



**COUNT  
ME  
IN**



Tracey D. Brown  
CEO, American Diabetes Association

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## A message from the CEO

Nearly one in two American adults are affected by diabetes or prediabetes. That is a number we at the American Diabetes Association® (ADA) know we can't ignore. It affects each and every one of us—and it will keep affecting us all unless we do something about it. We're committed to changing the numbers that matter most—so we can have an impact on all people with diabetes. We do that by:

**Bending the Curve.** Through our dedicated researchers at **118 leading research institutions working on 295 new and ongoing projects**, we're breaking down medical and research barriers through discoveries in insulin resistance and beta cells, as well as getting to the root of the problem by delving into the link between access to nutritious food and diabetes risk. And we continue to foster the next generation of researchers committed to diabetes by supporting them both financially and through a network of peer support. With **more than 12,000** physicians, scientists, researchers and health care providers having attended our 79th Scientific Sessions, we continue to share and showcase the latest advancements in science, diabetes research and technology. We will continue to educate all medical professionals through *Diabetes Care*, which reached over **40,000 health care providers** and received an incredible impact score of 15.3, **ranking 2<sup>nd</sup> among the 145 journals in the field of endocrinology and metabolism.**

**Helping People Thrive.** Through our commitment to the more than **122 million** Americans living with diabetes and prediabetes, we've pledged to continue to help them thrive with the disease through our various community impact programs. We continue to ensure people with diabetes are treated fairly and given adequate support in the workplace, at school and beyond, by advocating at the state and

federal levels with our **500,000 Diabetes Advocates** for affordable insulin, co-pay caps, protected health care coverage and more. We took on over **25,000** diabetes discrimination cases to protect our vulnerable community. We've welcomed **more than 5,000** young people to enjoy and experience our diabetes camps where they learned how to manage their diabetes independently. We continued to meet our community—people living with diabetes—where they are through public awareness campaigns. We challenged people living with diabetes to gather their community of family and friends and make healthy lifestyle changes that would affect their numbers.

**Being Great Business Stewards.** We continue to strive to be great business stewards. Through fostering partnerships, our fundraising initiatives and donations received, we've ensured that each dollar enhances diabetes research and our community-based, impact-driven programming. With more than \$156 million raised and expenses totaling \$149.6 million, 72% of which went directly toward funding our mission, our generous supporters can rest assured that we continue to fight for all people with diabetes.

Thank you for investing in the ADA and funding our research and community programs, campaigns and various initiatives. You've ensured that the projects of today will lead to the treatments of tomorrow—and ultimately a cure.



Tracey D. Brown, Person with Diabetes  
CHIEF EXECUTIVE OFFICER  
American Diabetes Association

#AwakenTheWorld #ConnectedForLife



## IMPACT THROUGH: **RESEARCH**

Big breakthroughs—the kind that truly improve patient outcomes—start with strong science.

In 2019, the ADA's investment in diabetes research continued with 295 new and ongoing projects at 118 leading U.S. research institutions. Powered by a rigorous submission and peer-review process, our portfolio encompasses a broad spectrum of research approaches to all types of diabetes and its many complications.

### **A Longstanding Legacy**

Since we began funding research in 1952, we have put **\$860 million toward more than 4,800 diabetes research projects.**

Highlights in ADA-funded research:

- **Protecting beta cells:** Jianxun Song, PhD, developed a new way to prevent immune cells from attacking the beta cells that produce insulin in the pancreas. His immunotherapy has the potential to both prevent type 1 diabetes and improve the success rates of islet transplantation for people with type 1.
- **Preventing insulin resistance:** Scott Summers, PhD, identified a molecule that drives insulin resistance—a hallmark of type 2 diabetes—in mice, as well as a new therapeutic strategy for lowering it. Dr. Summers' findings were published in the prestigious journal, *Science*, and next his team will try to validate these findings in humans.
- **Connecting the dots:** Food insecurity is a known barrier to good nutrition—especially so for people with prediabetes or type 2. Rebekah J. Walker, PhD, took this idea one step further, determining that food insecurity is indirectly associated with poor glucose control and self-care behaviors such as diet, exercise and taking medication.



## Precisely the Point

In October 2019, the ADA and the European Association for the Study of Diabetes convened an interactive research symposium, “Advancing Precision Diabetes Medicine.” Held in Madrid, Spain, and attended by a diverse group of stakeholders, this scientific meeting was part of our new Precision Medicine in Diabetes Initiative 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.

## Precision Medicine

An emerging approach for disease treatment and prevention that takes into account individual variability in genes, environment and lifestyle for each person. (Source: National Institutes of Health (NIH))



## IMPACT THROUGH: **INNOVATION**

The Pathway to Stop Diabetes® initiative was founded in 2013 with a singular vision: to introduce a new generation of brilliant scientists to diabetes research. The ADA supports Pathway scientists for five to seven years, giving them the freedom to explore new ideas without the constraints of traditional project-based funding.



