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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2009

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
American Diabetes Association

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1701 N Beauregard Street

City or town, state or country, and ZIP + 4
Alexandria, VA 22311

D Employer identification number
13-1623888

E Telephone number

G Gross receipts $ 261,618,658

F Name and address of principal officer
Larry Hausner
1701 N Beauregard Street
Alexandria, VA 22311

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www diabetes org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1940

M State of legal domicile OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
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 There are 23 6 million children and adults in the United States, or 7 8 of the population, who have diabetes In addition, there are 57 million Americans who have pre-diabetes, a condition that occurs when a persons blood glucose levels are higher than normal but not high enough for a diagnosis of type 2 diabetes

2 Check this box ▶☐ 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	33
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30
5	Total number of employees (Part V, line 2a)	5	1,666
6	Total number of volunteers (estimate if necessary)	6	375,000
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	8,142,673
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-86,353

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	166,038,319	146,831,892
	9	Program service revenue (Part VIII, line 2g)	36,218,717	34,904,268
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,314,730	1,192,498
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,144,183	12,584,329
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	218,715,949	195,512,987
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	38,779,166	30,283,310
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	68,037,972	60,095,586
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	4,080,954	3,354,556
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶46,850,151		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	111,032,588	103,055,429
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	221,930,680	196,788,881
	19	Revenue less expenses Subtract line 18 from line 12	-3,214,731	-1,275,894

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	106,379,505	100,243,981
	21	Total liabilities (Part X, line 26)	38,418,414	34,874,740
	22	Net assets or fund balances Subtract line 21 from line 20	67,961,091	65,369,241

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

▶ Signature of officer | 2010-11-12 Date

▶ Larry Hausner Chief Executive Officer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Scott Sherman	Date 2010-11-12	Check if self-empolyed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KPMG LLP 1676 International Drive Mclean, VA 22102			EIN ▶
			Phone no ▶ (703) 286-8000

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

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

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 exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 39,386,936 including grants of $ 30,131,155) (Revenue $ 11,364,573)

Research - See Schedule O

4b (Code) (Expenses $ 55,992,275 including grants of $ 152,155) (Revenue $ 32,562,367)

Information - See Schedule O

4c (Code) (Expenses $ 46,113,179 including grants of $) (Revenue $)

Advocacy and Public Awareness - See Schedule O

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$ 141,492,390

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)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• 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? *If "Yes," complete Schedule D, Part VII.*			
	• 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? *If "Yes," complete Schedule D, Part VIII.*			
	• 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? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• 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? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? (Yes / No) *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A: Yes			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III*	16		No
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? *If "Yes," complete Schedule G, Part I*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19	Yes	
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
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? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
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? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
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, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
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? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
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? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

						Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable*	1a	873				
b	Enter the number of Forms W-2G included in line 1a *Enter -0- if not applicable*	1b	11				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				1c	Yes	
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	1,666				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)				2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?				3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*				3b	Yes	
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)?				4a		No
b	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?				5c		No
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?				6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		No
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?				7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?				7h	Yes	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?				8		No
9	**Sponsoring organizations maintaining donor advised funds.**						
a	Did the organization make any taxable distributions under section 4966?				9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b	Yes	
10	**Section 501(c)(7) organizations.** Enter						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	**Section 501(c)(12) organizations.** Enter						
a	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b					
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?				12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					

Part VI **Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body	1a	33			
b	Enter the number of voting members that are independent	1b	30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?			3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?			4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		No
6	Does the organization have members or stockholders?			6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?			7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
a	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ WV , WI , WA , VA , UT , TN , SC , RI , PA , OR , OK , OH , NY , NJ , NH , ND , NC , MT , MS , MO , MN , MI , ME , MD , MA , LA , KY , KS , IN , IL , HI , GA , FL , DC , CT , CO , CA , AZ , AR , AL , AK

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

Deborah L Johnson CFO
1701 N Beauregard Street
Alexandria, VA 22311
(703) 549-1500

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

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 Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees 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, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
See add'l data										

1b Total . . . . ▶	3,869,034		309,674

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶56

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
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? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

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

(A) Name and business address	**(B)** Description of services	**(C)** Compensation
Infocision Management Corporation 325 Springside Drive Akron, OH 44333	Professional Fundraising and Consulting	2,692,004
Futuremarket Telecenter Inc 10201 S Padre Island Dr Suite 105 Corpus Christy, TX 78418	Fundraising support and telemarketing	1,988,108
Archimedes Inc 201 Mission Street 29th Floor San Francisco, CA 94105	Healthcare Consulting	889,000
Mullen 40 24th Street Pittsburgh, PA 15222	Media Campaign Planning and Production	774,336
Convio Inc 11921 N Mopec Expressway Suite 200 Austin, TX 78759	Constituent Records Application Technical Services	773,458

