

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter social security numbers on this form as it may be made public.
- Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2019** calendar year, or tax year beginning _____, and ending _____

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization American Diabetes Association		D Employer identification number
	Doing business as		13-1623888
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number
	2451 Crystal Drive	900	703-549-1500
	City or town	State	ZIP code
Arlington	VA	22202	G Gross receipts \$ 204,027,843
Foreign country name		Foreign province/state/county	Foreign postal code
F Name and address of principal officer: Tracey D. Brown 2451 Crystal Drive, Suite 900, Arlington, VA 22202		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.diabetes.org		L Year of formation: 1940 M State of legal domicile: OH	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>The mission of the American Diabetes Association (the Association) is to prevent and cure diabetes and to improve the lives of all people affected by diabetes.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	18
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	956
	6 Total number of volunteers (estimate if necessary)	6	19,515
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	2,620,644
b Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	118,306,745	108,955,331
	9 Program service revenue (Part VIII, line 2g)	29,206,262	28,450,236
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,296,877	1,530,692
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,553,919	7,830,233
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	158,363,803	146,766,492
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13,217,277	17,772,729
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	52,399,077	50,193,749
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,042,033	687,202
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 31,332,973		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	65,597,906	69,006,670
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	132,256,293	137,660,350	
19 Revenue less expenses. Subtract line 18 from line 12	26,107,510	9,106,142	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 142,466,593	End of Year 135,486,015
	21 Total liabilities (Part X, line 26)	83,630,180	64,272,981
	22 Net assets or fund balances. Subtract line 21 from line 20	58,836,413	71,213,034

Part II Signature Block

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

Sign Here	<i>Charlotte M Carter</i>	10/30/2020			
	Signature of officer	Date			
	Charlotte M Carter	Chief Financial Officer			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Marc Berger	<i>Marc Berger</i>	10/2/2020		P01871563
	Firm's name ▶ BDO USA, LLP	Firm's EIN ▶ 13-5381590			
	Firm's address ▶ 8401 Greensboro Drive, Suite 800, McLean, VA 22102	Phone no. 703-893-0600			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III X

1 Briefly describe the organization's mission:
The mission of the American Diabetes Association is to prevent and cure diabetes and to improve the lives of all people affected by diabetes.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 43,649,026 including grants of \$ 84,876) (Revenue \$ 18,050,754)
Information - See Schedule O

4b (Code:) (Expenses \$ 24,045,979 including grants of \$ 11,114) (Revenue \$)
Advocacy and Public Awareness - See Schedule O

4c (Code:) (Expenses \$ 27,604,205 including grants of \$ 17,676,739) (Revenue \$ 14,366,980)
Research - See Schedule O

4d Other program services (Describe on Schedule O.)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 2,065,744)

4e Total program service expenses ▶ 95,299,210

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V.</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	X	
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		N/A
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		N/A
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		N/A
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		N/A
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
	1a 872		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
	1c	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 956		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		N/A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		N/A
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		N/A
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		N/A
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		N/A
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		N/A
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		N/A
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		N/A
	Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		N/A
c	Enter the amount of reserves on hand		N/A
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		N/A
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year		X
	If "Yes," see instructions and file Form 4720, Schedule N.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
	If "Yes," complete Form 4720, Schedule O.		

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII X

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Tracey D. Brown ----- Chief Executive Officer	36.90 0.60			X			740,424		297,583	
(2) Eloise Scavella ----- Chief Operating and Strategy Officer	37.50 0.00				X		351,489		34,838	
(3) John Agos ----- Chief Strategic Development Officer	37.50 0.00				X		299,585		42,037	
(4) William Cefalu (ended 8/15/19) ----- Chief Scientific, Medical & Mission Officer	37.40 0.10				X		290,418		28,732	
(5) Vignesh Clingam (effective 2/28/19 ended 11/19) ----- Chief Marketing & Digital Officer	37.50 0.00				X		304,518		11,087	
(6) Charlotte M. Carter ----- Chief Financial Officer	36.90 0.60			X			279,844		26,353	
(7) Linda Cann ----- Sr Vice President, Professional Services	37.50 0.00				X		211,011		48,286	
(8) Paul Nalbandian ----- Assoc. Publisher, Advertising Sales & Sponsor	37.50 0.00					X	223,979		29,908	
(9) Sean McDonough ----- Vice President & General Counsel	37.50 0.00					X	214,573		14,744	
(10) Anthony Webster (ended 9/10/19) ----- Chief Human Resources Officer	37.50 0.00				X		200,403		21,436	
(11) LaShawn Mclver ----- SVP, Government Affairs, Advocacy & Community In	37.50 0.00					X	187,644		32,873	
(12) Tricia Cedotal ----- VP Corporate Alliances	37.50 0.00					X	187,611		20,086	
(13) Roy Furman ----- Medical Director, Quality Improvement	37.50 0.00					X	192,292		12,084	
(14) Tony Chiles (ended 9/20/19) ----- Chief Information Officer	37.50 0.00				X		172,278		29,585	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Jeanine Jones VP, HR Operations	37.50 0.00				X			178,382	20,028	
(16) Elaine Curran VP Development	37.50 0.00				X			175,357	19,033	
(17) Christa Wilson VP, Information Technology	37.50 0.00				X			156,327	18,258	
(18) David Herrick, MBA Chair of the Board	6.00	X		X						
(19) Louis H. Philipson, MD, PhD President, Medicine & Science	6.00	X		X						
(20) Gretchen Youssef, MS, RD, CDE President, Health Care & Education	6.00	X		X						
(21) Brian Bertha, JD, MBA Secretary-Treasurer	6.00	X		X						
(22) Umesh Verma Chair of the Board-Elect	2.00	X		X						
(23) Robert H. Eckel, MD President-Elect, Medicine & Science	2.00	X		X						
(24) Mary de Groot, Ph.D President-Elect, Health Care & Education	2.00	X		X						
(25) Martha Parry Clark, MBA Secretary/Treasurer-Elect	2.00	X		X						
1b Subtotal							4,366,135	0	706,951	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							4,366,135	0	706,951	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **85**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
BLACKBAUD, INC 11501 Domain Drive, Suite 200 Austin, TX 78758	Constituent Records Applica	2,443,826
CHAPMAN CUBINE & HUSSEY I 2000 15th Street North, Suite 550 Arlington, VA 2220	Professional fundraising and	725,819
CONTRAVENT LLC 916 South Main Street Salt Lake City, UT 84101	Digital Marketing	598,440
SPECTRUM SCIENCE COMMUN 2001 Pennsylvania Ave NW, 2nd Floor Washington,	Health Communications	539,550
RICOH USA, INC 70 Valley Stream Parkway Malvern, PA 19355	Printing Services	479,065

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **35**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII.

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 3,364,611					
	b	Membership dues	1b 0					
	c	Fundraising events	1c 18,548,172					
	d	Related organizations	1d 0					
	e	Government grants (contributions)	1e 1,873,884					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 85,168,664					
	g	Noncash contributions included in lines 1a-1f	1g \$ 4,170,335					
	h	Total. Add lines 1a-1f ▶		108,955,331				
	Program Service Revenue				Business Code			
2a		Subscriptions	511120	9,604,470	9,604,470	0	0	
b		Registration	611710	10,641,500	10,641,500	0	0	
c		Sales of Material	511130	2,138,452	2,138,452	0	0	
d		Booth Rental	611710	4,859,545	0	0	4,869,545	
e		Other Program Service Revenue	900099	1,206,269	1,206,269	0	0	
f		All other program service revenue		0	0	0	0	
g		Total. Add lines 2a-2f ▶		28,450,236				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		1,555,345	0	0	1,555,345	
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0	
	5	Royalties ▶		1,796,991	0	0	1,796,991	
	6a	Gross rents	(i) Real (ii) Personal					
			6a	0	0			
			6b	0	0			
	c	Rental income or (loss)	6c	0	0			
	d	Net rental income or (loss) ▶		0	0	0	0	
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other					
			7a	53,500,699	27,719			
			7b	53,553,071	0			
			7c	-52,372	27,719			
	d	Net gain or (loss) ▶		-24,653	0	0	-24,653	
	8a	Gross income from fundraising events (not including \$ 18,548,172 of contributions reported on line 1c). See Part IV, line 18						
			8a	3,743,929				
8b			3,743,929					
c	Net income or (loss) from fundraising events ▶		0		0	0		
9a	Gross income from gaming activities. See Part IV, line 19							
		9a	0					
		9b	0					
c	Net income or (loss) from gaming activities ▶		0	0	0	0		
10a	Gross sales of inventory, less returns and allowances							
		10a	0					
		10b	0					
c	Net income or (loss) from sales of inventory ▶		0	0	0	0		
Miscellaneous Revenue				Business Code				
	11a	Advertising Income	541800	2,583,185	0	2,583,185	0	
	b	Catalog Sales Income - Gift of Hope	454110	37,459	0	37,459	0	
	c	Abstract Fees & Permissions Income	900099	576,963	576,963	0	0	
	d	All other revenue		2,835,635	2,835,635	0	0	
e	Total. Add lines 11a-11d ▶		6,033,242					
12	Total revenue. See instructions. ▶			146,766,492	27,003,289	2,620,644	8,197,228	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21	17,700,317	17,700,317		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	55,572	55,572		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	16,840	16,840		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	4,795,200	3,163,931	339,823	1,291,446
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	35,674,247	21,639,871	4,888,134	9,146,242
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,296,827	784,288	178,015	334,524
9	Other employee benefits	5,381,305	3,301,046	713,858	1,366,401
10	Payroll taxes	3,046,169	1,864,583	390,956	790,630
11	Fees for services (nonemployees):				
a	Management	0	0	0	0
b	Legal	236,129	54,230	171,431	10,468
c	Accounting	327,534	6,551	319,345	1,638
d	Lobbying	180,108	180,108	0	0
e	Professional fundraising services. See Part IV, line 17	687,202			687,202
f	Investment management fees	210,643	0	210,643	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	8,962,454	7,134,661	569,955	1,257,838
12	Advertising and promotion	4,766,027	2,208,217	3,543	2,554,267
13	Office expenses	2,962,916	1,656,568	574,969	731,379
14	Information technology	4,503,642	3,088,082	168,160	1,247,400
15	Royalties	47,123	47,123	0	0
16	Occupancy	8,753,148	6,343,892	801,646	1,607,610
17	Travel	2,854,940	2,203,148	147,635	504,157
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	6,012,311	5,937,803	3,640	70,868
20	Interest	110	80	10	20
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	3,678,175	2,243,773	478,059	956,343
23	Insurance	663,361	442,930	73,403	147,028
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Supplies	3,896,224	3,717,692	19,307	159,225
b	Postage and Shipping	5,633,719	2,725,060	16,122	2,892,537
c	Printing and Publications	10,372,620	6,081,611	98,712	4,192,297
d	Data Processing	1,248,572	742,718	579	505,275
e	All other expenses	3,696,915	1,958,515	860,222	878,178
25	Total functional expenses. Add lines 1 through 24e	137,660,350	95,299,210	11,028,167	31,332,973
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	18,674,241	4,764,747	292,931	13,616,564

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X.

