## Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or
private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047 1 1999

Department of the Treasury Internal Revenue Service

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

This Form is Open to Public Inspection

A F	or the	1999 calendar year, OR tax year period beginning		and e	nding					
B c		Change Please Challenat CEDVICE DOADD OF ALCOHOLICE					D Employer	identification number		
_	address label or A MONVMOTIS THE						23-7282071			
۲-	Initial	type. Number and street (or P.O. box if mail is n	ot delivered to street a	ddraee\		Room/cuite	E Telephone			
F	⊒return ⊒Final	Specific 475 RIVERSIDE DRIVE	Of delivered to affect at	uuiassi	.	TOUTIVSUILE [	212-	870-3400		
F	Ineturn Amend	led Instruc						if exemption		
	⊒iretuan (regulaeda Ionstata	NEW YORK, NY 10115					1 QHOOK >	application is pending		
G 1		organization - X Exempt under 501(c) (3 )	(insert number) OR	<b>▶</b> sec	tion 4947(a)	(1) nonexem	pt charitable			
		tion 501(c)(3) exempt organizations and 4947(a								
		a group return filed for affiliates?						our-digit group		
		,' enter the number of affiliates for which this				ber (GEN)				
		is filed:	•	I	counting me			X Accrual		
_(E)		a separate return filed by an organization covered by a group rolling				pecify) 🕨				
		e 🕨 🔲 if the organization's gross receipts are norm		5,000. The or	ganization n	eed not file a	return with t	he IRS; but		
if	it receiv	ed a Form 990 Package in the mail, it should file a return	without financial data.	Some state	es require a	complete re	turn.			
		990-EZ may be used by organizations with gross				ts less than	\$250,000 a	it end of year.		
Pε	irt.I	Revenue, Expenses, and Changes in		und Bal	ances		hener zor	· 		
	1	Contributions, gifts, grants, and similar amounts received			1					
	а	Direct public support				075				
	b	Indirect public support				875,46	0 T •	,		
_	C	Government contributions (grants)		<u>1</u> c	<u></u>	Chmt 1				
300	d	Total (add lines 1a through 1c) (attach schedule of cor				Stmt 2	100.000	5,875,461.		
7.	•	(cash \$5, 875, 461. noncash \$						3,0/3,401.		
7.7	2	Program service revenue including government fees ar	-	•						
.7	3	Membership dues and assessments					·····	41,569.		
JUN	4	Interest on savings and temporary cash investments  Dividends and interest from securities						379,306		
~)						. •••••••••	5	37373001		
,-,	6 a	Gross rants	-							
Revenue	b C	Less: rental expenses								
ne.	7	Other investment income (describe	a)	• • • • • • • • • • • • • • • • • • • •	••••••	·····	6t	<del></del>		
Ver	-	Gross amount from sale of assets other	(A) Securities			B) Other		·		
H.	0 0	than inventory	3,000,0	00 - 8a	<del>,                                    </del>	D) Otto				
رد	b	Less: cost or other basis and sales expenses	2,994,8		<del>                                     </del>					
	C	Gain or (loss) (attach schedule)		17. 86	<u> </u>					
	d	Net gain or (loss) (combine line 8c, columns (A) and (E					84	5,117.		
	9	Special events and activities (attach schedule)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	a	Grass revenue (not including \$	of contribution	s .		_	(2010) (4010)			
		reported on line 1a)		<u>9a</u>						
	b	Less: direct expenses other than fundraising expenses		<u>9</u> b	<u> </u>			•		
	C	Net income or (loss) from special events (subtract line	•		. ,		9 <sub>6</sub>			
	10 a	Gross sales of inventory, less returns and allowances			<del> </del>					
ľ	p	Less: cost of goods sold			<u> </u>					
	C	Gross profit or (loss) from sales of inventory (attach so			•			<del></del>		
	11	Other revenue (from Part VII, line 103)					r · -	C 201 452		
	_12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10	c, and 11)		• • • • • • • • • • • • • • • • • • • •	· · · · · · ·		6,301,453.		
y,	13	Program services (from line 44, column (B))			EIVE	···········	13	3,877,079.		
Su	14	Management and general (from line 44, column (G))	·····			10	14	2,224,425.		
Expenses	15	runaraising (from line 44, column (D))	<del></del>	MASSO		280-8	15	<del></del>		
ш	16	Tatal expenses (add lines 16 and 44 actions (21)		!XI.A\Y]	-8-2000	- K	16	6,101,504.		
$\dashv$	<u>17</u> 18	Fycess or (deficit) for the year (subtract line 17 from the				<u> </u>	17 18	199,949.		
Ť.	19	Management and general (from line 44, column (G))  Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))  Excess or (deficit) for the year (subtract line 17 from line 18 assets or fund balances at beginning of year (from	ine 73 column /411	- OGD	en, u	7	19	6,593,902.		
Net Assets	20	Other changes in net assets or fund balances (attach ex	nlanation)	See	State	ment 4		<200,723.>		
٧	21	Net assets or fund balances at end of year (combine lin					·····   <u></u> v	6,593,128.		
	<del></del> -	The appeare of three philappas of olds of Appl feetinglife int	10, 10, and 20/				<u>  4</u> 1	2,330,120.		

