

Return of Organization Exempt From Income Tax

2000

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

A For the 2000 calendar year, OR tax year period beginning **07/01**, 2000, and ending **06/30/2001**

B Check if applicable: <input type="checkbox"/> Change of address <input type="checkbox"/> Change of name <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amend return	C Name of organization METROPOLITAN INTER-FAITH ASSOCIATION	D Employer identification number 62-0803601
	Please use IRS label or print or type See Specific Instructions. 910 VANCE P.O. BOX 3130	E Telephone number (901) 527-0208
	Number and street (or P O box if mail is not delivered to street address) Room/suite MEMPHIS, TN 38173	F Check <input type="checkbox"/> if application pending
	City or town, state or country, and ZIP code	

G Organization type (check only one) 501(c)(3) (insert no) 527 OR 4947(a)(1) Note (H and I are not applicable to section 527 orgs)

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes" enter number of affiliates

H(c) Are all affiliates included? (if "No" attach a list. See inst.) Yes No

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Enter 4-digit group exemption no (GEN)

J Accounting method Cash Accrual Other (specify)

K Check here if the organization's gross receipts are normally not more than \$25 000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)			
Revenue	1 Contributions gifts, grants and similar amounts received		
	a Direct public support	1a	6,472,808.
	b Indirect public support	1b	
	c Government contributions (grants)	1c	4,875,013.
	d Total (add lines 1a through 1c) (cash \$ noncash \$)	1d	11,347,821.
	2 Program service revenue including government fees and contracts (from Part VII line 93)	2	1,242,874.
	3 Membership dues and assessments	3	
	4 Interest on savings and temporary cash investments	4	216,673.
	5 Dividends and interest from securities	5	
	6a Gross rents	6a	
	b Less rental expenses	6b	
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c	215,979.
7 Other investment income (describe)	7		
8a Gross amount from sales of assets other than inventory	(A) Securities	8a	156,555.
	(B) Other	8b	165,673.
	b Less cost or other basis and sales expenses	8c	-9,118.
	c Net gain or (loss) (combine line 8c columns (A) and (B))	8d	-9,118.
9a Special events and activities (attach schedule)	a Gross revenue (not including \$ of contributions reported on line 1a)	9a	
	b Less direct expenses other than fundraising expenses	9b	
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c	
10a Gross sales of inventory, less returns and allowances	10a		
	b Less cost of goods sold	10b	
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	
11 Other revenue (from Part VII line 103)	11	1,455.	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	13,015,684.	
Expenses	13 Program services (from line 44, column (B))	13	8,013,033.
	14 Management and general (from line 44, column (C))	14	277,900.
	15 Fundraising (from line 44 column (D))	15	1,317,554.
	16 Payments to affiliates (attach schedule)	16	
	17 Total expenses (add lines 16 and 44 column (A))	17	9,608,487.
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	3,407,197.
	19 Net assets or fund balances at beginning of year (from line 73 column (A))	19	7,933,135.
	20 Other changes in net assets or fund balances (attach explanation) STMT 2	20	579,406.
	21 Net assets or fund balances at end of year (combine lines 18, 19 and 20)	21	11,919,738.

20

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 (See Specific Instructions on page 20)

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 \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	214,167.		214,167	
26	Other salaries and wages	3,441,674.	2,560,413.	332,536.	548,725.
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	152,088.	94,007.	44,528.	13,553
34	Telephone	69,763.	47,957.	17,542.	4,264.
35	Postage and shipping	35,001.	7,717.	4,822.	22,462.
36	Occupancy	235,301.	169,713.	25,618.	39,970.
37	Equipment rental and maintenance	6,222.	521.	4,581.	1,120.
38	Printing and publications	123,243.	17,083.	82.	106,078.
39	Travel	153,337.	128,325.	11,238	13,774.
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation depletion, etc (attach schedule)	385,517.	288,227.	47,439.	49,851.
43	Other expenses (itemize) a <u>STMT 3</u>	4,792,174.	4,699,070.	-424,653.	517,757.
b					
c					
d					
e					
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	9,608,487.	8,013,033.	277,900.	1,317,554.