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶22

Part VIII Statement of Revenue

Section	Line	Description	Sub-column / Business Code	Sub-amount	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a	8,890,639				
	b	Membership dues	1b					
	c	Fundraising events	1c	42,958,977				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	247,171				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	94,735,105				
	g	Noncash contributions included in lines 1a-1f $ 3,588,303						
	h	**Total.** Add lines 1a-1f			146,831,892			
Program Service Revenue			Business Code					
	2a	Subscriptions	511,120		17,489,284	17,489,284		
	b	Registration	611,710		8,366,749	8,366,749		
	c	Sales of Material	511,130		5,235,547	5,235,547		
	d	Booth Rental	611,710		2,961,586			2,961,586
	e	Other Program Service Revenue	900,099		851,102	851,102		
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f			34,904,268			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)			985,598			985,598
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties			702,791			702,791
			(i) Real	(ii) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	58,779,174	30,700				
	b	Less cost or other basis and sales expenses	58,588,773	14,201				
	c	Gain or (loss)	190,401	16,499				
	d	Net gain or (loss)			206,900			206,900
	8a	Gross income from fundraising events (not including $ 42,958,977 of contributions reported on line 1c) See Part IV, line 18	a	7,369,166				
	b	Less direct expenses	b	7,369,166				
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities See Part IV, line 19	a	205,382				
	b	Less direct expenses	b	133,531				
	c	Net income or (loss) from gaming activities			71,851			71,851
	10a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold	b					
	c	Net income or (loss) from sales of inventory						
		Miscellaneous Revenue	Business Code					
	11a	Advertising Income	541,800		6,383,072		6,383,072	
	b	Catalog Sales Income	454,110		1,759,601		1,759,601	
	c	Miscellaneous	900,099		3,667,014	3,667,014		
	d	All other revenue						
	e	**Total.** Add lines 11a–11d			11,809,687			
	12	**Total revenue.** See Instructions			195,512,987	35,609,696	8,142,673	4,928,726

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U S See Part IV, line 21	30,276,116	30,276,116		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	7,194	7,194		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	3,272,834	2,228,904	99,787	944,143
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			
7 Other salaries and wages	45,259,535	30,823,178	1,379,942	13,056,415
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,880,352	1,278,826	57,528	543,998
9 Other employee benefits	5,583,612	3,817,712	175,326	1,590,574
10 Payroll taxes	4,099,253	2,787,550	123,222	1,188,481
11 Fees for services (non-employees)				
a Management	0			
b Legal	372,035		372,035	
c Accounting	223,150		223,150	
d Lobbying	520,479	520,479		
e Professional fundraising *See Part IV, line 17*	3,354,556			3,354,556
f Investment management fees	186,307		186,307	
g Other	11,710,081	9,767,574	907,816	1,034,691
12 Advertising and promotion	5,040,074	4,397,382	45,562	597,130
13 Office expenses	6,716,549	4,645,884	420,038	1,650,627
14 Information technology	4,048,310	3,113,349	80,576	854,385
15 Royalties	639,327	639,327		
16 Occupancy	10,682,520	7,993,887	718,342	1,970,291
17 Travel	3,118,085	2,137,241	100,602	880,242
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	6,204,133	6,063,555	25,748	114,830
20 Interest	54,417	33,232	10,278	10,907
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	3,573,281	2,179,702	678,923	714,656
23 Insurance	412,077	300,899	46,697	64,481
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a Supplies	3,235,568	2,981,342	4,556	249,670
b Postage and Shiping	14,603,782	8,172,105	343,218	6,088,459
c Printing and Publications	24,696,699	14,172,323	1,540,572	8,983,804
d Miscellaneous	7,018,555	3,154,629	906,115	2,957,811
e				
f All other expenses	0			
25 **Total functional expenses.** Add lines 1 through 24f	196,788,881	141,492,390	8,446,340	46,850,151
26 **Joint costs.** Check here ▶ ☑ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	40,522,671	13,036,116	3,617,373	23,869,182

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			1,839,913	1	5,185,882
	2	Savings and temporary cash investments			604,239	2	2,531,574
	3	Pledges and grants receivable, net			36,821,326	3	37,877,878
	4	Accounts receivable, net			3,221,695	4	3,827,479
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			2,711,213	7	
	8	Inventories for sale or use			3,885,980	8	1,880,930
	9	Prepaid expenses and deferred charges			5,223,375	9	4,946,995
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	35,180,474			
	b	Less accumulated depreciation	10b	25,410,568	7,995,079	10c	9,769,906
	11	Investments—publicly traded securities			24,099,302	11	13,196,055
	12	Investments—other securities See Part IV, line 11			2,945,119	12	3,644,707
	13	Investments—program-related See Part IV, line 11			12,850,000	13	12,850,000
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			4,182,264	15	4,532,575
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			106,379,505	16	100,243,981
Liabilities	17	Accounts payable and accrued expenses			18,403,916	17	16,810,791
	18	Grants payable				18	
	19	Deferred revenue			13,433,771	19	11,823,961
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*				22	
	23	Secured mortgages and notes payable to unrelated third parties			1,560,000	23	1,320,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			5,020,727	25	4,919,988
	26	**Total liabilities.** Add lines 17 through 25			38,418,414	26	34,874,740
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			15,513,868	27	16,549,587
	28	Temporarily restricted net assets			45,197,379	28	41,490,149
	29	Permanently restricted net assets			7,249,844	29	7,329,505
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			67,961,091	33	65,369,241
	34	Total liabilities and net assets/fund balances			106,379,505	34	100,243,981

