

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2002

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

A For the 2002 calendar year, or tax year period beginning and ending

B Check if applicable

- Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization GENERAL SERVICE BOARD OF ALCOHOLICS ANONYMOUS, INC.

Number and street (or P O box if mail is not delivered to street address)

475 RIVERSIDE DRIVE

City or town, state or country, and ZIP + 4

NEW YORK, NY 10115

D Employer identification number

23-7282071

E Telephone number

212-870-3400

F Accounting method: Cash [X] Accrual [] Other (specify)

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

H and I are not applicable to section 527 organizations

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

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

H(c) Are all affiliates included? N/A [] Yes [] No [X]

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

I Enter 4-digit GEN

M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

G Web site WWW.ALCOHOLICS-ANONYMOUS.ORG

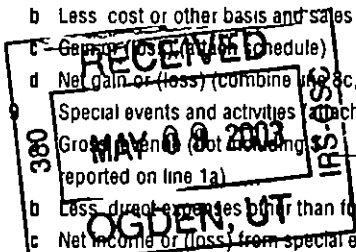
J Organization type (check only one) [X] 501(c) (3) (insert no) [] 4947(a)(1) or [] 527

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 Gross receipts Add lines 6b, 8b, 9b and 10b to line 12 11,275,810.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, Total. Includes revenue items like contributions, program service revenue, and expenses like program services and management.



ENVELOPE POSTMARK DATE MAY 08 2003

FILMED MAY 27 2003

**GENERAL SERVICE BOARD OF ALCOHOLICS
ANONYMOUS, INC.**

23-7282071

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 Page 2

<i>Do not include amounts reported on line 6a, 8b, 9b, 10b, or 16 of Part I</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash \$103,815 . noncash \$	22	103,815.	103,815.	Statement 6	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	132,849.	75,560.	57,289.	0.
26 Other salaries and wages	26	2,669,844.	1,601,327.	1,068,517.	
27 Pension plan contributions	27	148,032.	89,318.	58,714.	
28 Other employee benefits	28	542,531.	269,543.	272,988.	
29 Payroll taxes	29	204,578.	121,721.	82,857.	
30 Professional fundraising fees	30				
31 Accounting fees	31	26,000.		26,000.	
32 Legal fees	32	34,761.		34,761.	
33 Supplies	33	155,354.	106,548.	48,806.	
34 Telephone	34	61,585.	34,668.	26,917.	
35 Postage and shipping	35	603,718.	583,775.	19,943.	
36 Occupancy	36	360,723.	185,465.	175,258.	
37 Equipment rental and maintenance	37	93,614.	1,214.	92,400.	
38 Printing and publications	38	431,611.	430,853.	758.	
39 Travel	39				
40 Conferences, conventions, and meetings	40	750,928.	481,920.	269,008.	
41 Interest	41				
42 Depreciation depletion, etc (attach schedule)	42	109,413.		109,413.	
43 Other expenses not covered above (itemize)					
a	43a				
b	43b				
c	43c				
d	43d				
e See Statement 4	43e	965,586.	549,663.	415,923.	
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	44	7,394,942.	4,635,390.	2,759,552.	0.

Joint Costs Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? 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? **See Statement 5**

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) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others.)

a SEE FOOTNOTE		
(Grants and allocations \$	103,815.)	4,635,390.
b		
(Grants and allocations \$)	
c		
(Grants and allocations \$)	
d		
(Grants and allocations \$)	
e Other program services (attach schedule)	(Grants and allocations \$)
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	4,635,390.	

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Part IV Balance Sheets

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	772,525.	45	323,901.
	46 Savings and temporary cash investments	1,140,377.	46	1,197,755.
	47 a Accounts receivable	47a 130,873.		
	b Less allowance for doubtful accounts	47b	47c	130,873.
	48 a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	1,754,176.	53	396,522.
	54 Investments - securities Stmt 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	10,897,817.	54	10,856,724.
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other See Statement 8		1.	56 1.	
57 a Land, buildings, and equipment basis	57a 3,469,239.			
b Less accumulated depreciation	57b 3,058,249.	57c	410,990.	
58 Other assets (describe <input type="checkbox"/>)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	15,228,793.	59	13,316,766.	
Liabilities	60 Accounts payable and accrued expenses	1,234,942.	60	1,038,884.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/> See Statement 9)	4,375,905.	65	6,448,356.
66 Total liabilities (add lines 60 through 65)	5,610,847.	66	7,487,240.	
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	9,617,946.	67	5,829,526.
	68 Temporarily restricted		68	
	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, column (B) must equal line 21)	9,617,946.	73	5,829,526.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	15,228,793.	74	13,316,766.	

