	
		d Total (add lines la through 1c) (car		14,261 noncash \$	)	)		1 d	
FEB		<ol><li>Program service</li></ol>	ce reven	ue including government fees	and contracts (from Pa	rt VII, line 93	1)	2	1,631,710
4		3 Membership di	ues and	assessments				3	
_		4 Interest on sav	ings and	d temporary cash investments	;			4	42 034
Ö		5 Dividends and	ınterest	from securities				5	
<b>FLAED</b>		6a Gross rents				6 <u>a</u>		_	
<b>S</b>		<b>b</b> Less rental ex	penses			6b			
7		<ul> <li>Net rental incor</li> </ul>	me or (k	oss) (subtract line 6b from line	e 6a)			6c	
		7 Other investme	ent incon	ne (describe See 0	Other Investment Income	Statement	)	7	20,648
		8a Gross amount	from sal	es of assets other	(A) Securities		(B) Other		
	R	than inventory	11 0117 301	C3 01 G33C13 001C1		8a		]	
<del></del> ,	Ā	<b>b</b> Less cost or o	ther bas	is and sales expenses		86	<u>-</u>	1	
	727	c Gain or (loss) (atta	ich schedu	le)		8c			
	E	d Net gain or (los	ss) (com	bine line 8c, columns (A) and	I (B))			84	
		9 Special events	and act	ivities (attach schedule)					
		a Gross revenue	(not inc	luding \$		المنتوب سيديد	1		
		of contributions	s reporte	ed on line 1a)		<b>万胜</b> 0巨	AED	1	
		b Less direct ex	penses	other than fundraising expens	ses 🗁	95	100	1	
		c Net income or	(loss) fro	om special events (subtract li	ne 9b from line 9a)	. هـ دد.		9 c	
	ı			y, less returns and allowance	1 92 1	FEB 0	7 2002 [일		
		b Less cost of q		•	["]			i i	
		c Gross profit or (los	s) from sa	ies of inventory (attach schedule) (su	btract line 10b from line (0a)	OGDE	N, UI	10 c	
		11 Other revenue						11	
				s 1d, 2 3 4, 5, 6c 7, 8d, 9c,	. 10c and 11)			12	1,708 653
	_			n line 44, column (B))				13	1,463,714
	EXPERSES	•		rai (from line 44, column (C))				14	271,652
	E	_	-	44, column (D))				15	77,030
	N S			(attach schedule)				16	
	£ 5			nes 16 and 44, column (A))				17	1 812,396
	_			he year (subtract line 17 from	line 12)			18	-103,743
	N S	•	•	ances at beginning of year (fro	•			19	1 731,213
	NET			ssets or fund balances (attac				20	* * > 1 , 5 1 3
	` ī			ances at end of year (combine	•			21	1,627 470
		incresses 0/ 1	~ 10 Date	ances at end or year (combine	/ miss 10 13 and 20)			; 4·I	1,021 410