Page 2

Part II Statement of All Functional Expenses (4)	organiza organiz	ations must complete colum ations and section 4947(a)(	n (A). Columns (B), (C), ar 1) nonexemot charitable tri	id (D) are required for section usts but optional for others.	n 501(c)(3) and	
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	J. J.	(A) Total	(B) Program. services	(C) Management and general	(D) Fundraising	
22 Grants and allocations (attach schedule)						
cash \$225,000 • noncash \$	22	225,000.	225,000.	Statement 6		
23 Specific assistance to individuals (attach schedul	e) 23					
24 Benefits paid to or for members (attach schedule		101 500				
25 Compensation of officers, directors, etc		131,593.	80,267.	51,326.	0.	
26 Other salaries and wages		2,417,723.	1,403,975.	1,013,748.	<del>-</del>	
27 Pension plan contributions		169,485.	95,297.	74,188.		
28 Other employee benefits		449,610.	229,830.			
29 Payroll taxes		187,569.	105,469.	82,100.		
30 Professional fundraising fees			_		-	
31 Accounting fees		22,800.		22,800.		
32 Legal fees	32	17,599.		17,599.		
33 Supplies	. 33	122,372.	75,116.			
34 Telephone	. 34	80,386.	46,632.			
35 Postage and shipping	35	562,475.	548,748.			
36 Occupancy	36	329,301.	167,637.			
37 Equipment rental and maintenance	. 37	104,554.	54,091.			
38 Printing and publications	38	278,904.	272,693.	6,211.		
39 Travel					-1	
40 Conferences, conventions, and meetings	40	599,359.	323,623.	275,736.		
41 Interest	41					
42 Depreciation, depletion, etc. (attach schedule)	. 42					
43 Other expenses (itemize): a OFFICE SERVICE AND	43a					
b EXPENSE	43b	152,047.	29,027.	123,020.		
CONTRACTED SERVICES	43c	90,065.	59,550.	30,515.		
d WRITER'S FEES	43d	47,017.		538.		
8 FOREIGN LIT ASSISTANCE	438	113,645.	113,645.			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	6,101,504.	3,877,079.	2,224,425.	0.	
Reporting of Joint Costs Did you report in column	(B) (Pro	gram services) any joint cos	ts from a combined educat	tional campaign and		
fundraising solicitation?					Yes X No	
If "Yes," enter (I) the aggregate amount of these joint			(ii) the amount allocated to		;	
(III) the amount allocated to Management and genera			iv) the amount allocated to	Fundraising \$	· · · · · · · · · · · · · · · · · · ·	
Part III Statement of Program Ser				<del></del>		
What is the organization's primary exempt purpose?	<u> 5e</u>	e statement :	<u> </u>	<u> </u>	Program Service	
All organizations must describe their exempt purpose achievem	4-1	olana and annolan manage. Shaha	the every of ellegia aggress of	bileetiess issued ata Dissues	Expenses	
achievements that are not measurable. (Section 501(c)(3) and (4)					(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)	
allocations to others.)		<del></del>		<del> </del>	trusts; but optional for others.)	
a SEE FOOTNOTE		<del> </del>				
				225,000.)	2 077 070	
			Frants and allocations \$	223,000.)	3,877,079.	
b				<del></del>		
			Frants and allocations \$	· - }	-	
C		·	<u>-</u>			
			·	<del>-</del>		
<u> </u>		<del></del>		<del></del>		
_		(0	Frants and allocations \$	)	· · ·	
d					•	
					•	
			irants and allocations \$	)		
e Other program services (attach schedule)	106 - 2	<del></del>	irants and allocations \$	)i	2 077 070	
f Total of Program Service Expenses (should equi	u iine 44	i, column (B), Program serv	rces)	<u></u>	3,877,079.	