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	10,325,940	1	1,147,719
	2 Savings and temporary cash investments	273,979	2	6,957,683
	3 Pledges and grants receivable, net	43,752,266	3	43,882,563
	4 Accounts receivable, net	2,529,580	4	2,228,497
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	2,476,250	8	2,742,370
	9 Prepaid expenses and deferred charges	2,984,753	9	3,460,727
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 49,298,212		
	b Less: accumulated depreciation	10b 37,588,597	13,823,298	10c 11,709,615
	11 Investments—publicly traded securities	37,395,043	11	33,368,795
	12 Investments—other securities. See Part IV, line 11	9,607,301	12	10,549,883
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	19,298,183	15	19,438,163
16 Total assets. Add lines 1 through 15 (must equal line 33)	142,466,593	16	135,486,015	
Liabilities	17 Accounts payable and accrued expenses	24,291,801	17	23,073,719
	18 Grants payable	0	18	0
	19 Deferred revenue	9,123,278	19	8,367,853
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	50,215,101	25	32,831,409
	26 Total liabilities. Add lines 17 through 25	83,630,180	26	64,272,981
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-2,177,792	27	-1,776,039
	28 Net assets with donor restrictions	61,014,205	28	72,989,073
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
32 Total net assets or fund balances	58,836,413	32	71,213,034	
33 Total liabilities and net assets/fund balances	142,466,593	33	135,486,015	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	146,766,492
2	Total expenses (must equal Part IX, column (A), line 25)	2	137,660,350
3	Revenue less expenses. Subtract line 2 from line 1	3	9,106,142
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	58,836,413
5	Net unrealized gains (losses) on investments	5	3,270,479
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	71,213,034

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization American Diabetes Association	Employer identification number 13-1623888
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt 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)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A) N/A						
(B)						
(C)						
(D)						
(E)						
Total					0	0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	135,304,032	122,553,876	102,801,334	118,306,745	108,955,331	587,921,318
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	135,304,032	122,553,876	102,801,334	118,306,745	108,955,331	587,921,318
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						587,921,318

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	135,304,032	122,553,876	102,801,334	118,306,745	108,955,331	587,921,318
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,560,225	4,337,308	4,063,059	4,492,015	3,352,336	20,804,943
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	33,439	34,645	45,752	2,730	0	116,566
11 Total support. Add lines 7 through 10						608,842,827
12 Gross receipts from related activities, etc. (see instructions)					12	195,025,409
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	96.56%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	96.66%
16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0	0	0	0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	0	0	0	0	0	0
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	0	0	0	0	0	0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	0.00%

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization American Diabetes Association	Employer identification number 13-1623888
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. N/A

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ _____

3 Volunteer hours for political campaign activities (see instructions) _____

Part I-B Complete if the organization is exempt under section 501(c)(3). N/A

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). N/A

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____ **0**

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). N/A

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0	0												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	0	0												
c	Total lobbying expenditures (add lines 1a and 1b)	0	0												
d	Other exempt purpose expenditures	0	0												
e	Total exempt purpose expenditures (add lines 1c and 1d)	0	0												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	0	0												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	0	0												
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0												
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0	0												
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	0	0	0	0	0
b Lobbying ceiling amount (150% of line 2a, column(e))					0
c Total lobbying expenditures	0	0	0	0	0
d Grassroots nontaxable amount	0	0	0	0	0
e Grassroots ceiling amount (150% of line 2d, column (e))					0
f Grassroots lobbying expenditures	0	0	0	0	0

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	0
d Mailings to members, legislators, or the public?	X		65,520
e Publications, or published or broadcast statements?		X	0
f Grants to other organizations for lobbying purposes?		X	0
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		584,291
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		75,540
i Other activities?		X	0
j Total. Add lines 1c through 1i			725,351
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			0
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			0
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	0
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part II-B The American Diabetes Association's advocacy efforts and achievements are at the core of

 creating effective and lasting change for people living with and at risk for diabetes. Raising our

 voices from Capitol Hill to state legislatures across the country, our dedicated Diabetes Advocates

 continue to drive momentum in our ongoing fight to stop diabetes. Our advocacy work gives people

 with diabetes, their families and health care professionals the power to influence public policy

 issues that affect people with diabetes at the local, state and national levels. Our primary goals

 are: to increase federal and state funding for diabetes prevention, treatment and research; to

Part IV Supplemental Information *(continued)*

prevent diabetes; to improve access to adequate and affordable health care; to end the
discrimination people with diabetes face at school, work and elsewhere in their lives; to achieve
health equity. In 2019, the ADA achieved: Increased funding for National Institute of Diabetes and
Digestive and Kidney Diseases by over \$84 million, maintained funding for the Division of Diabetes,
and increased funding for the National Diabetes Prevention Program by \$2 million for federal Fiscal
Year 2020. Participated in hundreds of meetings, briefings; events; and other actions in support of
our legislative and regulatory priorities which led to 100 legislative and regulatory wins in states
across the country. Achieved 55 state-level wins that increase accessibility to affordable and
adequate health care. Achieved 42 state-level wins that advance prevention policies and increase
health equity. Provided review and language for Safe at School legislation and regulation in seven
states ensuring laws and regulations align with American Diabetes Association standards and
principles. Mobilized Diabetes Advocates through our Congress at Home initiative to host nearly 40
in-district meetings across the country with congressional members and their staff. Convened nearly
200 people living with and affected by diabetes, health care professionals, researchers at Call to
Congress to advocate on Capitol Hill in Washington, D.C. for increased federal funding for diabetes
research, affordable insulin and health care access and coverage and more. Achieved the goal of
further congressional hearings on insulin affordability, delivering expert testimony to the Senate
Finance Committee and the House Energy and Commerce Committee's Subcommittee on Oversight and
Investigation about the rising cost of this lifesaving drug. Secured an additional 181,000
signatures for ADA's insulin affordability petition – for a total of over 432,000 signatures. This
ongoing campaign included the launch of a new animated video to explain the complexities of the
insulin supply chain. Achieved 37 state level wins protecting or improving health care for millions
of people with diabetes in states across the country. Continued efforts to protect the Affordable
Care Act (ACA) by filing an amicus (friend of the court) brief to the U.S. Court of Appeals for the
Fifth Circuit defending the ACA against a lawsuit challenging the law's constitutionality. The
brief, which was jointly filed with numerous other patient advocacy organizations, brought to the
court's attention the ADA's significant interest in protecting the ACA for Americans impacted by
diabetes. Built support in the House and Senate for the Expanding Access to Diabetes Self-Management

Part IV Supplemental Information *(continued)*

Training Act, which would remove barriers to Diabetes Self-Management Education and Support in
Medicare and encourage beneficiaries to participate in such programs. Educated and inspired action
among our 525,000+ advocates in more than 110 federal, state and legal advocacy calls to action and
biweekly newsletter updates throughout the year. Improved access to continuous glucose monitors used
with a mobile device for Medicare beneficiaries. Increased access to nutritious foods through
healthy food financing, school-based meal assistance programs, and other state-level health equity
legislation that impacts communities across the country.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: American Diabetes Association; Employer identification number: 13-1623888

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. N/A

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. N/A

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|--------|
| c Beginning balance | 0 |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | 0 |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	22,635,671	22,899,249	22,534,220	22,460,102	22,540,712
b Contributions	80,442	4,547	182,068	-3,646	-2,371
c Net investment earnings, gains, and losses	2,949,834	1,449,845	2,556,516	1,972,812	1,593,023
d Grants or scholarships	2,214,213	1,717,970	2,373,555	1,895,048	1,671,262
e Other expenditures for facilities and programs	0	0	0	0	0
f Administrative expenses	0	0	0	0	0
g End of year balance	23,451,734	22,635,671	22,899,249	22,534,220	22,460,102

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment %
 - b** Permanent endowment 21%
 - c** Term endowment 79%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|------------------------------------|-----|----|
| (i) Unrelated organizations | X | |
| (ii) Related organizations | X | |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Yes No
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	4,500		4,500
b Buildings	0	0	0	0
c Leasehold improvements	0	6,334,906	2,244,320	4,090,586
d Equipment	0	16,245,961	13,478,019	2,767,942
e Other	0	26,712,845	21,866,258	4,846,587
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				11,709,615

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely held equity interests	0	
(3) Other Perpetual Trusts	10,549,883	FMV
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	10,549,883	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Due From Property Title Holding Corporation	6,620,288
(2) Investment in Net Assets of American Diabetes Association Property Title Holding Corporation	12,817,875
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	19,438,163

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Due to American Diabetes Association Research Foundation	32,831,409
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	32,831,409

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . . .

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	155,962,029
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	3,270,479	
b	Donated services and use of facilities	2b	2,837,563	
c	Recoveries of prior year grants	2c	0	
d	Other (Describe in Part XIII.)	2d	3,935,511	
e	Add lines 2a through 2d			2e 10,043,553
3	Subtract line 2e from line 1			3 145,918,476
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	210,643	
b	Other (Describe in Part XIII.)	4b	637,373	
c	Add lines 4a and 4b			4c 848,016
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 146,766,492

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	149,563,239
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	2,837,563	
b	Prior year adjustments	2b	0	
c	Other losses	2c	-674,330	
d	Other (Describe in Part XIII.)	2d	27,610,366	
e	Add lines 2a through 2d			2e 29,773,599
3	Subtract line 2e from line 1			3 119,789,640
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	210,643	
b	Other (Describe in Part XIII.)	4b	17,660,067	
c	Add lines 4a and 4b			4c 17,870,710
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 137,660,350

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V Line 4 The following was disclosed in the consolidated financial statements related

to the intended use of the Association endowment funds: The Association has adopted an investment policy for endowment assets that provides continued financial stability for the Association and a revenue stream for spending on the Association mission.

Part V Line 4 To fulfill this mission, the American Diabetes Association funds research, publishes scientific findings, provides information and other services to people with diabetes, their families, health professionals, and the public.

Part X Line 2 The following was disclosed related to uncertain tax positions in the audited financial statements: The American Diabetes Association and the American Diabetes Association Research Foundation, Inc. are generally exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code (the Code) and charitable contributions to these organizations qualify for tax deductions as described in the Code. The American Diabetes Association Property Title Holding Corporation is generally exempt from income taxes under

Part XIII Supplemental Information (continued)

Section 501(c)(2) of the Code. These entities are subject to taxation on any net unrelated business income and have been classified as organizations that are not private foundations under Section 509(a) of the Code. The Association recognizes the effect of income tax positions only if those positions more likely than not would not be sustained upon examination by the Internal Revenue Service. The Association has analyzed the tax positions taken and has concluded that as of December 31, 2019, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the consolidated financial statements.

Part XI Line 2d Donations reported by the American Diabetes Association Research Foundation's audited financial statement (EIN 54-1734511) \$3,291,589. Contributed services reported by the American Diabetes Association Research Foundation, Inc. (EIN 54-1734511) \$643,924.

Part XI Line 4b Management fee earned from the American Diabetes Association Research Foundation, Inc. (EIN 54-1734511) \$637,373.

Part XII Line 2d American Diabetes Association Research Foundation, Inc. (EIN 54-1734511) expenses \$27,610,366.

Part XII Line 4b Grant to the American Diabetes Association Research Foundation, Inc. (EIN 54-1734511) \$17,660,067.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

American Diabetes Association

Employer identification number

13-1623888

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Europe (Including Iceland and Greenland)	0	0	Grantmaking		16,840
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	0	0			16,840
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			16,840

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Europe (Including Iceland and	See Part V	16,840	Check	0		
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **1**

3 Enter total number of other organizations or entities **0**

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I Line 3 The Association awarded a grant to the International Diabetes Foundation

(IDF) as part of the Association's donor advised fund program. The grantee's use of the fund is monitored through the Association's membership in the IDF.

