Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public Inspection

| 1 | A F | or the 2 | 000 calendar year, OR tax year period beginning and er | nding | | <u> </u> |
|---------------|--|---------------------------------|--|----------------------------|---------------------------------------|-------------------------|
| E | | heck if oplicable: | Please Use IRS GENERAL SERVICE BOARD OF ALCOHOLICS | | D Employer Identif | cation number |
| • | | Change address | of label of a MONIXMONIC TANC | | 23-7282 | 071 |
| | | Change | of type Number and street (or P.O. hox if mail is not delivered to street address) | E Telephone numb | | |
| | Ē | Initial return | Specific 475 RIVERSIDE DRIVE | | 212-870 | |
| > | Ħ | Final | Instruc- tions. City or town, state or country, and ZIP | | - | if application pending |
| - | 一 | I return Amende | al NEW YORK NY 10115 | | • • • • • • • • • • • • • • • • • • • | n approaction pariating |
| | _ | return (use also state re | o for | (H and I are not applic | cable to section 527 o | rns) |
| - ш (| 3 0 | | | H(a) is this a group ref | | Yes X No |
| A , | | · yau | | H(b) If "Yes," enter nun | • | |
| ð- | • | Sectio | | H(c) Are all affiliates in | | Yes X No |
| Š. | | | ach a completed Schedule A (Form 990 or 900-EZ). | (If No, attach a li | | |
| POSTWARK DATE | | countin | G Cash X Accrual Cher (specify) ► | H(d) is this a separate | return filed by an | |
| က္က - | m | ethod: | | | | ? Yes X No |
| Ζ. | (Ch | ack her | e 🕨 🔲 if the organization's gross receipts are normally not more than \$25,000. The | | ip exemption no. (GEI | |
| | | | | | the organization is no | |
| | | | , it should file a return without financial data. Some states require a complete return. | | 3 (Form 990 or 990-E | |
| 8 | | | Revenue, Expenses, and Changes in Net Assets or Fund Bala | | _ , 000 01 000 E | -, <i>-</i> |
| Ŀ | 1 | 1 | Contributions, gifts, grants, and similar amounts received | | [46.08] | |
| | } | | Direct public support | | 1884 | |
| | Ì | | Indirect public support Pb | 5,939,4 | 128. | |
| | | c | Government contributions (grants) 1c | | 9.23 | |
| | | ď | Total (add lines 1a through 1c) | _ | | |
| | | • | (cash \$ 5,939,428 noncash \$) | | P 1d | 5,939,428. |
| | | 2 | Program service revenue including government fees and contracts (from Part VII, line 93) | | r - r | 4,108,388. |
| <u> </u> | | 3 | Membership dues and assessments | | | 1,200,000 |
| 3 | | 4 | Interest on savings and temporary cash investments | | | 85,444. |
| 4. | | 5 | Dividends and interest from securities | | | 402,253. |
| Ē | | 6 a | Gross rents 6a | | | 220,000 |
| E | | b | Less: rental expenses 6b | | | |
| | | _ C | Net rental income or (loss) (subtract line 6b from line 6a) | | | |
| 2 | ž | 7 | Other investment income (describe | | 1 7 | |
| À | Revenue | - | Gross amount from sale of assets other (A) Securities | (B) Other | 1 11111 | |
| Ē | æ | | than inventory 2,000,000 . 8a | | 1745.0 | |
| のことというと | | h | Less: cost or other basis and sales expenses 1,998,427. 8b | | 1999 | |
| ก | | | Gain or (loss) (attach schedule) 1,573. 8c | | | |
| | | | Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 2 | <u> </u> | ▶ 8d | 1,573. |
| | | 9 | Special events and activities (attach schedule) | | | <u> </u> |
| | • | _ | 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) | • | 9¢ | |
| | | 10 a | · · · · · · · · · · · · · · · · · · · | | | |
| | | b | Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line Other revenue (from Part VII, line 103) | | 1.3.38.30 53.3939 | |
| | | C | Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 100 from line | -10a)- | 10c | |
| | | 11 | Other revenue (from Part VII, line 103) | ીઝો | 11 | |
| | _ | 12 | Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 13) | и <u>''?</u> ! | 12 1 | 0,537,086. |
| _ | | 13 | io MAI U J Eou | 14 | 13 | 7,104,510. |
| | Expenses | 14 | Management and general (from line 44, column (B)) Fundraising (from line 44, column (D)) OGDEN, U | <u>,</u> | 14 | 2,215,808. |
| | e | 15 | Fundraising (from line 44, column (D)) | J | 15 | |
| | Ž | 16 | Payments to affiliates (attach schedule) | | 16 | |
| _ | | 17 | Total expenses (add lines 16 and 44, column (A)) | <u></u> | 17 | 9,320,318. |
| _ | | 18 | Excess or (deficit) for the year (subtract line 17 from line 12) | | | 1,216,768. |
| ŧ | <u>ن</u> و و | 19 | Net assets or fund balances at beginning of year (from line 73, column (A)) | 19 | 6,593,128. | |
| 2 | 20 Other changes in net assets or fund balances (attach explanation) See Statement 3 | | | | | <104,764.> |
| _ | | 21 | Net assets or fund balances at end of year (combine lines 18, 19, and 20) | <u></u> | 21 | 7,705,132 <u>.</u> |
| Ó | 2300 | 1 | | | | |

ANONYMOUS, INC.