Part 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

Do not include amounts reported on line bb, ชื่อ  9ิฮ, 10ิฮ, ʊr 16 ฮf Part !		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
(cash \$	1				
non cash \$)	22				
23 Specific assistance to individuals (attach sch)	23		· · · - · - · - · - · - · · - · · - · · - ·		
4 Benefits paid to or for members (attach sch)	24			\$ 187 198 1 198 N	<u> </u>
5 Compensation of officers directors, etc	25_	136,373	68,187	51,140	17,046
6 Other salaries and wages	26	830,530	758,015	54,386	18,129
7 Pension plan contributions	27	181,614	163,453	13,621	4,540
8 Other employee benefits	28_	219,626	109,813	82,360	27,453
9 Payroll taxes	29	61,855	52,577	6,959	2,319
Professional fundraising fees	30		··· · <del>-</del>	13.500	
31 Accounting fees	31	12,500	0	12,500	0
12 Legal fees	32				<u> </u>
33 Supplies	33	20.720	10.310		2 270
34 Telephone	34	28,729	19,248	7 111	2,370
SS Postage and shipping	35_	10,954	5,477	5 477	0
36 Occupancy	36	41,388	20,694	15 521	5,173
77 Equipment rental and maintenance	37	5,142	771	4,371	
38 Printing and publications 39 Travel	38	145,134	145,134	0	0
Travel Conferences, conventions, and meetings	40	10,602	5,301	5,301	0
Interest	41	10,002	3,301		<u>-</u> -
12 Depreciation, depletion, etc (attach schedule)	42	3,939	0	3,939	0
13 Other expenses (itemize)					
a Consulting Fees	43a	105,142	105,142	0	0
b Insurance	43b	869	582	287	00
c Books/Subscriptions	43c	9,320	9,320	00	0
d Moving Expenses	43d	8,679	0	8,679	0
14 Total functional expenses (add lines 22 43) Organizations completing columns (B) (D),	43e				
carry these totals to lines 13 - 15	44	1,812,396	_ 1,463,714	271,652	<u>77,030</u>
eporting of Joint Costs - Did you report in co	olumn -	(B) (program services) a	ny joint costs from a cor	mbined	——————————————————————————————————————
lucational campaign and fundraising solicitation	<sup>ל</sup> חנ			▶ [_]	
Yes, enter (i) the aggregate amount of these		•		mount allocated to prog	
	ocated	to management and ger	neral \$	, and (iv) th	e amount allocated
fundraising \$	A	liah-manka			
art 即《 Statement of Program Sen			277271721100/de	wolon	Program Service Expenses
hat is the organization's primary exempt purportions must describe their exempt nu	use/ P Irbose :	achievements in a clear	and concise manner St.	ate the number of	(Required for 501(c)(3) and
l organizations must describe their exempt pu ents served, publications issued, etc. Discuss ations & section 4947(a)(1) nonexempt charita	achiev	rements that are not mea	asurable (Section 501 (c	)(3) & (4) organ	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
allons & section #947(a)(1) nonexempt charite  Training seminars and cor				auona to outers )	opuonal for others )
organizations	= L.	-15.15 3 5.14 1,10 <b>F</b> 3	F		
		<b>-</b>			
		(Grante and	d allocations \$		1 463,714
<b>b</b>		(0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	2 2.00dilotta #_		1 305,714
	<b>-</b>	<del>-</del>			
					1
		(Grants and	d allocations \$	·	
c		(431.00 011			
	<del>-</del>				
					İ
		(Grants and	d allocations \$	·	
d	_	100000000000000000000000000000000000000			
				<b></b>	
		(Grants and	d allocations \$		
e Other program services			d allocations \$		
f Total of Program Service Expenses (sho	uld ogs	<del></del>		<del>/-</del>	1 463.714

Part V Balance Sheets (See instructions)