Part II Line 1 The primary purpose of the grant is for the annual contribution from the

Wendell Mayes donor advised fund to the International Diabetes Federation to support the Mary Jane Mayes scholar program.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

American Diabetes Association

Employer identification number

13-1623888

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 Chapman Cubine and Hussey, Inc. 2000 N 15th Street Arlington VA 22201	See Part IV		X	13,925,670	566,400	13,359,270
2 Automotive Recovery Services, Inc. 13085 Hamilton Crossing Blvd Carmel IN 4	See Part IV	X		274,825	89,149	185,676
3 Gordon and Schwenkmeyer, Inc. 20300 S Vermont Ave Torrance CA 90502	Telemarketing		X	26,480	35,676	0
4 Telefund, Inc. 186 Lincoln Street Boston MA 02111	Telemarketing		X	1,500	14,611	0
5				0	0	0
6				0	0	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
Total				14,228,475	705,836	13,544,946

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS
 , MT, NC, ND, NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		Step Out (event type)	Tour de Cure (event type)	9 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	2,539,697	16,119,055	3,633,349	22,292,101
	2	Less: Contributions	2,139,337	13,624,343	2,784,492	18,548,172
	3	Gross income (line 1 minus line 2)	400,360	2,494,712	848,857	3,743,929
Direct Expenses	4	Cash prizes	0	0	0	0
	5	Noncash prizes	20,329	243,624	21,425	285,378
	6	Rent/facility costs	257,485	1,139,004	247,175	1,643,664
	7	Food and beverages	11,796	439,156	381,995	832,947
	8	Entertainment	17,992	56,647	102,112	176,751
	9	Other direct expenses	92,758	616,280	96,151	805,189
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				(3,743,929)
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				0	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		Revenue	1	Gross revenue	
Direct Expenses	2	Cash prizes			0
	3	Noncash prizes			0
	4	Rent/facility costs			0
	5	Other direct expenses			0
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				(0)
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				0

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ 0 and the amount of gaming revenue retained by the third party ▶ \$ _____ 0

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____ 0

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____ 0

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part I Line 2(b)(1) Chapman Cubine and Hussey, Inc. activities are strategic services including account and project management, data processing analysis and reporting, meeting, and/or project services requested by ADA.

Part I Line 2(b)(2) Automotive Recovery Services, Inc. activities are advertising, acquisition and disposal of donated vehicles solicited by American Diabetes Association.

Part I Line 2(b)(2) Upon sale of the donated vehicle, the funds are deposited into the Automotive Recovery Services, Inc. bank account. The net proceeds from the donated car are then sent by Automotive Recovery Services, Inc. to the American Diabetes Association bank account.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
 Attach to Form 990.

OMB No. 1545-0047
2019
**Open to Public
Inspection**

Name of the organization
Employer identification number

American Diabetes Association

13-1623888

Part I General information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) American Diabetes Association Research Foundation, Inc. 2451 Crystal Drive, Suite 900, Arlington, VA 22202	54-1734511	501 (c)(3)	17,660,067	0			Research
(2) Lions Camp Merrick 11855 Holly Lane, Suite 104, Waldorf, MD 20601	52-1289731	501 (c)(3)	30,000	0			Camperships
(3) Cooper Green Mercy Health Services 1515 6th Avenue South, Birmingham, AL 35233	63-0658867	501 (c)(3)	10,250	0			Education and Development
(4) _____							
(5) _____							
(6) _____							
(7) _____							
(8) _____							
(9) _____							
(10) _____							
(11) _____							
(12) _____							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3

3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1	Lecture Honoraria	8	50,000	0		
2	Travel Scientific Conferences	6	5,572	0		
3						
4						
5						
6						
7						

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I Line 2 (Related to Research): The American Diabetes Association provides grant funding for Research grants to the American Diabetes Association Research Foundation. The American Diabetes Association closely monitors the use of all grant funds. Each grantee is required to submit an Annual Progress Report, which includes a scientific and a financial portion, 30 days after the end of each previously committed funding year. Each year of funding after the first is contingent upon approval of the Annual Progress Report and the availability of funds. If the complete report is not received within 90 days after the due date, payments will not be disbursed until all reporting requirements have been met. After the completion of the final year of the grant, a Cumulative Final Report, which includes a scientific and financial portion, is due within 60 days after the expiration date of the grant. If the complete final report is not received by the due date, the grantee will not be eligible to apply for any future American Diabetes Association Research Foundation awards until the obligations for the award are complete. This process is monitored and reviewed by the American Diabetes Association Scientific/Medical Management for award status and compliance.

Part I Line 2 (Related to Camps): The American Diabetes Association continues to be the world's largest provider of camps for children

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

with diabetes to help ensure the wellbeing of families affected by diabetes. The Association provides grants, scholarships and targeted youth programs for persons with diabetes. Each summer, thousands of children have the opportunity to spend time at Diabetes Camp, meeting other children with diabetes and sharing their experiences, challenges, hopes, and dreams. In 2019, the American Diabetes Association hosted 79 camp sessions in 25 states serving over 5,500 campers with Type 1, Type 2, and over 3,000 participants at-risk for Type 2 diabetes. In addition, more than 2,000 volunteers made camp possible by donating their time and expertise. Camp provides an outdoor recreational experience in which the child (for children with diabetes ages 4-17) can develop as a person while including informal education about the management of diabetes. Children are carefully supervised by a staff of doctors, nurses, dietitians, and other volunteers and staff. Program Evaluation and outcome measurement provide valuable data to the Association regarding camp programs and how to improve them. An assessment/planning meeting including camp volunteers and staff leadership is held within two months of the conclusion of the camp season. At this time, camp results are evaluated and compared to goals. The strengths and weaknesses of the camp program, opportunities for growth and improvement, emerging issues and needs and the viability of continuation/initiation of new

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

programs are evaluated.

Part II Line 2 (Related to Education): The American Diabetes Association is committed to preventing diabetes. The Diabetes Prevention Program (DPP) was a major multicenter clinical research study, funded in part by the American Diabetes Association, aimed at discovering whether modest weight loss through dietary changes and increased physical activity or treatment with the oral diabetes drug metformin (Glucophage) could prevent or delay the onset of type 2 diabetes in study participants. The DPP found that participants who lost a modest amount of weight through dietary changes and increased physical activity sharply reduced their chances of developing diabetes. Taking metformin also reduced risk, although less dramatically. The DPP's results indicate that millions of high-risk people can delay or avoid developing type 2 diabetes by losing weight through regular physical activity and a diet low in fat and calories. Weight loss and physical activity lower the risk of diabetes by improving the body's ability to use insulin and process glucose. The DPP contributed to a better understanding of how diabetes develops in people at risk and how they can prevent or delay the development of diabetes by making behavioral changes leading to weight loss. These findings are reflected in recommendations from the American

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
 Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Diabetes Association for the prevention or delay of type 2 diabetes, which stress the importance of lifestyle changes and weight loss.

Building on the success of the DPP, the Centers for Disease Control (CDC) led National Diabetes Prevention Program is an evidence-based

lifestyle change program for preventing type 2 diabetes. The year-long program helps participants make real lifestyle changes such as

eating healthier, including physical activity into their daily lives, and improving problem-solving and coping skills.

Part III Line 1,2 Each year, the American Diabetes Association recognizes the outstanding contributions of individuals in the service

of the diabetes community through its National Achievement Awards. These awards are among the Association's most noteworthy and coveted

recognition opportunities, celebrating those whose significant contributions to our cause have been national in scope and impact. Past

recipients represent individuals or groups that have never faltered in their efforts to improve the lives of all people affected by

diabetes.

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2019

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

American Diabetes Association

13-1623888

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

	Yes	No
1b	X	
2	X	
4a	X	
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		N/A

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Tracey D. Brown	(i) 592,408	140,000	8,016	270,347	27,236	1,038,007	133,140
1 Chief Executive Officer	(ii)					0	
Charlotte M. Carter	(i) 273,279	4,640	1,925	16,565	9,788	306,197	0
2 Chief Financial Officer	(ii)					0	
Eloise Scavella	(i) 346,039	4,640	810	25,572	9,266	386,327	0
3 Chief Operating and Strategy Officer	(ii)					0	
Vignesh Clingam (effective 2/28/19)	(i) 172,531	126,885	5,102	0	11,087	315,605	0
4 Chief Marketing & Digital Officer	(ii)					0	
Christa Wilson	(i) 153,227	0	3,101	9,252	9,006	174,586	0
5 VP, Information Technology	(ii)					0	
William Cefalu (ended 8/15/19)	(i) 286,279	0	4,139	16,341	12,391	319,150	0
6 Chief Scientific, Medical & Mission Officer	(ii)					0	
Jeanine Jones	(i) 173,912	0	4,470	10,492	9,536	198,410	0
7 VP, HR Operations	(ii)					0	
LaShawn McIver	(i) 186,763	0	881	5,867	27,006	220,517	0
8 SVP, Government Affairs, Advocacy	(ii)					0	
Elaine Curran	(i) 171,829	0	3,528	10,441	8,592	194,390	0
9 VP Development	(ii)					0	
Anthony Webster (ended 9/10/19)	(i) 187,690	0	12,713	8,865	12,571	221,839	0
10 Chief Human Resources Officer	(ii)					0	
Linda Cann	(i) 207,045	0	3,966	30,818	17,468	259,297	0
11 Sr Vice President, Professional Services	(ii)					0	
Roy Furman	(i) 187,121	0	5,171	11,037	1,047	204,376	0
12 Medical Director, Quality Improvement	(ii)					0	
Sean McDonough	(i) 207,562	4,640	2,370	12,496	2,248	229,316	0
13 Vice President & General Counsel	(ii)					0	
Paul Nalbandian	(i) 159,736	61,776	2,467	12,635	17,273	253,887	0
14 Assoc. Publisher, Advertising Sales & Marketing	(ii)					0	
John Agos	(i) 245,396	50,000	4,189	15,752	26,285	341,622	0
15 Chief Strategic Development Officer	(ii)					0	
Tricia Cedotal	(i) 180,066	4,640	2,905	11,226	8,860	207,697	0
16 VP Corporate Alliances	(ii)					0	

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I Line 1a Payments related to additional pension benefits are grossed up for individual tax reporting purposes.

Part II Line 6 William Cefalu, Chief Scientific, Medical and Mission Officer's employment with the American Diabetes Association ended on August 15, 2019.

Part II Line 4 Vignesh Ciingam, Chief Marketing & Digital Officer's employment with the American Diabetes Association ended on November 15, 2019.

Part II Line 17 Tony Chiles, Chief Information Officer's employment with the American Diabetes Association ended on September 20, 2019.

Part II Line 10 Anthony Webster, Chief Human Resources Officer's employment with the American Diabetes Association ended on September 10, 2019.

Part I Line 4a Anthony Webster, Chief Human Resources Officer, received a severance payment in the amount of \$8,369.

Part I Line 4b Linda Cann, SVP Professional Services, is compensated by the American Diabetes Association and contributed \$18,208 to its supplemental 457(f) retirement plan.

Part I Line 4b Tracey Brown, Chief Executive Officer, is compensated by the American Diabetes Association and contributed \$45,297 to its supplemental 457(f) retirement plan.

Part I Line 4b Eloise Scavella, Chief Operating & Strategy Officer, is compensated by the American Diabetes Association and contributed \$16,950 to its supplemental 457(f) retirement plan.