| Part III Functional Expenses (4) of | | tions must complete colum tions and section 4947(a)(| n (A). Columns (B), (C), an 1) nonexempt charitable tru | | n 501(0)(3) and |
|--|----------|---|--|----------------------------|--|
| 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 s 66,214. noncash s | 22 | 66,214. | 66,214. | Statement 5 | |
| 23 Specific assistance to individuals (attach schedule) | 23 | | | | |
| 24 Benefits paid to or for members (attach schedule) | 24 | <u> </u> | | | |
| 25 Compensation of officers, directors, etc | 25 | 136,390. | 83,011. | 53,379. | 0. |
| 26 Other salaries and wages | 26 | 2,434,893. | | | |
| 27 Pension plan contributions | 27 | 140,950. | | 54,277. | |
| 28 Other employee benefits | 28 | 463,716. | | 223,498. | |
| 29 Payroll taxes | 29 | 183,126. | 113,058. | 70,068. | |
| 30 Professional fundraising fees | 30 | | | | |
| 31 Accounting fees | 31 | 26,900. | | 26,900. | |
| 32 Legal fees | | 68,696. | | 68,696. | |
| 33 Supplies | | 116,364. | 72,729. | | |
| 34 Telephone | | 91,062. | 56,020. | 35,042. | |
| 35 Postage and shipping | | 530,744. | 516,598. | 14,146. | |
| 36 Occupancy | 36 | 334,266. | 174,175. | 160,091. | |
| 37 Equipment rental and maintenance | 37 | 89,524. | 42,372. | 47,152. | |
| 38 Printing and publications | 38 | 327,414. | 320,302. | 7,112. | |
| 39 Travel | 39 | | | _ | |
| 40 Conferences, conventions, and meetings | 40 | 3,781,176. | 3,482,395. | 298,781. | |
| 41 Interest | 41 | | | | |
| 42 Depreciation, depletion, etc. (attach schedule) | 42 | | | | |
| 43 Other expenses (itemize): | | | | | |
| OFFICE SERVICE AND | 43a | | | | |
| b EXPENSE | 43b | 208,039. | | 151,354. | |
| c CONTRACTED SERVICES | 43c | 144,114. | 94,477. | 49,637. | |
| d WRITER'S FEES | 43d | 44,596. | 44,596. | | |
| • FOREIGN LIT ASSISTANCE | 43e | 132,134. | <u>1</u> 32,134. | | |
| 44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15 | 44 | 9,320,318. | 7,104,510. | 2,215,808. | . 0. |
| Reporting of Joint Costs. Did you report in column (8) | | | | | • |
| fundraising solicitation? | | • | | | Yes X No |
| If "Yes," enter (i) the aggregate amount of these joint co | | | | | : |
| (iii) the amount allocated to Management and general \$ | _ | | (iv) the amount allocated to | | . |
| Partill Statement of Program Servi | | | | * | · |
| What is the organization's primary exempt purpose? | | | 4 | | |
| • | | | | | Program Service |
| All organizations must describe their exempt purpose achievemen | | | | | Expenses (Required for 501(c)(3) and |
| schievements that are not measurable. (Section 501(c)(3) and (4) o allocations to others.) | rganizat | ions and 494/(a)(1) nonexempt o | charitable trusts must also enter | the amount of grants and | (4) orgs and 4947(a)(1) trusts; but optional for others) |
| a SEE FOOTNOTE | | • | | | |
| | | | | | |
| | | | | | |
| | | (0 | Grants and allocations \$ | , 66,214.) | 7,104,510. |
| b | | | | | |
| | | | | | |
| | | | | | |
| | | | Grants and allocations \$ |) | |
| C | | | | | • |
| | | | | | |
| | | | | | |
| | | (0 | Grants and allocations \$ |) | |
| d | | | | | |
| | | | | | |
| | | | | | |
| | | | Grants and allocations \$ | , | |
| Other program services (attach schedule) | | | Grants and allocations \$ | | |
| f Total of Program Service Expenses (should equal | line 44 | | | | 7,104,510. |
| 023011 | | 2 | -, | | Form 990 (2000) |

Part IV Balance Sheets

| | |) Dalarioc Officets | | • | | | | |
|-----------------------------|-------|--|--|----------------------------|--------------------------|--------|---------------------------|--|
| Note | | re required, attached schedules and amounts wit ald be for end-of-year amounts only. | hin the d | description column | (A) Beginning of year | | (B) End of year | |
| | 45 | | | | 1,582,154. | | 358,804. | |
| | 46 | Savings and temporary cash investments | 663,367. | 46 | 2,083,499. | | | |
| | | Accounts receivable | | 161,875. | 116 001 | | 161 075 | |
| | b | Less: allowance for doubtful accounts | 47b | | 116,081. | 47c | 161,875. | |
| | 48 a | • | | | | 100000 | | |
| | l . | Less: allowance for doubtful accounts | | | | 48c | | |
| | 49 | Grants receivable | | | | 49_ | | |
| | 50 | Receivables from officers, directors, trustees, | | | | | | |
| so. | | and key employees | | | | 50 | | |
| Assets | | Other notes and loans receivable | 51a | | | | İ | |
| As | b | Less: allowance for doubtful accounts | | | | 51c | | |
| | 52 | Inventories for sale or use | | | | 52 | | |
| | 53 | Prepaid expenses and deterred charges | | <u></u> | 1,697,651. | | 1,467,747. | |
| | 54 | Investments - securities Stmt | .6 ▶ | Cost X FMV | 8,205,390. | 54 | 8,722,109. | |
| | 55 a | Investments - land, buildings, and | | | | | | |
| | | equipment: basis | 55a | | | 5440 | | |
| | | | | | | | | |
| | b | Less: accumulated depreciation | 55b | | | 55c | | |
| | 56 | Investments - other Se | e St | atement 7 | 1. | 56 | 1. | |
| | 57 a | Land, buildings, and equipment: basis | 57a | 3,469,239. | | | | |
| | | Less: accumulated depreciation | | 2,711,098. | 731,798. | | 758,141. | |
| | 58 | Other assets (describe | |) [| | 58 | | |
| | | | | | | | | |
| | 59 | Total assets (add lines 45 through 58) (must equal lin | e 74) . | | 12,996,442. 365,521. | 59 | 13,552,176. 1,406,254. | |
| | 60 | Accounts payable and accrued expenses | | | 365,521. | 60 | 1,406,254. | |
| | 61 | Grants payable | | | | 61 | | |
| es | 62 | Deferred revenue | | | | 62 | | |
| ≣ | 63 | Loans from officers, directors, trustees, and key emplo | yees | | | 63 | | |
| Liabilities | 64 a | Tax-exempt bond liabilities | | | | 64a | | |
| _ | | Mortgages and other notes payable | | | | 64b | | |
| | 65 | Other liabilities (describe Se | | | 6,037,793. | 65 | 4,440,790. | |
| | 66 | Total liabilities (add lines 60 through 65) | | | 6,403,314. | 66 | 5,847,044. | |
| - | | nizations that follow SFAS 117, check here | | | 0/105/511. | | 3701170111 | |
| | O.ga. | 69 and lines 73 and 74. | una con | ipiata iiries or tirrougii | | | | |
| S | 67 | Unrestricted | | | 6,593,128. | 67 | 7,705,132. | |
| Ę : | 68 | Temporarily restricted | | | 0/333/120. | 68 | 7,703,132. | |
| 391 | 69 | Permanently restricted | | | | 69 | | |
| פֿ | | nizations that do not follow SFAS 117, check here | | nd complete lines | | 200 | | |
| Net Assets or Fund Balances | Organ | 70 through 74. | a | ud combiata imas | | | | |
| SO | 70 | Capital stock, trust principal, or current funds | | | | 70 | | |
| Set | 71 | Paid-in or capital surplus, or land, building, and equipr | | | | 71 | | |
| As | 72 | taran da antara da a | Retained earnings, endowment, accumulated income, or other funds | | | | | |
| Žet | 73 | Total net assets or fund balances (add lines 67 through | | | | 72 | | |
| _ | | column (A) must equal line 19 and column (B) must eq | 6,593,128. | 73 | 7,705,132. | | | |
| | 74 | Total liabilities and net assets / fund balances (add | - | | 12,996,442. | 74 | 7,705,132. 13,552,176. | |