**Pathway to  
Stop Diabetes®**



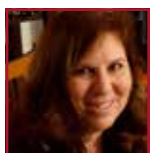
This year we welcomed three researchers into the Pathway fold:



**Ebony Boyce Carter, MD**, Washington University in St. Louis



**Matthew J. Webber, PhD**, University of Notre Dame



**Sarah A. Tishkoff, PhD**, University of Pennsylvania

We also thank and congratulate the following Pathway alumni who completed their awards in 2019. With this experience as their foundation, they are positioned to conduct the kind of transformative research that will change how we treat and cure this disease.



**Mayland Chang, PhD**, University of Notre Dame



**Zhen Gu, PhD**, University of California, Los Angeles



**Thomas Delong, PhD**, University of Colorado, Denver



**Stephen C.J. Parker, PhD**, University of Michigan

“Receiving a Pathway award was a career-defining moment. The funding has allowed me to obtain a position in a top-notch university, build up a strong lab and focus on important research questions.”

- Stephen C.J. Parker, PhD, Pathway grant recipient

## Pathway Productivity

In 2019, our Pathway researchers collectively:

- Published **30 high-impact, original research manuscripts**
- Published **seven reviews**
- Delivered **151 presentations** at scientific meetings

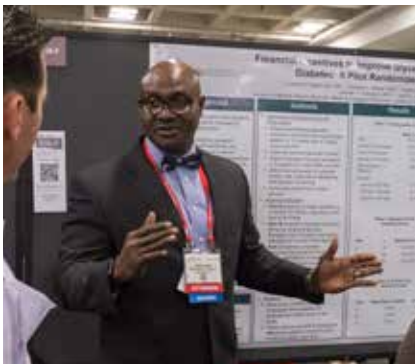
Notable breakthroughs:

- **Zachary A. Knight, PhD**, identified a new pathway that regulates appetite, which could help explain why bariatric surgery is so successful in helping people with type 2 diabetes lose weight quickly and improve their long-term glucose control.
- **Alexander R. Nectow, PhD**, discovered that a specific type of neuron in the brain regulates how we burn energy—making it a possible target to help with weight loss.
- **Sumita Pennathur, PhD**, and her team developed a new molecule with the potential to improve the durability and accuracy of continuous glucose monitoring.



## IMPACT THROUGH: **KNOWLEDGE-SHARING**

Beautiful San Francisco was once again the setting for the ADA's annual Scientific Sessions, the world's largest meeting for diabetes research. More than 12,000 physicians, scientists, researchers and health care providers joined us June 7–11, 2019, for original presentations on the very latest in diabetes prevention, care and education.



What makes our Scientific Sessions the foremost meeting for diabetes professionals? More than 99% of surveyed attendees believe the sessions were independent, balanced, objective and scientifically rigorous. Over 93% said the program gave them the knowledge they needed to enhance their clinical or research practice.



## Hot Off the Presses

Just some of the news making headlines at the ADA's 79<sup>th</sup> Scientific Sessions:

- Type 1 Diabetes May Affect Brain Development, Beginning in Early Childhood
- New Recommendations for Time-in-Range Targets During Continuous Glucose Monitoring
- Dulaglutide Reduces Cardiovascular Disease in People with Type 2 Diabetes
- Consistent Use of Diabetes Technology Across Multiple Environments Benefits Youth with Diabetes
- Researchers Find Accelerating Rates of Severe Complications in Young Adults with Youth-Onset Type 2 Diabetes
- Insulin-Producing Beta Cells Are Not Irreversibly Lost in Early Type 2 Diabetes

## Focus on the Future

This year marked our sixth **Focus on Fellows**, a program designed to engage diabetes professionals early in their careers. In a follow-up survey, 95% of 2014's inaugural class were still practicing within the field of diabetes, either through clinical care, research or both.





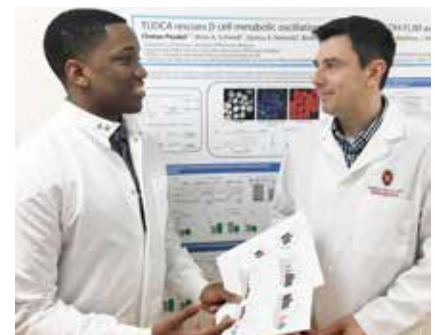
The ADA’s continuing education program for primary care providers had its biggest year yet.