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ 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? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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 in Schedule O . . .	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separated basis			
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?	3a		No
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 in Schedule O and describe any steps taken to undergo such audits . .	3b		No

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
American Diabetes Association

Employer identification number
13-1623888

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 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

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 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)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	158,692,640	76,984,677	172,933,160	166,128,320	146,831,892	721,570,689
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	158,692,640	76,984,677	172,933,160	166,128,320	146,831,892	721,570,689
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						721,570,689

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	158,692,640	1,973,880	172,933,160	166,128,320	146,831,892	721,570,689
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,461,217	1,973,880	6,111,253	4,230,370	3,310,774	19,087,494
9 Net income from unrelated business activities, whether or not the business is regularly carried on	1,893,313	464,804	553,652	-683,436	-86,353	2,141,980
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						742,800,163

12 Gross receipts from related activities, etc (See instructions)	12	202,913,910

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	97 140 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	96 990 %

16a **33 1/3% support test—2009.** 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 ▶☑

b **33 1/3% support test—2008.** If the organization did not check the 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 ▶☐

17a **10%-facts-and-circumstances test—2009.** 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 IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2008.** 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 IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

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 ▶☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

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

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	**15**	0 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	**17**	0 %
18 Investment income percentage from **2008** Schedule A, Part III, line 17	**18**	

19a **33 1/3% support tests—2009.** 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—2008.** 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 ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 13-1623888
Name: American Diabetes Association

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
George J Huntley CPA Chair of the Board	6 00	X		X				0	0	0
R Paul Robertson MD President, Science Medicine	6 00	X		X				0	0	0
Sue McLaughlin BS RD CDE CPT President, Health Care Education	6 00	X		X				0	0	0
T Edwin Stinson Jr Secretary-Treasurer	6 00	X		X				0	0	0
Nash M Childs PE Chair of the Board-Elect	2 00	X		X				0	0	0
Richard M Bergenstal MD President-Elect, Medicine Science	2 00	X		X				0	0	0
Christine T Tobin RN MBA CDE President-Elect, Health Care Education	2 00	X		X				0	0	0
Gerald B Nee CPA Secretary/Treasurer-Elect	2 00	X		X				0	0	0
John W Griffin Jr Vice Chair	2 00	X		X				0	0	0
Robert R Henry MD Vice President, Science Medicine	2 00	X		X				0	0	0
Elizabeth Mayer-Davis MSPH PhD RD Vice President, Health Care Education	2 00	X		X				0	0	0
Dwight Holing Vice Secretary/Treasurer	2 00	X		X				0	0	0
Larry Hausner Chief Executive Officer	38 00	X		X				441,044	0	34,819
Kermit R Crawford Board of Directors	1 00	X						0	0	0
Lurelean B Gaines RN MSN Board of Directors	1 00	X						0	0	0
Kenneth R Gerston Board of Directors	1 00	X						0	0	0
Philip R Higdon Board of Directors	1 00	X						0	0	0
Wahida Karmally DrPH RD CDE CLS Board of Directors	1 00	X						0	0	0
Lori M Laffel MD MPH Board of Directors	1 00	X						0	0	0
Rita J Louard MD Board of Directors	1 00	X						0	0	0
Dennis Marco Board of Directors	1 00	X						0	0	0
David G Marrero PhD Board of Directors	1 00	X						0	0	0
Brenda Montgomery RN MS CDE Board of Directors	1 00	X						0	0	0
Louis H Philipson MD PhD Board of Directors	1 00	X						0	0	0
William C Popik Board of Directors	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
Robin J Richardson Board of Directors	1 00	X						0	0	0
Thomas L Ryan CPA Board of Directors	1 00	X						0	0	0
Patrick Shuler CPA Board of Directors	1 00	X						0	0	0
Steven A Smith MD Board of Directors	1 00	X						0	0	0
Nickolas A Vitale MBA FHFMA Board of Directors	1 00	X						0	0	0
R Stewart Perry Board of Directors	1 00	X						0	0	0
John B Buse MD PhD Board of Directors	1 00	X						0	0	0
Ann L Albright PhD RD Board of Directors	1 00	X						0	0	0
Robert C Garrett FACHE Board of Directors	1 00	X						0	0	0
Deborah Johnson Executive VP/Chief Financial Officer	38 00			X				194,839	0	26,441
Richard Kahn Chief Scientific Medical Officer	38 00				X			650,473	0	24,783
Greg Elfers Chief Field Development Officer	38 00				X			327,589	0	23,852
Vaneeda Bennett Executive VP Development	38 00				X			201,090	0	21,800
Frank Hoose Senior VP Information Technology	38 00				X			218,291	0	22,566
Catherine Harvey Exec VP Communications/Publications	38 00				X			201,367	0	15,367
Don Laing Senior VP Human Resources	38 00				X			181,010	0	9,248
David Kendall Chief Scientific Medical Affairs Officer	38 00				X			155,664	0	3,975
Andrea Maddox VP Eastern Division	38 00				X			152,329	0	21,685
Martha Ramsey VP Publications	38 00				X			164,342	0	10,665
Scott Campbell VP Research	38 00				X			155,301	0	14,294
Marian Kirkman VP Clinical Affairs	38 00					X		206,242	0	16,848
Shereen Arent Exec VP Govt Affairs Advocacy	38 00					X		169,454	0	12,547
Lois Witkop Senior VP Marketing Communications	38 00					X		165,271	0	11,319
Lewis Bartfield VP Midwest Division	38 00					X		145,061	0	23,745
Lori Stevens VP Western Key Markets	38 00					X		139,667	0	15,720