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 IV-A Reconciliation of Revenue Financial Statements with Return | Revenue per | | Reconcili Financial Return | iation of Exp I Statements | enses p With Ex | er A (pen | udited ses per |
|---|--------------------------|---|---|-------------------------------|--------------------|----------------------------|-------------------|
| a Total revenue, gains, and other support per audited financial statements | | b Amounts i line 17, Fo (1) Donated s and use o' (2) Prior year reported of Form 990 (3) Losses rej line 20, Fo (4) Other (spe Stmt 9 Add amounts i 990 but no (1) Investmen not include | included on line or 1990: services of facilities \$ adjustments on line 20, | 366, 3 1) through (4) | 88. b | | 366,388. |
| Add amounts on lines (1) and (2) 6 Total revenue per line 12, Form 990 (line c plus line d) | | B Total expe | ints on lines (| 1) and (2) | > d | 9, | 320,318. |
| Part V List of Officers, Directors, Tr | | | ist each one e rage hours (i oted to | | sated.) | ions to enefit erred | |
| See Statement 10 | | | | 136,390. | | 0. | 0. |
| 75. Did any afficer director trustee or key employee reco | | | 100,000 (| | | | |
| ra tuut anv niiner mierini iillistee ni Vav amminuda tara | ite annienzia compandati | uu or more iban ¶1 | THE CHAILTON | MOUZ OZDANIZATION S | ann all reiste | ы | |

GENERAL SERVICE BOARD OF ALCOHOLICS

23-7282071 Form 990 (2000) ANONYMOUS, INC. Part VI Other Information N/A Yes No X Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 76 X Were any changes made in the organizing or governing documents but not reported to the IRS? 77 If "Yes," attach a conformed copy of the changes. Х 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement, 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 b If Yes, enter the name of the organization > AA WORLD SERVICES & AA GRAPEVINE and check whether it is X exempt OR nonexempt. 81 a Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 b Did the organization file Form 1120-POL for this year? 81b 82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than X fair rental value? 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.) 83 a Did the organization comply with the public inspection requirements for returns and exemption applications? 83a 83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 84 a Did the organization solicit any contributions or gifts that were not tax deductible? N/A 84a b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not N/A 84b tax deductible? 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A 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. N/A Dues, assessments, and similar amounts from members N/A Section 162(e) lobbying and political expenditures Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices N/A 85e N/A Taxable amount of lobbying and political expenditures (line 85d less 85e) Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A 85g If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues N/A allocable to nondeductible lobbying and political expenditures for the following tax year? 85h 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 N/A 86a N/A b Gross receipts, included on line 12, for public use of club facilities 86b 87 501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A b Gross income from other sources. (Do not net amounts due or paid to other sources N/A against amounts due or received from them.) 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 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: 0 - ; section 4912 ► O • ; section 4955 ► 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? X If "Yes," attach a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization 90 a List the states with which a copy of this return is filed NEW YORK ō b Number of employees employeed in the pay period that includes March 12, 2000 90b The books are in care of ► ORGANIZATION Telephone no. ► 212-870-3400 ZIP code ► 10115 Located at ▶ 475 RIVERSIDE DRIVE, NEW YORK, NY 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 Form 990 (2000)