lote	Where required attached schedules and amounts vicolumn should be for end of year amounts only	vithin the description	(A) Beginning of year		<b>(B)</b> End of year
	45 Cash – non-interest bearing		80,420	45	91,559
	46 Savings and temporary cash investments		814.058	46	1,266,345
	47 a Accounts receivable	47 a			
	b Less allowance for doubtful accounts	47 b		1776	
				- <del>7/2</del>	<u> </u>
- 1	48a Pledges receivable	48a			
	b Less allowance for doubtful accounts	486		48c	
	49 Grants receivable		216,725	49	147,983
	50 Receivables from officers, directors, trustees, a (attach schedule)	nd key employees		50	
4 5 5 7 5	51 a Other notes & loans receivable (attach schedule	e)   51a  [			
	b Less allowance for doubtful accounts	51 b		51 c	
	52 Inventories for sale or use	·		52	<del></del>
	53 Prepaid expenses and deferred charges	İ	46,960	53	62,483
	54 Investments - securities (attach schedule) L	-54 Stmt► Cost FMV	497,008	54	16,548
	55a Investments - land, buildings, & equipment ba		131,000	F 233	
1	b Less accumulated depreciation				
	(attach schedule)	55 <sub>b</sub>		55 c	
	56 Investments – other (attach schedule)	, <u>,</u>		56	
	57 a Land, buildings, and equipment basis	57a 41,148			
	b Less accumulated depreciation (attach schedule) L-57 Stm.t	57b 33,086	12,001	57 c	8 062
	58 Other assets (describe ► See Line 58		312,863	58	228,573
	59 Total assets (add lines 45 through 58) (must ed		1,980,035	59	1,821,553
	60 Accounts payable and accrued expenses	i i	78,398	60	30 036
ַ	61 Grants payable			61	
4	62 Deferred revenue		78,089	62	65 542
8	63 Loans from officers, directors, trustees, and ke	v employees (attach schedule)		63	
	64a Tax exempt bond liabilities (attach schedule)	· · · · · · · · · · · · · · · · · · ·		64 a	<del></del>
[	b Mortgages and other notes payable (attach sch	edule)	70,000	64Ь	70,000
E   5	65 Other liabilities (describe ► See Line 65	· · · · · · · · · · · · · · · · · · ·	22,335	65	28,505
İ	66 Total liabilities (add lines 60 through 65)		248,822	66	194,083
0		X and complete lines 67			
!	through 69 and lines 73 and 74			80.000 2.000	
	67 Unrestricted		1 731,213	67	1 627,470
SETS	68 Temporarily restricted	Ì		68	3 02., 11.0
:	69 Permanently restricted	Ì		69	
	organizations that do not follow SFAS 117, check here	and complete lines		27.0	<u> </u>
	70 through 74	_			
	70 Capital stock, trust principal, or current funds			70	
	71 Paid in or capital surplus, or land, building, and	l equipment fund		71	
	72 Retained earnings, endowment, accumulated in	F		72	
BALANCES	73 Total net assets or fund balances (add lines 67 72, column (A) must equal line 19 and column	through 69 or lines 70 through (B) must equal line 21)	1,731 213	್ವಿಡೆ? 73	1,627,470
•	74 Total liabilities and net assets/fund balances (a	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	1,980,035	74	1,821,553

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.

	1990 (2000) Industrial Areas			36-233				
Pai	Reconciliation of Revenu Financial Statements with per Return (See instruction	1 Revenue	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return					
a	Total revenue, gains, and other support per audited financial statements	a 1,708,653	Total expenses and financial statements	losses per audited	1,812,396			
b	Amounts included on line a but not on line 12, Form 990		b Amounts included or on line 17, Form 990					
(1)	Net unrealized gains on sinvestments \$		(1) Donated serv ices and use of facilities	i i				
(2)	Donated serv ices and use of facilities \$		(2) Prior year adjust ments reported on line 20, Form 990					
(3)	Recoveries of prior year grants		(3) Losses reported on line 20, Form 990 \$	<u>.                                    </u>				
(4)	Other (specify)		(4) Other (specify)					
	Add amounts on lines (1) through (4)		s	3				
c	Add amounts on lines (1) through (4)  Line a minus line b	c 1 708,653	Add amounts on lines (1)  c Line a minus line b	through (4)	1,812,396			
d	Amounts included on line 12, Form 990 but not on line a		d Amounts included or Form 990 but not on		1,812,330			
(1)	Investment expenses not included on line 6b, Form 990		(1) Investment expenses not included on line 6b, Form 990 \$	: : :				
(2)	Other (specify)		(2) Other (specify)					
	s		s					
	Add amounts on lines (1) and (2)	d	Add amounts on line	es (1) and (2)	<u>i</u>			
•	Total revenue per line 12, Form 990 (line c plus line d)	1,708,653	e Total expenses per 990 (line c plus line	<u>d)</u> _ ► e	1,812,396			
Par	Vege List of Officers, Directors,		<del></del>					
	(A) Name and address	(B) Title and average ho per week devoted to position	urs (C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances			
See	attached							
- <b>-</b> ·		-						
- <del>-</del> -		-						
		-						
See	List of Officers, Etc. Statement							
75	Did any officer, director, trustee, or ke from your organization and all related related organizations?  If Yes, attach schedule – see instruc	organizations, of which m	gate compensation of more ore than \$10,000 was provi	ded by the	Yes X No			
BAA			n4 09/21/00	<del></del>	Form 990 (2000)			