Continuation Sheet for Schedule J (Form 990)

Name of the organization

American Diabetes Association

Employer identification number

13-1623888

Part II Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(iv) 1099-MISC compensation				
17 Tony Chiles (ended 9/20/19) Chief Information Officer	170,804	0	1,474	9,111	20,475	201,864	0	
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
32								
33								

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization American Diabetes Association	Employer identification number 13-1623888
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Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	547	185,513	See Part II
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	100	914,883	Fair Market Value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies	X	66,963	3,069,939	Fair Market Value
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		0
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		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Form	Part	Section	Line	Explanation
1	Form 990	Part III	4	<p>Connected for Life</p> <p>Today, more than 122 million Americans in the United States have diabetes or prediabetes—an invasive, unrelenting and debilitating disease that spans all ages, geography and educational levels. This chronic disease targets children, the elderly and minority populations more than others and costs the United States \$327 billion dollars each year in lost productivity. It is a global epidemic that contributes to heart disease, stroke, nerve and kidney disease and vision loss.</p> <p>The American Diabetes Association is the only organization dedicated specifically to the research, education and advocacy required to improve the lives of the 34 million adults and children in the U. S. with diabetes and the 88 million people with prediabetes. For 79 years, we have been working on the frontlines to educate at-risk populations, protect the rights of people with diabetes at work, school and other aspects of daily life, pioneer clinical and research breakthroughs and foster a pipeline of the best and brightest scientists. From research labs to the halls of the Capitol to the offices of health care practitioners to communities nationwide, we are there. We are bending the curve to help people living with diabetes and their families thrive. Why? Because we envision a <i>life free of diabetes and all its burdens</i>, which is fueled by our mission to <i>prevent and cure diabetes and to improve the lives of all people affected by diabetes</i>.</p> <p>DIABETES RESEARCH</p> <p>Diabetes is an extremely complex disease, caused by a combination of various genetic and environmental factors that progressively lead to an inability to produce or effectively utilize insulin. The complexity of causes conspiring to diminish the body's production or response to insulin, leading to high blood glucose and eventual development of diabetes, makes finding a single cure particularly difficult. While a cure has been elusive, critical research efforts in recent decades have led to significantly improved patient care, resulting in fewer complications and better health outcomes for individuals with diabetes.</p> <p>As a leader in diabetes research, and the only organization dedicated specifically to the research, education and advocacy required to improve the lives of all people with diabetes, the American Diabetes Association funds critical, innovative diabetes research and invests in promising scientists early in their careers. Our direct involvement in diabetes research extends back to the 1940s when Dr. Charles H. Best, one of four scientists credited with discovering insulin, provided the American Diabetes Association with the framework and early leadership for a formalized diabetes research program.</p> <p>Since our Research Program's inception in 1952, we have been the leader in funding cutting-edge diabetes research, supporting more than 4,800 research projects and investing more than \$860 million in diabetes research. In 2019, the ADA supported 295 new and continuing research projects at 118 leading research institutions across the United States. The projects cover the broad spectrum of research approaches, including basic, clinical and translational science and address all types of diabetes, diabetes-related disease states and complications.</p> <p>The primary goals of the ADA's Research Program are to:</p> <ul style="list-style-type: none"> • Support the highest quality science across the broad spectrum of diabetes research. • Support investigators early in their careers to encourage them to dedicate their efforts to diabetes research. • Support innovative research with a high potential to have a significant impact for patients with diabetes. <p>Peer Review Process</p> <p>One of the factors that sets American Diabetes Association-funded research apart and ensures that we are supporting the very best science is peer review. Peer review is a process whereby grant applications are reviewed and evaluated by individuals who are experts in the field (or "peers" of the individual submitting the grant). ADA grant applications all undergo peer review by three or more volunteer experts who are themselves diabetes researchers. Reviewers provide both a score and detailed comments regarding the strengths and weaknesses of each grant they review. Scores from all reviewers for each grant are averaged to arrive at a composite merit score that is then used to determine which grants to support.</p> <p>Types of Research Awards</p> <p>Research awards are divided into four major categories that reflect our research goals and priorities, provide extraordinary opportunities for researchers from diverse backgrounds, and foster the professional development of young scientists interested in diabetes research. The categories are: Investigator-Initiated Awards (Core Program), Pathway to Stop Diabetes, Collaborative Targeted Research, and Research Co-Support. Approximately 80 percent of American Diabetes Association-funded research falls under the Core Research Awards. The ADA uses a single annual grant application cycle for its Core Research Program, featuring a streamlined grant portfolio. In 2019, a total of 609 research grant applications were submitted from scientists based at institutions across the United States.</p> <p>ADA-supported researchers made significant progress in understanding how diabetes develops and progresses, and in identifying new ways to combat the disease.</p> <ul style="list-style-type: none"> • A new way to prevent immune cells from attacking insulin-producing beta-cells — Replacing insulin-producing beta-cells that have been lost in people with type 1 diabetes is a promising strategy to restore control of glucose levels. However, because the autoimmune disease is a continuous process, replacing beta-cells results in another immune attack if immunosorbent drugs are not used, which carry significant side-effects. This year, ADA-funded researcher Dr. Jianxun Song reported on the potential of an immunotherapy he developed that prevents immune cells from attacking beta-cells and reduces inflammatory processes. This immunotherapy offers several potential benefits, including eliminating the need for immunosuppression, long-lasting effects, and the ability to customize the treatment to each patient. The ability to suppress autoimmunity has implications for both prevention of type 1 diabetes and improving success rates of islet transplantation. • A novel therapy to prevent type 1 diabetes — The hormone insulin normally acts like a 'key', traveling through the blood and opening the cellular 'lock' to enable the entry of glucose into muscle and fat cells. However, in people with type 2 diabetes, the lock on the cellular door has, in effect, been changed, meaning insulin isn't as effective. This phenomenon is called insulin resistance. Scientists have long sought to understand what causes insulin resistance and develop therapies to enable insulin to work correctly again. In 2019, ADA-funded researcher Dr. Scott Summers determined an essential role for a molecule called ceramides as a driver of insulin resistance in mice. He also presented a new therapeutic strategy for lowering ceramides and reversing insulin resistance. His findings were published in one of the most prestigious scientific journals, <i>Science</i>. Soon, Dr. Summers and his team will attempt to validate these findings in humans, with the ultimate goal of developing a new medication to help improve outcomes in people with diabetes.

Form	Part	Section	Line	Explanation
2	Form 990	Part III	4 Continued...	<ul style="list-style-type: none"> Revealing the relationship between food insecurity and diabetes — Food insecurity is defined as the state of being without reliable access to a sufficient quantity of affordable, nutritious food. For people living with prediabetes or type 2 diabetes, food insecurity can be even more detrimental as it can result in an inability to follow nutritional guidelines, even if they are motivated to do so. In 2019, ADA-funded researcher Dr. Rebekah J. Walker conducted a study to determine the direct and indirect ways in which food insecurity influences glucose control and self-care behaviors. Her research determined that food insecurity was indirectly associated with A1C, and different self-care behaviors including diet, exercise and medication adherence. This year, she plans to test the effect of a culturally tailored food box to reduce food insecurity in African Americans with diabetes and improve outcomes. <p>Pathway to Stop Diabetes</p> <p>The American Diabetes Association's <i>Pathway to Stop Diabetes</i> initiative aims to inspire a new generation of diabetes researchers who are early in their career or are established but would like to expand their focus on diabetes research. Through awards of \$1.625 million over the course of five years, the program allows researchers to have the time and focus needed to explore new ideas. With a goal of funding 100 new diabetes researchers over the next decade, Pathway provides crucial support to individuals focusing on innovative ideas and transformational approaches that will lead to new discoveries in diabetes prevention and treatment.</p> <ul style="list-style-type: none"> Three new Pathway awardees began their research projects in January 2019. During the 2019 calendar year these new awardees, along with the 27 Pathway scientists who were continuing in their terms of Pathway funding, collectively published 30 high-impact original research manuscripts and seven reviews. They delivered 151 presentations at scientific meetings. Through 2019, all nine Pathway Initiator award recipients have secured their first independent faculty positions. Thirteen patent applications have been filed by Pathway awardees to date. These outcomes demonstrate that the Pathway initiative continues to exceed its objectives and progress toward our vision of bringing 100 brilliant scientists to diabetes research. Several exciting outcomes that have the potential to help patients with diabetes resulted from Pathway research in 2019. Dr. Zachary Knight identified a new pathway that regulates appetite which could help to explain the effectiveness of bariatric surgery to induce rapid weight loss and improve glucose control. Dr. Alexander Nectow discovered that a specific type of neuron in the brain potentially regulates energy expenditure and could be targeted to help with weight-loss. Dr. Sumita Pennathur and her team of researchers developed a new molecule with the potential to improve the durability and accuracy of continuous glucose monitoring. The Pathway scientists came together at the 6th annual Pathway to Stop Diabetes Symposium, held at the 79th Scientific Sessions in San Francisco, CA, where the newest cohort of Pathway awardees presented their project plans and progress to date. This exclusive symposium brought the awardees together with the Mentor Advisory Group, program sponsors, philanthropic supporters, and American Diabetes Association leadership. The 7th annual Pathway to Stop Diabetes grant competition was held in 2019. The Mentor Advisory Group reviewed 72 outstanding nominations and selected two new Pathway awardees who began their grants in January 2020. With selection of these new awardees, the Pathway program has supported 34 outstanding investigators in total. In 2019, the second group of scientists completed their terms of Pathway funding, which had started in 2015. These scientists, Mayland Chang, PhD, of the University of Notre Dame; Thomas Delong, PhD, of the University of Colorado, Denver; Zhen Gu, PhD, of the University of California, Los Angeles; and Stephen C.J. Parker, of the University of Michigan, all completed their fifth and final year of their awards. Each of them has already added substantially to our understanding of diabetes and diabetes risk, and their contributions will continue throughout their careers in diabetes science, because they are now set up for success in conducting the kind of innovative, transformative research that holds promise to ultimately stop the health crisis that is diabetes. <p>Scientific Sessions</p> <p>Held annually, Scientific Sessions exemplifies the American Diabetes Association's leadership role in the global diabetes community, while providing a critical platform for driving diabetes awareness. Scientific Sessions is the world's largest scientific and medical meeting focused on the latest basic and clinical science research related to diabetes and its complications.</p> <p>The 79th Scientific Sessions, held June 7-11, 2019 in San Francisco, California, brought together over 12,000 physicians, scientists, researchers, and health care providers. Over the course of five days, participants received exclusive access to more than 3,000 original research presentations, increasing their knowledge on the latest advances in diabetes research, care, and education. More than 3,000 abstracts were received. Of those received, 2,544 were presented as either Oral or Poster presentations. The remaining abstracts were published on the journal <i>Diabetes</i>® website as Published Only or not accepted for presentation by the Scientific Sessions Meeting Planning Committee.</p> <p>6th Annual Focus on Fellows</p> <p>The 6th Annual Focus on Fellows program was held in conjunction with the 79th Scientific Sessions. This meeting is dedicated to fostering growth/development of future diabetes clinicians, researchers and leaders and engage fellows early in their careers to encourage them to remain in the diabetes field.</p> <p>ADA Host Research Symposium with European Association for the Study of Diabetes (EASD)</p> <p>The ADA hosted a research symposium on Advancing Precision Diabetes Medicine in Madrid, Spain in October of 2019. The symposium, held in conjunction with the European Association for the Study of Diabetes, focused on the future of precision medicine in diagnosing, preventing, and treating diabetes. As part of the ADA's new Precision Medicine in Diabetes Initiative, this scientific meeting was designed to engage diverse stakeholders in incorporating and building the evidence base for the adoption of a precision medicine approach to diabetes. The ultimate goals of the initiative are to better predict who is at risk for diabetes, determine how best to diagnose for treatment, and identify ways to improve treatment outcomes and reduce the risk of diabetes complications.</p> <p>INFORMATION</p> <p>Saving Lives through Knowledge</p> <p>For people affected by or at risk for diabetes, having access to the most up-to-date tools and resources can literally make the difference between life and death. As a trusted leader, the American Diabetes Association works hard to ensure that those affected by and at risk for diabetes, their health care team as well as the general public receive targeted, timely and accurate information. We deliver resources that people can access any time in multiple formats—including our website for consumers and professionals, diabetes.org, our flagship social media channels, and our professional journals and publications.</p>