23-7282071

| Enter gross amounts unless otherwise | | Unrelati | ed business income | Exclu | ded by section 512, 513, or 514 | /E) | |
|--|----------------------|----------------------|---------------------------------|------------------------|------------------------------------|----------------------------|----------|
| indicated. | | (A) | (B) | (C) | (D) | (E) Related or exemp | nt |
| 93 Program service revenue: | | Business code | Amount | Exclu- sion code | Amount | function income | • |
| 2 INT'L CONVENTION | | | | COUP | | 4,108,3 | |
| | | | - · · · - | | | 1,100,5 | |
| | | | | <u> </u> | · | | |
| <u> </u> | | | | | - | | |
| d | | | | | | | |
| 8 | | | | - | | - | |
| f Medicare/Medicald payments | | | | | | | _ |
| g Fees and contracts from government agenci | | | | | | | |
| 94 Membership dues and assessments | | | | | | | |
| 95 Interest on savings and temporary | | | | | | | |
| cash investments | , ., | | | 14 | 85,444. | | |
| 96 Dividends and interest from securities | | | | 14 | 85,444. 402,253. | | |
| 97 Net rental income or (loss) from real estate: | | | | | | | |
| a debt-financed property | <u> </u> | | | | | | |
| b not debt-financed property | | | | <u> </u> | | | |
| 98 Net rental income or (loss) from personal pr | | | | | - | | |
| 99 Other investment income | | | | | | | |
| | | | | | | | |
| IDD Gain or (loss) from sales of assets | | ľ | | 18 | 1 572 | | |
| other than inventory | | | | 10 | 1,573. | | |
| 101 Net income or (loss) from special events | | | | - | | | |
| 102 Gross profit or (loss) from sales of inventory | ′ | | | | | | |
| 103 Other revenue: | 1 | | | | | | |
| a | | | | | | | |
| b | | | | | | | |
| C | | | | | | <u> </u> | |
| d | | | | | | | |
| e | | | : :::: | | | | |
| 04 Subtotal (add columns (B), (D), and (E)) | | | 0. | 197 | 489,270. | 4,108,3 | 88. |
| 105 Total (add line 104, columns (B), (D), and (E | | | | | | 4,597,6 | 58. |
| Note: Line 105 plus line 1d, Part I, should eq | | | | | | | |
| Part VIII Relationship of Activiti | | | | t Pur | DOSAS | | |
| Line No. Explain how each activity for which i | | | | | | of the especiantion's | |
| exempt purposes (other than by pro | | | | ııııpqıı | antity to the accomplishment | n tua oidamzation 2 | |
| 83A INTERNATIONAL CON | | | | mm te | משטט עם חשחו | 47 000 BB | |
| 83A MEMBERS. ACTIVIT | | | | | | 47,000 AA | |
| DOA MEMBERS. ACTIVIT | TES INCI | חשמטם | MEETINGS, W | OKK | SHUPS, EIC. | | |
| | | | | | | | |
| Barrell Information Devonition | T | : _ :: | Bi | . d F. | alai | | |
| Part IX Information Regarding | | bsidiari | | ea Er | | (F) | |
| | (B) Percentage of | | (C) Nature of activities | | (D) Total income | (E) End-of-year | |
| | nership interest | | | | | assets | |
| | % | | | | | | |
| N/A | % | | | | | | |
| | % | | | | | | |
| | % | | - | | | | |
| Part X Information Regarding | Transfers 4 | Associa | ted with Personal | Ben | efit Contracts | | |
| (a) Did the organization, during the year, receive | | | | | | Yes X | No C |
| (b) Did the organization, during the year, pay p | = | - | | | | | No |
| Note: If "Yes" to (b), file Form 8870 and For | rm 4790 /ccc / | eta <i>ioticae</i> l | ji on a peragnar banant cu | andet: | | | 40 |
| TOO TO (U), INDITOTH 0070 dill FOR | iii +i 20 (See Ins | stru Gti OrijS) | accompanying schedules and | stateme | nts, and to the best of my knowled | ge and belief, it is true. | |
| | | | I information of which prepared | r has any | knowledge (Important See Gener | at Instruction W.) | . |

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

OMB No. 1545-0047

| Internal Revenue Service | ► MUST be completed by the above organ | Izations and attached to their | r Form 990 or 990-E | Z. | |
|-----------------------------|---|--|---------------------|--|--|
| Name of the organization | GENERAL SERVICE BOARD OF ANONYMOUS, INC. | ALCOHOLICS | | Employer Identifi | |
| | sation of the Five Highest Paid Emploions. List each one. If there are none, enter "None.") | yees Other Than Off | ficers, Directo | rs, and Trus | tees |
| | nd 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 oth allowances |
| GREG MUTH | | GENERAL MGR | | | |
| SLEEPY HOLLO | W, NY | 35 | 150,000 | | 0 |
| THOMAS JASPE | <u>R</u> | SERVICES DIR | | | |
| BROOKLYN, N. | Υ | 35 | 121,016 | | 0 |
| LEONORA HALL | igan | PERSONNEL MGF | ų | | |
| NEW YORK, N. | Υ. | 35 | 100,213 | , | 0. |
| LILLIANNA MU | <u> РРНҮ</u> | EDP MGR | | | |
| BROOKLYN, N. | Υ | 35 | 89,609 | | 0. |
| LOIS FISHER | | STAFF | | | |
| | | 35 | 121,262 | <u>, </u> | 0. |
| Total number of other emp | loyees paid | 13 | | | |
| Part II Compens | sation of the Five Highest Paid Indepe ons. List each one (whether individuals or firms). If there | | or Profession | al Services | |
| | and address of each independent contractor paid more th | | (b) Type of | service | (c) Compensation |
| None | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| Total number of others reco | eiving over | | | | |

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2000

\$50,000 for professional services

Schedule A (Form 990 or 990-EZ) 2000

An organization organized and operated to test for public safety. Section 509(a)(4), (See page 5 of the instructions.)

| Salandii da a a | /F 000 - | 000 531 | 0000 | 3 3 T () T T () (| 0110 | TNO |
|-----------------|---------------|---------|------|---------------------|------|------|
| ocheuwe A (| irorin 990 or | 99U-EZ) | 2000 | ANONYM | UUD, | INC. |

