

UNDER EXTENSION UNTIL 2/15/02

Form 990

Return of Organization Exempt from Income Tax

OMB No 1545-0047

2000

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 charitable trust

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Form 990 header section including A (calendar year), B (check if applicable), C (Name of organization: Zion Development Corporation), D (Employer ID Number: 36-3229794), E (Telephone number: (815) 964-8280), G (Organization type: 501(c)3), J (Accounting method: Accrual), K (Check here if gross receipts normally not more than \$25,000), H (Affiliates), I (Group exemption no), L (Check this box if not required to attach Schedule B).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see instructions)

Table with 21 rows and 3 columns: Description, Amount, and Total. Rows include: 1 Contributions (124,031 + 171,623 + 216,997 = 512,651), 2 Program service revenue (725,835), 3 Membership dues (14,548), 6a Gross rents (239,006), 6b Less rental expenses (206,203), 6c Net rental income (32,803), 8a Gross amount from sales of assets other than inventory, 9 Special events and activities, 10a Gross sales of inventory, 11 Other revenue (10,570), 12 Total revenue (1,296,407), 13 Program services (771,097), 14 Management and general (306,322), 15 Fundraising (31,076), 16 Payments to affiliates, 17 Total expenses (1,108,495), 18 Excess or deficit (187,912), 19 Net assets at beginning (512,310), 20 Other changes (45,000), 21 Net assets at end (745,222).

SCANNED JAN 14 2002

RECEIVED JAN 08 2002 OGDEN UT

Part II 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 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ non cash \$ _____)	22			
23 Specific assistance to individuals (attach sch)	23			
24 Benefits paid to or for members (attach sch)	24			
25 Compensation of officers directors, etc	25	54,761	0	54,761
26 Other salaries and wages	26	479,412	406,446	72,966
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31	11,125	0	11,125
32 Legal fees	32			
33 Supplies	33	19,028	8,073	10,955
34 Telephone	34	9,821	2,106	7,715
35 Postage and shipping	35			
36 Occupancy	36	61,919	33,155	28,764
37 Equipment rental and maintenance	37	3,052	1,992	1,060
38 Printing and publications	38	15,949	0	0
39 Travel	39	329	33	296
40 Conferences conventions and meetings	40	5,357	314	5,043
41 Interest	41	38,459	21,650	16,809
42 Depreciation, depletion etc (attach schedule)	42	16,183	8,755	7,428
43 Other expenses (itemize)				
a ADVERTISING	43a	1,523	190	1,333
b CONST/ REPAIRS/ MAINTENANCE	43b	23,959	20,825	3,134
c PAYROLL TAXES/ EMP EXP	43c	52,708	39,964	12,744
d DUES	43d	1,835	0	1,835
e See Other Expenses Stmt	43e	313,075	227,594	70,354
44 Total functional expenses (add lines 22-43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	1,108,495	771,097	306,322

Reporting of Joint Costs - Did you report in column (B) (program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No

If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to program services \$ _____, (iii) the amount allocated to management and general \$ _____, and (iv) the amount allocated to fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? Provide job training, Rehab housing All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) & (4) organizations & section 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
a Sheltered Workshop--a machine shop program operated to provide jobs and training for economically disadvantaged individuals traditionally difficult to employ to help them to become financially stable, contributing members of the community (Grants and allocations \$ 0)	314,218
b Housing Rehabilitation and Housing Program--seeks to motivate volunteers to work with trained staff to rehabilitate housing in depressed neighborhoods to provide affordable housing for rent or sale to economically disadvantaged individuals (Grants and allocations \$ 0)	449,268
c Choppi Leadership Program and other program expenses (Grants and allocations \$ 0)	7,611
d (Grants and allocations \$)	
e Other program services (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44, column (B), program services)	771,097

Part IV Balance Sheets (See instructions)