Diabetes Is Primary is a live, continuing medical education (CME) professional education program, targeting primary care health care workers. Its mission is to put practical, up-to-date information into the hands of physicians, nurses, physician assistants, pharmacists and other professionals who are on the front lines of diabetes prevention and care. The program piloted a live session in conjunction with the ADA’s Scientific Sessions and, in 2019, branched out to six programs nationwide. The goals of the program are to increase:

- Knowledge and use of the *Standards of Medical Care in Diabetes*
- Knowledge and use of pharmacological treatment options
- Referrals to evidence-based interventions for the prevention and management of diabetes

—  
**“Thank you for making implementation in primary care realistic, practical and possible.”**

– Diabetes Is Primary attendee, Tampa, Florida





Among the 2019/20 program attendees, 98% felt the program content provided the necessary knowledge to improve their interprofessional collaboration and practice and 91% were likely to recommend Diabetes Is Primary to a colleague. Six months following the program, 88% reported changing their clinical practice as a result of the information learned.



**Diabetes  
Is Primary<sup>®</sup>**



Since the 2018 expansion of Diabetes Is Primary, we've reached:

**7,508**

primary care providers, with an estimated...

**1.4  
million**

patients with prediabetes and...

**2.7  
million**

patients with diabetes

## A Boon for Patient Programs

A survey showed that **55% of Diabetes Is Primary attendees** referred their patients with prediabetes to the National Diabetes Prevention Program more often, and **51%** referred patients with diabetes to diabetes self-management education and support programs more often.





IMPACT THROUGH:

# PROFESSIONAL PUBLICATIONS

To bend the curve, we must arm health care professionals with evidence-based information to care for people with and at risk for diabetes.

## *Standards of Care*

The *Standards of Medical Care in Diabetes* is the gold standard of diabetes care—created, reviewed and approved by the ADA. In 2019, the number of unique *Standards of Care* users grew by 10%.

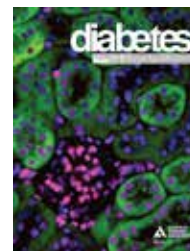
The 2020 edition, developed throughout 2019, includes the following key changes:

- Simplified figures and tables that more easily guide providers through individualized treatment options for cardiovascular disease based on patients' pre-existing conditions
- Special considerations for treating the growing population of older adults with type 1 diabetes
- A revised and expanded section on diabetes technology, to keep pace with the latest advancements



## Professional Journals

In 2019, our scientific and medical journals reached more than 40,000 health care professionals with cutting-edge research on the prevention and treatment of diabetes and its complications. Collectively, *Diabetes*, *Diabetes Care*, *Clinical Diabetes* and *Diabetes Spectrum* received more than 12 million visits and 25 million page views at [diabetesjournals.org](http://diabetesjournals.org), and ADA-published studies were cited more than 124,000 times.



## In Good Company

In 2019, *Diabetes Care* achieved the highest impact factor ever recorded for an ADA journal (15.3). *Diabetes Care* and *Diabetes* are the top two journals devoted to diabetes research, ranking 2<sup>nd</sup> and 4<sup>th</sup> among the 145 journals in the field of endocrinology and metabolism.

## Special Editions

The ADA published numerous papers and reports in 2019, including:

- Gestational Diabetes Mellitus: New Evidence for the Continuing Challenge (March 2019)
- Nutrition Therapy for Adults with Diabetes or Prediabetes: A Consensus Report (May 2019)
- Clinical Targets for Continuous Glucose Monitoring Data Interpretation: Recommendations From the International Consensus on Time in Range (August 2019)
- Realizing Better Diabetes Outcomes Through a Diabetes Data Revolution (August 2019)
- Innovative Solutions to Care for Individuals With Diabetes in Underserved Populations (November 2019)

## Listen Up!

Since 2013, we have produced a monthly podcast for busy health care professionals. Each episode of *Diabetes Core Update* discusses how the research published in our scholarly journals is relevant to clinical practice. Download it via iTunes, RSS feed or directly through [professional.diabetes.org](http://professional.diabetes.org).



There are many ways to access the *Standards of Care*, and we update these resources throughout the year.

- Full edition, in print or online, published in *Diabetes Care*
- Abridged version for primary care providers, published in *Clinical Diabetes*
- Interactive app with clinical decision-making tools
- Continuing education webcasts
- Pocket chart
- Comprehensive slide deck for professional use



## IMPACT THROUGH: **INITIATIVES**

In order to help people with diabetes thrive, we must go into their communities and meet them where they are.

### **Know Diabetes by Heart™**

The ADA and the American Heart Association, along with industry leaders, launched in 2018 a groundbreaking initiative to reduce cardiovascular deaths, heart attacks and strokes in people living with type 2 diabetes. Our collaboration has been strong and focused on improving outcomes that matter to patients and providers through a long-term awareness and understanding campaign, professional education and quality and systems improvement efforts.