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Subscriptions	511,120	17,489,284	17,489,284		
Registration	611,710	8,366,749	8,366,749		
Sales of Material	511,130	5,235,547	5,235,547		
Booth Rental	611,710	2,961,586			2,961,586
Other Program Service Revenue	900,099	851,102	851,102		

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, 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," to 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," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

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

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).

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 funtion activities ▶ $

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

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

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made 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-

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

A Check ☐ if the filing organization belongs to an affiliated group
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 (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		

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

	(a)	**(b)**
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -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? ☐ **Yes** ☐ **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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)).**

		(a) Yes	(a) No	(b) 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?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?	Yes		49,491
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		367,453
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		534,071
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			951,015
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No	

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 carryover lobbying and political 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) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible 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	
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	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009
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" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)	14,387	
4	Aggregate value at end of year	279,869	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☑ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other
c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

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" to 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 XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☑ **No**

b If "Yes," explain the arrangement in Part XIV

Part V **Endowment Funds.** Complete if the organization answered "Yes" to 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	19,282,060	20,888,880			
b Contributions	353,666	653,769			
c Investment earnings or losses	3,234,277	-519,302			
d Grants or scholarships	2,210,192	1,741,287			
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	20,659,811	19,282,060			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ %

b Permanent endowment ▶ 15 000 % %

c Term endowment ▶ 85 000 % %

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	3a(i)	Yes	
(ii) related organizations	3a(ii)	Yes	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	Yes	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI **Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		67,092		67,092
b Buildings				
c Leasehold improvements		1,200,169	897,386	302,783
d Equipment		14,116,548	8,766,679	5,349,869
e Other		19,796,665	15,746,503	4,050,162
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				9,769,906

Part VII Investments—Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Investment in Net Assets of American Diabetes Association Property Title Holding Corporation	12,850,000	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶	12,850,000	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Due to American Diabetes Association Research Foundation	4,919,988
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	4,919,988

2. Fin 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	195,512,987
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	196,788,881
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,275,894
4	Net unrealized gains (losses) on investments	4	1,799,069
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	389,186
9	Total adjustments (net) Add lines 4 - 8	9	2,188,255
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	912,361

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	205,403,459
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	1,799,069		
b	Donated services and use of facilities	2b	3,191,109		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	6,223,562		
e	Add lines **2a** through **2d**			2e	11,213,740
3	Subtract line **2e** from line **1**			3	194,189,719
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	186,307		
b	Other (Describe in Part XIV)	4b	1,136,961		
c	Add lines **4a** and **4b**			4c	1,323,268
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	195,512,987

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	204,491,098
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	3,191,109		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	34,828,570		
e	Add lines **2a** through **2d**			2e	38,019,679
3	Subtract line **2e** from line **1**			3	166,471,419
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	186,307		
b	Other (Describe in Part XIV)	4b	30,131,155		
c	Add lines **4a** and **4b**			4c	30,317,462
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	196,788,881

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
V	1a	The prior year beginning balance and gains and losses were re-stated in the 2009 audited financial statements, and accordingly, re-stated on this schedule
V	4	Income on endowments is spent in the year it is earned either for purposes restricted by the donor or towards the overall mission of the American Diabetes Association
X	2	The following was disclosed related to uncertain tax positions in the consolidated financial statements The American Diabetes Association, the American Diabetes Association ResearchFoundation, Inc and Shaping Americas Health Association for Weight Managementand Obesity Prevention are exempt from income taxes under Section 501c3 of theInternal Revenue Code the Code and charitable contributions to these organizationsqualify for tax deductions as described in the Code The American Diabetes AssociationProperty Title Holding Company, Inc is exempt from income taxes under Section501c2 of the Code These entities consolidated, the Association have been classifiedas organizations that are not private foundations under Section 509a of the Code On January 1, 2009, the Association adopted the provisions in Financial AccountingStandards Board FASB Accounting Standards Codification ASC 740-10, IncomeTaxes, which requires that a tax position be recognized or derecognized based on amore-likely-than-not threshold This applies to positions taken or expected to be takenin a tax return The implementation of this standard had no impact on the financialstatements The Association recognizes the effect of income tax positions only if thosepositions are more likely than not of being sustained The Association does not believeits financial statements include or reflect any significant uncertain tax positions
XI	8	Excess from the American Diabetes Association Research Foundation, Inc EIN 54-1734511 1,176,755 Shortfall from Shaping Americas Health EIN 20-2993719 787,569
XII	2d	Donations reported by the American Diabetes Association Research Foundation, Inc EIN 54-1734511 5,684,996 Contributed Services reported by the American Diabetes Association Research Foundation, Inc EIN 54-1734511 528,669 Revenue reported by Shaping Americas Health EIN 20-2993719 9,897
XII	4b	American Diabetes Association Research Foundation, Inc EIN 54-1734511 Management Fee Reported 1,136,961
XIII	2d	American Diabetes Association Research Foundation, Inc EIN 54-1734511 Expenses 34,031,104 Shaping Americas Health EIN 20-2993719 Expenses 797,466
XIII	4b	American Diabetes Association Research Foundation, Inc EIN 54-1734511 Grant 30,131,155

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

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" to Form 990, Part IV, line 14b.