Part VI Other Information (See specific instructions )	N/	4 Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed desort each activity	scription 76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
If 'Yes,' attach a conformed copy of the changes		2000	
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by the	nis return? 78	a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78	<del>-  </del>	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79	aáta.	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through c membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization?	ommon 80	a	X
b If 'Yes,' enter the name of the organization ▶		300	TO V
and check whether it is exempt or	nonexempt	87.55	1623
81 a Enter the amount of political expenditures, direct or indirect, as described in the instructions   81 a	o l	3/3-5	4577.
b Did the organization file Form 1120-POL for this year?	81	Ь	X
-			<del>deita</del>
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge of substantially less than fair rental value?	or at 82		X
b If '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.)			
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83	a X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83	ЬХ	
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84	a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or question and tax deductible?	gifts were	<b>1</b> 2879	
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85		┼──
	85		<del> </del>
b Did the organization make only in house lobbying expenditures of \$2,000 or less?		7 200	10000
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization waiver for proxy tax owed for the prior year	received a		
c Dues, assessments, and similar amounts from members		زر <sub>ي</sub> مرد	
d Section 162(e) lobbying and political expenditures 85d			
e Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices 85e			
f Taxable amount of lobbying and political expenditures (line 85d less 85e)  851		1.000	
g Does the organization elect to pay the Section 6033(e) tax on the amount in 85f?	85	A	·/~~~
		a	+
h if Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	reasonable 85	h	<u> </u>
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on			
line 12 86a		1000	
b Gross receipts, included on line 12, for public use of club facilities 86b		30%	
87 501(c)(12) organizations Enter a Gross income from members or shareholders 87 a		28	
b Gross income from other sources. (Do not net amounts due or paid to other sources			
against amounts due or received from them )		138	
At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or p or an entity disregarded as separate from the organization under Regulations Sections 301 7701-2 and 301 If 'Yes,' complete Part IX	partnership, 7701 32 88		×
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under		2000	
Section 4911 ► 0 , Section 4912 ► 0 , Section 4955 ►	o i	(100)	12994
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any Section 4958 excess benefit transduring the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a	action statement		1
explaining each transaction  c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under	89	<u>b </u>	<u>  X</u>
Sections 4912, 4955, and 4958	<u> </u>		0
d Enter Amount of tax on line 89c, above, reimbursed by the organization			0_
90a List the states with which a copy of this return is filed > Illinois		-,	
b Number of employees employed in the pay period that includes March 12, 2000 (see instructions)	90		12
	312) 245-921	1	
	code > 60610		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here			▶
and enter the amount of tax exempt interest received or accrued during the tax year	▶  92		

Form 990 (2000) Industrial Areas Foundation

36-2334627

Page 5

	TE Analysis of Income-1 Toda		usiness income		ion 512, 513, or 514	(F)
	ross amounts unless se indicated	(A) Business code	(B) Amount	(C) Exclusion code	<b>(D)</b> Amount	(E) Related or exempt tunction income
	Program service revenue					
a	Sponsoring Organ	<del></del>				
ь		<del></del>	···	-		1,631,710
c d		<del>  -   -</del>	<del></del>	<del>                                     </del>		
e						
f	Medicare/Medicaid payments					
_	Fees & contracts from government agencies					
	Membership dues and assessments			14	42.024	
	Interest on savings & temporary cash invents Dividends & interest from securities	···		14	42,034	
	Net rental income or (loss) from real estate					
	debt financed property	<u> </u>		***		
	not debt financed property					
98	Net rental income or (loss) from pers prop					
	Other investment income			18	20,648	
100	Gain or (loss) from sales of assets other than inventory					
	Net income or (loss) from special events					
	Gross profit or (loss) from sales of inventory		. <u>, , , , , , , , , , , , , , , , , , ,</u>	77,	,	1 1, 0 1 , 700, 700
103 Ь	Other revenue a		0 0		<u> </u>	108 3
C		<u> </u>	<del></del>	<del>                                     </del>		<del></del>
ď						<del></del>
e			-			
104	Subtotal (add columns (B), (D), and (E))	6 7 7 6 7		3 X X 3 3 5	62,682	1,631,710
105	Total (add line 104, columns (B), (D),	and (E))			<u> </u>	1,694,392
Note. L	ine 105 plus line 1d. Part I. should equ	ual the amount on	line 12 Part I			
Part V	III Relationship of Activities t	o the Accomp	lishment of E	cempt Purposes	(See instructions )	. <u>-</u>
Line N ▼	Explain how each activity for which of the organization's exempt purp	ch income is repor loses (other than l	ted in column (E) by providing fund:	of Part VII contributes for such purposes)	ed importantly to the	accomplishment
9	3b Enabled the Foundatio	n to aid ir	the devel	opment of pro	grams	
	for the solution of p	oroblems of	American <u>i</u>	ndustrial are	as	
				<u></u>		
		<u>-</u>				
art ()			nes and Disre			<u>N/A</u>
	(A)	(B)		(C)	(D)	(E)
	me, address, and EIN of corporation,	Percentage of	, Nature	of activities	Total	End of year
	partnership, or disregarded entity	ownership interes	_		income	assets
			%   %			
			%			
			<del>%</del>	<del></del>		<del></del>
art X	Information Regarding Tra		<del></del>	onal Benefit Cor	tracts (See metru	etions )
a Di	id the organization, during the year, re enefit contract?	<del></del>	_			Yes X No
	id the organization, during the year, pa	av nremijims, dire	ctly or indirectly	on a personal benefit	contract?	Yes X No
	e If 'Yes' to b, file Form 8870 and For	• •		on a personal benefit		☐ .c3 ∰!#0
		iji iy Zo <u>toga mem</u>		ying schedules and stateme ormation of which preparer h	nts and to the best of my	knowledge and belief, it is
			aséd on all inf	nmation of which preparer h	nas any knowledge (See in ▶ 🏊 ː III	structions)
				11141101	* 165011/ W	. U/41 M.
				Dale /	Type or Print Name an	id Title
				Date / C	Type or Print Name an	d Title