Know **Diabetes** by **Heart**™

In 2019, Know Diabetes by Heart:

- Raised awareness with **209 million media impressions**
- Reached **27 million people** through social media platforms, encouraging them to take meaningful steps to learn more about their risks
- Engaged **5.9 million professionals** through online conferences and social media with tools and resources to improve care
- Developed **meaningful partnerships** with leading health systems to drive guideline adherence
- Rallied **4,000 volunteers, staff and national community impact leaders** to champion the cause

**We thank you for your support!**



## Overcoming Therapeutic Inertia (OTI) Initiative

Therapeutic inertia is defined as a delay in starting or intensifying therapy when appropriate to do so. Extensive research shows that these treatment delays happen at all stages of diabetes treatment, from starting the first drug to adding more medications, to intensifying insulin therapy. Research also shows that managing glucose levels early in the diabetes journey leads to better long-term outcomes, reducing a person's chances of developing complications.

During 2019, the ADA worked closely with key opinion leaders and stakeholders to better understand this problem and chart an ambitious course for addressing this global, multifaceted challenge. This work culminated in an intensive meeting held in October. The final plan includes three primary work pillars:

- **Research** to identify, evaluate and curate the most effective approaches for overcoming therapeutic inertia and share findings broadly. A systematic review and meta-analysis is currently under way.
- **An awareness and education campaign** to promote the urgent need for addressing therapeutic inertia now while sharing practical approaches for identifying therapeutic inertia and rapidly intensifying therapy to achieve control quickly.
- **Collaborative barrier busting** approaches aimed at working with coalitions, alliance partners, payers and electronic health records to identify and address challenging systems-level barriers.

In support of overall initiative goals, the ADA also completed two projects. First, we conducted a market research survey to understand the perception of therapeutic inertia in primary care clinicians. We found, through this study, that at least half of primary care clinicians have little or no familiarity with the concept of therapeutic inertia. Second, we completed a series of interactive OTI clinical workshops engaging over 280 clinicians. Workshop participants left with an increased confidence in assessing treatment barriers, setting explicit and collaborative treatment goals and helping patients achieve optimal control quickly.

**Learn more about the ADA's OTI initiative at [therapeuticinertia.diabetes.org](https://therapeuticinertia.diabetes.org).**



**The OTI workshop speakers were excellent and very engaging. I'm grateful for the opportunity to hear them, have a chance to reflect on my own practice and examine how our practice could do things differently.**

**—OTI clinical workshop participant**



## Diabetes Disaster Response Coalition (DDRC)

Now in its third year, the DDRC continues to serve the needs of the diabetes community, ensuring people with diabetes and their caregivers have swift and adequate access to health care, information and supplies during times of disasters. The ADA is a proud founding member, and today, the Coalition is made up of over 100 representatives from the diabetes community, public agencies, disaster response organizations, retailers, elected officials and drug and device manufacturers. In 2019, the Coalition responded to four hurricanes, five tropical storms, floods in the Midwest, tornadoes in the Southeast, California wildfires and furloughed workers impacted by the government shutdown.



## Focus on Diabetes™

The ADA welcomes VSP Vision Care® and Regeneron Pharmaceuticals, Inc., as Visionary Partners of the ADA's eye health initiative. Focus on Diabetes is a new Connected for Life Therapeutic Inertia Initiative focused on the crucial role annual comprehensive eye exams play in the early detection, intervention and prevention of eye disease and vision loss caused by diabetes. Focus on Diabetes is our second comprehensive campaign focused on a specific disease state, following the launch of Know Diabetes by Heart in 2018. Both substantiate our commitment to treating the WHOLE patient and are the first two campaigns targeting the gaps in the most prevalent comorbidities associated with diabetes. Other disease state campaigns are planned in the future.

With VSP® and Regeneron's collaboration in launching this exciting multi-year initiative, we are poised to bend the curve in preventing and reducing the risk of diabetes-related eye disease.



To learn more about VSP Vision Care and Regeneron, visit [diabetes.org/about-us/corporate-support](https://diabetes.org/about-us/corporate-support)

**REGENERON**

## Time In Range (TIR)

Time In Range is the ADA's nationwide effort to encourage measuring and monitoring of blood sugar (blood glucose) levels beyond A1C to better manage diabetes and improve outcomes and quality of life. Through consumer awareness, education and professional support, people with diabetes will have the knowledge to own their blood sugar measures and thrive every day.

In late 2019, Founding Partners Abbott Diabetes Care and Dexcom supported the launch of Phase I of Time In Range, committing to develop a multi-faceted campaign with one strategic plan that encompasses all relevant diabetes ecosystem stakeholders including the ADA, other professional and patient organizations, payers and key industry partners. To elevate patient and provider awareness of Time In Range recommendations, we will combine existing evidence-based programs, platforms and groundwork amplified by creating an education campaign to reach all audiences.

By carefully evaluating the resources, tools, awareness campaigns and related activation events, the Time In Range initiative will improve the lives of all people affected by diabetes and reduce complications. It amplifies the positive impact of improved patient blood sugar control and monitoring.