Note		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
ASSETS	45	Cash -- non interest bearing		6,934	45	30,884
	46	Savings and temporary cash investments		13,758	46	81,403
	47a	Accounts receivable	47a 54,969			
		b Less allowance for doubtful accounts	47b 0	63,431	47c	54,969
	48a	Pledges receivable	48a 48,565			
		b Less allowance for doubtful accounts	48b	57,394	48c	48,565
	49	Grants receivable		0	49	22,400
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes & loans receivable (attach schedule)	51a 1,517,500			
		b Less allowance for doubtful accounts	51b 0	0	51c	1,517,500
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54	Investments -- securities (attach schedule)			54	
	55a	Investments -- land, buildings, & equipment basis	55a 1,938,650			
		b Less accumulated depreciation (attach schedule)	55b 481,365	2,060,893	55c	1,457,285
	56	Investments -- other (attach schedule)				
	57a	Land, buildings, and equipment basis	57a 380,913	277,972	56	693,279
		b Less accumulated depreciation (attach schedule)	57b 0	141,062	57c	380,913
	58	Other assets (describe ▶ See Line 58 Stmt)		148,231	58	184,194
59	Total assets (add lines 45 through 58) (must equal line 74)		2,769,675	59	4,471,392	
LIABILITIES	60	Accounts payable and accrued expenses		75,082	60	57,370
	61	Grants payable			61	
	62	Deferred revenue			62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
		b Mortgages and other notes payable (attach schedule)		1,970,026	64b	3,492,220
	65	Other liabilities (describe ▶ See Line 65 Stmt)		212,257	65	176,580
66	Total liabilities (add lines 60 through 65)		2,257,365	66	3,726,170	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		481,354	67	636,320
	68	Temporarily restricted		30,956	68	108,902
	69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	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)		512,310	73	745,222
	74	Total liabilities and net assets/fund balances (add lines 66 and 73)		2,769,675	74	4,471,392

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

Part VI Other Information (See specific instructions)

		N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		X
77	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	77		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80a	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		X
	b If 'Yes,' enter the name of the organization ▶ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
81a	Enter the amount of political expenditures direct or indirect, as described in the instructions 81a 0			
	b Did the organization file Form 1120-POL for this year?	81b		X
82a	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		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) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4) (5) or (6) organizations a Were substantially all dues nondeductible by members?	85a		
	b Did the organization make only in house lobbying expenditures of \$2,000 or less? 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	85b		
	c Dues, assessments, and similar amounts from members 85c			
	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) 85f			
	g Does the organization elect to pay the Section 6033(e) tax on the amount in 85f? 85g			
	h 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 lobbying and political expenditures for the following tax year? 85h			
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86a			
	b Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b			
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? If 'Yes,' complete Part IX 88			X
89a	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 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			X
	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958 ▶ 0			
	d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶			
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) 90b 25			
91	The books are in care of ▶ Brad Roos Telephone number ▶ (815) 964-8280 Located at ▶ 524 7th Street, Rockford IL ZIP code ▶ 61104			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here ▶ <input type="checkbox"/> and enter the amount of tax exempt interest received or accrued during the tax year ▶ 92			

Part VII Analysis of Income-Producing Activities (See instructions)

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Workshop Sales					291,179
b Amort-Def Mtgs					4,107
c Developer and Other Fees					430,549
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					14,548
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt financed property					32,803
b not debt financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b Miscellaneous					10,570
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					783,756
105 Total (add line 104, columns (B), (D), and (E))					783,756

Note. Line 105 plus line 1d Part I should equal the amount on line 12 Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	Revenue from jobs/ training for unskilled individuals chronically unemployed
93b and 93c	Income from sources conected with the housing rehabilitation projects that seek to provide affordable housing for low income individuals to rent or purchase
	See Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions) N/A

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions)

- a Did the organization during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- b Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

I have prepared this return and accompanying schedules and statements and to the best of my knowledge and belief it is based on all information of which preparer has any knowledge (See instructions)

12-27-01
Date

Curtiss A. Reynolds - Assg. Treas.
Type or Print Name and Title

Part III Statements About Activities

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt 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 ▶ \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A. Other organizations checking 'Yes,' must complete Part VI-B and attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary?		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Pt V, Fm 990.	2d	X
e Transfer of any part of its income or assets? If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc?	3	X
4a Do you have a section 403(b) annuity plan for your employees?	4a	X
b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions.)		

Part IV Reason for Non-Private Foundation Status (See instructions)

The organization is not a private foundation because it is (please check only **One** applicable box)

- 5 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 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc. functions - subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (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). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