#### Part IV Balance Sheets

	ere required, attached schedules and amoun ould be for end-of-year amounts only.	ts within the description column	(A) Beginning of year	(B) End of year
45	Cash - non-interest-bearing		333,000. 45	1,582,154. 663,367.
46	Savings and temporary cash investments	443,066. 45	663,367.	
47 :	a Accounts receivable	472   116,081		
	b Less: allowance for doubtful accounts		120,208. 47c	116,081.
48	a Pledges receivable	1 1	···	
	b Less: allowance for doubtful accounts		480	·
49	Grants receivable		49	
50	Receivables from officers, directors, trustees,			
	and key employees		50	
Assets				
şş l	b Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges			1,697,651.
54	Investments - securities	Stmt 7	8,507,334. 54	8,205,390.
55 8				
	equipment: basis	55a		
	Less: accumulated depreciation	55b	550	
56	investments - other	See Statement 8	1. 56	1.
57 a		$ _{57a} _{3,569,194}$	•	
1	Less: accumulated depreciation		. 1,034,253. <sub>576</sub>	731,798.
58	Other assets (describe	)	58	·
	•		1	
59	Total assets (add lines 45 through 58) (must ea	ual line 74)	11,225,304. 59	12,996,442.
60	Accounts payable and accrued expenses		653,185. 60	365,521.
61	Grants payable		61	
S 62	Deferred revenue		62	
62 63 64 64	Loans from officers, directors, trustees, and key			
면   64	a Tax-exempt bond liabilities	64a		
-	b Mortgages and other notes payable		64b	
65	Other liabilities (describe	<u>See Statement 9</u>	3,978,217. 65	6,037,793.
		•	·   ·	
66	Total llabilities (add lines 60 through 65)		4,631,402.66	6,403,314.
Orga	anizations that follow SFAS 117, check here 🕨	X and complete lines 67 through		
	69 and lines 73 and 74.			
ဗ္ဗိ   67	Unrestricted		6,593,902. 67	6,593,128.
<u> </u>	Temporarily restricted	***************************************	68	
<u>6</u> 69	Permanently restricted		69	
S Orga	anizations that do not follow SFAS 117, check he	e 🕨 🔛 and complete lines		
<u> </u>	70 through 74			:  
<u>s</u> 70	Capital stock, trust principal, or current funds			
Net Assets or Fund Balances  10	Paid-in or capital surplus, or land, building, and			, ,
₹ 72	Retained earnings, endowment, accumulated in		0000000000	
할   73	Total net assets or fund balances (add lines 67			
İ	column (A) must equal line 19 and column (B) r		6,593,902. 73	6,593,128.
74	Total liabilities and net assets / fund balance:	(add lines 66 and 73)	11,225,304. 74	12,996,442.

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.

Form 990 (1999) , ANONYMOUS, INC		or Miconollic		23-72820	71 ' Page 4
Part IV A Reconciliation of Revenue per Au		Part IV-B Recond	iliation of Exc		
Financial Statements with Reven	ue per	Financi	al Statements	With Exper	ises per
Return	_	Return			· · · · · · · · · · · · · · · · · · ·
a Total revenue, gains, and other support per audited financial statements a 5,9	02 112	a Total expenses and to audited financial state	osses per	_ E	004 217
per audited financial statements	<i>33,</i> 443.	audited financial state b Amounts included on	ements	► a j J /	774,411.
b Amounts included on line a but not on		line 17, Form 990:	i illio a but itut qij		
line 12, Form 990:		(1) Donated services			
(1) Net unrealized gains		and use of facilities			
on investments\$ <308,010.		(2) Prior year adjustmen	ts		
(2) Donated services		reported on line 20,			
and use of facilities \$		Form 990	.\$		
(3) Recoveries of prior		(3) Losses reported on			
year grants\$		line 20, Form 990 🔒	\$		
(4) Other (specify):		(4) Other (specify):			
ss		Stmt 10	<u>\$ &lt;107,2</u>	<u>87.</u>	
Add amounts on lines (1) through (4) ▶ b <3	08,010.	Stmt 10  Add amounts on lines c Line a minus line b	s (1) through (4)	▶ b <	107,287.
c Line a minus line b	01,453.	c Line a minus line b		<b>▶</b> 6 6,	101,504.
d Amounts included on line 12, Form		d Amounts included on	line 17, Form		
990 but not on line a:		990 but not on line a			
(1) Investment expenses		(1) Investment expenses			
not included on		not included on			
line 6b, Form 990\$		line 6b, Form 990	s		
(2) Other (specify):		(2) Other (specify):			
		(2) Other (aposity).	•		
Add amounts on lines (1) and (2)	80.70.500.80.360%	Add amounts on lines	. (1) and (2)		9007107107900800,50080048046
			o 17 Form 000	····· •   •	
e Total revenue per line 12, Form 990 (line c plus line d)	01,453,	(line c plus line d)	10 17, FUIIII 550	<b>▶</b>  0 6-	101.504.
Part V List of Officers, Directors, Trustees,	and Key F	mployees /List each on	e even if not compan	sated \	101/0011
Endited: List of States, Baselin, Husters,	cita itoy L				(Е) Ехрелѕе
(A) Name and address		(B) Title and average hours per week devoted to position	(If not paid, enter	employee benefit plans & deferred	account and other allowances
		position	-0-/	compensation	oniei allowanices
				,	
See Statement 11			131,593.	0.	0.
bee bedeement 11			131,355.		<del></del>
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75 Did any officer, director, trustee, or key employee receive aggreg	ata aamaassa 1	on of more than \$100,000 for	m your organization	and all related	
organizations, of which more than \$10,000 was provided by the					Form 990 (1999)

ι.