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.

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements ▶ a <u>7,275,080.</u></p> <p>b Amounts included on line a but not on line 12, Form 990</p> <p>(1) Net unrealized gains on investments \$ <u>237,064.</u></p> <p>(2) Donated services and use of facilities \$ _____</p> <p>(3) Recoveries of prior year grants \$ _____</p> <p>(4) Other (specify) _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) through (4) ▶ b <u>237,064.</u></p> <p>c Line a minus line b ▶ c <u>7,038,016.</u></p> <p>d Amounts included on line 12 Form 990 but not on line a</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify) _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) and (2) ▶ d <u>0.</u></p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ▶ e <u>7,038,016.</u></p>	<p>a Total expenses and losses per audited financial statements ▶ a <u>11,063,500.</u></p> <p>b Amounts included on line a but not on line 17, Form 990</p> <p>(1) Donated services and use of facilities \$ _____</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$ _____</p> <p>(3) Losses reported on line 20 Form 990 \$ _____</p> <p>(4) Other (specify) <u>Stmt 10</u> \$ <u>3,668,558.</u></p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) through (4) ▶ b <u>3,668,558.</u></p> <p>c Line a minus line b ▶ c <u>7,394,942.</u></p> <p>d Amounts included on line 17, Form 990 but not on line a</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify) _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) and (2) ▶ d <u>0.</u></p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ▶ e <u>7,394,942.</u></p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement 11		132,849.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule ▶ Yes No Stmt 12 Form 990 (2002)

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ANONYMOUS, INC.**

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Part VI Other Information		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
78 a 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? N/A	78b		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b If "Yes," enter the name of the organization ▶ AA WORLD SERVICES & AA GRAPEVINE and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
81 a Enter direct or indirect political expenditures. See line 81 instructions 81a <u>0.</u>			
b Did the organization file Form 1120-POL for this year?	81b		X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		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 in Part III.) 82b <u>N/A</u>			
83 a 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		
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		
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 <u>N/A</u>			
d Section 162(e) lobbying and political expenditures 85d <u>N/A</u>			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e <u>N/A</u>			
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f <u>N/A</u>			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 85g <u>N/A</u>			
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 85h <u>N/A</u>			
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86a <u>N/A</u>			
b Gross receipts, included on line 12, for public use of club facilities 86b <u>N/A</u>			
87 501(c)(12) organizations Enter a Gross income from members or shareholders 87a <u>N/A</u>			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b <u>N/A</u>			
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
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>			
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 ▶ <u>0.</u>			
d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ <u>0.</u>			
90 a List the states with which a copy of this return is filed ▶ NEW YORK			
b Number of employees employed in the pay period that includes March 12, 2002 90b <u>0</u>			
91 The books are in care of ▶ ORGANIZATION Telephone no ▶ 212-870-3400			
Located at ▶ 475 RIVERSIDE DRIVE, NEW YORK, NY ZIP + 4 ▶ 10115			
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 <u>N/A</u>			

GENERAL SERVICE BOARD OF ALCOHOLICS
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Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a INT'L CONVENTION					
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	35,769.	
96 Dividends and interest from securities			14	415,020.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
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	3,226.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		454,015.	0.
105 Total (add line 104, columns (B), (D), and (E))					454,015.

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 page 32 of the 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)
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

(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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the 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

Accompanying schedules and statements and to the best of my knowledge and belief, it is true information of which preparer has any knowledge.