1 **For grantmakers.** 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 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees or agents in region	**(d)** Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for region
Totals . . . . . ▶					

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Schedule F-1 (Form 990) 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 of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe	Year End Distribution from Wendell Mayes Endowment to the International Diabetes Federation	7,194	Check			

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 . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) 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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

Identifier	ReturnReference	Explanation

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" to Form 990, Part IV, lines 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. ▶ See separate instructions.

OMB No. 1545-0047

2009

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" to 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 e-mail 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 or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☑ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(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
Infocision Management Corporation	Telemarketing		No	4,741,005	2,692,004	2,049,001
Futuremarket Telecenter	Fundraising support and telemarketing		No	2,521,315	1,988,108	533,207
Car Program LLC	Advertising, acquisition and disposal of donated vehicles solicited by American Diabetes Association	Yes		1,085,080	325,524	759,556
Thompson Habib & Denison Inc	Creative, strategic and production services for direct mail appeals		No		160,000	
Convio	Product and interactive consulting, content management, website administration, email implementation, reporting, data management, technical programming, user/website experience consulting, design services and project/camapaign management		No		90,000	
Total . . . . ▶				34,139,852	5,651,636	28,738,216

3 List all states in which the organization is registered or licensed to solicit funds 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" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

			(a) Event #1 Step Out Walk Event (event type)	(b) Event #2 Tour De Cure (event type)	(c) Other Events 1 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	18,294,617	17,083,462	14,950,064	50,328,143
	2	Less Charitable contributions	16,532,621	15,322,288	11,104,068	42,958,977
	3	Gross income (line 1 minus line 2)	1,761,996	1,761,174	3,845,996	7,369,166
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes	565,757	422,288	773,279	1,761,324
	6	Rent/facility costs	463,762	416,321	926,970	1,807,053
	7	Food and beverages	138,319	229,810	1,412,753	1,780,882
	8	Entertainment	43,362	46,800	268,809	358,971
	9	Other direct expenses	550,721	645,935	464,280	1,660,936
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				7,369,166
	11	Net income summary Combine lines 3, column d, and line 10 ▶				

Part III **Gaming.** Complete if the organization answered "Yes" to 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			205,382	205,382
Direct Expenses	2	Cash prizes			23,840	23,840
	3	Non-cash prizes			87,182	87,182
	4	Rent/facility costs				
	5	Other direct expenses			22,509	22,509
	6	Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☑ Yes 84 000 % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				133,531
	8	Net gaming income summary Combine lines 1, column d, and line 7 ▶				71,851

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities See Additional Data Table			
a	Is the organization licensed to operate gaming activities in each of these states?	9a	Yes	
b	If "No," Explain			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		No
b	If "Yes," Explain			
11	Does the organization operate gaming activities with nonmembers?	11		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?	12		No

				Yes	No
13	Indicate the percentage of gaming activity operated in				
a	The organization's facility	**13a**			
b	An outside facility	**13b**	100 000 %		

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

Name ▶ See Schedule O

Address ▶ 1701 N Beauregard Street
Alexandria, VA 22311

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

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

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶ See Schedule O

Gaming manager compensation ▶ $ ____________

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? . . . . | **17a** | Yes |

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $ 71,851

Additional Data

Software ID:
Software Version:
EIN: 13-1623888
Name: American Diabetes Association

Form 990 Schedule G Part III Line 9

Enter the state(s) in which the organization operates gaming activities	WI, TX, RI, PA, OR, OH, NY, NJ, MO, MI, MD, MA, IL, IA, GA, DE, CT, CA, AZ, AK

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

2009

Open to Public Inspection

Name of the organization
American Diabetes Association

Employer identification number
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. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(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
American Diabetes Association Research Foundation Inc1701 N Beauregard St Alexandria, VA 22311	541734511	501 C 3	30,131,155				Research
Barton Center for Diabetes EducationP O Box 356 North Oxford, MA 01593	222701822	501 C 3	40,400				Camperships
Campfire USA Camping Services8511 15th Avenue NE Seattle, WA 98115	910575953	501 C 3	42,585				Camperships
Florida Camp for Children and Youth with Diabetes Inc PO Box 14136 Gainesville, FL 32604	237098099	501 C 3	6,580				Camperships
Lions Camp Merrick11855 Holly Lane Suite 104 Waldorf, MD 20601	521289731	501 C 3	26,827				Camperships
Lions of Illinois Foundation 2814 Dekalb Avenue Sycamore, IL 60178	237379629	501 C 3	15,686				Camperships

2 Enter total number of section 501(c)(3) and government organizations ▶ 15

3 Enter total number of other organizations ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) 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