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 (See Specific Instructions on page 23)

What is the organization's primary exempt purpose? **SEE STATEMENT 4**

	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a DELIVERY OF MEALS FOR SENIOR CITIZENS; TRANSITIONAL HOUSING FOR HOMELESS FAMILIES; EMERGENCY ASSISTANCE FOR THE CITY OF MEMPHIS AND OTHER PROGRAMS FOR THE ELDERLY AND NEEDY. (Grants and allocations \$ _____)	8,013,033.
b _____ (Grants and allocations \$ _____)	
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
Total of Program Service Expenses (should equal line 44, column (B) Program services)	8,013,033

Part IV Balance Sheets (See Specific Instructions on page 23)

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	1,111,325.	45	1,034,984.	
	46 Savings and temporary cash investments	2,120,592.	46	2,247,565.	
	47a Accounts receivable	47a 96,534.			
	b Less allowance for doubtful accounts	47b	89,885.	47c	96,534
	48a Pledges receivable	48a 3,651,452.			
	b Less allowance for doubtful accounts	48b	3,207,730.	48c	3,651,452.
	49 Grants receivable		804,987.	49	1,265,331.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a Other notes and loans receivable (attach schedule)	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges		8,464.	53	12,582.
	54 Investments - securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a Investments - land, buildings, and equipment basis	55a			
b Less accumulated depreciation (attach schedule)	55b		55c		
56 Investments - other (attach schedule)			56		
57a Land, buildings, and equipment basis	57a 10,538,068.				
b Less accumulated depreciation (attach schedule)	57b 2,382,970.	291,230.	57c	8,155,098.	
58 Other assets (describe ▶ SEE STATEMENT 5)		966,297.	58	NONE	
59 Total assets (add lines 45 through 58) (must equal line 74)		8,600,510.	59	16,463,546.	
Liabilities	60 Accounts payable and accrued expenses	525,645.	60	471,957.	
	61 Grants payable			61	
	62 Deferred revenue	SEE STATEMENT 6	83,092.	62	99,430.
	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) STMT 7		NONE	64b	1,000,000.
	65 Other liabilities (describe ▶ SEE STATEMENT 8)		58,638.	65	2,972,421.
66 Total liabilities (add lines 60 through 65)		667,375.	66	4,543,808.	
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		4,658,181.	67	8,851,661.
	68 Temporarily restricted		3,274,954.	68	3,068,077.
	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)		7,933,135.	73	11,919,738.	
74 Total liabilities and net assets/fund balances (add lines 66 and 73)		8,600,510.	74	16,463,546.	

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.

Part VI Other Information (See Specific Instructions on page 26)

		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		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		X
78a	Did the organization have unrelated business gross income of \$1 000 or more during the year covered by this return?		X
78b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination or substantial contraction during the year? If "Yes," attach a statement		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?	X	
b If "Yes," enter the name of the organization INDEPENDENT APARTMENTS MIFA FOUNDATION and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt			
81a	Enter the amount of political expenditures direct or indirect, as described in the instructions for line 81		
81b	Did the organization file Form 1120-POL for this year?	N/A	
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?	X	
82b	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	579,406.
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	
84b	b If "Yes" did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
85b	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	N/A	
85c	c Dues, assessments and similar amounts from members	N/A	
85d	d Section 162(e) lobbying and political expenditures	N/A	
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
85g	g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	
85h	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?	N/A	
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	N/A	
86b	b Gross receipts, included on line 12, for public use of club facilities	N/A	
87a	501(c)(12) orgs Enter a Gross income from members or shareholders	N/A	
87b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	N/A	
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		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>N/A</u> section 4912 <u>N/A</u> section 4955 <u>N/A</u>		
89b	b 501(c)(3) and 501(c)(4) orgs 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		X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955 and 4958			N/A
d Enter Amount of tax on line 89c above, reimbursed by the organization			N/A
90a	List the states with which a copy of this return is filed		
90b	b Number of employees employed in the pay period that includes March 12 2000 (See inst)		
91	The books are in care of <u>MICHAEL TOUCHET</u> Telephone no <u>901-527-0208</u> Located at <u>910 VANCE, MEMPHIS, TN.</u> ZIP code <u>38173</u>		
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		N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 30)

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 PROGRAM INCOME			01	1,242,874.	
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	216,673.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	215,979.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-9,118.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b MATCHING FUNDS			01	1,455.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				1,667,863.	
105 Total (add line 104, columns (B), (D), and (E))					1,667,863.