GENERAL SERVICE BOARD OF ALCOHOLICS ANONYMOUS, INC. 23-7282071 Form 990 (1999) Page 6 Part VI Other Information No Х 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? 77 If "Yes." attach a conformed copy of the changes. X 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? 78b X 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, X 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 X 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 Х fair rental value? 82a 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 N/A expense in Part II. (See instructions for reporting in Part III.) X 83a 83 a Did the organization comply with the public inspection requirements for returns and exemption applications? b Did the organization comply with the disclosure requirements relating to guid pro quo contributions? N/A 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 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? N/A 85b 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 85c N/A Section 162(e) lobbying and political expenditures 85d N/A 85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices N/A Does the organization elect to pay the section 6033(e) tax on the amount in 85f? 85p If section 6033(a)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 85h N/A 86 N/A b Gross receipts, included on line 12, for public use of club facilities 86b 501(c)(12) organizations. Enter: N/A 87a a Gross income from members or shareholders 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.) 87b 88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes, complete Part IX 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: O - ; section 4912 ► section 4911 O • ; section 4955 ▶ b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit X transaction during the year? If "Yes," attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under 0. d Enter: Amount of tax in 89c, above, reimbursed by the organization 90 a List the states with which a copy of this return is filed ▶ <u>NEW YORK</u> 0 b Number of employees employed in the pay period that includes March 12, 1999 \_\_\_\_\_\_ Telephone no. ► 212-870-3400 91 The books are in care of ORGANIZATION Located at ► 475 RIVERSIDE DRIVE, NEW YORK, NY

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Part VII   Analysis of Income-	Producing Ac		ted business income	Evelue	ded by section 512, 513, or 514	J
Enter gross amounts unless otherwise		_ (A)		(C)		(E)
indicated.		Business	(B) Amount	Exclu- sion	(D) Amount	Related or exempt function income
93 Program service revenue:		code	711100111	code	Amount	I I I I I I I I I I I I I I I I I I I
(a)						
(b)					<u></u>	<u> </u>
(c)				$\perp$		
(d)						
(e)						
(f) Medicare/Medicald payments				11		 
(g) Fees and contracts from government	agencies					
94 Membership dues and assessments	,					<u> </u>
95 Interest on savings and temporary						
cash investments				14	41,569. 379,306.	
96 Dividends and interest from securities				14	379,306.	
97 Net rental income or (loss) from real esta	F-33					
(a) debt-financed property					·	
(b) not debt-financed property						
98 Net rental income or (loss) from persona				1		•
99 Other investment income						
100 Gain or (loss) from sales of assets	····					
other than inventory	ĺ		•	18	5,117.	*
101 Net income or (loss) from special events				1		
102 Gross profit or (loss) from sales of invent				1		
103 Other revenue:				1		·
		i			•	
a				1		· · · · · · · · · · · · · · · · · · ·
b				<del>  .  </del>	<del></del>	
<u> </u>				1		
d	<del></del>		<u> </u>		<del>-</del>	
6					425,992.	0.
104 Subtotal (add columns (B), (D), and (E))				P		
105 TOTAL (add line 104, columns (8), (D), at					▶	420,992.
Note: (Line 105 plus line 1d, Part I, should Part VIII Relationship of Activ	d equal the amou	nt on line 1	12, Part I.	4 D		
Line No. Explain how each activity for whice exempt purposes (other than by purposes)	h income is reporte	d in column	(E) of Part VII contributed			of the organization's
						·
				•		
Part IX Information Regardir	ıg Taxable Sı	ubsidiari	es (Complete this Part i	f the "Ye	s" box on 88 is checked.)	<del></del> -
Name, address, and employer identification	Percentage of ownership interest	Nat	ture of business activities		Total income	End-of-year assets
N/A	%	·	<u> </u>	<del></del> [-	<del></del>	POONID
21/21	- 70. %		<u> </u>			
	%					
	%1			ľ		•

#### SCHEDULE A (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

### Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(8), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

GENERAL SERVICE BOARD OF ALCOHOLICS

ANONYMOUS, INC.

1999

Employer identification number 23 7282071

OMB No. 1545-0047

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

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter "None.") (a) Contributions to employee benefit plans & deferred compensation (b) Title and average hours (e) Expense account and other (a) Name and address of each employee paid (c) Compensation per week devoted to more than \$50,000 position allowances GREG MUTH GENERAL MGR 35 135,000 0. SLEEPY HOLLOW, NY THOMAS JASPER SERVICES DIR BROOKLYN, N.Y. 35 116,840 0. PERSONNEL MGR LEONORA HALLIGAN 35 98,224 0. NEW YORK, N.Y. LILLIANNA MURPHY EDP MGR BROOKLYN, N.Y. 35 86,162. 0. STAFF RICHARD BUSH LONG BRANCH, NJ 35 81,449 0. Total number of other employees paid 13 Part | Compensation of the Five Highest Paid Independent Contractors for Professional Services (See 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) Compansation None Total number of others receiving over \$50,000 for professional services

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

Schedule A (Form 990) 1999

P	art III Statements About Activities		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public	T		
		1	070407040	X
	If "Yes," enter the total expenses paid or incurred in connection with the lobbying activites 🕨 \$			
	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.			
2	During the year, has the oganization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors,			
	officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is			
	affiliated as an officer, director, trustee, majority owner, or principal beneficiary:			
а	Sale, exchange, or leasing of property?	a		Х
b	Lending of money or other extension of credit?	<u>b</u>		X
c	Furnishing of goods, services, or facilities?	). (c		Х
٠	· ·	-		
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990	<u>:a</u>	Х	
9	Transfer of any part of its income or assets?	e		Х
	If the answer to any question is "Yes," attach a detailed statement explaining the transactions.			
	• • • • • • • • • • • • • • • • • • • •	3		<u> X</u>
	we will be a second of the sec	a	X	
	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions.)			
P	art IV Reason for Non-Private Foundation Status (See instructions.)			
The	organization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)			
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.)			
11:	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.)			
111				
12				
12	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.)			
	by the organization after date of, 1970. God social costalization for the cappet confidence in Factor 11.5			
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 4 of the instructions.)			
	(6	Line	numb	er Jer
	(a) Name(s) of supported organization(s)		m abo	
14				
	Schedule A	(Forr	m 990)	1999 (