| Pa | Support Schedule (C Note: You may use th | complete only if you che se worksheet in the ins | ecked a box on line 10 Injetions for converting |), 11, or 12.) Use cas h o <i>from the accruel to ti</i> | nethod of accountine cash method of ac | ng. countina. |
|------------|--|---|--|--|---|---|
| begir | ndar year (or fiscal year uning 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) | 5,875,461. | 5,946,790. | 5,722,629. | 4,574,917. | 22,119,797. |
| 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 | | | | | |
| 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 | 420,875. | 440,897. | 420,661. | 477,169. | 1,759,602. |
| 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 benaif | | | | , | |
| 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 | | | | | 23,879,399. |
| 24 | Line 23 minus line 17 | | | | | 23,879,399. |
| 25 | Enter 1% of line 23 | 62,963. | | 61,433. | | |
| 26 | Organizations described on lines 10 | Jor 11: a Enter 2% of a | amount in column (e), line | 8 24 | ► <u>26a</u> | 477,588. |
| b | Attach a list (which is not open to pu | · · · · · · | | - | 1 | |
| | governmental unit or publicly suppor | • | • | | l .e.e. | perantinantin |
| | in line 26a. Enter the sum of all these | excess amounts | | | ► 26b | 0. |
| | | | | | | 22 220 |
| | Total support for section 509(a)(1) to | | | | ▶ 26c | 23,879,399. |
| ٥ | Add: Amounts from column (e) for li | · · · · · · · · · · · · · · · · · · · | 759,602. ₁₉ | | | 1 750 602 |
| _ | Dublic annual disc OC ania a line O | | | b | | 1,759,602. 22,119,797. |
| e | Public support (line 26c minus line 2 Public support percentage (line 26c | | | | | 92.6313% |
| <u>'</u> _ | Organizations described on line 12: | | | | | · |
| . 1 | to public inspection) to show the nar | me of, and total amounts r | eceived in each year fron | n, each "disqualified perso | on." Enter the sum of suc | ch amounts for each year: |
| | (1999) N/A | | | | | |
| 0 | For any amount included in line 17 th | | | | | * * |
| | that was more than the larger of (1) individuals.) After computing the differencess amounts) for each year: N | erence between the amou | | • | | * |
| | (1999) | (1998) | (| (1997) | (1996 |) |
| _ | Add: Amounto from column (a) for be | ner: 15 | | 16 | | |
| C | Add: Amounts from column (e) for III | 20 | | 21 | ▶ 27c | N/A |
| d | Add: Line 27a total | 031 hne | ine 27h total | <u></u> | <u>27d</u> | N/A |
| e | Public support (line 27c total minus l | | | | | N/A |
| f | Total support for section 509(a)(2) to | ast: Enter amount on line | 23, column (e) | ▶ 271 | N/A | 5.7000000000000000000000000000000000000 |
| g | Public support percentage (line | | | | | N/A % |
| - | Investment income percentage | • | | | | N/A % |
| 8 L | Inusual Grants: For an organization | described in line 10, 11, | or 12, that received any u | inusual grants during 19 | 96 through 1999, attach | a list (which is not open to |
| | ublic inspection) for each year showin iese grants in line 15. (See page 5 of t | | utor, the date and amoun | it of the grant, and a brief | | a of the grant. Do not includ |

Schedule A (Form 990 or 990-EZ) 2000 ANONYMOUS, INC.

| | Private School Questionnaire (To be completed ONLY by schools that checked the box on line 6 in Part IV) | N/ | A | |
|--------|--|---------------|---------------|------------|
| 9 | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing | <u></u> | Yes | No |
| | instrument, or in a resolution of its governing body? | 29 | COST CO. | |
| 0 | 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? | 30 | | |
| 1 | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of | - W | 1000 | |
| | solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known | 24 | | |
| | 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.) | 31 | 1,371,88 | 250 |
| | 11 165. piease describe. Il 140, piease explain. (il you need more space, attach a separate statement.) | - | | |
| 2 | Dana the accomplished maintain the fall accident | - | | |
| 2 | Does the organization maintain the following: | 20- | 0 10,5 | 15.74 |
| a b | Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially | | | |
| | nondiscriminatory basis? | . 32b | | |
| Ç | admissions, programs, and scholarships? | 20- | | l |
| d | Copies of all material used by the organization or on its behalf to solicit contributions? | | - | \vdash |
| u | If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) | . 320 | | |
| | in you answered the to any of the above, please explain. (if you need more space, attach a separate statement.) | | | |
| | | • | | |
| 3 | Does the organization discriminate by race in any way with respect to: | - | | |
| - 2 | | 33a | n mag | 206400 |
| - b | Admissions policies? | | | |
| c | Employment of faculty or administrative staff? | | | |
| d | Scholarships or other financial assistance? | | | |
| e | Educational policies? | | | |
| ť | Use of facilities? | · | | |
| · | 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.) | . 3311 | 14.888 | |
| | 11 you answered 103 to any or the above, please explain. (if you need those space, attach a separate statement.) | - | | |
| | | . Historia | | |
| | | . Cita | | |
| 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? | 34b | | |
| | If you answered "Yes" to either 34a or b, please explain using an attached statement. | | | |
| i | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, | 1 | | |
| | 1975-2 C.B. 587, covering racial condiscrimination? If "No." attach an explanation | 35 | I | |

Schedule A (Farm 990 or 990-EZ) 2000

Part VI-B Lobbying Activity by Nonelecting Public Charities N/A (For reporting only by organizations that did not complete Part VI-A) During the year, did the organization attempt to influence national, state or local legislation, including any attempt to 29Y Amount 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 0. 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 A (Form 990 or 990-EZ) 2000

| Schedule | A (Form 990 or 990-EZ) 2000 | ANONYMOUS, INC. | | 23-72 | 82071 [.] | Page |
|----------|---|--|---------------------------------------|--|----------------------|--------------|
| Part | | | d Transactions and | d Relationships With Noncharit | able | |
| | Exempt Organiz | | | | | |
| | | irectly or indirectly engage in any of | | | | |
| | | section 501(c)(3) organizations) or in panization to a noncharitable exempt | | olitical organizations? | Ī | es No |
| | | • | * | | 51a(l) | X |
| | | | | | _ | X |
| | ther transactions: | | | | | |
| | | te with a noncharitable evernot organ | nization | ., | b(I) | x |
| | | | | | - | X |
| | | | | | · - ' . · | X |
| | | | | | b(iv) | X |
| | v) Loans or loan guarantees | | | | b(v) | Х |
| | • | | | | r | X |
| | | | | | 1 1 | Х |
| | | | | always show the fair market value of the | | |
| | | given by the reporting organization. | | | | |
| tr | ansaction or sharing arrangem | ent, show in column (d) the value of | the goods, other assets, o | r services received: | N | /A |
| (a) | (b) | (c) | | (d) | | |
| Line no | . Amount involved | Name of noncharitable exe | empt organization | Description of transfers, transactions, and s | haring arran | igements |
| | | | | | | |
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| | - | - | | anizations described in section 501(c) of the | ٦., | X No |
| | ode (other than section 501(c) "Yes," complete the following s | (3)) or in section 527? | | | _ Yes | TT NO |
| | (a) | | (b) | (c) | | |
| | Name of org | | Type of organization | Description of relationsh | ip | |
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Schedule B (Form 990 or 990-EZ)