1/10/03
Donald W MEYER CFO Asset Trust
Type or print name and title

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2002

Name of the organization **GENERAL SERVICE BOARD OF ALCOHOLICS ANONYMOUS, INC.** Employer identification number **23 7282071**

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
GREG MUTH ----- SLEEPY HOLLOW, NY	GEN MANAGER 35	193,968.		0.
THOMAS JASPER ----- BROOKLYN, N.Y.	SERVICES DIR 35	131,756.		0.
LEONORA HALLIGAN ----- NEW YORK, N.Y.	PERSONNEL MGR 35	152,002.		0.
LILLIANNA MURPHY ----- BROOKLYN, N.Y.	EDP MANAGER 35	108,002.		0.
JOANIE MONCRIEF ----- NEW YORK, NY	STAFF 35	88,846.		0.
Total number of other employees paid over \$50,000 ▶	16			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 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 ▶	0	

GENERAL SERVICE BOARD OF ALCOHOLICS

Part III Statements About Activities (See page 2 of the instructions)

	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 ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) 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		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?	X	
Note 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		

Part IV Reason for Non-Private Foundation Status (See pages 3 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)
- 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 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)

GENERAL SERVICE BOARD OF ALCOHOLICS

Schedule A (Form 990 or 990-EZ) 2002 **ANONYMOUS, INC.**

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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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	8,703,451.	5,939,428.	5,875,461.	5,946,790.	26,465,130.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable etc purpose		4,108,388.			4,108,388.
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	513,269.	487,697.	420,875.	440,897.	1,862,738.
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	9,216,720.	10,535,513.	6,296,336.	6,387,687.	32,436,256.
24 Line 23 minus line 17	9,216,720.	6,427,125.	6,296,336.	6,387,687.	28,327,868.
25 Enter 1% of line 23	92,167.	105,355.	62,963.	63,877.	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				▶ 26a 566,557.
	b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a Do not file this list with your return Enter the sum of all these excess amounts				▶ 26b 0.
	c Total support for section 509(a)(1) test Enter line 24, column (e)				▶ 26c 28,327,868.
	d Add Amounts from column (e) for lines 18 <u>1,862,738.</u> 19 _____ 22 _____ 26b _____				▶ 26d 1,862,738.
	e Public support (line 26c minus line 26d total)				▶ 26e 26,465,130.
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				▶ 26f 93.4244%
27 Organizations described on line 12	a For amounts included in lines 15, 16 and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year				N/A
	(2001)	(2000)	(1999)	(1998)	
	b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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) Do not file this list with your return 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				N/A
	(2001)	(2000)	(1999)	(1998)	
	c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____				▶ 27c N/A
	d Add Line 27a total _____ and line 27b total _____				▶ 27d N/A
	e Public support (line 27c total minus line 27d total)				▶ 27e N/A
	f Total support for section 509(a)(2) test Enter amount on line 23, column (e)				▶ 27f N/A
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				▶ 27g N/A %
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				▶ 27h N/A %

28 Unusual Grants For an organization described in line 10, 11 or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15

GENERAL SERVICE BOARD OF ALCOHOLICS

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

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

		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.)		
<hr/> <hr/> <hr/>			
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.)		
<hr/> <hr/> <hr/>			
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.)		
<hr/> <hr/> <hr/>			
34 a	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.		

GENERAL SERVICE BOARD OF ALCOHOLICS

Schedule A (Form 990 or 990-EZ) 2002 ANONYMOUS, INC.

23-7282071 Page 5

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

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

Check a if the organization belongs to an affiliated group

Check b if you checked "a" 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
	N/A	
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 -		
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	
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 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4 Year Averaging Period				N/A (e) Total
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

N/A

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
 - 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

Yes	No	Amount
		0.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
(ii) Other assets

b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

Table with 3 columns: Question, Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c.

N/A

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52 a Is the organization directly or indirectly affiliated with or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (X) No

b If "Yes," complete the following schedule N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Footnotes

Statement 1

FORM 990 PART III

THE GENERAL SERVICE BOARD OF ALCOHOLICS ANONYMOUS, INC. SERVES AS THE CUSTODIAN OF A.A. TRADITIONS AND FUNDS. IT ACTS FOR THE SOCIETY IN MATTERS OF NATIONAL AND INT'L SCOPE TO FURTHER THE PURPOSE OF THE MOVEMENT, WHICH IS THE REHABILITATION OF PERSONS SUFFERING FROM ALCOHOLISM AND ITS ATTENDANT PROBLEMS.