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 Specific Instructions on page 31)

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)
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 31)

(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 Specific Instructions on page 31)

- (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

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, this return and the accompanying schedules and statements are true, correct, and complete. I am a preparer (other than officer) is based on all information of which preparer has any knowledge

Date: 1/2/98/01
 Type or print name and title: JERN NORFLEET, SEC.

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(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

2000

Department of the Treasury
Internal Revenue Service

▶ **MUST** be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization

Employer identification number

METROPOLITAN INTER-FAITH ASSOCIATION

62-0803601

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(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
MARGARET CRADDOCK 910 VANCE AVE., MEMPHIS, TN	EXEC DIR 40 HRS	91,376.		
MIKE TOUCHET 910 VANCE AVE, MEMPHIS, TN	CHP FINANC 40	72,100.		
CONRAD LEHFELDT 910 VANCE AVE, MEMPHIS, TN	ASSO EXEC 40	50,691.		
Total number of other employees paid over \$50 000 ▶	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 1 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50 000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50 000 for professional services ▶	NONE	

Part III Statements About Activities

	Yes	No
<p>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?</p> <p>If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____</p> <p>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</p>		X
<p>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</p>		
<p>a Sale, exchange, or leasing of property?</p>		X
<p>b Lending of money or other extension of credit?</p>		X
<p>c Furnishing of goods services, or facilities?</p>		X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1 000)?</p>	X	
<p>e Transfer of any part of its income or assets?</p> <p>If the answer to any question is "Yes " attach a detailed statement explaining the transactions</p>		X
<p>3 Does the organization make grants for scholarships, fellowships student loans etc ?</p>		X
<p>4a Do you have a section 403(b) annuity plan for your employees?</p>		X
<p>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 page 2 of the instructions)</p>		

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the 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)(v) (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 page 5 of the 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 page 5 of the 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)	9,238,719.	8,457,401.	6,210,778.	6,995,657.	30902555.
16 Membership fees received					
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	1,600,102.	1,542,147.	606,472.	613,915.	4,362,636.
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	354,553.	203,099.	3,385.	3,045.	564,082.
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	STMT 10 27,451.	118,834.	28,133.	76,692.	251,110.
23 Total of lines 15 through 22	11220825.	10321481.	6,848,768.	7,689,309.	36080383.
24 Line 23 minus line 17	9,620,723.	8,779,334.	6,242,296.	7,075,394.	31717747.
25 Enter 1% of line 23	112,208.	103,215.	68,488.	76,893.	
26 Organizations described in lines 10 or 11	a Enter 2% of amount in column (e) line 24				▶ 26a 634,355.
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					▶ 26b NONE
c Total support for section 509(a)(1) test Enter line 24, column (e)					▶ 26c 31717747.
d Add Amounts from column (e) for lines	18 564,082.	19	22 251,110.	26b NONE	▶ 26d 815,192.
e Public support (line 26c minus line 26d total)					▶ 26e 30902555.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					▶ 26f 97.4299 %
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				NOT APPLICABLE
(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 _____
d Add Line 27a total _____ and line 27b total _____					▶ 27d _____
e Public support (line 27c total minus line 27d total)					▶ 27e _____
f Total support for section 509(a)(2) test Enter amount on line 23 column (e)					▶ 27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					▶ 27g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					▶ 27h _____ %
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 page 5 of the instructions)					

Part V Private School Questionnaire (See page 5 of the instructions)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

NOT APPLICABLE

		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		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 7 of the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

NOT APPLICABLE

Check here **a** if the organization belongs to an affiliated group
 Check here **b** if you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

(a) Affiliated group totals	(b) To be completed for ALL electing organizations
-----------------------------------	---

36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - 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 Over \$1 000 000 but not over \$1 500 000 \$175 000 plus 10% of the excess over \$1,000 000 Over \$1 500 000 but not over \$17 000 000 \$225 000 plus 5% of the excess over \$1 500 000 Over \$17 000 000 \$1 000 000	41		
42 Grassroots nontaxable amount (enter 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 line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 9 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 9 of the instructions)

	Yes	No	Amount
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		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule B
(Form 990 or 990-EZ)

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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

2000

Name of organization

Employer identification number

METROPOLITAN INTER-FAITH ASSOCIATIO

62-0803601

Organization type (check only 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 \$

Note: This form is generally not open to public inspection except for section 527 organizations