Department of the Treasury Internal Revenue Service

Schedule A (Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

2000

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 Chantable Trust Supplementary Information — (See separate instructions.)

OMB No 1545-0047

► Must be completed by the above organizations a	nd attached to their Form 990 or	990-EZ.				
Name of the Organization			Employer Identification Number			
Industrial Areas Foundation			36-2334627			
Part & See Instructions List each one If ther		Than Officers, [	Directors, and T	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, IL 60610	SUPERVISOR 60	120,000	576	0		
SR CHRISTINE STEPHENS	<u>}</u>					
CHICAGO, IL 60610	SUPERVISOR 60	90,000	0	0		
ARNOLD GRAF	-			:		
CHICAGO IL 60610	SUPERVISOR 60	105,000	608	0		
MICHAEL GECAN						
CHICAGO, IL 60610	SUPERVISOR 60	100,000	682	0		
JAMES_DRAKE						
CHICAGO, IL 60610	SUPERVISOR 60	85,000	<u> </u>	0		
Total number of other employees paid over \$50,000						
Part II Compensation of the Five High (See instructions List each one (wheth	est Paid Independent Con er individuals or firms). If there a	tractors for Proference name enter None	essional Servic	es		
(a) Name and address of each independent contractions	actor paid more than \$50,000	<b>(b)</b> Type	of service	(c) Compensation		
NONE						
	<del></del>	-				
		-				
		-				
		-				
Total number of others receiving over \$50,000 for professional services	NONE					