THE MAJOR SERVICES RENDERED BY THE GENERAL SERVICE HEAD-QUARTERS OF A.A. INCLUDE: HANDLING THOUSANDS OF COMMUNICATIONS FROM INDIVIDUALS AND A.A. GROUPS; PUBLICATION OF BULLETINS FOR A.A. GROUPS; CONDUCT OF ANNUAL GENERAL SERVICE CONFERENCES COMPRISING 91 DELEGATES ELECTED BY A.A. GROUPS IN CANADA AND THE U.S.A. AND ITS POSSESSIONS; CONTINUATION OF PUBLIC RELATIONS ACTIVITIES WITH OBJECTIVES OF CREATING GREATER UNDERSTANDING OF THE A.A. RECOVERY PROGRAM WITHIN THE BASIC CONCEPT OF ATTRACTION RATHER THAN PROMOTION; MAINTENANCE OF ALL NECESSARY RECORDS FOR THE WORLDWIDE MOVEMENT.

PROGRAM SERVICES ARE AS FOLLOWS:

GROUP SERVICES	1,696,716.
FELLOWSHIP SERVICES	1,810,393.
GENERAL SERVICE CONFERENCE	614,321.
REGIONAL FORUMS	339,456.
DONATION TO A.A. GRAPEVINE	103,815.
WORLD SERVICE MEETING	70,689.
TOTAL	<u>4,635,390.</u>

FORM 990 PART V AND SCH A PART 1

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ARE NOT SEPARATELY CALCULATED.

Form 990	Gain (Loss) From Publicly Traded Securities			Statement	2
Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)	
UST NOTES 5/15/02 7.5%	250,000.	249,480.	0.	520.	
UST NOTES 8/15/02 6.375%	500,000.	488,843.	0.	11,157.	
UST NOTES 10/31/02 5.75%	500,000.	498,785.	0.	1,215.	
UST NOTES 11/30/02 5.75%	500,000.	500,000.	0.	0.	
UST NOTES 2/15/07 7.625%	500,000.	509,666.	0.	-9,666.	
UST BILL 2/21/02	995,250.	995,250.	0.	0.	
UST BILL 3/14/02	995,770.	995,770.	0.	0.	
To Form 990, Part I, line 8	4,241,020.	4,237,794.	0.	3,226.	

Form 990	Other Changes in Net Assets or Fund Balances		Statement	3
Description				Amount
CHANGE IN UNREALIZED GAIN				237,064.
SAFS 87 & SFAS 106 ADJUSTMENTS				-3,668,558.
Total to Form 990, Part I, line 20				-3,431,494.

Form 990	Other Expenses			Statement	4
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising	
OFFICE SERVICE AND EXPENSE	232,791.	45,396.	187,395.		
CONTRACTED SERVICES	241,785.	200,112.	41,673.		
WRITERS FEES	97,398.	96,894.	504.		
FOREIGN LIT ASSISTANCE	207,261.	207,261.			
EARLY RETIREMENT SEVERANCE	186,351.		186,351.		
Total to Fm 990, ln 43	965,586.	549,663.	415,923.		

Form 990 Statement of Organization's Primary Exempt Purpose Part III Statement 5

Explanation

TO ASSIST IN THE FORMATION OF AA GROUPS AND COORDINATING THE AA PROGRAM OF REHABILITATING ALCOHOLICS THROUGHOUT THE WORLD.

Form 990 Cash Grants and Allocations Statement 6

Classification	Donee's Name	Donee's Address	Donee's Relationship	Amount
	A.A. GRAPEVINE, INC.	NEW YORK, NY	SEE PART VI	103,815.
Total Included on Form 990, Part II, line 22				103,815.

Form 990 Government Securities Statement 7

Description	U.S. Government	State and Local Gov't	Total Gov't Securities
SEE ATTACHED LIST	10,856,724.		10,856,724.
Total to Form 990, line 54, Col B	10,856,724.		10,856,724.

Form 990 Other Investments Statement 8

Description	Valuation Method	Amount
AA WORLD SERVICES AND AA GRAPEVINE AT NOMINAL VALUE	Cost	1.
Total to Form 990, Part IV, line 56, Column B		1.

Form 990	Other Liabilities	Statement	9
<u>Description</u>		<u>Amount</u>	
	DEFERRED INCOME - AAGV	1,482,949.	
	ACCRUED POSTRETIREMENT BENEFITS	3,698,152.	
	ACCRUED PENSION BENEFIT	1,267,255.	
Total to Form 990, Part IV, line 65, Column B		6,448,356.	

Form 990	Other Expenses Not Included on Form 990	Statement	10
<u>Description</u>		<u>Amount</u>	
	SFAS 87 & SFAS 106 ADJUSTMENTS	3,668,558.	
Total to Form 990, Part IV-B		3,668,558.	