## IMPACT THROUGH: **YOUTH PROGRAMS**

For 70 years, the ADA has hosted summer camps for children and teens with type 1 diabetes. Our campers enjoy all the fun and friendship of a traditional camp while being empowered to manage their diabetes in a safe environment.



New for 2019, we held two winter camps to engage parents and children who are newly diagnosed or new to the ADA Camp community. After Camp, 97% of campers could perform at least one diabetes management skill independently— from changing their insulin pump site to recognizing their symptoms of low blood sugar.

All ADA Camps are subsidized by 50%, with opportunities for additional financial aid to ensure that cost is not a barrier for any family.

## Embracing Technology

Insulin pumps and continuous glucose monitors (CGM) did not exist when we started hosting Camps in 1949. But today, over 75% of our campers use some type of pump or CGM.

That's why we convened an October 2019 conference to discuss what all this rapidly advancing technology means for our Camps. The result is a living document, Best Practices for the use of Diabetes Technology at Summer Camps, plus a new set of training materials, both available at [diabetes.org/summercamp](https://diabetes.org/summercamp).

## Project Power

We continue to confront the increasing rates of type 2 diabetes in youth through Project Power, our healthy lifestyle intervention program for at-risk children and their families. In 2019, we welcomed 3,866 participants—an astounding 600% increase over 2018—and four new programs, for a total of 23 nationwide.



## Project Power

## Camp Counts

2019 by the numbers:

**57**  
sessions

**5,827**  
campers (90% with type 1)

**38%**  
of campers were new

**2,425**  
volunteers made these  
programs possible

**1,208**  
professionals provided  
medical expertise

**\$513,456**  
awarded in need-based  
financial aid

## Big Thanks!

ADA's Youth, Young Adult & Family Initiatives are supported nationally by the generosity of Novo Nordisk, The Helmsley Charitable Trust and Lilly Diabetes. Our Camps also received over \$4 million in donated supplies from Novo Nordisk, Lilly Diabetes, Sanofi-Aventis, Direct Relief, Animas/LifeScan, Medtronic, Omnipod, Insulet and Nova Diabetes Care.





IMPACT THROUGH:

# GOVERNMENT AFFAIRS & ADVOCACY

**Millions of Stories. One Powerful Voice.**

Backed by nearly 500,000 Diabetes Advocates who have said “count me in,” the ADA leads the way in fighting for all people affected by the disease.



Our advocacy drives scientific research, addresses health disparities, improves the availability of care and programs and ends discrimination.



## This was a year of distinct wins:

### Cleared for Takeoff

For decades, pilots using insulin had not been allowed to operate commercial aircraft—so we set out to convince the Federal Aviation Administration (FAA) that they could be qualified to fly. In November 2019, we celebrated as the FAA published a new protocol for evaluating commercial pilots with diabetes. The ADA's tireless advocacy over the years has opened cockpit doors for both private and commercial pilots with insulin-treated diabetes.

### Winning Coast to Coast

From protecting access to health insurance coverage to funding diabetes research and prevention efforts, we achieved a whopping 99 state legislative and regulatory victories (a 24% increase over 2018). Together these wins impact the lives of over 20 million Americans, bending the curve on diabetes and helping those living with it thrive.

### Prioritizing Diabetes Research

The ADA is the critical player in pushing for federal funding for diabetes research and programs to prevent or manage diabetes. Last year, we helped secure \$2.5 billion in fiscal year 2020 funding for federal agencies, including the National Institutes of Health's (NIH) National Institute of Diabetes and Digestive and Kidney Diseases, Centers for Disease Control's (CDC) Division of Diabetes Translation and National Diabetes Prevention Program, and both components of the Special Diabetes Program.

### Making Insulin Affordable

The Congressional Diabetes Caucus took concrete steps to address insulin affordability in 2019, including introducing the Insulin Price Reduction Act. This bill encourages manufacturers to reduce the list price of all insulin products to 2006 levels, and is the first federal legislation endorsed by the ADA that directly addresses the cost of this life-saving medication.

And in Colorado, we helped pass legislation capping monthly insulin copayments to \$100. This law eases the financial burden for Coloradans with diabetes and kicked off a firestorm of interest in other states.

### A Proven Track Record

- Since 2002, our Legal Advocacy team has fielded **25,000+ cases** of diabetes discrimination at school, on the job, in custody and detention and in other parts of daily life.
- In 2019, New Mexico became **the 34<sup>th</sup> state** to meet all three tenets of our Safe at School<sup>®</sup> platform for students with diabetes.
- Our insulin affordability petition has garnered **520,000+ signatures** since it launched in November 2016.

## IMPACT THROUGH:

# CORPORATE ALLIANCES

(Health Care, Consumer, Retail and Enterprise)

## Corporate Recognition Program

Our corporate supporters play an integral part in helping us advance our mission. We are pleased to recognize our Banting Circle Elite, Banting Circle, National Strategic Partners and National Sponsors for their ongoing annual support.