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ)

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ

Caution: Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ)

Public Inspection

Schedule B (Form 990 or 990-EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ

See the instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ)

Contributors Required To Be Listed on Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations

General Rule. Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who, during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year

Section 501(c)(3) organizations. For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a))

Example: A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000

Section 501(c)(7), (8), or (10) organizations. For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General Rule discussed above

Name of organization

Employer identification number

METROPOLITAN INTER-FAITH ASSOCIATIO

62-0803601

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		<u>500,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>2</u>		<u>250,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>3</u>		<u>1,000,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>4</u>		<u>250,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>5</u>		<u>250,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
			Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return ▶ See separate instructions

Name(s) shown on return METROPOLITAN INTER-FAITH ASSOCIATION	Identifying number 62-0803601
--	---

1 Enter the gross proceeds from sales or exchanges reported to you for 2000 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)	1 121,527.
--	-------------------

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (See instructions)

(a) Description of property	(b) Date acquired (mo day, yr)	(c) Date sold (mo day yr)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2						

3 Gain, if any, from Form 4684, line 39	3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5
6 Gain, if any, from line 32, from other than casualty or theft	6
7 Combine lines 2 through 6 Enter the gain or (loss) here and on the appropriate line as follows Partnerships (except electing large partnerships) Report the gain or (loss) following the instructions for Form 1065, Schedule K line 6 Skip lines 8, 9, 11 and 12 below S corporations Report the gain or (loss) following the instructions for Form 1120S Schedule K, lines 5 and 6 Skip lines 8, 9 11 and 12 below unless line 7 is a gain and the S corporation is subject to the capital gains tax. All others If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on Schedule D and skip lines 8, 9, and 12 below	7
8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8
9 Subtract line 8 from line 7 If zero or less, enter -0- Also enter on the appropriate line as follows (see instructions) S corporations Enter any gain from line 9 on Schedule D (Form 1120S), line 15, and skip lines 11 and 12 below All others If line 9 is zero, enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on Schedule D	9

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 17 (include property held 1 year or less) SEE STATEMENT 13	-9,118.

11 Loss, if any, from line 7	11 ()
12 Gain, if any from line 7 or amount from line 8, if applicable	12
13 Gain, if any, from line 31	13
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16
17 Recapture of section 179 expense deduction for partners and S corporation shareholders from property dispositions by partnerships and S corporations (see instructions)	17
18 Combine lines 10 through 17 Enter the gain or (loss) here and on the appropriate line as follows a For all except individual returns Enter the gain or (loss) from line 18 on the return being filed b For individual returns (1) If the loss on line 11 includes a loss from Form 4684 line 35 column (b)(ii), enter that part of the loss here Enter the part of the loss from income-producing property on Schedule A (Form 1040) line 27, and the part of the loss from property used as an employee on Schedule A (Form 1040) line 22 Identify as from "Form 4797 line 18b(1)" See instructions (2) Redetermine the gain or (loss) on line 18 excluding the loss if any on line 18b(1) Enter here and on Form 1040, line 14	18 -9,118.
	18b(1)
	18b(2)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245 1250 1252 1254 or 1255 property	(b) Date acquired (mo day yr)	(c) Date sold (mo day yr)		
A				
B				
C				
D				
These columns relate to the properties on lines 19A through 19D	Property A	Property B	Property C	Property D
20 Gross sales price (Note See line 1 before completing)	20			
21 Cost or other basis plus expense of sale	21			
22 Depreciation (or depletion) allowed or allowable	22			
23 Adjusted basis Subtract line 22 from line 21	23			
24 Total gain Subtract line 23 from line 20	24			
25 If section 1245 property				
a Depreciation allowed or allowable from line 22	25a			
b Enter the smaller of line 24 or 25a	25b			
26 If section 1250 property If straight line depreciation was used enter -0- on line 26g except for a corporation subject to section 291				
a Additional depreciation after 1975 (see instructions)	26a			
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b			
c Subtract line 26a from line 24 If residential rental property or line 24 is not more than line 26a skip lines 26d and 26e	26c			
d Additional depreciation after 1969 and before 1976	26d			
e Enter the smaller of line 26c or 26d	26e			
f Section 291 amount (corporations only)	26f			
g Add lines 26b, 26e, and 26f	26g			
27 If section 1252 property Skip this section if you did not dispose of farmland or if the form is being completed for a partnership (other than an electing large partnership)				
a Soil water, and land clearing expenses	27a			
b Line 27a multiplied by applicable percentage (see instructions)	27b			
c Enter the smaller of line 24 or 27b	27c			
28 If section 1254 property				
a Intangible drilling and development costs expenditures for development of mines and other natural deposits and mining exploration costs (see instructions)	28a			
b Enter the smaller of line 24 or 28a	28b			
29 If section 1255 property				
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a			
b Enter the smaller of line 24 or 29a (see instructions)	29b			