<u>3016</u>	tuu	6 A (Form 990 or 990-E2) 2000 Industrial Areas Foundation 36-233462	<u>: /</u>		age /
Pai	<b>U</b>	Statements About Activities		Yes	No
1	Dı	Fing the year, has the organization attempted to influence national, state, or local legislation. Including any attempt influence public opinion on a legislative matter or referendum?	Τ,		l x
		'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities	100	3734	328
	OΓ	rganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A. Other ganizations checking 'Yes,' must complete Part VI B and attach a statement giving a detailed description of the		9.34	
	lol	bying activities	3,8	, % % , °,	
2	Dt	uring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its			
	m	ustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization this which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary			17.00
	_		12.28	0.20	
	ı Sa	ale, exchange, or leasing of property?	2a		<u>X</u>
ŀ	Le	ending of money or other extension of credit?	2b		x
	: Fu	umshing of goods, services, or facilities?	2c		×
c	i Pa	syment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Pt V, Fm 990	_2d	х	
	Tr	ansfer of any part of its income or assets?	2e		x
		the answer to any question is 'Yes,' attach a detailed statement explaining the transactions	- <u></u> -		<u> </u>
			1		
3	Do	pes the organization make grants for scholarships, fellowships, student loans, etc?	3		X
4 a	Do	you have a section 403(b) annuity plan for your employees?	4a		<u>  X</u>
t	At or	tach a statement to explain how the organization determines that individuals or organizations receiving grants loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions.)			
Par	ŧΝ	Reason for Non-Private Foundation Status (See instructions )			<u></u>
The	org	anization is not a private foundation because it is (please check only <b>One</b> applicable box)			
5	Ť	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 5)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III)			
8	L	A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)			
9	L	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's	name,	city,	
	_	and state >			_ <b>_</b> _
10	<u>_</u>	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV A.)	170(b)	(1)(A):	(IV)
11 a		An organization that normally receives a substantial part of its support from a governmental unit or from the general p Section 170(b)(1)(A)(vi) (Also complete the <b>Support Schedule</b> in Part IV A)	ublic		
116	. [	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 contributions, membership fees, and from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV A.)	f its su	pport	ots
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) section 509(a)(3))	inizatio ) (See	ns	
		Provide the following information about the supported organizations (See instructions)			
		(a) Name(s) of supported organization(s)		ne nur n abo	
			11 01	11 200	<del>-</del>
14	Γ	An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)			

Part V-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	WOLKSHEEL III UIE IIISU	uchons for conventing	i ii Oili die accidal to t	ne cash memou o	
begi	ndar year (or fiscal year nning in)	1999	(3) 1998	(c) 1997	( <del>)</del> 1996	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	870	1 744	2,408		5,022
16	Membership fees received		<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 organization's charitable, etc. purpose	1,703,733	1,662,100	1,702 572	1,710.74	4 6.779,149
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	74,490	59,637	67,102	_ 66,83	8 268,067
19	Net income from unrelated business activities not included in line 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	1,779,093	1,723 481	1 772,082	1,777,58	
24	Line 23 minus line 17	75,360	61,381	69,510_	66,83	
	Enter 1% of line 23	17,791	17,235	17,721	17,77	
26	Organizations described on lines	10 or 11 a Enti	er 2% of amount in co	olumn (e), line 24		(6a
	Attach a list (which is not open to person (other than a government 1999 exceeded the amount show	al unit or publicly supp n in line 26a Enter the	oorted organization) we e sum of all these exc	d amount contributed hose total gifts for 19 ess amounts	96 through	
	: Total support for Section 509(a)(1		• •		<del> </del>	6c
•	i Add Amounts from column (e) fo	orlines 18		19		
	_		<del></del>	26Ь		26 d
	Public support (line 26c minus lin	•			<u> </u>	6e
	Public support percentage (line 2	<del></del>	d by line 26c (denom:	inator))	<u> </u>	61 %
	Organizations described on line For amounts included in lines 15, inspection) to show the name of, for each year	16, and 17 that were and total amounts red	ceived in each year fr	om, each 'disqualified	person' Enter the	e sum of such amounts
	(1999)	(1998)	(1997) _	<b></b>	_ (1996)	
	For any amount included in line 1 received for each year, that was i organizations described in lines 5 and the larger amount described	more than the larger of through 11, as well a in (1) or (2), enter the	of (1) the amount on li is individuals ) After c sum of these differer	ine 25 for the year or omputing the different ices (the excess amore	(2) \$5,000 (Included to be tween the arounds) for each year	de in the list nount received r
	(1999)	(1998)	(1997)		(1996)	
•	: Add Amounts from column (e) fo	or lines 15	5,022_	16		
	17 <u>6</u>	779,149 20		21	<u> </u>	7c 6,784,171
•	(1999)  Add Amounts from column (e) for 17 6  Add Line 27a total	ar	nd line 27b total		<u></u>	7d
•	Public support (line 27c total mini	us line 2/d total)			<b>-</b>   2	7e  6,784,171
1	Total support for section 509(a)(2	) test Enter amount o	on line 23, column (e)	► 27f 7	7,052,238	
	Public support percentage (line 2		,		<b>_</b> -	7g 96 20 %
<u>-</u>	Investment income percentage (I	ine 18. column (e) (nu	merator) divided by It	ne 27f (denominator)	) <u>►   2</u>	7h 3 80 %

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions.)