Form	Part	Section	Line	Explanation
3	Form 990	Part III	4 Continued...	<p>We focus our efforts on three areas:</p> <ol style="list-style-type: none"> 1. Raising awareness of diabetes as a serious disease. 2. Ensuring patients, providers and care givers have tools and resources to effectively treat and manage diabetes 3. Reaching diverse groups of people who are at risk for or have diabetes, their families and health care professionals, with the goal of reducing the incidence of diabetes and the impact of complications. <p>Center for Information</p> <p>The ADA's Center for Information (CFI) at 1-800-DIABETES, marks the very first stop for many of our constituents as they start their journey of living with diabetes. The CFI processed nearly 90,000 contacts from constituents, professional members and others in 2019. CFI helps to bend the curve every day by providing constituents with information and resources on prevention, nutrition and diabetes management, help with medications and supplies, discrimination issues, ADA events, assisting professional members and donors and much more!</p> <p>In 2019, CFI supported ADA's mission by:</p> <ul style="list-style-type: none"> • Helping nearly 90,000 contacts • Collecting a total of \$178,544 in donations • Distributing more than 30,000 packets of information • Processing 3,100 intakes for our Legal Advocacy team • Assisting over 6,000 contacts with information and resources for assistance with medications and supplies. In addition, established working relationships with Novo Nordisk and Eli Lilly to connect constituents who need financial assistance for their insulin directly to the Novo Nordisk Customer Care Center and the Lilly Diabetes Solution Center. • Handling logistics after the Living with Diabetes – Ask the Expert Series (assembled and mailed over 5,000 giveaways to Ask the Experts participants and assisted with over 500 unanswered questions from constituents). • Providing onsite support at Scientific Sessions <p>Digital Engagement</p> <p>We offer a variety of targeted and interactive online properties to connect with our consumer and professional audiences, while providing the latest diabetes-related information and news. Through our newly refreshed website, diabetes.org, our new blog (diabetes.org/blog) to our ever-growing presence on Facebook, Twitter, YouTube, and Instagram, the American Diabetes Association is connected to its constituents 24/7.</p> <p>Diabetes.org</p> <p>Our website for consumers and professionals, diabetes.org, is widely regarded as the most informative and credible diabetes and nutrition resource on the Internet. In 2019, the site had 25 million sessions, 34 million unique pageviews, and 15 million new users.</p> <p>Social Media</p> <p>The ADA's flagship social media channels continue to grow:</p> <ul style="list-style-type: none"> • Facebook fan base is now more than 740,000 • Twitter following is up to 145,000 • Pinterest following is over 15,000 • Instagram following is now over 35,000 • LinkedIn continues to be a dedicated marketing communications channel for the professional audiences. Our company page has more than 49,000 followers. • The ADA's 79th Scientific Sessions generated more than 340 million+ media impressions worldwide. • In August 2019, the ADA launched a new blog (diabetes.org/blog) to lift up the stories of real people living and thriving with diabetes. Over the four- and a-half months it was live in 2019, it received nearly 175,000 pageviews. • Constituent acquisition through digital channels continued to be a major focus for the ADA in 2019. The ADA continued promoting the new Facebook Fundraisers tool with great success, raising more than \$3 million in 2019. <p>Professional.diabetes.org</p> <p>DiabetesPro at professional.diabetes.org provides the latest resources in diabetes care and research for health care professionals and scientists. The mobile-friendly platform gives the ADA enhanced ability to deliver customized members-only content. DiabetesPro is the most advanced professional education website in any branch of medicine, giving those who have placed diabetes in the center of their careers the opportunity to stay informed and take advantage of various resources and educational offerings. Featured content includes:</p> <ul style="list-style-type: none"> • Diabetes meetings and continuing education opportunities • News • Clinical practice recommendations • Webcasts and podcasts • Journals and books • Research grants • Recognition programs • Professional section interest groups <p>Youth, Young Adult and Family Initiatives: Reaching Type 1 and Type 2 Diabetes Families</p> <p>Reaching People</p> <p>The American Diabetes Association continues to be the world's largest provider of camps for children with diabetes. The ADA hosted 57 summer Camp and winter camp sessions serving 5,827 children and teens and more than 10,000 loved ones.</p> <ul style="list-style-type: none"> • 2,236 campers were new in 2019 • 2,425 volunteers made these programs possible • 1,208 trained medical professionals served as medical, dietary and social work staff during the summer season • ADA also held two winter camps throughout the year, engaging parents and children who are newly diagnosed or new to the Camp community. • 5,219 of our 5,827 campers have Type 1 diabetes. All camps offer camp fee subsidies for participants of 50% or more. In addition to this subsidy, 24% of our campers received need-based financial aid and \$513,456 was awarded in 2019. This program ensures that the cost of camp is not a barrier for any family.

Form	Part	Section	Line	Explanation
4	Form 990	Part III	4 Continued...	<p>Gaining New Diabetes Management Skills After camp, 97% of campers were able to perform at least one diabetes management skill independently.</p> <ul style="list-style-type: none"> • Rotate injection sites: 17% increase • Draw up insulin without assistance: 12% increase • Recognize own low blood glucose levels: 10% increase • Gave own injections: 10% increase • Understand insulin to carb ratios: 13% increase • Checked for ketones: 13% increase • Changed pump site/sets: 17% increase <p>In addition,</p> <ul style="list-style-type: none"> • 69% of campers were always or often able to solve diabetes management problems after attending camp — a 17% increase from before Camp • Among all campers and across all areas, knowledge increased by 31% after camp • Nearly 30% of our youngest campers increased their knowledge of when to check blood sugar • 27% of parents and caregivers stated that their familial communication improved or significantly improved after their child attended Camp <p>Sharing Best Practices</p> <p>The Youth, Young Adult and Family Initiatives team hosted a conference in October 2019 to examine and address the needs of rapidly advancing medical technology and data with the support of The Leona M. and Harry B. Helmsley Charitable Trust. At the conference, 45 stakeholders, including leaders from the ADA's camp network, the Diabetes Education and Camping Association (DECA), industry representatives, ADA Youth and Family Initiative staff, and The Helmsley Charitable Trust convened in Arlington, Virginia to plan for the future. The goal was to share best practices and information to create a living document entitled, <i>Best Practices for the use of Diabetes Technology at Summer Camps</i>, and a set of training materials entitled, <i>Diabetes Basics</i> that are available for download at diabetes.org/summercamp.</p> <p>Engaging Partners</p> <p>Industry and professional partners contributed more than \$4 million in donated services and supplies. Top supporters included Novo Nordisk, Lilly Diabetes, Sanofi-Aventis, Direct Relief, Animas/LifeScan, Medtronic, Omnipod, Insulet, and Nova Diabetes Care (Camp supplies include, insulin, meters, pens/needles, strips, lancets and insulin pump supplies). Youth and Family Initiatives were supported nationally by the generosity of Novo Nordisk, The Leona M. and Harry B. Helmsley Charitable Trust, and Lilly Diabetes.</p> <p>Project Power</p> <p>The ADA continues to take on the growing rates of type 2 in youth with Project Power, our healthy lifestyle intervention program for children at risk for type 2 diabetes and their families.</p> <ul style="list-style-type: none"> • 3,866 participants in Project Power (600% growth in 2019) • 23 total programs (4 new in 2019) <p>Ask the Experts</p> <ul style="list-style-type: none"> • To address issues commonly faced by people living with diabetes, the American Diabetes Association developed a free education series focused on diabetes management. The monthly wellness series includes live Q&A with diabetes experts, aimed to reinforce and increase participant knowledge of and engagement in healthy lifestyle behaviors as well as provide a community where individuals can ask questions and hear from others who might share similar experiences. As part of the Know Diabetes by Heart initiative, this series provides tools and resources for people living with type 2 diabetes to learn how to reduce their risk of cardiovascular disease. • In 2019, experts connected with 6,141 participants who engaged for 20+ minutes on the phone or online. Many participants attended multiple events, with 32% of unique participants attending six or more. Participants were highly satisfied with events and experienced notable impact. • Across events, individual level knowledge increased 16% on average from before an event to after an event. On average, 23% of participants who had not done so previously, had a conversation with a healthcare provider about the link between heart disease and diabetes one month after attending an event. Additionally, 17% of participants who had not done so before, enrolled in a diabetes education program within one month after attending an event. <p>Diabetes Self-Management Support (DSMS)</p> <ul style="list-style-type: none"> • ADA launched the new Diabetes Support Initiative to identify and promote Diabetes Self-Management Support programs. ADA convened a subject matter expert workgroup to review, vet, and identify DSMS program curriculums and resources that meet the ADA criteria for support programming, align with the <i>Standards of Care</i>, and demonstrate significant positive outcomes. http://professional.diabetes.org/dsi • An online application platform was developed and a call for applications were submitted in March and July 2019 to review research-tested and practice-tested DSMS programs. 10 organizations' diabetes support program curriculums and resources were approved based on ADA diabetes support criteria. • ADA developed a new Diabetes Support Directory, a free online tool to help connect communities to a qualified, ADA-approved diabetes support program. The ADA-approved diabetes support programs currently listed on the Diabetes Support Directory are promoted to Education Recognition Programs, partner health clinics, community-based organizations, and health systems. http://professional.diabetes.org/dsdirectory • ADA has developed a Community Grants process to offer financial support to deliver ADA-approved diabetes support programs in high risk communities. ADA was awarded \$98,000 in grant funding from Janssen Pharmaceuticals to implement one of the ADA-approved diabetes support programs in partnership with one of our Education Recognition Programs / FQHC as a 2020 pilot. <p>Community Health Workers (CHWs)</p> <ul style="list-style-type: none"> • To address ADA's Standards of Care highlighting the importance of CHWs in diabetes prevention and management, especially among underserved communities, the ADA's National Health Disparities Committee developed the new CHW webpage Resources for CHWs. • The Health Disparities Committee and ADA's Professional Membership team established the new CHW Professional Membership for only \$35 for community health representatives, peer health