## Banting Circle Supporters

Companies that make medicines and devices to help people live with diabetes are recognized for their cumulative annual support. Our highest level of recognition, Banting Circle Elite, honors companies that have given \$1 million or more.

## Banting Circle Elite Companies

(\$1 million+)

- Abbott Diabetes Care
- AstraZeneca Pharmaceuticals LP
- Bayer Healthcare
- Boehringer-Ingelheim Pharmaceuticals, Inc.
- Eli Lilly and Company
- Merck
- Novo Nordisk, Inc.
- Regeneron Pharmaceuticals, Inc.
- Sanofi S.A.

## Banting Circle Companies

(\$500,000–\$999,999)

- Dexcom, Inc.

## National Strategic Partners

(\$500,000–\$1 million+)

Consumer product companies who support the ADA at our highest level of sponsor commitment represent our National Strategic Partners.

- Colgate Palmolive Company
- CVS Pharmacy
- VSP Vision Care

## National Sponsors

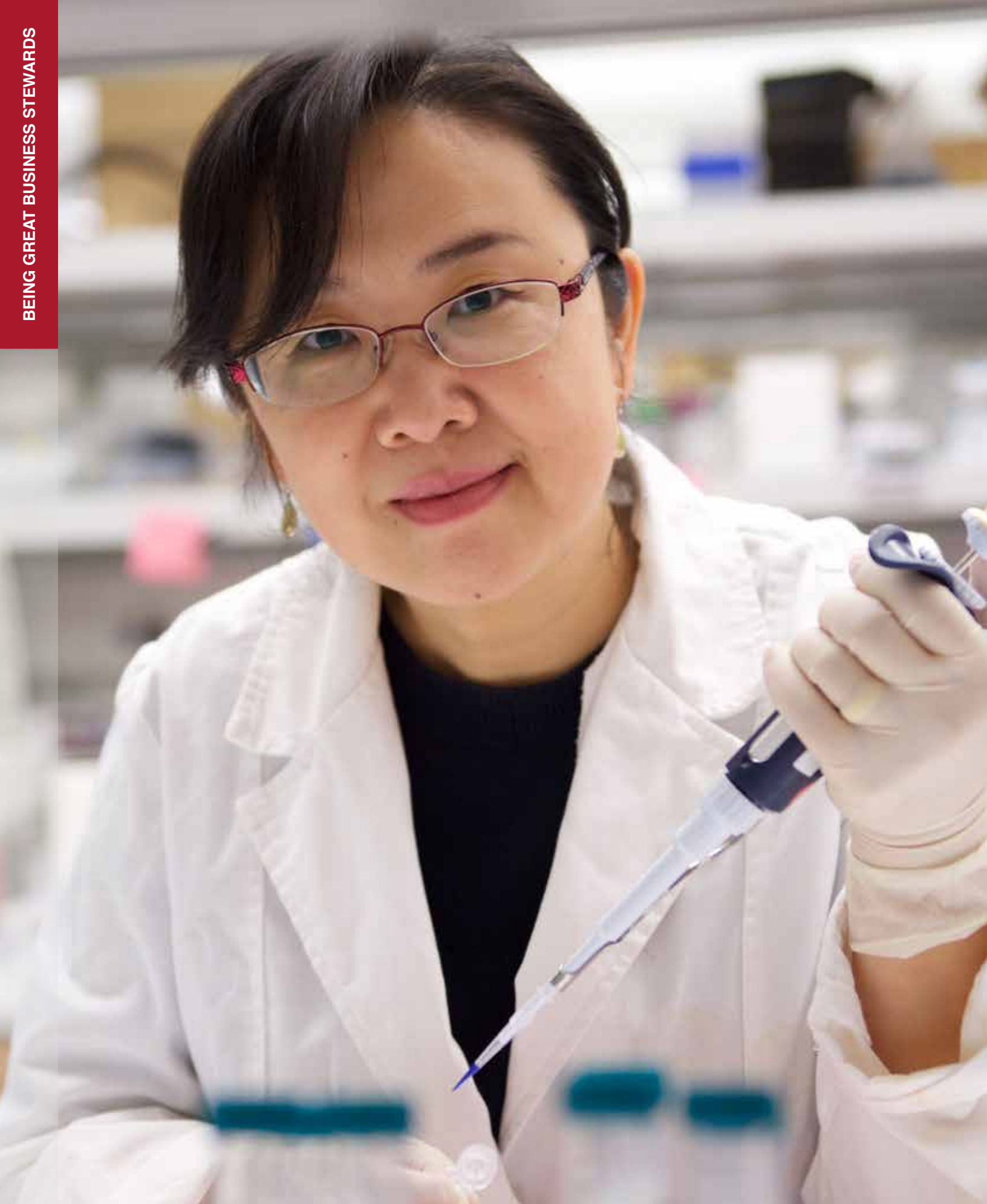
(\$150,000–\$499,999)

Our National Sponsors support the ADA with an annual financial commitment of at least \$150,000 and conduct promotional activities to help raise awareness about the seriousness of diabetes.