Part V ... Private School Questionnaire (See instructions) (To be completed Only by schools that checked the box on line 6 in Part IV) Yes No 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 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, 30 and scholarships? 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) 32 Does the organization maintain the following 32 a a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially 32 b nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32 c 32 d 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) 33 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 33 a b Admissions policies? 33b 33 c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 334 e Educational policies? 33 e f Use of facilities? 33f g Athletic programs? 33 q 33h h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) 34a Does the organization receive any financial aid or assistance from a governmental agency? 34 a b Has the organization's right to such aid ever been revoked or suspended? 34 b If you answered 'Yes' to either 34a or b, please explain using an attached statement 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

Sch	edule A (Form 990 or 990 EZ) 2000	industrial Areas <u>Foun</u> dation		36-2334	627	Page !
Par	<b>tVI-A</b> Lobbying Expenditures (To be completed Only by an	by Electing Public Charities (See instructed lighted Form 5768)	ctions)		N/A	
Che	dr here ► a if the organization	nelongs to an affiliated group		_		
Che	ck here ► b if you checked 'a' a	bove and 'limited control provisions apply				
		bbying Expenditures		(a) Affiliated group totals	To be con for all e	mpleted
	(The term 'expenditures	means amounts paid or incurred )	_		organiz	
36	Total lobbying expenditures to influence	e public opinion (grassroots lobbying)	36			
37	Total lobbying expenditures to influence	e a legislative body (direct lobbying)	37		l .	
38	Total lobbying expenditures (add lines	36 and 37)	38			
39	Other exempt purpose expenditures		39			
40	Total exempt purpose expenditures (a	td lines 38 and 39)	40			
41	Lobbying nontaxable amount. Enter th				77.000 77.000 77.000 77.000	
	If the amount on line 40 is —	The lobbying nontaxable amount is -	8,000		Marie San San	
	Not over \$500,000	20% of the amount on line 40				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	8 00	a de la compansión de la compansión de la compansión de la compansión de la compansión de la compansión de la c		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	973	(800 )00 (1) 00 (800 b	18,000 De 28,90	. 1880° 30° 00° 00° 00° 00° 00° 00° 00° 00° 0
	Over \$17,000,000	\$1,000,000				
42	Grassroots nontaxable amount (enter a	25% of line 41)	42		_	
43	Subtract line 42 from line 36 Enter 0	if line 42 is more than line 36	43			_
44	Subtract line 41 from line 38 Enter 0	if line 41 is more than line 38	44			•
	Caution If there is an amount on either	er line 43 or line 44 you must file Form 4720	2 2 2			
	(Some organizations that n	1 -Year Averaging Penod Under Section and a section 501(h) election do not have to consee the instructions for lines 45 through	omplete	(h) all of the five columns	below	

			Lobbying Expend	itures Dunng 4 -Year A	Veraging Period	
	Calendar year (or fiscal year beginning in) ►	(a) 2000	<b>(b)</b> 1999	(c) 1998	<b>(d)</b> 1997	(e) Total
45	Lobbying nontaxable amount					·
46	Lobbying ceiling amount (150% of line 45(e))					
47	Total lobbying expenditures					
48	Grassroots non taxable amount			••-		
49	Grassroots ceiling amount (150% of line 48(e))					
50	Grassroots lobbying expenditures					

Part VI-B: Lobbying Activity by Nonelecting Public Chanties

(For reporting only by organizations that did not complete Part VI-A) (See instructions )

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- Total lobbying expenditures (add lines c through h)

Yes	No	Amount
	Х	
	X	
	X	
	Χ	
	X	
	Χ	
	X	
	Х	
	y No.	

f 'Yes' to any of the above,	also attach a statement of	jiving a detailed description (	of the lobbying activities
------------------------------	----------------------------	---------------------------------	----------------------------

## Part VII\* Information Regarding Transfers To and Transactions and Relationships With Nonchantable Exempt Organizations (See Instructions)