Form	Part	Section	Line	Explanation
5	Form 990	Part III	4 Continued...	<p>representatives, peer health educators and other frontline public health workers. Promotions of the new CHW professional membership were done in collaboration with the National Association of Community Health Workers (NACHW) and through other ADA partner networks. In 2019, there were a total of 49 CHW professional members.</p> <ul style="list-style-type: none"> A free Health Disparities - Community Health Workers Resources' continuing education webcast series was developed by the Health Disparities Committee to provide professional education resources addressing various topics related to CHWs and social determinants of health. The first webcast entitled Community Health Workers (CHWs): Strong Evidence-base for Embracing CHWs into the Public Health and Healthcare Workforce held in December 2019, had a total of 870 registrants. <p>Professional Education</p> <p>The primary goal of our professional education program is to affect the quality of treatment and improve patient outcomes for people with diabetes by providing quality education for those health care professionals who provide their care. We conduct professional education activities directed toward enhancing knowledge, competence, advancing skills and apprising health care professionals of the latest developments in diabetes research and clinical practice. The American Diabetes Association has been accredited to provide continuing education to health care professionals for more than 30 years and is accredited by seven accrediting boards. The ADA remains in exemplary standing with each accrediting board proving our compliance with the continuing education guidelines. The ADA continues to be at the forefront of professional continuing education for the diabetes community as an accredited provider of continuing education credit for all health care professionals on the diabetes management team.</p> <p>Education Recognition Program</p> <p>Since the American Diabetes Association became a National Accrediting Organization (NAO) for Medicare in 1986, our Education Recognition Program (ERP) has recognized more than 6,500 diabetes self-management education and support (DSMES) services across the United States plus U.S. territories including as far as Guam!</p> <p>In 2019,</p> <ul style="list-style-type: none"> The ADA supported over 1,500 services in more than 3,600 sites across the U.S. These services are located within hospitals, clinics, pharmacies, health departments, Federally Qualified Health Centers (FQHC), rural health clinics, Indian health services and VA hospitals among others. More than 750,000 patients were served by the ADA's Recognized services. These services are provided by over 8,000 trained professionals such as Registered Nurses, Registered Dietitians, Pharmacists, and Certified Diabetes Care and Education Specialists (CDCED). The ADA received 600 + applications from services to renew, expand or start a new Recognized program. The average A1C decrease was 1.28 among patients documented in Chronic Diabetes (ADA's diabetes education platform). <p>Nutrition Programs</p> <p>What Can I Eat? Program</p> <p>Many high-risk populations do not receive culturally appropriate prevention services. To address this need, the American Diabetes Association created What Can I Eat?, a community-based, nutrition-focused support program for adults living with type 2 diabetes, their families and caregivers. This program is designed to promote positive dietary behavior change among disparately impacted adults with type 2 diabetes.</p> <p>In 2018, the What Can I Eat program was piloted in communities across the country - including Spanish language sites and American Indian / Alaska Native pilot sites. Program participants demonstrated a significant increase in non-starchy vegetable consumption (17%), use of the diabetes plate method (15%), and use of food labels (14%) following the program. Among participants with an A1C of 9% or higher, A1C significantly decreased 2 percentage points.</p> <p>The American Diabetes Association will continue working to scale and expand the What Can I Eat? program to reach diverse communities of PWD where they are in their communities, in their life stage, and in their circumstances.</p> <p>Overcoming Therapeutic Inertia: Accelerating Diabetes Care for Life</p> <p>Despite more than 40 new diabetes treatment options being approved since 2005, and the ADA and other organizations developing clear guidelines and treatment algorithms, there has been no measurable improvement in glycemic control. In fact, between 1999 and 2014 the percentage of diabetes patients with an A1C > 9% actually increased. At the root of this problem is therapeutic inertia, "The failure to establish appropriate goals and to initiate or intensify therapy when therapeutic goals are not reached."</p> <p>During 2019, the ADA worked closely with a key opinion leaders and stakeholders to execute Phase Two of the Overcoming Therapeutic Inertia (OTI) Initiative. In October, a Steering Committee came together for an intensive one-day meeting, charting an ambitious course for addressing this long-term and multifaceted challenge. The plan includes three primary components:</p> <ol style="list-style-type: none"> Research to identify, evaluate and curate the most effective approaches for overcoming therapeutic inertia in clinical practice. An Awareness and Education Campaign promoting the urgent need for addressing therapeutic inertia now while sharing of practical approaches for identifying therapeutic inertia and rapidly intensifying therapy to achieve control quickly. Systems Level Barrier Busting aimed at engaging electronic medical record companies, insurance companies and key alliance partners to provide better clinical decision-making support and reduce barriers to medication and device access, including cost and coverage confusion. <p>As Phase Two was being developed, the ADA executed several projects to support and inform OTI goals. These included:</p> <ul style="list-style-type: none"> A series of interactive clinical workshops held in Los Angeles, Chicago, Baltimore and Phoenix engaging over 280 clinicians. Participants left with an increased appreciation for the impact therapeutic inertia on patient outcomes, and increased confidence in assessing treatment barriers, setting explicit and collaborative treatment goals and helping patients achieve optimal control quickly. A newly formed Diabetes Technology Coalition brought together 18 diabetes patient and professional organizations to address issues impacting access to diabetes technologies and devices. Working in collaboration with device manufacturers, this group is developing coverage policy proposals for pumps, monitors, software/algorithms, and telehealth to be shared with CMS (Centers for Medicare and Medicaid Services) and Congress. A free Online Consumer Guide tool will be available late April 2020, where anyone can search, review and compare all diabetes therapies and devices.

Form	Part	Section	Line	Explanation
6	Form 990	Part III	4 Continued...	<p>The Overcoming Therapeutic Inertia initiative is supported by Founding Sponsors Abbott, AstraZeneca, Merck, Novo Nordisk and Sanofi, plus Strategic Sponsors Dexcom, Janssen, Lilly Diabetes and Medtronic. Learn more at professional.diabetes.org/therapeuticinertia.</p> <p>Diabetes Is Primary</p> <p>In 2019, ADA expanded its reach to primary care providers by hosting 10 Diabetes Is Primary programs. Since the program launched its national expansion in 2018, it has reached 7,508 primary care providers through both live programs and webcasts. This results in an estimated reach of 2.7 million patients with diabetes, and 1.4 million patients with prediabetes. To date, significant increases in referrals to diabetes education have been seen:</p> <ul style="list-style-type: none"> • 55% referred patients with prediabetes to Diabetes Prevention Programs more often after attending a program • 51% referred patients with diabetes to Diabetes Self-Management Education and Support programs more often <p>Diabetes INSIDE</p> <p>In 2019, the American Diabetes Association launched a new Diabetes INSIDE® collaboration centered in the Greater Philadelphia region, and extending into New Jersey and Maryland. The commitments from regional health partners include the area's largest healthcare systems whose service areas cover more than 18 million people.</p> <p>The Diabetes INSIDE® leadership team also sits on the steering committee for the American Medical Association Philadelphia Diabetes Prevention Collaborative, the AMA/CDC partnership with Philadelphia health systems, non-profits, community groups, business leaders, and government to identify undiagnosed prediabetes patients and enroll them into DPP programs throughout PA, DE, and NJ.</p> <p>Novo Nordisk's <i>Cities Changing Diabetes</i> global initiative has also selected Philadelphia as its next U.S. city, and has included the Diabetes INSIDE® team on its advisory committee. Our involvement in these three major initiatives solidifies ADA's role as a leader in population health.</p> <p>Diabetes INSIDE® has also now published results in <i>Diabetes Care</i>. This publication helps propel Diabetes INSIDE® as an evidence-based solution to improving diabetes population health outcomes.</p> <p>WIN ADA for Women in Diabetes</p> <p>The Women's Interprofessional Network of the American Diabetes Association (WIN ADA) held its first full-day Career Development Program in Indianapolis, Indiana on Nov. 15, 2019. More than 120 women clinicians, scientists, educators, and industry professionals attended this event, which focused on the advancement of women in the diabetes field. Sessions topics included leadership, networking, grant writing, work-life integration, and more. Attendees learned career development skills that they can apply in clinical and research settings and use to improve patient outcomes.</p> <p>Professional Membership</p> <ul style="list-style-type: none"> • Exceeded the 19,000 benchmark for the first time since 2007 and achieved a 24% YOY increase. The growth was largely attributed to the addition of 5,000 third-party sponsored Adjunct Members from India. • Added new membership category (Community Health Worker). Refined existing categories by sunseting in-training and replacing it with two separate categories (Student and Early Career). Moved Emeritus (retired) from free to a nominal fee. • Grew Scientific Sessions Membership Lounge visitors to 53% YOY, the largest number of visitors ever at 3,893. <p>Digital "Clinical Diabetes" Roundtable Discussions</p> <p>In 2019, the ADA launched a new educational opportunity whose goal is to facilitate dialogue and improve understanding with primary care audiences on important subjects and topics related to diabetes prevention and treatment.</p> <p>The program consists of a panel of experts who are recruited to participate in a roundtable discussion on a diabetes related topic, which is video-recorded and posted on the Clinical Diabetes website along with a summary paper outlining content to be discussed. A separate sponsored landing page will also be developed and reside on the Clinical Diabetes website. It will house the roundtable discussion and carry speaker biographies and affiliations.</p> <p>Diabetes Core Update Podcast Sponsorships</p> <p>Diabetes Core Update is a monthly audio podcast series devoted to presenting and discussing the latest clinically relevant articles from the ADA's four scholarly journals: <i>Diabetes</i>, <i>Diabetes Care</i>, <i>Clinical Diabetes</i> and <i>Diabetes Spectrum</i>, as well as content gleaned from other sources.</p> <p>New for 2019, industry stakeholders were invited to sponsor podcast episodes covering important topics of mutual interest to both the ADA and the sponsoring partner. Each podcast episode can be accessed via iTunes, RSS feed or directly through diabetes.org.</p> <p>PUBLICATIONS</p> <p>The American Diabetes Association is the leading authority in creating and publishing the world's most respected consumer magazine, books, and professional journals about diabetes. Our award-winning monthly magazine, <i>Diabetes Forecast</i>, is the premier healthy-living magazine for individuals affected by diabetes. Numerous books by well-known and credentialed authors are published each year, including consumer-oriented books on diabetes treatment, self-care, nutrition, cooking and psychosocial issues, as well as a variety of titles for our professional readers, such as the frequently updated Medical Management Series. The ADA also publishes four highly valued professional journals, <i>Diabetes</i>, <i>Diabetes Care</i>, <i>Clinical Diabetes</i> and <i>Diabetes Spectrum</i>, as well as numerous articles, position and other professional papers.</p>

7	Form Form 990	Part Part III	Section	Line 4 Continued...	Explanation
					<p>Standards of Care & Medical Affairs</p> <p>The <i>Standards of Medical Care in Diabetes (Standards of Care)</i> 2019, the ADA's key clinical practice guidelines, was published in December 2018. By the end of 2019, we had expanded the number of unique users of our Standards of Medical Care in Diabetes by 10%.</p> <p>The <i>Standards of Medical Care in Diabetes</i> 2020 was developed throughout 2019 and published in December 2019, and includes key changes:</p> <ul style="list-style-type: none"> • The <i>Standards of Medical Care in Diabetes</i>—2020 includes simplified figures and tables that more easily guide providers through treatment options and individualized recommendations for treatment of cardiovascular disease based on patients' pre-existing conditions. • Special considerations for older adults with type 1 diabetes have also been added to address the treatment of this growing population. • Because diabetes technology is rapidly changing, revised recommendations and additional supporting evidence were included in section 7, Diabetes Technology. The <i>Standards of Medical Care in Diabetes 2019</i> was disseminated through multiple channels: • Revised interactive <i>Standards of Care</i> app with digital tools for providers and the full <i>Standards of Care</i> for mobile devices. • The abridged <i>Standards of Care</i> for primary care providers was published simultaneously in <i>Clinical Diabetes</i>, and is updated continuously based on Living Standard updates. • A continuing education webcast with free CE credit, along with a comprehensive slide set for professionals to use in their own presentations, updated throughout the year based on Living Standard updates. Worked with expert writing committees on the publication of: <ul style="list-style-type: none"> ◦ Nutrition Therapy for Adults with Diabetes or Prediabetes: A Consensus Report. <i>Diabetes Care</i>, April 2019 ◦ Diabetes Digital App Technology: Benefits, Challenges, and Recommendations. A Consensus Report by the European Association for the Study of Diabetes (EASD) and the American Diabetes Association (ADA) Diabetes Technology Working Group. <i>Diabetes Care</i>, December 2019 ◦ 2019 Update to: Management of Hyperglycemia in Type 2 Diabetes, 2018. A Consensus Report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD). <i>Diabetes Care</i>, December 2019 <p>Professional Journals</p> <p>The American Diabetes Association continued to publish the leading scientific and medical journals related to the prevention and treatment of diabetes and diabetes complications. In 2019, <i>Diabetes</i>, <i>Diabetes Care</i>, <i>Clinical Diabetes</i> and <i>Diabetes Spectrum</i> reached more than 40,000 health care professionals, including researchers, physicians and diabetes educators, with information on cutting-edge diabetes research, state-of-the-art treatment advances and clinical treatment guidelines.</p> <p>The American Diabetes Association's professional journals at diabetesjournals.org received more than 12 million visits and 25 million page views, and studies published in ADA journals were cited more than 124,000 times by studies published in other science and medical publications.</p> <p>The 2018 impact factors for <i>Diabetes</i> and <i>Diabetes Care</i> were released in July 2019. <i>Diabetes Care</i> achieved the highest impact factor ever recorded for an ADA journal (15.2) and <i>Diabetes</i> achieved an impact factor of 7.2. In addition, according to Eigenfactor®, a measure of a journal's total importance to the scientific community, <i>Diabetes Care</i> and <i>Diabetes</i> are the top two journals devoted to diabetes research, and ranked second and fourth, respectively, among the 145 journals indexed in the broader field of "endocrinology and metabolism."</p> <p>In January 2019, the American Diabetes Association published the <i>Standards of Medical Care in Diabetes</i> and the abridged version of the "Standards of Care" for primary care physicians in <i>Diabetes Care</i> and <i>Clinical Diabetes</i>, respectively. In addition to these critical resources for diabetes health care professionals, numerous Association papers and special topic collections were published in ADA journals in 2019, including:</p> <ul style="list-style-type: none"> • Predicting Diabetes Using Genetic Risk Scores. https://care.diabetesjournals.org/content/42/2 (February 2019) • Gestational Diabetes Mellitus: New Evidence for the Continuing Challenge. https://care.diabetesjournals.org/content/42/3 (March 2019) • Continuing Evolution of Nutritional Therapy for Diabetes. https://care.diabetesjournals.org/content/42/5 (May 2019) • ADA Consensus Report: Nutrition Therapy for Adults with Diabetes or Prediabetes: A Consensus Report. https://doi.org/10.2337/dci19-0014 (May 2019) • Consensus Report: International Consensus on Risk Management of Diabetic Ketoacidosis in Patients with Type 1 Diabetes Treated with Sodium-Glucose Cotransporter (SGLT) Inhibitors. https://doi.org/10.2337/dc18-2316 (June 2019) • International Consensus Report: Clinical Targets for Continuous Glucose Monitoring Data Interpretation: Recommendations From the International Consensus on Time in Range. https://doi.org/10.2337/dci19-0028 (August 2019) • Realizing Better Diabetes Outcomes Through a Diabetes Data Revolution. https://spectrum.diabetesjournals.org/content/32/3 (August 2019) • Innovative Solutions to Care for Individuals With Diabetes in Underserved Populations. https://spectrum.diabetesjournals.org/content/32/4 (November 2019) <p>Compendia: An Important Educational Tool for Health Care Professionals</p> <p>The development of educational compendia continued in 2019 and are focused on covering important topics of interest to health care providers who are treating diabetes and concomitant conditions.</p> <p>Through the sponsorship support of our industry partners, the ADA's task is to convene a panel of experts who author individual sections of educational compendia with distribution implemented via direct mail to approximately 40,000 health care professionals who are recipients of the ADA's four professional journals, <i>Diabetes</i>, <i>Diabetes Care</i>, <i>Clinical Diabetes</i> and <i>Diabetes Spectrum</i>.</p> <p>The compendia are also accessed digitally via diabetes.org to enhance reach.</p> <p>Currently two compendia are nearing completion:</p> <ul style="list-style-type: none"> • CV and Renal Outcomes of Type 2 Diabetes Pharmacotherapies • The Role of SMBG in Diabetes Management