Form 990	Part V - List of Officers, Directors, Trustees and Key Employees	Statement	11
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<u>Name and Address</u>	<u>Title and Avrg Hrs/Wk</u>	<u>Compen-sation</u>	<u>Employee Ben Plan Contrib</u>	<u>Expense Account</u>
MICHAEL ALEXANDER NY, NY	TRUSTEE EMER PART	0.	0.	0.
GARY GLYNN NY, NY	TRUSTEE EMER PART	0.	0.	0.
DOUG RICHARDSON NY, NY	ASST SECRETARY 35	75,560.	0.	0.
DONALD MEURER BABYLON NY	ASST TREASURER 20	57,289.	0.	0.
LINDA CHEZEM MOORESVILLE, IN	1ST V-CHAIR PART	0.	0.	0.

PHYLLIS HALLIDAY OLYMPIA, WA	TRUSTEE PART	0.	0.	0.
JIM ESTELLE EL DORADO HILLS, CA	TRUSTEE EMER PART	0.	0.	0.
ELAINE MCDOWELL, PHD BALTIMORE, MD	CHAIR PART	0.	0.	0.
LEONARD BLUMENTHAL ROLLY VIEW, AB	TRUSTEE PART	0.	0.	0.
JOHN C. KOSTER NEW YORK, NY	TRUSTEE PART	0.	0.	0.
RONALD GAUTHIER SO. HAMILTON, MA	TRUSTEE PART	0.	0.	0.
DOROTHY J. MAY INDIANAPOLIS, IN	TRUSTEE PART	0.	0.	0.
ROBERT PELOT BELLEFEUILLE, CA	TRUSTEE PART	0.	0.	0.
GORDON PATRICK ETOBICOKE, CANADA	TRUSTEE EMER PART	0.	0.	0.
RIC DOWNEY BURNABY, BC	TRUSTEE PART	0.	0.	0.
ALEX PALMER ABBOTSFORD, BC CANADA	TRUSTEE PART	0.	0.	0.
VINCENT KEEFE ORLAND PARK, IL	TREASURER PART	0.	0.	0.
GEORGE VALLIANT BOSTON, MA	TRUSTEE PART	0.	0.	0.

GENERAL SERVICE BOARD OF ALCOHOLICS ANON

23-7282071

REV. ROBERT MILLER	2ND V-CHAIR PART	0.	0.	0.
BIRMINGHAM, AL				
BETH RABREN	TRUSTEE PART	0.	0.	0.
BRAZORIA, TX				
TONY TASCHNER	SECRETARY PART	0.	0.	0.
BERLIN, CT				
GREG TOBIN	TRUSTEE PART	0.	0.	0.
SOUTH ORANGE, NJ				
TED STOA	TRUSTEE PART	0.	0.	0.
ABERDEEN, SD				
ALLEN L. AULT	TRUSTEE PART	0.	0.	0.
WASHINGTON, DC				
CHARLES F. BARTELL	TRUSTEE PART	0.	0.	0.
NEW ORLEANS, LA				
DAVID J. EVERY	TRUSTEE PART	0.	0.	0.
WAILUKU, HI				
RICHARD F. GALLAGHER	TRUSTEE PART	0.	0.	0.
ALTAMONTE SPRINGS, FL				
Totals Included on Form 990, Part V		<u>132,849.</u>	<u>0.</u>	<u>0.</u>

Form 990

Part V - Officer Compensation from
Related Organizations

Statement 12

Officer's Name	Name of Related Organization	Compen- sation	Employee Ben Plan Contrib	Expense Account
DONALD MEURER	AA WORLD SERVICES, INC.	57,289.	0.	0.