ANONYMOUS,

Pa	Note: You may use the	Complete only it you ch he worksheet in the ins	tructions for convenin	o, 11, or 12 above.) Us g from the accrual to ti	se cash method of acc he cash method of acc	counting. counting.		
begl	ndar year (or fiscal year nning in)	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total		
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	5,946,790.	5,722,629.	4,574,917.	5,129,598.	21,373,934.		
16	Membership fees received					<u> </u>		
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				3,776,108.	3,776,108.		
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	440,897.	420,661.	477,169.	553,623.			
19	Net income from unrelated business				,			
	activities not included in line 18	İ				•		
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. Altach a schedule. Do not include gain or (loss) from sale of capital assets		·					
23	Total of lines 15 through 22	6,387,687.	6,143,290.	5,052,086.	9,459,329.	27,042,392.		
24	Line 23 minus line 17	6.387.687.	6.143.290.	5,052,086.	5,683,221.	23,266,284.		
25	Enter 1% of line 23	63,877.	61,433.	50,521	94,593.			
26 b	Organizations described in lines 10 Attach a list (which is not open to pu governmental unit or publicly suppor in line 26a. Enter the sum of all these	blic inspection) showing l rted organization) whose t	the name of and amount total gifts for 1995 throug	contributed by each perso gh 1998 exceeded the am	on (other than a ount shown 26b	465,326. 0.		
C	Total support for section 509(a)(1) to	est: Enter line 24, column	(0)			23,266,284.		
ď	Add; Amounts from column (e) for li	nes: 18 $1$ ,						
		22		ib		1,892,350.		
e		26d total)			26a	21,373,934.		
<u> </u>	Public support percentage (line 26e					91.8666%		
27 b	of, and total amounts received in eac (1998)	th year from, each "disqua (1997)	lified person." Enter the s	um of such amounts for ( (1996)	each year. N/A (1995)			
u	b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount decribed in (1) or (2), enter the sum of these differences (the excess amounts) for each year:  N/A  (1998) (1997) (1996) (1996)							
C	Add: Amounts from column (e) for li 17 Add: Line 27a total	nes: 15	<del></del>	16	<b>▶</b> 27c	N/A		
4	Add: Line 97s total		ing 27h total	<u></u>	27d	N/A		
	Public support (line 27c, total minus	and i	ine Z/U (Uta)	·····	270 27e	N/A		
e f	Total support for section 509(a)(2) to	ast: Enter amount on line !	23 column (e)	271		N/11		
g	Public support percentage (line					N/A %		
_	Investment income percentage	•	- , ,		······	N/A %		
					<del></del>			
F (	Jnusual Grants: For an organization public inspection) for each year showin hese grants in line 15. (See instruction	ig the name of the contrib is.)	outor, the date and amour		description of the nature	of the grant. Do not include		

Schedule A (Form 990) 1999

ANONYMOUS, INC.

23-7282071

Page 4

Pa	Private School Questionnaire (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
			Vac	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?	29	162	140
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	30		0000
	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?	31		
	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		32a	v2	a care or a c
b				
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	-		   
d	Copies of all material used by the organization or on its behalf to solicit contributions?			
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)	_		
		_		
33	Does the organization discriminate by race in any way with respect to:			MXX
a				
b	Admissions policies?	33b		
d	Employment of faculty or administrative staff? Scholarships or other financial assistance?			
u 0	Educational policies?			
1	Use of facilities?			
q	Athletic programs?			
h		33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	_		
		-		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		asimited:
	Has the organization's right to such aid ever been revoked or suspended?			
35	If you answered "Yes" to either 34a or b, please explain using an attached statement.  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	· .	