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
I	2	The American Diabetes Association provides grant funding for Research grants to the American Diabetes Association Research Foundation ADA closely monitors the use of grant funds in United States 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, the award will be terminated
I	2	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 ADA-RF awards until the obligations for the award are complete This is monitored and reviewed by the American Diabetes Association Scientific / Medical Management for award status and compliance
I	2	The Association also provides grants and scholarships for persons with diabetes and their families to attend camp programs In 2009, the Association made it possible for 7,500 children and teens with diabetes to share in the summer camp experience through one of the 56 weeks of camp the Association offered in 45 locations in 27 states or at one of the camps offered by other organizations that met the Associations high standards of care Camp provides an outdoor recreational experience in which the child for children with diabetes ages 8-18 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 volunteer and staff leadership is held within two months of the conclusion of the camp session 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 programs are evaluated

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

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Name of the organization
American Diabetes Association

Employer identification number
13-1623888

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Travel for companions ☑ Tax idemnification and gross-up payments ☐ Discretionary spending account ☑ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Independent compensation consultant ☑ Form 990 of other organizations ☑ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in 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?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in 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?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		**(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				
See Additional Data Table								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
I	1a	The Association provides housing for the Chief Field Development Officer on a continuing basis
I	1a	The Chief Executive Officer is permitted limited spouse travel
I	1a	Payments related to housing, spouse travel, and excess pension benefits are grossed up for individual tax reporting purposes
I	4b	A 457 plan is available to senior management In addition, Richard Kahn, who separated from the organization as of 12/31/2009, participated in a Supplemental Executive Retirement Plan
II		Employment term for David Kendall, Chief Scientific Medical Officer, with the American Diabetes Association started in September 2009

Additional Data Return to Form

Software ID: 09000123
Software Version: 2009.0.12
EIN: 13-1623888
Name: American Diabetes Association

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Larry Hausner	(i) (ii)	419,782		21,261	17,707	17,113	475,863	
Deborah Johnson	(i) (ii)	193,188		1,651	13,916	12,525	221,280	
Richard Kahn	(i) (ii)	332,412	114,387	203,674	21,260	3,523	675,256	357,363
Greg Elfers	(i) (ii)	286,214		41,375	13,275	10,578	351,442	
Vaneeda Bennett	(i) (ii)	196,995		4,095	13,844	7,957	222,891	
Frank Hoose	(i) (ii)	215,626		2,665	12,548	10,018	240,857	
Catherine Harvey	(i) (ii)	198,095		3,273	8,086	7,281	216,735	
Don Laing	(i) (ii)	179,441		1,569	1,295	7,953	190,258	
David Kendall	(i) (ii)	99,734	49,571	6,359		3,975	159,639	
Andrea Maddox	(i) (ii)	151,035		1,294	9,897	11,787	174,013	
Martha Ramsey	(i) (ii)	162,295		2,046	8,443	2,222	175,006	
Scott Campbell	(i) (ii)	153,990		1,312	7,830	6,464	169,596	
Marian Kirkman	(i) (ii)	196,014	8,500	1,728	1,100	15,748	223,090	
Shereen Arent	(i) (ii)	168,062		1,393	10,785	1,762	182,002	
Lois Witkop	(i) (ii)	162,690		2,581	9,029	2,290	176,590	
Lewis Bartfield	(i) (ii)	140,630		4,431	9,344	14,400	168,805	
Lori Stevens	(i) (ii)	138,461		1,206	8,876	6,844	155,387	

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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶**See separate instructions.**

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Name of the organization
American Diabetes Association

Employer identification number
13-1623888

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
R Paul Robertson MD - Pacific North	Current Officer - President, Science Medical	Mentor-Based Postdoctoral Fellowship
Louis H Philipson - University of C	Current Member of the Board of Directors	Research award

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
American Diabetes Association

Employer identification number
13-1623888

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	1,026	768,104	Sale of comparable property and/or opinion of expert to determine Fair Market Value
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	62	621,472	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	56,449	2,198,727	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 |

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes	
b If "Yes," describe in Part II			
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
I	32b	American Diabetes Association contracts with Car Program LLC 3755 Omec Circle, 4, Rancho Cordova, CA 95742, to advertise for donation of vehicles, receive and dispose of the donated vehicles on behalf of the American Diabetes Association

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SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
American Diabetes Association