GSB OF AA
Form 990 Part IV
Fixed Assets and Accumulated Depreciation

	<u>Cost 1-1-02</u>	<u>Additions</u>	<u>Deletions</u>	<u>Cost 12-31-02</u>
Leasehold Improvements	\$2,795,469	\$0	\$0	\$2,795,469
Computer Hardware	402,099	0	0	402,099
Software	<u>271,671</u>	<u>0</u>	<u>0</u>	<u>271,671</u>
Totals	<u><u>3,469,239</u></u>	<u><u>0</u></u>	<u><u>0</u></u>	<u><u>3,469,239</u></u>

	<u>Acc. Dep. 1-1-02</u>	<u>Additions</u>	<u>Deletions</u>	<u>Acc. Dep. 12-31-02</u>
Leasehold Improvements	\$2,459,180	\$48,042	\$0	\$2,507,222
Computer Hardware	217,985	61,371	0	279,356
Software	<u>271,671</u>	<u>0</u>	<u>0</u>	<u>271,671</u>
Totals	<u><u>2,948,836</u></u>	<u><u>109,413</u></u>	<u><u>0</u></u>	<u><u>3,058,249</u></u>

**AAGSB
RESERVE FUND
US TREASURIES**

Year 2002
Month 12

Date	Par Value	Mo	Maturity Da	Yr	Int Rate	Cost	Purchases	(Premium Amort.)	(Sales)	#480 Gain (Loss)	#411 Ending Cost	#412 Market Value	Total Income	
May 92	\$250,000	5	15	2002	7.500%	\$0.00					\$0.00		\$0.00	
Var 92	\$500,000	8	15	2002	6.375%	249,480.00			(250,000.00)	520.00	0.00		9,375.00	
Nov 97	\$500,000	10	31	2002	5.750%	488,843.39			(500,000.00)	11,156.61	0.00		31,875.00	
Var	\$500,000	11	30	2002	5.750%	498,785.00			(500,000.00)	1,215.00	0.00		28,750.00	
Sep 00	\$250,000	2	15	2003	6.250%	503,519.83		(3,519.83)	(500,000.00)	0.00	(0.00)		28,750.00	
Mar 98	\$250,000	3	31	2003	5.500%	250,661.31		(588.00)			250,073.31	251,484	15,625.00	
May 99	\$500,000	6	30	2003	5.375%	249,062.50					249,062.50	252,578	13,750.00	
Var 93	\$500,000	8	15	2003	5.750%	498,437.50					498,437.50	510,313	26,875.00	
Jul 99	\$500,000	2	15	2004	5.875%	501,416.75		(876.00)			500,540.75	513,906	28,750.00	
Jun 94	\$250,000	5	15	2004	7.250%	501,536.25		(720.00)			500,816.25	525,781	29,375.00	
Sep 94	\$250,000	8	15	2004	7.250%	250,000.00					250,000.00	270,078	18,125.00	
Aug 99	\$500,000	8	15	2004	6.000%	245,000.00					245,000.00	273,437	18,125.00	
Var	\$500,000	5	15	2005	6.500%	499,856.25					499,856.25	536,875	30,000.00	
Var	\$500,000	8	15	2005	6.500%	504,485.25		(1,332.00)			503,153.25	555,000	32,500.00	
Nov 99	\$500,000	11	15	2005	5.875%	504,235.19		(1,164.00)			503,071.19	559,219	32,500.00	
Feb 00	\$500,000	7	15	2006	7.000%	495,321.51					495,321.51	554,531	29,375.00	
Oct 01	\$500,000	2	15	2007	7.625%	504,245.00		(936.00)			503,309.00	579,687	35,000.00	
May 01	\$500,000	5	15	2009	5.500%	509,907.63		(242.00)	(500,000.00)	(9,665.63)	0.00		19,062.50	
Oct 01	\$750,000	2	15	2011	5.000%	747,109.38		(624.00)			503,986.00	567,344	27,500.00	
Mar 02	\$500,000	8	15	2011	5.000%	0.00	487,812.50				747,109.38	824,062	37,500.00	
5-15-02	\$500,000	2	15	2012	4.875%	0.00	490,647.53				487,812.50	548,281	10,220.99	
Nov 01	\$1,000,000	2	21	2002	0.000%	995,250.00				0.00	0.00	542,969	6,194.75	
Dec 01	\$1,000,000	3	14	2002	0.000%	995,770.00			(995,250.00)	0.00	0.00		4,750.00	
Nov 02	\$1,000,000	2	27	2003	0.000%		997,100.00		(995,770.00)	0.00	997,100.00	997,100	4,230.00	
Dec 02	\$1,000,000	3	6	2003	0.000%		996,987.00				996,987.00	996,987		
Dec 02	\$1,000,000	3	13	2003	0.000%		997,091.94				997,091.94	997,092		
							10,497,532.74	3,969,638.97	(10,001.83)	(4,241,020.00)	3,225.98	10,219,375.86	10,856,724	518,208.24