Schedule of Contributors

Supplementary Information for line 1d of Form 990 or

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

line 1 of Form 990-EZ (see instructions) Name of organization GENERAL SERVICE BOARD OF ALCOHOLICS

Employer identification number

| ANONYMOUS, INC. | 23-7282071 |
|--|---|
| Organization type (check one)-Section: X 501(c)(3) ◀ (enter number) | 527 or 4947(a)(1) nonexempt charitable trus |
| 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., p | urpose ▶\$ |
| Note: This form is gonerally not once to public imposition avenue | et for continu 507 occomizations |

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 8 (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 9090-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

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

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.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions

Note: You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

Part I. In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year; and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

023451 12-19-00

Page 1 to 1 of Part I

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

Employer Identification number

23-7282071

| Part I | Contributors | | |
|------------|-----------------------------------|--------------------------------|--|
| (a) No. | (b) Name, address and ZIP code | (c) Aggregate contributions | (d) Type of contribution |
| 1 | | s1,428,222. | Individual X Payroll Noncash (Complete Part II if a noncash contribution.) |
| (a) No. | (b) Name, address and ZIP code | (c) Aggregate contributions | (d) Type of contribution |
| 2 | | \$ | Individual Payroll Occash Complete Part II if a noncash contribution.) |
| (a) No. | (b) Name, address and ZIP code | (c) Aggregate contributions | (d) Type of contribution |
| 3 | | \$ | Individual Payroll Occash Complete Part II if a noncash contribution.) |
| (a) No. | (b) Name, address and ZIP code | (c) Aggregate contributions | (d) Type of contribution |
| 4 | | \$ | Individual Payroll Noncash Complete Part II if a noncash contribution.) |
| (a) No. | (b) Name, address and ZIP code | (c) Aggregate contributions | (d) Type of contribution |
| 5 | | \$ | Individual Payroll Noncesh (Complete Part II if a noncash contribution.) |
| (a) No. | (b) Name, address and ZIP code | (c) Aggregate contributions | (d) Type of contribution |
| 6 | | \$ | Individual Payroll Noncash Complete Part II if a noncash contribution.) |

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Footnotes

Statement

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 93 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 FELLOWSHIP SERVICES GENERAL SERVICE CONFERENCE REGIONAL FORUMS INTERNATIONAL CONVENTION/WORLD SERVICE MEETING DONATION TO A.A. GRAPEVINE | 1,560,375. 1,521,190. 557,202. 227,091. 3,172,438. 66,214. |
|---|---|
| TOTAL | 7,104,510. |

FORM 990 PART V AND SCH A PART 1

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ARE NOT SEPARATELY CALCULATED.

. i .

| Form 990 Gain (Loss) Fr | rom Publicly T | raded Securit | ies S | tatement 2 |
|---|----------------------------|------------------------|-----------------|--|
| Description | Gross Sales Price | Cost or Other Basis | Expense of Sale | Net Gain or (Loss) |
| UST NOTES 2/15/00 8.5% UST NOTES 3/31/00 | 250,000. | 248,510. | 0. | 1,490. |
| 5.5% | 500,000. | 500,000. | 0. | 0. |
| UST NOTES 5/15/00 8.875% | 250,000. | 249,917. | 0. | 83. |
| UST NOTES 5/15/00 6.375% | 500,000. | 500,000. | 0. | . 0. |
| UST NOTES 8/31/00 6.25% | 500,000. | 500,000. | 0. | 0. |
| To Form 990, Part I, line 8 | 2,000,000. | 1,998,427. | 0. | 1,573. |
| Form 990 Other Changes Description | in Net Assets | or Fund Bala | nces S | tatement 3 Amount |
| DEPRECIATION - CAPITAL PROJECT POST-RETIREMENT HEALTH BENEFIT CHANGE IN UNREALIZED GAIN PENSION ADJ - FAS 87 | | | | <280,513. <504,322. 261,624. 418,447. |
| Total to Form 990, Part I, lin | ne 20 | | _ | <104,764. |
| Form 990 Statement of Organ | nization's Pri Part III | mary Exempt P | urpose S | tatement 4 |

Explanation

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

Part III

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. 2 .

| | - | | | |
|--|-------------------|--------------------|--------------------------|---------------------------|
| Form 990 | Cash Grant | s and Allocation | ns | Statement 5 |
| Classification D | onee's Name | Donee's Addres | Donee's s Relationsl | nip Amount |
| | .A. GRAPEVINE, | NEW YORK, NY | SEE PART | 66,214. |
| Total Included on | Form 990, Part 1 | II, line 22 | | 66,214. |
| Form 990 | Gove | ernment Securition | es | Statement 6 |
| Description | | U.S. Government | State and Local Gov't | Total Gov't Securities |
| SEE ATTACHED LIST | | 8,722,109. | | 8,722,109. |
| Total to Form 990 | , line 54, Col B | 8,722,109. | | 8,722,109. |
| Form 990 | Othe | er Investments | | Statement 7 |
| Description | | • | Valuation Method | Amount |
| AA WORLD SERVICES VALUE | AND AA GRAPEVINE | E AT NOMINAL | Cost | 1. |
| Total to Form 990 | , Part IV, line 5 | 66, Column B | | 1. |
| Form 990 | Other | Liabilities | | Statement 8 |
| Description | | | | Amount |
| DEFERRED INCOME - ACCRUED POSTRETIR | | | | 1,482,949. 2,957,841. |
| Total to Form 990 | , Part IV, line 6 | 55, Column B | | 4,440,790. |
| | | | | |