Form	Part	Section	Line	Explanation
8	Form 990	Part III	4 Continued...	<p>Diabetes Forecast</p> <p>Each issue of our healthy living magazine, <i>Diabetes Forecast</i>, reaches 6 million people with diabetes and prediabetes, as well as their caregivers. The magazine and website provide readers with recipes, diabetes management tips, stories about people thriving with diabetes, research news, and in-depth looks at issues affecting the diabetes community. In 2019, diabetesforecast.org had more than 5.7 million sessions and more than 6.6 million unique pageviews.</p> <p><i>Diabetes Forecast</i> conducted a survey to determine reader perceptions of the magazine and 80% of people with diabetes learned something in <i>Diabetes Forecast</i> that improved their care. The magazine's content prompted readers to make lifestyle changes, such as making healthy food swaps, exercising more, and beginning to take medications as prescribed.</p> <p>Know Diabetes by Heart Recipe Bookazine</p> <p>Working with collaborators at the American Heart Association®, the Publications department created the <i>Diabetes + Heart Healthy Recipes</i> bookazine, a collection of more than five dozen recipes designed specifically for heart health and diabetes management. Branded under the Know Diabetes by Heart Initiative™, the bookazine was released to newsstands nationwide in November and available at a number of major retailers, including Walgreens, Kroger's brand stores, Barnes & Nobles, and many more.</p> <p>New Book Titles</p> <p>In 2019, the Books Department distributed 166,632 book units to physical booksellers, online resellers, international wholesalers, direct customers, and public libraries, where constituents can access our award-winning materials free of charge. This is a 6.6% increase over 2018, and much of this growth came from popular new titles for both patients and professionals.</p> <p>Consumer</p> <ul style="list-style-type: none"> • <i>The Instant Pot Diabetes Cookbook</i>. Nancy S. Hughes • <i>The Easy Air Fryer Cookbook</i>. Kathy Moore and Roxanne Wyss • <i>The Mindful Guide to Managing Diabetes: Your Path to Reducing Stress and Living Well</i>. Joseph P. Napora, PhD • <i>Diabetes Superfoods Cookbook and Meal Planner</i>. Cassandra L. Verdi, MPH, RD and Stephanie A. Dunbar, MPH, RD • <i>The Diabetes Cookbook (Food Hub) Walmart edition</i>. American Diabetes Association • <i>The Mediterranean Diabetes Cookbook, 2nd edition</i>. Amy Riolo • <i>Complete Guide to Carb Counting, 4th edition</i>. American Diabetes Association <p>Professional</p> <ul style="list-style-type: none"> • <i>Diabetes Technology: Science and Practice</i>. Boris Draznin, MD, PhD, editor • <i>2019 Guide to Medications for the Treatment of Diabetes Mellitus</i>. John R. White, Jr., PharmD, PA-C, editor • <i>Medical Management of Pregnancy Complicated by Diabetes, 6th edition</i>. Erika Werner, MD, editor • <i>Practical Insulin, 5th edition</i>. American Diabetes Association • <i>Annual Review of Diabetes 2019</i>. American Diabetes Association • <i>Choose Your Foods: Food Lists for Diabetes</i>. American Diabetes Association/Academy of Nutrition and Dietetics • <i>Choose Your Foods: Food Lists for Weight Management</i>. American Diabetes Association/Academy of Nutrition and Dietetics • <i>Choose Your Foods: Count Your Carbs, 4th edition</i>. American Diabetes Association/Academy of Nutrition and Dietetics <p>AWARENESS & EDUCATION</p> <p>American Diabetes Month®</p> <p>Observed every November, American Diabetes Month (ADM) is an important element in the efforts of the American Diabetes Association to focus the nation's attention on diabetes and the tens of millions of people affected by the disease. Through the ADA's flagship awareness campaign, the ADA speaks directly to constituents and rally them to increase awareness and understanding of the prevalence of diabetes and the burden it places on individual lives.</p> <p>During the month of November, the American Diabetes Association highlighted the numbers that make a difference in fighting diabetes. The campaign dubbed "Count Me In" was supported by national Sponsors Colgate Total® and CVS Pharmacy®. Count Me In brought to life stories from all walks of life with diabetes and demonstrated why numbers are so critical in ending this disease. From the number of advocates' voices fighting for those living with diabetes to the number of research breakthroughs towards a cure. From the number of people who know their risk, to the numbers people see on their blood glucose meter. Numbers like these can change everything.</p> <p>Throughout the month, we used captivating videos, emails, social media posts and more to reach people nationwide. We encouraged people to change their numbers by taking the Type 2 Diabetes Risk Test, signing up to be an advocate, or even cooking a healthy meal—offering multiple ways to get involved.</p> <p>The team promoted the campaign using various mediums, ADA channels, and partner outreach. The campaign garnered nearly 56,300 pageviews to the ADM landing page, and more than 1.3 million impressions through social media.</p> <p>Know Diabetes by Heart™</p> <p>The American Diabetes Association® and the American Heart Association®, along with other industry leaders continued to raise awareness and understanding of the link between diabetes and cardiovascular disease through its collaborative initiative Know Diabetes by Heart™. In 2019, the initiative, aimed to reduce cardiovascular deaths, heart attacks and strokes in people living with type 2 diabetes, expanded its reach through the following.</p> <ul style="list-style-type: none"> • Facebook premiere, Satellite Media Tour and educational launches at ADA Scientific Sessions • Radio integrations through the Tom Joyner Morning Show Guest series with "Ask Tom" web Q&A and GetUp! Mornings with gospel singer and radio show host Erica Campbell • Ambassador recruitment efforts • Type2 Heart-to-Heart talk event and media day with actress Angela Bassett • Added 12 new alliances <p>Learn more about the Know Diabetes by Heart initiative at https://knowdiabetesbyheart.org/.</p> <p>Diabetes Food Hub</p> <p>Diabetes food Hub continued to be a popular destination for people living with diabetes, caregivers, and health care professionals. In 2019, the food and recipe website received more than 1.3 million unique visitors and more than 5 million pageviews, with nearly half of those users finding the site via search.</p> <p>The site itself also saw a number of enhancements that improved search, navigation, and personalization features, and now boasts more than 1,000 recipes, with dozens of new recipes added on a monthly basis. Because of this, Diabetes Food Hub continues to be a popular opportunity for sponsors, and collaborations with a number of companies, including Saladmaster, Eilor, and Luvo Foods, were activated in 2019.</p>

Form	Part	Section	Line	Explanation
9	Form 990	Part III	4 Continued...	<p>Signature Campaigns and Events</p> <p>Our special events provide another opportunity for the American Diabetes Association to raise awareness about diabetes and are an integral part of our strategic vision to eradicate the disease. In 2019, all ADA events, including our signature events Step Out: Walk to Stop Diabetes and Tour de Cure, incorporated our educational message to bring awareness of the seriousness of this diabetes epidemic and raised more than \$2.4 million.</p> <p>Walmart Wellness Days The ADA has partnered with Walmart to help provide resources, staff and volunteers for their Walmart Wellness Days since 2017. We have distributed 2.4M educational pieces in store for use at the screening table during Wellness events. Materials were shipped directly to all 4,700+ stores for each Wellness event day since September 2017. In 2019, we supported 412 stores on each Wellness event day with over 934 ADA staff and volunteers to assist the stores and serve as a resource in the community. Since our partnership began, we have mobilized nearly 2,800 ADA staff and volunteers to attend Wellness events, supporting the stores and driving awareness in the local communities.</p> <p>ADVOCACY</p> <p>Speaking Up for All People with Diabetes</p> <p>The American Diabetes Association's advocacy efforts and achievements are at the core of creating effective and lasting change for people living with and at risk for diabetes. Raising our voices from Capitol Hill to state houses to court houses across the country, our dedicated Diabetes Advocates continue to drive momentum in our ongoing fight to Stop Diabetes. Our advocacy work gives people with diabetes, their families and health care professionals the power to influence public policy issues that affect people with diabetes at the local, state and national levels. Our primary goals are:</p> <ul style="list-style-type: none"> • to increase federal and state funding for diabetes prevention, treatment and research • to prevent diabetes • to improve the availability of accessible, adequate and affordable health care • to end the discrimination people with diabetes face at school, work and elsewhere in their lives. <p>We have trained advocates around the country who represent those with diabetes who need a raised voice to protect their rights. An ever-growing volunteer network of attorneys, health care professionals and advanced school advocates help thousands facing discrimination because of their diabetes. In 2019, the ADA:</p> <ul style="list-style-type: none"> • Handled nearly 1,800 discrimination cases, providing expert legal assistance to people with diabetes facing unfair treatment at school, on the job, in custody and detention, and in other parts of daily life. In the nearly 20-year history of the Legal Advocate Program, ADA has helped with more than 25K cases of discrimination. • Increased funding for National Institute of Diabetes and Digestive and Kidney Diseases by \$84.5 million and for CDC's National Diabetes Prevention Program by \$2 million in federal fiscal year 2020 and achieved tremendous bipartisan support of the Special Diabetes Program (SDP), with 378 representatives and 68 senators signing letters supporting SDP renewal. Impacted nearly 21 million lives with 99 state legislative and regulatory wins—an increase of 24% over the previous year. • Convened over 200 people impacted by diabetes, health care professionals, researchers at Call to Congress—to advocate on Capitol Hill for increased federal funding for diabetes research, affordable insulin, health care access and coverage and more. Expanded our Advocates in Action grassroots activities to include more advocates than ever before—engaging 500,000+ grassroots advocates, broadcasting a dozen webinars with a nearly 500% increase in number of advocates participating. <p>The collaboration between Sun Life Financial® and American Diabetes Association® to deliver the 2019 Call to Congress, provided the opportunity to elevate our shared mission. We engaged the U.S. Congress, supported advocates of critical diabetes related legislation, highlighted the ADA's youth advocates during Call to Congress and executed an exclusive Call to Congress at home. In Late August we closed out with an exceptional Diabetes Advocacy Day featuring representatives from US Sen. Susan Collin's office together with our Diabetes Advocates; and a finale, Diabetes Awareness Night with the Portland Sea Dogs, both hosted and sponsored by Sun Life.</p> <p>We're Connected for Life</p> <p>The American Diabetes Association is the nation's leading voluntary health organization fighting to bend the curve on the diabetes epidemic to help people live a better life and thrive—until we ultimately find a cure. The moving force behind the work of the American Diabetes Association is a network of more than 565,000 volunteers, including our dedicated Board of Directors, a membership of more than 540,000 people with diabetes, their families and caregivers, a professional society of nearly 20,000 health care professionals, as well as more than 450 staff members. Diabetes has brought us all together, what we do next makes us Connected for Life. Learn more about the American Diabetes Association at diabetes.org.</p>