Summary of Part III Gains Complete property columns A through D through line 29b before going to line 30

30 Total gains for all properties Add property columns A through D, line 24	30
31 Add property columns A through D lines 25b, 26g, 27c 28b and 29b Enter here and on line 13	31
32 Subtract line 31 from line 30 Enter the portion from casualty or theft on Form 4684, line 33 Enter the portion from other than casualty or theft on Form 4797 line 6	32

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(See instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation See instructions	34	
35 Recapture amount Subtract line 34 from line 33 See the instructions for where to report	35	

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

=====

DESCRIPTION	AMOUNT
-----	-----
IN-KIND SUPPORT AND SERVICES	579,406.
TOTAL	-----
	579,406.
	=====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
FRINGE BENEFITS	520,645.	371,146.	76,736.	72,763.
IN-KIND GOODS AND SERVICES	579,404.	578,639.	NONE	765.
FOOD COSTS	1,159,778.	1,159,770.	NONE	8.
UTILITIES	87,715.	15,015.	72,700.	NONE
BUILDING AND OFFICE MAINTENANC	245,730.	179,657.	48,346.	17,727.
VEHICLE FUEL	103,926.	97,517.	6,202.	207.
TAXES AND LICENSES	15,892.	15,048.	544.	300.
CONTRACT SERVICES	255,248.	106,469.	92,811.	55,968
PROFESSIONAL SERVICES	170,610.	1,000.	93,884.	75,726.
INSURANCE	170,041.	144,242.	25,799.	NONE
DUES AND MEMBERSHIPS	7,432.	2,115.	4,226.	1,091.
ADVERTISING	9,216.	4,233.	1,407.	3,576
EQUIPMENT	20,812.	9,597.	864.	10,351.
BAD DEBT EXPENSE	17,752.	17,482.	270.	NONE
MISCELLANEOUS EXPENSE	378,308.	251,599.	2,405.	124,304.
INDIRECT COSTS		695,876.	-850,847	154,971.
DIRECT CLIENT SUPPORT	1,049,665.	1,049,665.	NONE	NONE
TOTALS	4,792,174.	4,699,070.	-424,653.	517,757.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

METROPOLITAN INTER-FAITH ASSOCIATION'S PRIMARY EXEMPT PURPOSE
IS TO OPERATE PROGRAMS DESIGNED TO MEET THE BASIC HUMAN
NEEDS OF PEOPLE AND TO EMPOWER PEOPLE TO LIVE WITH INDEPENDENCE AND
DIGNITY IN MEMPHIS, TENNESSEE AND THE SURROUNDING AREAS.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
INTERCOMPANY RECEIVABLE	966,297.	NONE
TOTALS	966,297.	NONE

FORM 990, PART IV - DEFERRED REVENUE

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
UNEARNED GRANT FUNDS	83,092.	99,430.
TOTALS	83,092.	99,430.
	=====	=====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

LENDER: NATIONAL BANK OF COMMERCE

BEGINNING BALANCE DUE	NONE
ENDING BALANCE DUE	1,000,000.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	NONE
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=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	1,000,000.
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FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
DEFERRED REVENUE	58,638.	NONE
ACCRUED EXPENSES	NONE	213,579.
INTERCOMPANY PAYABLE	NONE	2,758,842.
TOTALS	----- 58,638. =====	----- 2,972,421. =====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION
MARGARET CRADDOCK 910 VANCE AVENUE MEMPHIS, TN	EX. DIR 40	91,376.
MIKE TOUCHET 910 VANCE AVENUE MEMPHIS, TN	CHF FIN 40	72,100
CONRAD LEHFELDT 910 VANCE AVENUE MEMPHIS, TN	ASS. EX DIR 40	50,691.