Schedula A (Form 990) 1999

	art VI-A Lobbying	Expenditures by Eled ONLY by an eligible orga					N/A
- Ch		ganization belongs to an affi			<del>.</del> — — —		IV/ A
<u>Ch</u>	eck here 🕨 b 🔲 If you cl	hecked "a" above and "limite	d control" provisions apply		,		
	L	imits on Lobbying	Expenditures		(a) Affiliated group to	itals	(b) To be completed for ALL
_	(The te	rm "expenditures" means an	nounts paid or incurred)	<del></del>			electing organizations
	7 4 11-16 for some 19	to following and the control of		.	N/A		
36					<u> </u>		<del>-</del>
37 38		-	•		-		<del></del>
39		•					<del>                                     </del>
40							
41		•					
	If the amount on line 40 is -	The lobby	ing nontaxable amount is -				
	Not over \$500,000			06000060			
	Over \$500,000 but not over \$1,00			I F		iwani.	
	Over \$1,000,000 but not over \$1,5			(VX) (VX) (XX)			
	Over \$1,500,000 but not over \$17 Over \$17,000,000		=	[89903030			
42					1886	1000000000000	
43					·		
44	Subtract line 41 from line 38	. Enter -0- if line 41 is more	than line 38	44			
			. •				
_	Caution: If there is an amo	ount on either line 43 or i	ine 44, you must tile For	m 4720.		<u> </u>	
			Lobbying Ex	penditures During 4-Ye	ar Averaging Perlod		N/A
	endar year (or eal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996		(e) Total
45	Lobbying nontaxable						
	amount					Si koso si	. 0
46	Lobbying ceiling amount (150% of line 45(e))						0
47	Total lobbying					<u> 4000,00</u>	
•	expenditures				•	_	0
48	Grassroots nontaxable						
	amount			Dr. St. COCONIDERON PR. NO. CO. CO.		A100100578	0
49	Grassroots calling amount						0
50	(150% of line 48(e)) Grassroots lobbying					266,566	
	expenditures						. 0
P	art VI-B Lobbying	Activity by Noneled		ies	<del></del>		37 / 3
_		only by organizations that did			440		N/A
	ring the year, did the organizati uence public opinion on a legis			n, including any attemp	Yes	No	Amount
	Volunteers						
b	Paid staff or management (in						
C	Media advertisements					<u> </u>	
d	Mailings to members, legislat					<del> </del> -	·
6	Publications, or published or						<del>-</del>
t q	Grants to other organizations Direct contact with legislators					<del> </del>	
y h	Rallies, demonstrations, sem						
i	Total lobbying expenditures (						0
	If 'Yes' to any of the above, a	Iso attach a statement giving	g a detailed description of t	he lobbying activities.			<del></del>

Schedule A (Form 990) 1999

ANONYMOUS. INC

chedulo A (Form 530) 1995	_ MOUITIOOD/		
Part VII Information	Regarding Transf	fers To and Transactions and	Relationships With Noncharitable
Evaluation Over			

	- Exotilist or Baltications				
51	Did the reporting organization directly or indirectly engage in any of the following with any other organization des				_
	501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organization	ns?			
a	a Transfers from the reporting organization to a noncharitable exempt organization of:	:		Yes	
	(I) Cash	***************************************	51a(i)		X
	(li) Other assets		a(II)		<u>X</u>
b					17
	(I) Sales of assets to a noncharitable exempt organization		b(1)		<u>X</u>
	(II) Purchases of assets from a noncharitable exempt organization		p(ii)		X
	(iii) Rental of facilities or equipment		b(ill)		X
	(iv) Reimbursement arrangements		b(iv)		X
	(v) Loans or loan guarantees		b(v)		<u>X</u>
	(vi) Performance of services or membership or fundraising solicitations		b(vi)		<u>X</u>
E	s Sharing of facilities, equipment, mailing lists, other assets, or paid employees		C		Х
d	d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always indicate the	a fair market value of the			
	goods, other assets, or services given by the reporting organization. If the organization received less than fair ma	rket value in any			
	transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received	d:	-	N/A	
(a)	a) (b) (c)	(d)			
Line	e no. Amount involved Name of noncharitable exempt organization Description of	transfers, transactions, and sha	ring arı	rangem	ents
•					
					•
		<del></del>			
				-	
	<del></del>				
		-			
		<del></del>			
52 a	Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations descrit	and in section 501/c) of the			
JE Q	Code (other than section 501(c)(3)) or in section 527?	· · · —,	Yes	ΓX	No
	f "Yes," complete the following schedule: N/A		162		NO
	(a) (b) Name of organization Type of organization	(c) Description of relationship			
	·	<del></del>			
	<del></del>	<del></del>			
	<del></del>	<u>_</u>			
	<del></del>	<del>-</del>	_		
		<del></del>			
		<del></del>			
	·· <del>···································</del>	· · · · · · · · · · · · · · · · · · ·			
	·				
		<del></del>	•		
		<del></del>	<u> </u>		
_		<del></del>	<del>.</del> _		
_					
		<del></del>			
		Schedule	A (For	m 990)	1999

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 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		1,580,877.
FELLOWSHIP SERVICES		1,327,227.
GENERAL SERVICE CONFERENCE	·	514,934.
REGIONAL FORUMS		229,041.
OTHER MEETINGS, ETC.		0.
DONATION TO A.A. GRAPEVINE		225,000.
TOTAL	· .	3,877,079.

#### FORM 990 PART V AND SCH A PART 1

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ARE NOT SEPARATELY CALCULATED.