- Amarin Corporation
- Amgen
- BD Diabetes Care
- Catherines
- Cintas Corporation
- Genentech Pharmaceuticals
- Healogics, Inc.
- Insulet Corporation
- Janssen Pharmaceuticals, Inc.
- MannKind Corporation
- Medtronic Diabetes
- Organogenesis, Inc.
- Pfizer Inc.
- Sun Life







## IMPACT THROUGH: **DEVELOPMENT**

(Major Gifts, Estates and Planned Giving)

Because of your generosity, we can advance life-changing research, programs and events that touch and help people living with diabetes and those at risk, thrive. Thank you to all of the individual donors, foundations, corporate supporters, and others whose gifts helped to drive our mission forward.

In 2019 we received \$97.1 million from bequests and donations, and more than \$18.5 million raised through our signature events. Estate revenue exceeded \$35 million and Planned Giving commitments increased 28% over the prior year, projecting \$3.8 million in future bequest revenue. In addition, nearly, \$900,000 in revenue was raised through our new partnership with FreeWill.com, a digital resource that allows people to create simple wills for free online and also provides wording for charitable inclusions.

**\$97.1M**  
in donations received

**\$18.5M**  
raised through  
signature events

### Organizations that Made an Impact

- In 2019, the ADA recognized our 40-year partnership with the **Amaranth Diabetes Foundation**, the philanthropic arm of the Order of the Amaranth. Collectively, the organization has raised more than \$16 million for diabetes research focused on making advances towards a cure for diabetes and remains dedicated to this long-standing partnership with the ADA.
- Grants from **Genentech** and **Vadon** totaling more than \$225,000 provided the matching funds necessary to ensure the full roll out of the **What Can I Eat?** pilot initiative for American Indians. Initial funding of \$225,000 for this important initiative pilot was provided by the Seeds of Native Health, the **Shakopee Mdewakanton Sioux Community's** philanthropic campaign to improve American Indian nutrition and food access.

## MESSAGE FROM THE SECRETARY/TREASURER



As the nation's leading volunteer health organization fighting to end the diabetes epidemic, the American Diabetes Association® (ADA) honors every single dollar we receive. We're committed to stewarding these gifts, large and small, to best help those affected by this disease.

We continued to improve the ADA's financial stability in 2019, following CEO Tracey D. Brown's rigorous approach to growing revenue, reducing expenses and prioritizing activities with the highest impact.

The ADA raised \$156 million, including initial funding for Focus on Diabetes, our multi-year initiative to raise awareness of diabetes-related eye disease. Our expenses totaled \$149.6 million, 72% of which went directly toward our mission: to prevent and cure diabetes and to improve the lives of all people affected by diabetes. The ADA does this through research, professional education, youth camps, prevention programs, advocacy and more.

This marks the second year in a row the ADA has achieved a net income (\$6.4 million), allowing us to rebuild some of our cash reserves and ensuring we can continue to invest in innovative programs and projects that meet the needs of the people we serve.

To our donors, sponsors, volunteers and other stakeholders: Thank you for believing in the ADA. Your donations, time and expertise make our work possible. Together, we're Connected for Life.

Brian Bertha, JD, MBA  
Secretary/Treasurer



## FINANCIAL HIGHLIGHTS DECEMBER 31, 2019

(in thousands)

### Assets

Cash and Investments	\$65,379
Accounts Receivable, Net	9,586
Contributions Receivable, Net	45,000
Fixed Assets, Net	11,710
Other Assets	6,203
<b>Total Assets</b>	<b>\$137,878</b>

### Liabilities

Accounts Payable and Accrued Liabilities	\$23,163
Research Grant Payable	13,201
Deferred Revenues	9,017
<b>Total Liabilities</b>	<b>\$45,381</b>

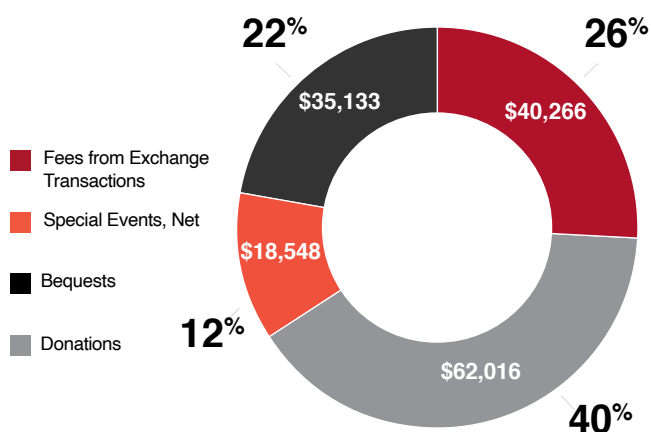
### Net Assets

Net Assets Without Donor Restrictions	\$(2,075)
Net Assets With Donor Restrictions	94,572
<b>Total Net Assets</b>	<b>\$92,497</b>