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| Form 990 Other | Expenses Not | Included on | Form 990 | State | ement 9 |
|---|----------------|-----------------------|-------------------|---------------------------------|------------------------------------|
| Description | | | | Aı | mount |
| DEPRECIATION SFAS 87 ADJUSTMENT SFAS 106 ADJUSTMENT | | | | | 280,513. <418,447.> 504,322. |
| Total to Form 990, Part I | Ј- В | | | | 366,388. |
| | - List of Offi | | | State | ement 10 |
| Name and Address | | itle and cg Hrs/Wk | Compen- sation | Employee Ben Plan Contrib | Expense Account |
| MICHAEL ALEXANDER | | STEE EMER | 0. | 0. | 0. |
| NY, NY | PART | Ľ | 0. | 0. | 0. |
| SARY GLYNN NY, NY | CHAI PARI | IRMAN I | 0. | 0. | 0. |
| OANIE MONCRIEF | ASSI 35 | SECT'Y | 83,011. | 0. | 0. |
| OONALD MEURER | ASS1 20 | TRES | 53,379. | 0. | 0. |
| LINDA CHEZEM | | V-CHAIR | | | |
| MOORESVILLE, IN | PART | י | 0. | 0. | 0. |
| OIM CLOUGH | TRUS PART | | 0. | 0. | 0. |
| JIM ESTELLE | TRUS PART | STEE EMER | 0. | 0. | 0. |

EL DORADO HILLS, CA

| GENERAL SERVICE BOARD OF ALCO | HOLICS ANON | | 23-72 | 282071 |
|-------------------------------|--------------|----|-------|--------|
| ELAINE JOHNSON, PHD | 1ST V-CHAIR | • | | |
| BALTIMORE, MD | PART | 0. | 0. | 0. |
| LEONARD BLUMENTHAL | TRUSTEE | • | 0 | |
| ROLLY VIEW, AB | PART | 0. | 0. | 0. |
| TOM MAGUIRE | TRUSTEE | | | • |
| LIVE OAK, FL | PART | 0. | 0. | 0. |
| MARNE HILL | TRUSTEE | | | _ |
| THUNDER BAY, ON | PART | 0. | 0. | 0. |
| JACK L. OSTREM | TRUSTEE | | | |
| JOLIET, IL | PART | 0. | 0. | 0. |
| DEAN RINEHART | TRUSTEE | | | |
| EL RENO, OK | PART | 0. | 0. | 0. |
| JACQUELINE JOHNSTON | TRUSTEE | | | |
| PALM DESERT, CA | PART | 0. | 0. | 0. |
| RICHARD ROUGHTON | TRUSTEE | | | |
| CHICAGO, IL | PART | 0. | 0. | 0. |
| GORDON PATRICK | TRUSTEE EMER | | | |
| ETOBICOKE, CANADA | PART | 0. | 0. | 0. |
| RIC DOWNEY | TRUSTEE | | | |
| BURNABY, BC | PART | 0. | 0. | 0. |
| ALEX PALMER | TRUSTEE | | | |
| ABBOTSFORD, BC CANADA | PART | 0. | 0. | 0. |
| ARTHUR KNIGHT, JR. | TREASURER | | | |
| LAKE FOREST, IL | PART | 0. | 0. | 0. |
| GEORGE VAILLANT | TRUSTEE | • | • | - |
| BOSTON, MA | PART | 0. | 0. | 0. |

| GENERAL SERVICE BOARD OF ALCOHOL | ICS ANON | | 23 | -7282071 |
|-----------------------------------|-------------------|----------|----|----------|
| REV. ROBERT MILLER | TRUSTEE PART | 0. | 0. | 0. |
| BIRMINGHAM, AL | | | | |
| BETH RABREN | TRUSTEE PART | 0. | 0. | 0. |
| BRAZORIA, TX | | | • | |
| ELIZABETH STEVENS | SECRETARY PART | 0. | 0. | 0. |
| COLUMBIA, SC 29210 | TTACE | •• | • | • |
| TONY TASCHNER | TRUSTEE PART | 0. | 0. | 0. |
| BERLIN, CT | | | | |
| GREG TOBIN | TRUSTEE PART | 0. | 0. | 0. |
| SOUTH ORANGE, NJ | TAKI | . | 0. | • |
| TED STOA | TRUSTEE PART | 0. | 0. | 0. |
| ABERDEEN, SD | LWI | 0. | 0. | . |
| Totals Included on Form 990, Part | v | 136,390. | 0. | 0. |

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

| | Cost 1-1-00 | Additions | Deletions | Cost 12-31-00 |
|------------------------|---------------------|----------------|-----------|-----------------------|
| Leasehold Improvements | \$2,795,469 | \$0 | \$0 | \$2,795,469 |
| Computer Hardware | 502,054 | 306,856 | 406,811 | 402,099 |
| Software | 271,671 | 0 | 0 | 271,671 |
| Totals | 3,569,194 | 306,856 | 406,811 | 3,469,239 |
| | | | | |
| | Acc. Dep. 1-1-00 | Additions | Deletions | Acc. Dep. 12-31-00 |
| Leasehold improvements | \$2,063,671 | \$219,142 | \$0 | \$2,282,813 |
| Computer | | | | |
| Hardware | 502,054 | 61,371 | 406,811 | 156,614 |
| Software | 271,671 | 0 | 0 | 271,671 |
| Totals | 2,837,396 | <u>280,513</u> | 406,811 | 2,711,098 |