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

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	469,299	144,278	227,988	416,021	1,257,586
16 Membership fees received	0	0	0	0	0
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	690,176	751,155	564,928	500,027	2,506,286
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	444	1,183	486	-17,340	-15,227
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
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	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	3,403	7,688	7,470	7,437	25,998
23 Total of lines 15 through 22	1,163,322	904,304	800,872	906,145	3,774,643
24 Line 23 minus line 17	473,146	153,149	235,944	406,118	1,268,357
25 Enter 1% of line 23	11,633	9,043	8,009	9,061	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					25,367
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts					0
c Total support for Section 509(a)(1) test. Enter line 24, column (e)					1,268,357
d Add Amounts from column (e) for lines	18	-15,227	19	0	
	22	25,998	26b	0	10,771
e Public support (line 26c minus line 26d total)					1,257,586
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					99.15%
27 Organizations described on line 12					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each 'disqualified person.' Enter the sum of such amounts for each year					
(1999) _____ (1998) _____ (1997) _____ (1996) _____					
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					
(1999) _____ (1998) _____ (1997) _____ (1996) _____					
c Add Amounts from column (e) for lines	15	16	17	20	21
	27c	27d	27e	27f	27g
d Add Line 27a total and line 27b total					27h
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					%
28 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)

		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?		
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?		
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? If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement) ----- ----- -----		
32	Does the organization maintain the following		
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 nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
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?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
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?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement		
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		

Schedule B
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary information for line 1d of Form 990 or
and line 1 of Form 990-EZ (see instructions)

OMB No 1545 0047

2000

Name of Organization

Zion Development Corporation

Employer Identification Number

36-3229794

Organization type (check one) – Section

501(c)(3) ◀ (enter number), 527 or
 4947(a)(1) nonexempt charitable trust

A Section 501(c)(7), (8), or (10) organizations – Check this box if the organization had **no** charitable contributors who contributed more than \$1,000 during the year (But see **General rule** below) ▶

Enter here the total gifts received during the year for a religious, charitable, etc, purpose ▶ \$

BAA For Paperwork Reduction Act Notice, see instructions for Form 990 and Form 990-EZ.

Schedule B (Form 990 or 990-EZ) (2000)

Name of Organization

Employer Identification Number

Zion Development Corporation

36-3229794

Part I Contributors

(a) Number	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
1		\$ 45,000	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
2		\$ 44,139	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Other expenses (itemize)				
OUTSIDE SERVICES	46,030	34,979	11,051	0
PROFESSIONAL FEES	11,717	9,881	1,836	0
INSURANCE	50,132	19,085	31,047	0
REAL ESTATE TAXES	10,799	7,542	3,257	0
EDUCATION/ SEMINARS	5,569	600	4,969	0
OFFICE EXPENSE	9,878	694	9,184	0
GRAND AVE/ WELLNESS EXPENSES	138,865	138,865	0	0
VEHICLE EXPENSES	7,475	5,355	2,120	0
TRASH REMOVAL	13,013	9,537	3,476	0
BANQUET	15,127	0	0	15,127
MISCELLANEOUS EXPENSE	4,470	1,056	3,414	0
Total	313,075	227,594	70,354	15,127

Form 990, Page 3, Part IV, Line 56

Investments - Other Statement

Line 56 – Investments - Other:	Beginning of Year	End of Year
Investment in LLC - Longwood Plaza	245,218	310,653
Investment in LLC - 528 Seventh Street	32,754	32,626
Investment in LP - Grand Apartments	0	350,000
Total	277,972	693,279

Form 990, Page 3, Part IV, Line 58

Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
Meter deposits	225	14,377
Developer fee receivable- Longwood	148,006	169,817
Total	148,231	184,194

Form 990, Page 3, Part IV, Line 65

Other Liabilities Statement

Line 65 - Other Liabilities:	Beginning of Year	End of Year
Overdraft	14,116	0
Tenant deposits	13,758	13,337
Accrued payroll taxes	12,009	16,251
Accrued payroll	35,132	28,253
Accrued real estate taxes	48,860	75,341
Other long term liabilities	3,500	2,298

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

Continued

Line 65 - Other Liabilities:	Beginning of Year	End of Year
Advanced payments - grants	84,882	41,100
Total	<u>212,257</u>	<u>176,580</u>

Form 990, Page 6, Part VIII

Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Line Number ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
95	Interest income helps to support all program objectives
97a	Income from housing rented to economically disadvantaged individuals provides affordable housing
103b	All supplemental income is used to help implement program objectives

Supporting Statement of:

Form 990 p 1/Line 20

Description	Amount
PRIOR PERIOD ADJUSTMENT/ UNITED WAY CONTRIBUTION	45,000
Total	<u>45,000</u>

Supporting Statement of:

Form 990 p 3/Line 51a

Description	Amount
LONGWOOD PLAZA	1,517,500
Total	<u>1,517,500</u>

ZION DEVELOPMENT CORPORATION
 FEIN 36 3229794
 Form 990, Part IV, Line 57
 June 30, 2001