Form	Part	Section	Line	Explanation
10 Form 990	Part III		4	Other Program Services revenue reported in Line 4d \$1,816,333 relates to the investment in real estate. This investment represents a 1998 donor bequest that restricted the Association from selling the property for 25 years. A portion of the property is leased to corporations and derives monthly rental income that is reported in investment income. \$249,411 relates to rental income received from tenants of subleased office space.
11 Form 990	Part VI	A	6,7a	The American Diabetes Association has established the voting membership of the Association as the Voting Members. The Voting Members are comprised of all of the members of the Board of Directors and additional delegates. The Voting Members vote on the election of the organization's governing body each year. No governance decisions are reserved to or subject to approval by the membership.
12 Form 990	Part VI	B	11	IRS Review Process by the Governing Body: The American Diabetes Association Board of Directors assigns the Audit Committee the oversight responsibility of the IRS Form 990 and its supplemental schedules prior to completion. After review by management and BDO, the final signed 990 was provided to the Associations Board of Directors prior to filing with the IRS.
13 Form 990	Part VI	B	12	Managing Conflict of Interest: To identify potential conflicts of interest with appropriate due diligence, Officers, Directors, and members of select Board appointed committees and their related subcommittees, journal/periodical editors, and senior staff of the Association must annually disclose any potential conflicts of interest. The American Diabetes Association's Audit Committee and senior staff in Legal Affairs manage the disclosure and monitoring processes. Through review of the annual disclosures and review of the agendas of the relevant Board ,Committee and other meetings, appropriate efforts are made in advance of the meetings to identify potential conflicts of interest. Each person also has the responsibility to report his/her own conflicts of interest (actual or perceived) as those conflicts may arise during a meeting. Based on the situation, senior volunteers and staff presiding over the discussion are responsible to ensure appropriate action is taken: for the individual to publicly disclose the conflict, for the individual to recuse him or herself from the discussion, vote or room as appropriate and to ensure the disclosure and action is documented in the minutes of the meeting.
14 Form 990	Part VI	B	15a	Compensation Process: Annually, The American Diabetes Association Principal Officers (Chair of the Board; President, Medicine & Science; President, Health Care & Education; and Secretary/Treasurer) are responsible for establishing executive compensation consistent with the guidelines approved by the Compensation Committee. The Principal Officers of the Association use a Compensation Committee, compensation studies and an independent consultant to establish the compensation of the Chief Executive Officer and other Key employees. The Chief Executive Officer is responsible for the individual performance evaluations of staff officers and key employees, and establishes the total compensation for key employees subject to the guidelines established by the Executive Compensation Committee. The Executive Compensation Committee develops guidelines for the key employee (executive) positions listed below following the process described in the IRS intermediate sanctions rules when determining compensation. Specifically, the Committee (1) Is composed entirely of non-employee volunteer leaders who have no familial, business or significant personal relationships with the American Diabetes Association or its executives (2) Assesses the short-term and long-term contribution and performance of CEO and other senior executive employees in meeting very definitive and quantifiable objectives focused on the Association's mission success (3) Engages an independent compensation consulting firm to compile appropriate comparability data (including compensation market information for peers with whom the American Diabetes Association competes for executive talent). (4) The Committee reviews this data in detail for all elements of each executive's total compensation, including but not limited to base salary, bonuses, perquisites, fringe benefits, and incentive and deferred compensation arrangements. Upon the executive's hire, and at each point in time thereafter at which a new or revised compensation arrangement is under consideration with respect to the executive, the Committee meets before the arrangement is implemented to evaluate the reasonableness of the arrangement by comparing both the arrangement itself and the executive's entire compensation package to compensation packages paid by similarly situated organizations for functionally comparable positions (5) Documents, concurrently with its determination, the basis for its determination in the minutes of its meeting These minutes are reviewed, revised if necessary and approved at the following meeting of the Executive Compensation Committee. The process described above was used to establish compensation for the following positions: Chief Executive Officer, Chief Field Development Officer, Chief Financial Officer, Chief Medical Officer, Chief Revenue Officer, Executive Vice President of Government Affairs & Advocacy, Senior Vice President and Chief Technology Officer, Senior Vice President of Human Resources, Senior Vice President of Marketing & Communications. The total compensation of executives at the American Diabetes Association is specifically designed to attract and retain the highest qualified executive talent to fulfill the critically important mission to prevent and cure diabetes and to improve the lives of all people affected by diabetes.
15 Form 990	Part VI	C	17	Filing Jurisdiction & Registration Number: Alabama-AL97-256, Alaska-N/A, Arizona-10145, Arkansas-N/A, California-CT81471, Colorado-2002-3003670, Connecticut-5084, District of Columbia-981855, Florida-CH1618, Georgia-CH-001422, Hawaii-N/A, Illinois-CO 01-025537, Indiana-000103829-000, Kansas- 177-257-350, Kentucky-45, Louisiana-N/A, Maine- CO-1247, Maryland-102, Massachusetts-029317, Michigan-MICS 10326, Minnesota-N/A, Mississippi- 100000294, Missouri- CO-021-87, Nevada-C28859-1997, New Hampshire-5006, New Jersey- CH-0581900, New Mexico-N/A, New York- 1/30/1965, North Carolina- SL000618, North Dakota-7894, Ohio- 01-0239, Oklahoma- N/A, Oregon- 16402, Pennsylvania- No. 21, Rhode Island-95-233, South Carolina-641, Tennessee-5104, Utah- 6536093-Char, Virginia-N/A, Washington-7664, West Virginia-N/A, Wisconsin- 3020-800.

Form	Part	Section	Line	Explanation
16 Form 990	Part VI	C	19	The following information is available on the American Diabetes Association's website: < http://www.diabetes.org >: Board of Directors, Audited Consolidated Financial Statements, Latest 990 filed, Whistleblower policy. Available subject to request to the American Diabetes Association Legal Affairs department are the following: Current Bylaws, Articles of Incorporation, Conflict of Interest Policy.
17 Form 990	Part VII	A	1a(39)	The Chief Executive Officer of the Association is a non-voting member of the Board of Directors.
18 Form 990	Part VI	A	4	The bylaws of the American Diabetes Association were revised in 2019. Changes to the bylaws include: (1) Community and Volunteer Development Committee members added to Voting Members (2) Immediate Past Principal Officers removed from Board of Directors (3) Number of At-Large Directors expanded from six to ten (4) Chief Scientific, Medical and Mission Officer removed from Board of Directors
19 Form 990	Part VII	A	9	Employment term for William Cefalu, Chief Scientific, Medical and Mission Officer, ended on August 15, 2019. Employment term for Vignesh Clingam, Chief Marketing and Digital Officer, started on February 28, 2019 and ended on November 15, 2019 Employment term for Tony Chiles, Chief Information Officer, ended on September 20, 2019 Employment term for Tony Webster, Chief Human Resources Officer, ended on September 10, 2019

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

American Diabetes Association

Employer identification number

13-1623888

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) American Diabetes Association Research Foundation, Inc. 54-17 See Part VII 2451 Crystal Drive, Ste 900 Arlington, VA 22202	VA	501 (c) (3)	7		American Diabetes Association		X
(2) American Diabetes Association Property Title Holding Corporation See Part VII 2451 Crystal Drive, Ste 900 Arlington, VA 22202	VA	501 (c) (2)	N/A		American Diabetes Association		X
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) Various Perpetual Trusts -----	Fiduciary		American Diabetes Association	Trust					X
(2) Various Perpetual Trusts -----	Fiduciary	OK	American Diabetes Association	Trust					X
(3) Various Perpetual Trusts -----	Fiduciary	NC	American Diabetes Association	Trust					X
(4) Various Charitable Remainder Trusts -----	Fiduciary	OR	American Diabetes Association	Trust					X
(5) Various Charitable Remainder Trusts -----	Fiduciary	NJ	American Diabetes Association	Trust					X
(6) Various Charitable Remainder Trusts -----	Fiduciary	FL	American Diabetes Association	Trust					X
(7) Various Charitable Remainder Trusts -----	Fiduciary	PA	American Diabetes Association	Trust					X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b	Gift, grant, or capital contribution to related organization(s)	X	
c	Gift, grant, or capital contribution from related organization(s)		X
d	Loans or loan guarantees to or for related organization(s)		X
e	Loans or loan guarantees by related organization(s)		X
f	Dividends from related organization(s)		X
g	Sale of assets to related organization(s)		X
h	Purchase of assets from related organization(s)		X
i	Exchange of assets with related organization(s)		X
j	Lease of facilities, equipment, or other assets to related organization(s)		X
k	Lease of facilities, equipment, or other assets from related organization(s)		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o	Sharing of paid employees with related organization(s)	X	
p	Reimbursement paid to related organization(s) for expenses		X
q	Reimbursement paid by related organization(s) for expenses		X
r	Other transfer of cash or property to related organization(s)		X
s	Other transfer of cash or property from related organization(s)		X

2	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	American Diabetes Association Research Foundation Inc.	b	17,660,067	Cash
(2)	American Diabetes Association Research Foundation Inc.	l,n,o	637,373	Fair Value
(3)	American Diabetes Association Property Title Holding Corporation	s	1,816,333	Cash
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) -----													
(2) -----													
(3) -----													
(4) -----													
(5) -----													
(6) -----													
(7) -----													
(8) -----													
(9) -----													
(10) -----													
(11) -----													
(12) -----													
(13) -----													
(14) -----													
(15) -----													
(16) -----													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Part II Line 1b The Foundation's objective is to secure major gifts and grants to fund
diabetes related research leading to the prevention and cure of diabetes, the prevention and
cure of the complications of diabetes, and new therapies for individuals affected by diabetes.

Part II Line 2b The mission of the American Diabetes Association Property Title Holding Corp.
is to hold title to real property, collect the income therefrom, and remit to the American
Diabetes Association.

