

Return of Organization Exempt From Income Tax

2004

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

Form 990 header section including: A For the 2004 calendar year, or tax year beginning and ending; B Check if applicable; C Name of organization; D Employer identification number; E Telephone number; F Accounting method; G Website; J Organization type; K Check here; L Gross receipts.

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

Table with 21 rows detailing revenue (lines 1-12), expenses (lines 13-17), and net assets (lines 18-21). Includes sub-rows for contributions, program revenue, investment income, and sales of assets/inventory.

Vertical stamp: SCANNED JUN 1 2005, POSTMARK DATE MAY 1 2005, 650

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

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 \$ <u>1870343</u> . noncash \$ _____)	1,870,343.	1,870,343.	Statement 5	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	173,430.	0.	173,430.	0.
26	Other salaries and wages	1,663,885.	1,154,917.	508,968.	
27	Pension plan contributions	153,794.	97,243.	56,551.	
28	Other employee benefits	269,194.	133,292.	135,902.	
29	Payroll taxes	125,158.	79,272.	45,886.	
30	Professional fundraising fees				
31	Accounting fees	60,900.		60,900.	
32	Legal fees	53,053.		53,053.	
33	Supplies	46,249.	6,767.	39,482.	
34	Telephone	36,587.	15,699.	20,888.	
35	Postage and shipping	1,368,000.	1,349,278.	18,722.	
36	Occupancy	220,866.	143,921.	76,945.	
37	Equipment rental and maintenance	77,013.	20,545.	56,468.	
38	Printing and publications	36,783.	34,257.	2,526.	
39	Travel	59,065.	12,763.	46,302.	
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc (attach schedule)				
43	Other expenses not covered above (itemize)				
a	_____				
b	_____				
c	_____				
d	_____				
e	See Statement 3	685,010.	428,566.	256,444.	
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	6,899,330.	5,346,863.	1,552,467.	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 4		Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
a SALES OF BOOKS, PAMPHLETS, CASSETTE TAPES, ETC. DIRECTED TOWARDS THE REHABILITATION OF ALCOHOLICS. DURING 2004, 7,188,401 ITEMS WERE DISTRIBUTED. (Grants and allocations \$ 1,870,343.)		5,346,863.
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)		5,346,863.

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	152,955.	45	435,427.	
	46 Savings and temporary cash investments	217,851.	46	871,241.	
	47 a Accounts receivable	309,962.			
	b Less allowance for doubtful accounts				
		1,077,551.	47c	309,962.	
	48 a Pledges receivable				
	b Less allowance for doubtful accounts				
			48c		
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees			50	
	51 a Other notes and loans receivable				
	b Less allowance for doubtful accounts				
			51c		
	52 Inventories for sale or use	2,235,957.	52	2,512,885.	
	53 Prepaid expenses and deferred charges	66,306.	53	84,893.	
54 Investments - securities			54		
55 a Investments - land, buildings, and equipment basis					
b Less accumulated depreciation					
		55c			
56 Investments - other			56		
57 a Land, buildings, and equipment basis					
b Less accumulated depreciation					
		57c			
58 Other assets (describe <input type="checkbox"/> Cost <input type="checkbox"/> FMV See Statement 6)		1.	58	1.	
59 Total assets (add lines 45 through 58) (must equal line 74)	3,750,621.	59		4,214,409.	
Liabilities	60 Accounts payable and accrued expenses	829,158.	60	1,072,360.	
	61 Grants payable		61		
	62 Deferred revenue	46,889.	62	20,248.	
	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"/>)		65		
66 Total liabilities (add lines 60 through 65)	876,047.	66		1,092,608.	
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	2,874,574.	67	3,121,801.	
	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)	2,874,574.	73		3,121,801.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	3,750,621.	74		4,214,409.

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 76 through 92 regarding organizational activities, financials, and compliance.

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

Note: 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) Exclu- sion code	(D) Amount	
93 Program service revenue					
a _____					
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	1,758.	
96 Dividends and interest from securities					
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					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					7,144,799.
103 Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		1,758.	7,144,799.
105 Total (add line 104, columns (B), (D), and (E))					7,146,557.

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 34 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)
102	SALES OF BOOKS, PAMPHLETS AND CASSETTES TO A.A. GROUPS, MEMBERS AND
102	OTHER INTERESTED PERSONS SEEKING REHABILITATION FROM ALCOHOLISM

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 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 34 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

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

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

1/9/05 Date ▶ Donald W. Miller CFO Type or print name and title

Date ▶ Check if self- ▶ Preparer's SSN or PTIN

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2004

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

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

Name of the organization

ALCOHOLICS ANONYMOUS WORLD SERVICES, INC

Employer identification number

13 1679617

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
CHRISTOPHER CAVANAUGH ----- OSSINING, NY	PUBLICATIONS 35	141,148.		0.
CAROL HARLEY ----- FOREST HILLS, NY	PRODUCTION 35	85,169.		0.
ELEANOR WIDDOES ----- NEW YORK, NY	WRITER 35	89,240.		0.
DAN DEFILIPPIS ----- FLORAL PARK, NY	ASST CONT 35	80,458.		0.
DANIEL BROWN ----- BRONX, NY	SPANISH EDIT 35	74,306.		0.
Total number of other employees paid over \$50,000 ▶	9			

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
OWEN J FLANAGAN & CO ----- NEW YORK, NY	AUDIT & TAX	60,900.
----- ----- ----- ----- ----- ----- ----- ----- -----		
Total number of others receiving over \$50,000 for professional services ▶	0	

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 i 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 a Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)		X
b Do you have a section 403(b) annuity plan for your employees?	X	
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 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)