ASSETS

Description	Balance at 6/30/2000	Additions	Disposals	Balance at 6/30/2001
Land	5,950 00	8,650 00		14,600 00
Office Building	26,771 00	164,967 00		191,738 00
Building improvements	67,732 00	52,246 00		119,978 00
Office Equipment	33,681 00	5,800 00		39,481 00
Lshld improve - Workshp	56,663 00			56,663 00
Shop Equipment	13,167 00			13,167 00
Vehicles	20,001 00	20,270 00		40,271 00
	<u>223,965 00</u>	<u>251,933 00</u>	<u>0 00</u>	<u>475,898 00</u>

Accumulated Depreciation

Less	Balance at 6/30/2000	Disposals Dr	Depreciation Cr	Balance at 6/30/2001
Accumulated Depreciation	82,903 00		12,082 00	94,985 00
Net assets Part IV, line 57	<u>141,062 00</u>			<u>380,913 00</u>

ZION DEVELOPMENT CORPORATION
BOARD OF DIRECTORS

ZION DEVELOPMENT CORPORATION 36-3229794
Form 990 (6/30/2001) Part V, Board of Directors

NAME & ADDRESS	TERM EXPIRES	EMPLOYMENT	PHONES	FAX E-MAIL
<i>Resigned 2001</i> David Bippus (Kohne) TREASURER 9640 N Blaine Drive Byron IL 61010	2001	Vice President of Finance & Information Technology Haldex Barnes Corp 2222 Fifteenth Street Rockford IL 61104-7390	W 398-1400 X219 H 234-7304 C 262-3631	398-0435 david.bippus@hbus.haldex.com
Rev Dr Denver Bitner (Pam) CHAIRMAN 3523 Northview Road Rockford IL 61107	2001	Senior Pastor Zion Lutheran Church 925 Fifth Avenue Rockford IL 61104	W 964-4609 H 633-4136	964-4652 dbitner@quik.com
Anton Cooper* 528 Seventh Street #3 Rockford IL 61104	2000		H 963-7324	
John Crove (Linda) 2787 Hedge Cliff Dr Rockford IL 61114	2000	Executive Vice President Belvidere National Bank 600 S State Street Belvidere IL 61008	W 231-6081 H 654-9601 C 985-8080	544-7221 jacapca@aol.com
Regina Evans* 528 Seventh Street #7 Rockford IL 61104	2000	Legal Department City of Rockford 425 E. State Street Rockford IL 61104	W 987-5540 H 967-4155	967-6949
Karol Hammond* (Lance) 609 College Avenue Rockford IL 61104	2002	Chrysler Corporation 300 W Chrysler Drive Belvidere IL 61008	H 968-5868	
Robert Huffington (MaryLou) 811 Paris Avenue Rockford IL 61107	2001	Managing Director RSM McGladrey 501 Seventh Street Rockford IL 61104	W 961-7465 H 226-4710 C 978-8725	987-9894 Bob.huffington@RSMI.com

210N DEVELOPMENT CORPORATION 36-3229794
 Board of Directors (6/30/2001) page 2 of 2

NAMF & ADDRESS	TERM EXPIRES	EMPLOYMENT	PHONES	FAX E-MAIL
Maralyn Johnson SECRETARY 219 Hunter Avenue Rockford IL 61108	2001	RETIRED	H 399-3007	mjohn21377
Curtis Reynolds (Marion) 427 N Highland Avenue Rockford IL 61107	2002	RETIRED President Rehnberg-Jacobson Mfg Co	H 399-0508 C 519-8185	car20@worldnet.att.net
Hon Brian Dean Shore (Mary) 1106 Pine Valley Drive Rockford IL 61107	2002	Associate Judge Seventeenth Judicial Circuit 400 W State Street Rockford IL 61101	W 987-3077 H 399-6875	4shore@inwave.com
William Spstrom (Genny) PRESIDENT 6336 Park Ridge Road Loves Park IL 6111	2000	Director of Facilities Planning Rock Valley College 3301 N Mulford Rd Rockford IL 61114-5699	W 639-2561 H 877-8727	639-2568 W_Spstrom@RVC.ct.il.us
Donald Weir (Phyllis) 1111 Winthrop Lane Rockford IL 61107	2002	RETIRED Deputy Fire Chief	H 399-8971	drwfire@juno.com
Patricia Cardenas	2002	1220 Eighth Street Rockford, IL 61104		
Wayne Dust	2002	5974 Palo Verde Dr Rockford, IL 61114		