Employer identification number
13-1623888

Identifier	Return Reference	Explanation
990 VI	11	IRS Review process by the Governing Body The American Diabetes Associations Board of Directors assigns the Audit Committee the oversight responsibility of the IRS Form 990 and its supplemental schedules prior to filing After review by management and KPMG, the final and signed 990 w as provided to the Associations Board of Directors prior to filing w ith the IRS
Form 990 VI	12c	Managing a Conflict of Interest To identify potential conflicts of interest w ith appropriate due diligence, Officers, Directors, members of select Board appointed committees and their related subcommittees, journal periodical editors, and senior staff of the Association and its subsidiaries must annually disclose any potential conflicts of interest
Form 990 VI	12c	The American Diabetes Associations 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 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 ow n 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
Form 990 VI	15	Compensation ProcessAnnually, the American Diabetes Associations Principal Officers Chair of the Board, President, Medicine Science, President, Health Care Education and SecretaryTreasurer are responsible for establishing executive compensation consistent w ith the guidelines approved by the Compensation Committee The Principal Officers of the Association use a Compensation Committee, w ritten employment contract, 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 merit increase and/or bonus as appropriate and w ithin guidelines established by the Compensation Committee
Form 990 VI	17	Filing Jurisdiction - Registration NumberAlabama AL97-256Alaska N/AArizona 10145Arkansas N/ACalifornia CT81471Colorado 2002-3003670Connecticut 5084District of Columbia 981855Florida CH1618Georgia CH-001422Haw aii N/A Illinois CO01-025537Indiana 000103829-000Kansas 177-257-3SOKentucky 01-0239Kentucky 45
Form 990 VI	17	Kentucky 2202 Louisiana N/AMaine CO-1247Maryland 102Massachusetts O29317Michigan MICS 10326 Minnesota N/AMississippi 100000294Missouri CO-021-87New Hampshire 5006New Jersey CH-0581900New Mexico N/ANew York 01/30/65North Carolina SL000618North Dakota 7894Ohio 01-0239Oklahoma N/AOregon 16402Pennsylvania No 21
Form 990 VI	17	Rhode Island 95-233South Carolina 641Tennessee 1919Tennessee 5104Utah 6536093-CharVirginia N/AWashington 167Washington 7664West Virginia N/AWisconsin 3020-800
Form 990 VI	19	The follow ing documents are available on the American Diabetes Association w ebsite w w w diabetes org http//w w w diabetes org Board of Directors, Audited Consolidated Financial Statements, Latest 990 filed, Whistleblow er policyAvailable subject to request to the American Diabetes Association Legal Affairs department are the follow ing Current Bylaw s, Articles of Incorporation, Conflict of Interest Policy

Identifier	Return Reference	Explanation
Form 990 III	14	The Associations records are centralized at the home office at 1701 N Beauregard St, Alexandria, VA 22311 based on the information submitted by each Executive Director located in field offices

Schedule G III 16 The management and administration of the Associations gaming/special events are the responsibility of the local Executive Director of each office Compensation is based on total fundraising performance and is not specific to the results of an individual gaming activity Schedule G I v The amounts reported in column v represent fees paid to registered professional fundraisers for the Associations car program and for the dual purpose public awareness and fundraising activities of the direct mail and residential programs In addition, amounts were paid to these service providers to cover other expenses such as postage and printing The amounts paid for these expenses were determined by review of the detailed invoices supplied by the service provider On Form 990, Part IX, line 11e, amounts reported as professional fundraising services represent the fees on Schedule G that have been functionally allocated to the fundraising category The remainder of the fees are reported on line 11g and have been functionally allocated to the public awareness program category because of the educational and call to action components of the information Form 990 III 4 MISSION/FOCUS AREASThe 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 Diabetes is a disease in which the body does not produce or properly use insulin Insulin is a hormone that is needed to convert sugar, starches and other food into energy needed for daily life The cause of diabetes continues to elude the medical community, although research has shown that both genetics and environmental factors appear to play roles Form 990 III 4 In the United States, nearly 24 million children and adults, or 7 8 of the population, have diabetes While an estimated 17 9 million of those have been diagnosed with diabetes, unfortunately, 5 7 million or nearly one quarter are unaware that they have the disease In addition, another approximately 57 million Americans have pre-diabetes Pre-diabetes is a condition that occurs when a persons blood glucose levels are higher than normal but not high enough for a diagnosis of type 2 diabetes Diabetes kills more Americans every year than breast cancer and AIDS combined It doubles the risk of heart attack and stroke and is the number one cause of blindness in adults Diabetes costs the United States 174 billion each year Form 990 III 4 The American Diabetes Association is leading the fight against the deadly consequences of diabetes and fighting for those affected by diabetes The Association funds research to prevent, cure and manage diabetes and its complications delivers services to communities across the United States provides objective and credible information through multiple media and channels and stays involved with advocacy and awareness efforts to educate people about the disease and to give voice to those denied their rights because of diabetes Form 990 III 4 At the American Diabetes Association, we take our responsibility seriously to be good financial stewards, while ensuring that the funds we raise benefit those affected by diabetes Direct mission activities include funding diabetes research, delivering information to consumers and health care professionals, advocating on behalf of individuals with diabetes, and helping to educate the public about diabetes and its deadly consequences Form 990 III 4a RESEARCHThe two primary goals of the Associations Research Program are 1 to support the best and brightest diabetes researchers and 2 to promote and support innovative, groundbreaking diabetes research In 2009, the American Diabetes Association and its Research Foundation provided nearly 33 6 million in research grants, funding 435 awards at 142 leading United States research institutions Over the years, the American Diabetes Association has invested more than 500 million in diabetes research and provided funding for more than 4,000 research projects

Identifier	Return Reference	Explanation
Form 990 III	4a	Types of Research AwardsThe American Diabetes Association Research Program supports basic and clinical diabetes research aimed at preventing, treating and curing diabetes The diabetes research projects we support cover the spectrum from islet cell biology and transplantation techniques, to education and behavioral issues The Association also funds targeted, or donor-driven research grants This means a donor provides the Association with funds to support a research topic that both the donor and the Association have interest in researching Our core program offers investigator-initiated funding for basic and clinical science research awards