AAGSB RESERVE FUND US TREASURIES

sa je je

| 2000 | | | | | | | US IREASURIES | S III | | | | | ;• • |
|---|-------------------|----------------------------|------------------|-------------|------------|----------------------|---------------|-------------|----------------|--------------|----------------|----------------|------------|
| Par Maturity Int Value Mc Da Yr Pate | Maturity Da Vr | > | > | Int Rate | | Ç | G sector | (Premium | (Sales) | #480 Gain | #411 Ending | #412 Market | TOTAL |
| | | | | | Ϊ | | 5 | | (care) | (503) | | 200 | |
| \$250.000 2 15 2000 8.500% 248 | 2000 8.500% | 2000 8.500% | 8.500% | | 248 | \$0.00 248.510.00 | | | (250,000,00) | 1.490.00 | 00.00 | | 10.625.00 |
| 3 31 2000 5.500% | 2000 5.500% | 2000 5.500% | 5.500% | | 200 | 500,000.00 | | | (200,000,005) | 0.00 | 0.00 | | 13.750.00 |
| 5 15 2000 8.875% | 15 2000 8.875% | 2000 8.875% | 8.875% | | 249, | 249,917.50 | | | (250,000.00) | 82.50 | 0.00 | | 11,093.75 |
| 5 15 2000 6.375% | 15 2000 6.375% | 2000 6.375% | 6.375% | | 200 | 500,540.82 | | (540.82) | (200,000.00) | 0.00 | 0.00 | | 15,937.50 |
| 8 31 2000 6.250% | 31 2000 6.250% | 2000 6.250% | 6.250% | | 500, | 500,523.57 | | (523.57) | (200'000'00) | 0.00 | 0.00 | | 31,250.00 |
| 3 31 2001 6.375% | 31 2001 6.375% | 2001 6.375% | 6.375% | | 249, | 249,140.63 | | | | | 249,140.63 | \$250,234 | 15,937.50 |
| 3 31 2001 6.375% | 31 2001 6.375% | 2001 6.375% | 6.375% | | | | 250,273.44 | (273.44) | | | 250,000.00 | 250,234 | 696.72 |
| 6 30 2001 6.625% | 30 2001 6.625% | 2001 6.625% | 6.625% | | 250,(| 250,000.00 | | 1 | | | 250,000.00 | 251,094 | 8,281.25 |
| 5007 | 2007 | L002 | | 6.625% | | | 250,585.75 | (585.75) | | | 250,000.00 | 251,094 | (1,485.22) |
| 31 2001 6.625% | 31 2001 6.625% | 2001 6.625% 2001 5.875% | 6.625% 5.875% | | 504 | 504 972 38 | 501,171,88 | (488.00) | | | 500,683.88 | 502,656 | (180.03) |
| 5 15 2002 7.500% | 15 2002 7.500% | 2002 7.500% | 7.500% | | 249 | 249,480.00 | | (5,000,00) | | | 249.480.00 | 256,953 | 18,750.00 |
| 8 15 2002 6.375% | 15 2002 6.375% | 2002 6.375% | 6.375% | | 488, | 488,843.39 | | | | | 488,843.39 | 508,594 | 31,875.00 |
| 10 31 2002 5.750% | 31 2002 5.750% | 2002 5.750% | 2.750% | | 498 | 498,785.00 | | | | | 498,785.00 | 504,531 | 28,750.00 |
| 11 30 2002 5.750% | 30 2002 5.750% | 2002 5.750% | 5.750% | • | 249, | 249,959.49 | | | | | 249,959.49 | 252,422 | 14,375.00 |
| 2 15 2003 6.250% | 15 2003 6.250% | 2003 6.250% | 6.250% | | • | 1 | 251,445.31 | (196.00) | | | 251,249.31 | 255,312 | (934.10) |
| 3 31 2003 5.500% | 31 2003 5.500% | 2003 5.500% | 5.500% | | 249, | 249,062.50 | | | | | 249,062.50 | 251,953 | 13,750.00 |
| \$500,000 6 30 2003 5.375% 498, | 30 2003 5.375% | 2003 5.375% | 5.375% | | 804 804 | 498,437.50 | | 100 000 | | | 498,437.50 | 502,813 | 13,437.50 |
| 0 13 2003 3.73076 2 15 2004 F 8759 | 15 2003 3,73076 | 2003 3.73076 | 5.750% | | , co | 503,104,73 | | (0/2/00) | | | 50.282,200 | 507,500 | 20,730.00 |
| 5 15 2004 7.250% | 15 2004 3.013% | 2004 7.250% | 7 250% | | 207 | 250 000 00 | | (124:00) | | | 250,000,000 | 266,094 | 18 125 00 |
| 8 15 2004 7.250% | 15 2004 7.250% | 2004 7.250% | 7.250% | | 245 | 245,000.00 | | | | | 245 000.00 | 267,188 | 18 125.00 |
| 8 15 2004 6.000% | 15 2004 6.000% | 2004 6.000% | %000'9 | | 499, | 499,856.25 | | | | | 499,856.25 | 514,219 | 30,000.00 |
| 5 15 2005 6.500% | 15 2005 6.500% | 2005 6.500% | 6.500% | • | 254 | 254,733.75 | | (880.00) | | | 253,853.75 | 263,750 | 16,250.00 |
| 5 15 2005 6.500% | 2005 6.500% | 2005 6.500% | 6.500% | | | | 252,187.50 | (224.00) | | | 251,963.50 | 263,750 | 6,402.85 |
| 8 15 2005 6.500% | 15 2005 6.500% | 2005 6.500% | 6.500% | | 254.8 | 254,817.94 | | (856.00) | | | 253,961.94 | 264,375 | 16,250.00 |
| 8 15 2005 6.500% | 15 2005 6.500% | 2005 6.500% | 6.500% | | | | 252,031.25 | (294.00) | | | 251,437.25 | 264,375 | 2,366.07 |
| 11 15 2005 | 2005 5.875% | 2005 5.875% | 5.875% | | 495,3 | 21.51 | | | | | 495,321.51 | 517,031 | 29,375.00 |
| \$500,000 7 15 2006 7.000% | 2006 | 2006 | | 7.000% | | | 506,000.00 | (819.00) | | | 505,181.00 | 544,375 | 14,403.84 |
| | | | | | | 0.00 | | | | : | 0.00 | | 0.00 |
| \$10,500,000 | 8,244 | 8,244 | 8,244 | 8,244 | 8,244 | 8,244,047.23 | 2,263,695.13 | (10,172.58) | (2,000,000.00) | 1,572.50 | 8,499,142.28 | 8,722,109 | 464,707.63 |
| (200,000) | | | | | | | | | | | | (8,499,142) | |
| \$8,500,000 | | | | | | | | | | | | | |
| | | | | | | | | | | | | 222.967 | |