SEE STATEMENT 11

GRAND TOTALS
 214,167.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	1999	1998	1997	1996	TOTAL
MATCHING FUNDS	6,126.	14,244.	25,874.	27,461.	73,705.
REGISTRATION	NONE	NONE	NONE	NONE	NONE
PROFESSIONAL FEES	NONE	NONE	2,259.	49,231.	51,490.
NEWSPAPER	NONE	NONE	NONE	NONE	NONE
MEMPHIS PARENT	NONE	63,690.	NONE	NONE	63,690
LIQUIDATION OF PARENT	NONE	40,900.	NONE	NONE	40,900.
TANK REMOVAL REFUND	21,325.	NONE	NONE	NONE	21,325.
TOTALS	27,451.	118,834	28,133.	76,692.	251,110

**2000/2001
MIFA BOARD OF DIRECTORS**

NAME	ADDRESS	NUMBERS
CHAIR:		
Mrs. Julie Raines	211 Goodwyn Place Memphis, TN 38111	324-6021 (Home) 363-4986 (Office) 327-5096 (Fax) raines898@aol.com
VICE CHAIR:		
Rabbi Harry Danziger	7237 Great Oaks Road Germantown, TN 38138	754-4487 (Home) hkd38@aol.com
Assistant Carol Giller		
VICE CHAIR - MARKETING:		
Mr. Tom Barzizza	Southern Stores, Inc P. O. Box 381288 Germantown, TN 38138	759-5322 (Office) 759-5334 (Fax) tom@bbvideo.com
SECRETARY:		
Mrs. Jean Norfleet	90 South Perkins Memphis, TN 38117	761-3535 (Home)
TREASURER:		
Mr. Steven J. Martin	7552 Thorn Tree Lane Cordova, TN 38018	755-8446 (Office) 757-9691 (Home) 755-9250 (Fax) martin@ecaribu.com
CHAPLAIN		
Rev. Roger Brown	LeMoyne-Owen College 807 Walker Ave Memphis, TN 38126	942-7349 (Office) 942-7809 (Fax) roger_brown@nile.lemoyne-owen.edu
Mr. Leo Bearman, Jr.	Baker, Donelson, Bearman et al 2000 First Tennessee Building Memphis, TN 38103	526-2000 (Office) 577-2303 (Fax) lbearman@bdhc.com

*Mrs. Kim Blankenship	571 Wild Elm Cove Memphis, TN 38120	683-4341 (Home) kblankenship@bigfoot.com
Ms. Beth Breazeale	1863 Cordova Road Germantown, TN 38138	754-5511 (Home) jmbethb@bellsouth.net
*Ms. Peggy Brewer	Memphis Light, Gas & Water P. O. Box 430 Memphis, TN 38101-0430	528-4820 (Office) 528-4086 (Fax) pbrewer@mlgw.org
Mr. John D. Canale, III	D. Canale and Company 1 Commerce Square, Ste. 1800 40 South Main St. Memphis, TN 38103-5530	432-0265 (Office) 432-0294 (Fax) icanale@dcanale.com
Rev. Cheryl Cornish	First Congregational Church 234 S. Watkins Memphis, TN 38104	278-6786 (Office) 278-2071 (Fax)
*Ms. Carol Crawley	Memphis Area Chamber of Commerce 22 North Front, Suite 200 Memphis, TN 38103	543-3546 543-3510 ccrawley@memphis-chamber.com
Mrs. Sara Dobbs	505 Goodwyn Memphis, TN 38111	458-4665 (Home)
Rev. Harry Durbin	Collierville United Methodist 454 W. Poplar Memphis, TN 38017	853-8383 (Office) 854-4584 (Fax) srpastor@colliervilleumc.org
Mr. Jef Feibelman	Burch, Porter & Johnson 130 N Court Avenue Memphis, TN 38103	524-5000 (Office) 524-5024 (Fax) jfeibelman@bplaw.com
Ms. Elise Flowers	6309 Ragan Farms Drive Memphis, TN 38141	545-3474 (Office) 366-9754 (Home)