Form 990 Gain (Loss) F	rom Publicly T	raded Securit	ies S	tatement 3
Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
UST NOTES 2/15/99 8.875% UST NOTES 2/28/99	250,000.	246,875.	0.	3,125.
5.50% UST NOTES 3/31/99	500,000.	498,672.	0.	1,328.
6.25%	500,000.	500,000.	0.	0.
UST NOTES 5/31/99 6.75%	250,000.	249,883.	0.	117.
UST NOTES 6/30/99 6.0%	500,000.	500,000.	0.	0.
UST NOTES 7/31/99 5.875%	250,000.	250,000.	0.	0.
UST NOTES 10/15/99 6.0%	250,000.	249,766.	0.	234.
UST NOTES 10/31/99 5.625%	500,000.	499,687.	0.	313.
To Form 990, Part I, line 8	3,000,000.	2,994,883.	0.	5,117.
Form 990 Other Changes	in Net Assets	or Fund Bala	nces S	tatement 4
Description				Amount
DEPRECIATION - CAPITAL PROJECT POST-RETIREMENT HEALTH BENEFIT CHANGE IN UNREALIZED GAIN PENSION ADJ - FAS 87			_	<302,455.> 53,249. <308,010.> 356,493.
Total to Form 990, Part I, lin	ne 20			<200,723.>
	· 			

#### Explanation

Form 990

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

Part III

Statement of Organization's Primary Exempt Purpose Statement

Form 990	Cash Grants	s and Allocation	ns 	Statement 6
Classification	Donee's Name	Donee's Address	Donee's Relations	hip Amount
	A.A. GRAPEVINE, INC.	NEW YORK, NY	SEE PART	VI 225,000.
Total Included	on Form 990, Part II	[, line 22		225,000.
Form 990	Gove	rnment Securitie	2S	Statement 7
Description	Valuation Method	U.S. Government	State and Local Gov't	Total Gov't Securities
SEE ATTACHED LI	ST Market Value	8,205,390.		8,205,390.
Total to Form 9	90, line 54, Col B	8,205,390.		8,205,390.
Form 990	Other	: Investments		Statement 8
Description		v	aluation Method	Amount
AA WORLD SERVIC VALUE	ES AND AA GRAPEVINE	AT NOMINAL C	ost	1.
Total to Form 9	90, Part IV, line 56	5, Column B		1.
Total to Form 9		Liabilities	· · · · · · · · · · · · · · · · · · ·	Statement 9
Form 990				
Form 990  Description  DEFERRED INCOME	Other  - AAGV IREMENT BENEFITS			Statement 9

Form 990 Other I	Expenses	Not	Included	on F	orm 990	Sta	tement	10
Description							Amount	
DEPRECIATION SFAS 87 ADJUSTMENT SFAS 106 ADJUSTMENT							302,4 <356,4 <53,2	193.>
Total to Form 990, Part IV	<b>/</b> –В						<107,2	287.>
			icers, Di y Employe		ors,	Sta	tement	11
Name and Address			tle and g Hrs/Wk		Compen- sation	Employe Ben Pla Contri		
MICHAEL ALEXANDER		TRU:	 STEE EMER T		0.			0.
NY, NY		I file.					•	•
GARY GLYNN NY, NY	·	CHA PAR'	IRMAN I		0.	. 0	•	0
JOANIE MONCRIEF		ASS:	r sect'y		80,267.	0	•	0.
DONALD MEURER BABYLON NY		ASS!	I TRES		51,326.	. 0		0.
LINDA CHEZEM		TRUS PAR	STEE F	٠.	0.	. 0	•	0.
MOORESVILLE, IN 46158  JIM CLOUGH		TRUS	STEE P		0.	. 0		0:
COSTA MESA, CA  JIM ESTELLE  EL DORADO HILLS, CA		TRUS	STEE EMER I		0.	. 0		0.

GENERAL SERVICE BOARD OF A	ALCOHOLICS ANON		23-7	282071
ELAINE JOHNSON, PHD	1ST V-CHAIR PART	0.	0.	0.
BALTIMORE, MD	11111	•	•	•
CARL BUDD	TRUSTEE PART	0.	0.	0.
ROCK SRINGS, WY	FAILI	0.	0.	0.
TOM MAGUIRE	TRUSTEE PART	0.	0.	0.
LIVE OAK, FL 32060	IAMI	•	•	
MARNE HILL	TRUSTEE	0.	0.	0.
THUNDER BAY, ON	PART	•	0.	0.
JACK L. OSTREM	TRUSTEE	0.	0.	0.
JOLIET, IL 60436	PART		0.	0.
DEAN RINEHART	TRUSTEE		0	0
EL RENO, OK 73036	PART	0.	<b>0</b> •	0.
JACQUELINE JOHNSTON	TRUSTEE	0.	0.	0.
PALM DESERT, CA	PART	0.	0.	
RICHARD ROUGHTON	TRUSTEE	0.	0.	0.
CHICAGO, IL 60610	PART	0.	0.	0.
GORDON PATRICK	TRUSTEE EMER	0.	0.	0.
ETOBICOKE, CANADA	PART	0.	0.	0.
PETER ROACH	2ND V-CHAIR	0.	0.	0.
PETERBOROUGH, ONTRIO	PART		0.	0.
ALEX PALMER	TRUSTEE		0	0
ABBOTSFORD, BC CANADA	PART	0.	0.	0.
ARTHUR KNIGHT, JR.	TREASURER	0.	0.	0.
LAKE FOREST, IL	PART	0.	0.	0.
GEORGE VAILLANT	TRUSTEE	0.	0.	0.
BOSTON, MA	PART		<b>U</b> •	<b>U</b> •