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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
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	10,460,468.	10,333,312.	11,128,420.	9,296,970.	41,219,170.
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	2,194.	5,638.	9,405.	24,620.	41,857.
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	10,462,662.	10,338,950.	11,137,825.	9,321,590.	41,261,027.
24 Line 23 minus line 17	2,194.	5,638.	9,405.	24,620.	41,857.
25 Enter 1% of line 23	104,627.	103,390.	111,378.	93,216.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a N/A
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
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: (2003) 0. (2002) 0. (2001) 0. (2000) 0.					
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: (2003) 943,832. (2002) 753,351. (2001) 1,226,802. (2000) 917,536.					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 41,219,170. 20 _____ 21 _____					27c 41,219,170.
d Add: Line 27a total 0. and line 27b total 3,841,521.					27d 3,841,521.
e Public support (line 27c total minus line 27d total)					27e 37,377,649.
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f 41,261,027.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 90.5883%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h .1014%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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					None

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)		

32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	

33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
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	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

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			
Over \$500,000 but not over \$1,000,000			
Over \$1,000,000 but not over \$1,500,000			
Over \$1,500,000 but not over \$17,000,000			
Over \$17,000,000			
The lobbying nontaxable amount is -			
20% of the amount on line 40			
\$100,000 plus 15% of the excess over \$500,000			
\$175,000 plus 10% of the excess over \$1,000,000			
\$225,000 plus 5% of the excess over \$1,500,000			
\$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
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
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	Yes	No	Amount
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.)			0.

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

990 PART V

CONTRIBUTIONS TO THE EMPLOYEE BENEFIT PLANS
ARE NOT SEPARATELY CALCULATED BY EMPLOYEE.

PART OF OFFICERS' SALARIES ARE CARRIED BY THE
GENERAL SERVICE BOARD OF A.A.

Form 990	Income and Cost of Goods Sold Included on Part I, Line 10	Statement 2
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Income

1. Gross receipts	11,620,495	
2. Returns and allowances	322,934	
3. Line 1 less line 2		11,297,561
<hr/>		
4. Cost of goods sold (line 13)	4,152,762	
5. Gross profit (line 3 less line 4)		7,144,799
<hr/> <hr/>		

Cost of Goods Sold

6. Inventory at beginning of year	2,235,957	
7. Merchandise purchased	4,429,690	
8. Cost of labor		
9. Materials and supplies		
10. Other costs		
11. Add lines 6 through 10		6,665,647
<hr/>		
12. Inventory at end of year	2,512,885	
13. Cost of goods sold (line 11 less line 12).		4,152,762
<hr/> <hr/>		

Form 990	Other Expenses			Statement 3
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
SELLING EXPENSES	169,605.	169,605.		
CONTRACTED SERVICES	148,032.	39,849.	108,183.	
OFFICE SERVICE & EXPENSE	138,311.	9,275.	129,036.	
BAD DEBTS	9,735.		9,735.	
ROYALTIES ON BOOKS	164,985.	164,985.		
WRITERS FEES	54,342.	44,852.	9,490.	
Total to Fm 990, ln 43	685,010.	428,566.	256,444.	

Form 990	Statement of Organization's Primary Exempt Purpose Part III	Statement 4
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Explanation

DISSEMINATION OF LITERATURE AND RELATED ITEMS DIRECTED TOWARDS ALCOHOLICS FOLLOWING THE A.A RECOVERY PROGRAM.

Form 990	Cash Grants and Allocations			Statement 5
Classification	Donee's Name	Donee's Address	Donee's Relationship	Amount
	GENERAL SERVICE BOARD OF A.A.	475 RIVERSIDE DRIVE, NEW YORK, NY	SEE PART VI	1870343.
Total Included on Form 990, Part II, line 22				1870343.

Form 990	Other Assets	Statement	6
Description		Amount	
COPYRIGHTS & GOODWILL @ NOMINAL VALUE			1.
Total to Form 990, Part IV, line 58, Column B			1.

Form 990	Part V - List of Officers, Directors, Trustees and Key Employees	Statement	7
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Name and Address	Title and Avg Hrs/Wk	Compen- sation	Employee Ben Plan Expense Contrib Account
GREG MUTH NEW YORK, NY	PRESIDENT 20	109,407.	0. 0.
VALERIE O'NEILL NEW YORK, NY	SECOND VICE PRESIDENT 20	0.	0. 0.
JOHN C. KOSTER NEW YORK, NY	TRUSTEE 2	0.	0. 0.
ROBERT PELOT ST. JEROME (QC), CANADA	TRUSTEE 2	0.	0. 0.
RONALD J. GAUTHIER SO. HAMILTON, MA	CHAIRPERSON 2	0.	0. 0.
JOSEPH DENNAN NEW YORK, NY	SECRETARY 20	0.	0. 0.
DONALD MEURER BABYLON, NY	ASST. TREASURER 20	64,023.	0. 0.
PAUL CLEARY OCEANSIDE, CA	TRUSTEE 2	0.	0. 0.

JANE T. SHEPPARD	TREASURER			
BEASLEY, TX	2	0.	0.	0.
DON MILLER	TRUSTEE			
LOUISVILLE, CO	2	0.	0.	0.
GARY KLUKSDAHL	1ST VICE-PRESIDENT			
PARKER, CO	2	0.	0.	0.
Totals Included on Form 990, Part V		173,430.	0.	0.

Form 990 Part V - Officer Compensation from Related Organizations Statement 8

Officer's Name	Name and EIN of Related Organization	Compensation	Employee Ben Plan Contrib	Expense Account
GREG MUTH	GENERAL SERVICE BOARD OF ALCOHOLICS ANONYMOUS	109,407.	0.	0.
DONALD MEURER	GENERAL SERVICE BOARD OF ALCOHOLICS ANONYMOUS	64,023.	0.	0.