Mr. E. J. Goldsmith, Jr.	Apartment 3 6586 Poplar Woods Cr., So Germantown, TN 38138	754-3692 (Home)
Mrs. Mimi Graves	1092 Audubon Drive Memphis, TN 38117	767-0166 (Home)
*Charles W. Griesbeck, Jr.	Reynolds Bone & Griesbeck, P.L C 5100 Wheelis Dr , Suite 300 Memphis, TN 38117	682-2431 (Office) 683-5482 (Fax) cgriesbeck@rbgcpa.com
*Rev. Peggy Gunness	770 Island Drive Memphis, TN 38103	527-2993 (Home) 525-6602 (Office) 578-7876 (Fax) pgunness@bellsouth.net
Mr. Allen Israel	Minor Frances 3080 Poplar Avenue Memphis, TN 38111	452-4949 (Office) 323-3188 (Fax) al6026@aol.com
Mr. L. Donald Jordan, Jr.	Jordan Management 6750 Poplar Ave , Suite 107 Memphis, TN 38138	755-8103 (Office) 755-3302 (Fax)
Mrs. Anne Keesee	73 Cherry Road Memphis, TN 38117	761-0435 (Home) 767-9600 (Fax)
Rabbi Peter Light	Beth Sholom Synagogue 6675 Humphreys Blvd Memphis, TN 38120	683-3591 (Office) 683-3592 (Fax) rabligh@aol.com
Rev. Martin McCain	Grace United Methodist Church 1619 E. Raines Road Memphis, TN 38116	396-5123, Ext. 105 (Off.) 396-5124 (Fax) mccain@clergy.net
Rev. Jackie McHenry	Mississippi Blvd Christian Ch 70 No. Bellevue Blvd Memphis, TN 38104	729-6222 (Office) 726-5418 (Fax) McHenryJackie@MBCCmemphis.org

08/14/00

STATEMENT11

Mrs. Snow Morgan	6830 Massey Lane Memphis, TN 38120	685-8091 (Home) 766-4275 (Fax)
Mr. Maury Radin	Manpower, Inc. P. O. Box 772299 Memphis, TN 38177	761-3232 (Office) 767-5993 (Fax) mradin@lunaweb.net eradin0114@aol.com
Ms. Sue Ellen Rainey	1618 Vinton Avenue Memphis, TN 38104	272-2405 (Home)
Dr. Joseph Rosas	Union Avenue Baptist Church 2181 Union Avenue Memphis, TN 38104	276-5421 (Office) 276-5423 (Fax) jiru@mem.net
<i>Assistant Claudia Townsend</i>		
Mrs. Anne Stokes	108 E. Chickasaw Parkway Memphis, TN 38111	323-0533 (Home) 323-6249 (Fax) astokes@midssouth rr.com
*Ms. Laurie Tucker	Federal Express Corp. First Floor Vertical 30 FedEx Parkway Collierville, TN 38017	263-7888 (Office) 263-7808 (Fax) latucker@fedex.com
Mr. Russ Williams	Archer-Malmo Advertising 65 Union Ave , Suite 500 Memphis, TN 38103	260-4136 (Office) 523-7654 (Fax) rwilliams@archer-malmo.com

Executive Committee:

- Mrs. Julie Raines, Chair
- Rabbi Harry Danziger, Vice-Chair
- Mr. Tom Barzizza, Vice-Chair - Marketing
- Mrs. Jean Norfleet, Secretary
- Mr. Steve Martin, Treasurer
- Rev. Roger Brown, Chaplain
- Rev. Martin McCain, Planning
- Mr. Allen Israel, Past Chair/Nominations
- Mr. Russ Williams, Chair of Development Board
- Mr. Jef Feibelman, Legal

*Indicates a new Board member

METROPOLITAN INTER-FAITH ASSOCIATION
EIN 62-0803601

FORM 990
PART IV, LINE 57

	<u>6/30/2000</u>	<u>6/30/2001</u>
LAND		\$ 351,481
LEASEHOLD IMPROVEMENTS	\$ 581,947	\$ 267,188
EQUIPMENT	\$ 751,535	\$ 1,114,132
VEHICLES	\$ 571,819	\$ 833,394
BUILDING		\$ 2,739,163
CONSTRUCTION IN PROGRESS		\$ 5,232,710
	<hr/>	<hr/>
TOTAL	\$ 1,905,301	\$ 10,538,068
LESS ACCUMULATED DEPRECIATION	<u>\$(1,614,071)</u>	<u>\$(2,382,970)</u>
PROPERTY & EQUIPMENT, NET	<u>\$ 291,230</u>	<u>\$ 8,155,098</u>