GENERAL SERVICE BOARD OF	ALCOHOLICS ANON		23-7	282071
REV. ROBERT MILLER	TRUSTEE	0.	0.	0.
BIRMINGHAM, AL	PART	<b>0.</b>	0.	0.
BETH RABREN	TRUSTEE			
BRAZORIA, TX	PART	0.	0.	0.
GARRY MCAULEY	SECRETARY			
STETTLER, ALBERTA	PART	0.	0.	0.
ELIZABETH STEVENS	TRUSTEE		_	
COLUMBIA, SC 29210	PART	0.	0.	0.
TONY TASCHNER	TRUSTEE	_		
BERLIN, CT	PART	0.	0.	0.
GREG TOBIN	TRUSTEE	•		
SOUTH ORANGE, NJ	PART	0.	0.	0.
Totals Included on Form 990	, Part V	131,593.	0.	0.

AAGSB RESERVE FUND US TREASURIES

MONTH

(81.52)3,532.61) 0.00 478.94 31,875.00 490,233.61 \$11,093.75 13,750.00 15,625.00 8,437.50 15,000.00 14,687.50 15,000.00 28,125.00 21,250.00 27,500.00 22,187.50 31,875.00 31,250.00 15,937.50 16,562.50 15,091.00 18,750.00 28,750.00 14,375.00 13,750.00 6,035.91 8,750.00 1,460.64 8,125.00 18,125.00 NCOME TOTAL 8,205,390 243,750 250,078 500,000 253,281 501,250 501,094 250,547 251,484 196,875 256,641 500,938 492,969 246,172 484,687 489,531 491,719 257,656 257,969 492,187 250,000 242,734 MARKET VALUE **推12** (0.00)0.00 0.00 0.00 0.00 0.00 254,733.75 247,626.20 8,244,047.23 0.00 504,972.38 249,480.00 188,843.39 198,785.00 249,959.49 503,164.75 502,980.25 245,000.00 199,856.25 248,510.00 500,523.57 249,140.63 250,000.00 249,062.50 198,437.50 250,000.00 254,817.94 500,000.00 49,917.50 500,540.82 247,695.31 ENDING COST #411 (0.00) 117.19 0.00 0.00 234.29 312.50 5,117.11 1,328.13 \$3,125.00 (SSOT GAIN #480 (12,236.80) (3,000,000.00) (500,000,000)(500,000,000) 250,000.00) (500,000,00) (250,000.00) (250,000.00) (500,000,00) \$250,000.00) (SALES) (110.00) (872.00)(301.00) (2,477.63) (3,893.75) (691.42)(1,448.00)(788.00)(1,512.00)(PREMIUM AMORT.) 254,843.75 3,013,185.58 506,484.38 498,437.50 503,281.25 199,856.25 254,960.94 247,626.20 247,695.31 **PURCHASES** 0.00 498,785.00 250,000.00 502,477.63 503,893.75 250,691.42 499,687.50 248,510.00 500,000.00 249,917.50 501,988.82 249,140,63 250,000.00 249,480.00 188,843.39 249,959.49 249,062.50 504,036.75 245,000.00 8,237,981.34 198,671.87 501,311.57 249,882.81 249,765.71 COST 5.750% 5.750% 5.875% 3.250% 3.000% 6.000% 5.500% 3.875% 3.375% 6.250% 5.375% 5.625% 5.875% 7.500% 5.375% 5.500% 3.375% 5.750% .250% 3.000% 5.500% 5.875% 3.750% 5.875% 5.625% 3.500% 5.875% .250% 3.500% RATE ¥ 666 2002 2002 2002 2002 2003 2003 1999 666 2000 2000 2000 2002 2003 2004 2004 282 2001 2007 2001 MATURITY ă 88 8 8 5 8 3 ğ 500,000 250,000 250,000 500,000 250,000 250,000 250,000 500,000 500,000 250,000 500,000 500,000 250,000 500,000 500,000 500,000 500,000 500,000 250,000 250,000 250,000 250,000 500,000 250,000 500,000 250,000 250,000 11,250,000 250,000 VALUE MAR 94 MAR 98 May 90 MAR 98 May 97 Dec 98 36 NNC OCT 97 FEB 90 Var 97 May 97 May 99 May 92 Var 92 Nov 97 Dec 97 May 99 VAR 93 Jun 94 Sep 94 Aug 99 Nov 99 Nov 99 Var 97 99 Inc DATE

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

	Cost 1-1-99	Additions	Deletions	Cost 12-31-99
Leasehold Improvements	\$2,795,469	\$0	\$0	\$2,795,469
Computer			•	
Hardware	502,054	0	0	502,054
Software	271,671	0	0	271,671
Totals	3,569,194	0	0	3,569,194
	Acc. Dep. 1-1-99	Additions	Deletions	Acc. Dep. 12-31-99
Leasehold Improvements	\$1,761,216	\$302,455	\$0	\$2,063,671
Computer				
Hardware	502,054	0	0	502,054
Software	271,671	<u>0</u> .	0.	271,671
Totals	2,534,941	302,455	0	<u>2,83</u> 7,396