57 Dia un	ne reporting organization Code (other than section	directly or in	directly engage in any (	of the following	g with any other organization describeing to political organizations?	d in section	501(	2)
	ifers from the reporting of					1	Yes	No
(i)C	• =	· gameacon ·	o a riorioriaritosio oxoni	p. 0. ge	5.	51 a (i)	100	X
` '	Other assets					a (ii)		X
	transactions					- 2.7		_ <del></del>
	ales or exchanges of ass	ets with a no	oncharitable exempt ord	ianization		b(i)		Х
	urchases of assets from		•			b (ii)		X
	ental of facilities, equipm					b (ni)		X
· · · · · ·	eimbursement arrangem					b (iv)		X
	oans or loan quarantees					b (v)		X
	erformance of services o	r membersh	p or fundraising solicita	tions		p (vi)		X
	ng of facilities, equipmen		·			С		X
d If the	answer to any of the abo	ve is 'Yes,'	complete the following:	schedule Colu	umn (b) should always show the fair management of the fair management fair management assets, or services received	iarket value	of	
any tr	ansaction or sharing arra	ingement, sr	•	alue of the go		t		
(a) Line no	(b) Amount involved	Name of	(c) noncharitable exempt o	rganization	(d) Description of transfers, transactions, and	d sharing arrai	naement	s
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descr	organization directly or in the section of section 501(c) of state of the section	the Code (ot	liated with, or related to her than section 501(c)	, one or more 3)) or in secti	tax exempt organizations on 527?	► ☐ Ye	s X	No
	(a) Name of organization		(b) Type of organi	zation	Description of relatio	nship		
					· · · · · · · · · · · · · · · · · · ·		_	
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### Schedule B (Form 990 or 990-EZ)

**Schedule of Contributors** 

Supplementary information for line 1d of Form 990 or

2000

OMB No 1545-0047

Department of the Treasury Internal Revenue Service	and line 1 of Form 950-E2 (see instructions)			2000
Name of Organization			Employer id	entification Number
<u>Industrial Area</u>	s Foundation		36-233	4627
Organization type (check	one) - Section	X 501(c)( <u>3</u> ) ◀ (enter number), <u>527 c</u> 4947(a)(1) nonexempt charitable trust	or	
A Section 501(c)(7), (8), than \$1,000 during th	·	s - Check this box if the organization had no charital neral rule below)	ple contributors who	contributed more
Enter here the total g	ifts received during t	the year for a religious, charitable, etc, purpose 🕒 💲		<u></u>
BAA For Pagerwork Rei	duction Act Notice.	see instructions for Form 990 and Form 990-FZ	Schedule B (E	orm 990 or 990 EZ) (2000)

Line 65 - Other Liabilities:	Beginning of Year	End of Year
Custodial Obligations	22 335	28 505
Total	22,335	28,505

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

(A) Name and address	( <b>B)</b> Title and average hours per 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 12601	V PRESIDENT 5	0_	0	0
DR JEAN ELSHTAIN	CCCDCTARY C			•
NASHVILLE, TN 37215	SECRETARY 5	0	0	0
REV HAYES ROCKWELL ST LOUIS, MO 63103	MEMBER 5	o	o	o
THOMAS J BOODELL, JR	TIETIDEK 3	<del></del>	<del></del>	
CHICAGO, IL 60601	MEMBER 5	l o	o	0
BISHOP JOHN ADAMS	1101,001,	<del>-</del>		
COLUMBIA, SC 29223	MEMBER 5	o	0	0
TALAT OTHAM				
LONG GROVE, IL 60047	MEMBER 5	0	0	0
EDWARD T CHAMBERS				
CHICAGO, IL 60610	EXEC DIR 65	<u>136,373</u>	19,087	0

Total 136 373 19,087 0

#### Supporting Statement of

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

Description	Amount
Friars of the Atonement	50,000
Sisters of Divine Compassion	10,000
Sisters of Notre Dame	10,000
Total	70,000

#### Supporting Statement of

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

Description	Amount
Friars of the Atonement	50,000
Sisters of Divine Compassion	10,000
Sisters of Notre Dame	10,000
Total	70,000