<b>Total Liabilities and Net Assets</b>	<b>\$137,878</b>
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## PUBLIC SUPPORT AND OTHER REVENUE\*

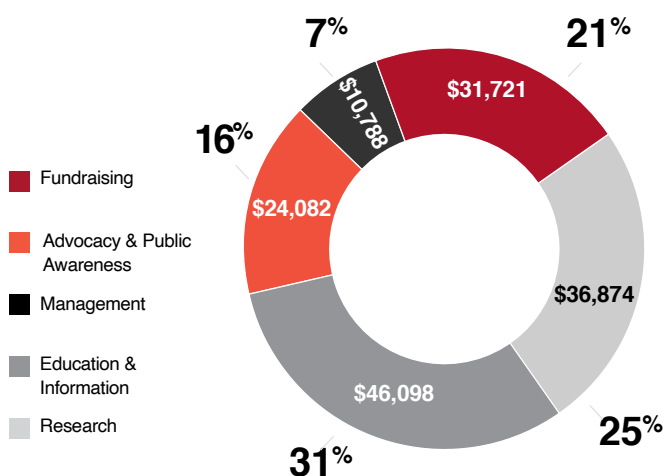
(in thousands)



Total Revenue: \$155,963

## EXPENSES

(in thousands)



Total Expenses: \$149,563

Net Income: \$6,400

## 2019 OFFICERS



**David Herrick | MBA**  
**CHAIR OF THE BOARD**  
Managing Principal, EthicOne | New York, NY



**Gretchen Youssef | MS, RD, CDE**  
**PRESIDENT, HEALTH CARE & EDUCATION**  
Program Director | MedStar Health Diabetes Institute |  
Washington, DC



**Louis H. Philipson | MD, PhD, FACP**  
**PRESIDENT, MEDICINE & SCIENCE**  
James C. Tyree Professor, Departments of Medicine and Pediatrics |  
Director, Kovler Diabetes Center | The University of Chicago |  
Chicago, IL



**Brian Bertha | JD, MBA**  
**SECRETARY/TREASURER**  
Senior Advisor/Consultant, HITLAB (Health Innovation Technology  
Lab) | San Francisco, CA



**Tracey D. Brown | MBA, BChE**  
**CHIEF EXECUTIVE OFFICER**  
American Diabetes Association | Arlington, VA

## 2019 BOARD OF DIRECTORS

### Umesh Verma

#### CHAIR OF THE BOARD-ELECT

Chief Executive Officer | BLUE LANCE | Houston, TX

### Martha Parry Clark | MBA

#### SECRETARY/TREASURER-ELECT

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Medical Director | Dallas Diabetes Research Center | Dallas, TX

### Glen Tullman

Executive Chairman/Founder | Livongo | Mountain View, CA





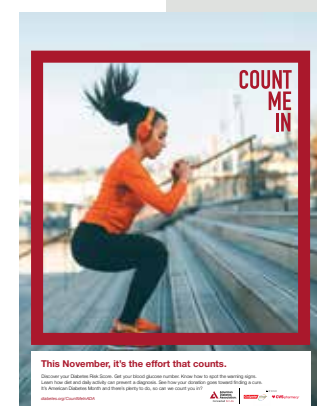
## COUNT ME IN

What if we told you that numbers make all the difference when it comes to stopping the diabetes epidemic? From the number of advocates' voices fighting for those living with diabetes to the number of researchers committed to finding breakthroughs for a cure—and even the number on your blood glucose meter. Numbers like these change everything.

These numbers allow us to face the threat head-on—let go of the “what ifs” and plant our feet firmly in the reality of what’s next. Because unlike some numbers, these are numbers we can change. In 2018, we highlighted the “Everyday Reality” of people living with diabetes. We took that a step further and made **2019 the year of making a real impact by getting people to join together, know their risk and take action for better health.**

**Count Me In** challenged everyone to help change the numbers. We challenged those who aren’t living with diabetes to learn their risk—changing the number of those at risk and unaware. And for those with diabetes who know their numbers far too well, we challenged them to make an impactful change—from the number who know their A1C to the number committed to making a healthy lifestyle change and the number who stand up and tell their stories authentically and fearlessly.

When it comes down to it, the diabetes crisis doesn’t need people standing on the sidelines. We need people to take action. To know and understand their numbers and take steps to improve their lives. We need everyone to be on their feet, raising their hand, calling, donating and moving the proverbial needle. We need people who will say, **“Count Me In.”**





## STAYING CONNECTED



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**COUNT  
ME  
IN**



Connected for Life