Form 990 III 4a As we strongly believe in the drive and potential of young and promising researchers, we also offer training awards to support scientists interested in diabetes research at various stages through their careers from medical school through assistant professorship Form 990 III 4a The Career Development and Junior Faculty awards, for example, provide young scientists the salary and research support necessary to establish a track record of success that will allow them to get more funding from the National Institutes of Health NIH Other awards match recent doctoral candidates with outstanding senior scientists to help them get started in research, and awards that provide clinical students a year of research experience before or after graduation The Associations Research Program also provides general grant support to both new and established investigators, specialized grants assisting clinical and innovative researchers, and opportunities for established investigators as they advance their careers and the field of diabetes research and care Form 990 III 4a Headlines from projects supported by the American Diabetes Association Research Program includedEarly eating and activity habits may contribute to childhood obesity, January/February 2009Excess fat contributes to cardiovascular risks in type 2 diabetes, February 2009Blocking gene inhibits the development of insulin resistance in a high-fructose diet, March 2009Fructose beverages are more health damaging than glucose beverages for overweight consumers, May 2009Elevated triglyceride levels can be used to predict nerve loss, May 2009Restoring leptin sensitivity in the brain can lower glucose levels and increase activity levels in mice, June 2009Promising diabetic retinopathy treatment developed from natural human peptide and nanoparticles, June 2009Current body mass index measurements could overestimate obesity for African-Americans, June 2009 Form 990 III 4a Development of metabolic syndrome could be associated with bearing children, June 2009Fox01 protein links inflammation and insulin resistance in type 2 diabetes, August 2009Glucose intolerance reversed with carnitine supplementation in obese animals, August 2009Novel biomarkers for predicting response to treatment in diabetic nephropathy, August 2009Deaf1 gene has possible link to development of type 1 diabetes, September 2009Saving limbs using gene therapy and stem cells, November 2009Genetic Markers for End-Stage Renal Disease in Type 1 Diabetes identified, December 2009 Form 990 III 4a Promotion of Scientific Medical ResearchScientific Sessions Scientific Sessions -- the worlds largest scientific and medical conference focused on diabetes and its complications -- exemplifies the Associations leading role in the diabetes landscape, while functioning as an important platform for driving diabetes awareness In 2009, the Associations 69th Scientific Sessions was held in New Orleans, LA, and drew more than 16,300 top scientists, physicians and other health care professionals from around the world Through sessions focused on the latest information in the areas of basic and clinical research and on the application of this information to clinical practice, attendees developed skills enabling them to Form 990 III 4a Discuss key issues in the management of diabetic dyslipidemia Identify cardiorenal issues related to diabetes and their implications for optimal diabetes management Assess pro and con data on diabetes as a key diagnostic factor for cardiovascular disease Describe the cardiovascular risks associated with hypoglycemia Assess the effectiveness of current prevention and behavioral interventions for underserved populations List clinical issues related to diabetes and exercise and their impact on diabetes management Review tactics and controversies in the management of hyperglycemia in the hospital Form 990 III 4a Assess the safety and effectiveness of drug therapy during pregnancy Review current research on using the A1C test for the diagnosis of diabetes Discuss the role of sex hormones in the epidemiology of type 2 diabetes and cardiometabolic risk Review the latest research on brown adipose tissue and the clinical implications for diabetes management Discuss pro and con data related to whether autoimmunity influences beta cell regeneration

Identifier	Return Reference	Explanation
Form 990 III	4b	INFORMATIONKnowledge is critically important in the fight against diabetes As the leading voice in the diabetes community, the American Diabetes Association is committed to providing all people affected by diabetes, the health care professionals who work on their behalf, as well as the general public with credible, up-to-date diabetes-related information, tools and resources We focus our efforts on1 Raising the awareness of diabetes as a serious disease 2 Addressing the epidemic of diabetes through prevention, information and education initiatives

Form 990 III 4b How We Connect With Our ConstituentsThe American Diabetes Association reaches its constituents through a number of channels including the Center for Information and Community Support, our websites, www diabetes org and www stopdiabetes com, award-winning books and publications for general consumers and health care professionals, the Education Recognition Program and Diabetes Physician Recognition Program, and the annual Scientific Sessions Form 990 III 4b Center for Information and Community Support American Diabetes Association representatives at the Center for Information and Community Support 1 800 DIABETES are our constituents personal guides to information on diabetes, as well as association programs and events The Center for Information and Community Support responds to more than 1000 phone and email inquiries each day In 2009, more than 300000 people contacted the center with questions and concerns, or to seek support or direction regarding diabetes and diabetes management At the core of this valuable service are highly trained representatives, who answer a wide range of non medical questions in English or Spanish Form 990 III 4b Websites www diabetes org and www stopdiabetes com The American Diabetes Associations award winning website, www diabetes org, is widely regarded as the most informative and credible diabetes and nutrition resource on the Internet Consumers, health care professionals and scientists can get the information they need 24 7 Following a major redesign, the new diabetes org launched November 2, 2009 The new site is more visually appealing and easy to navigate, while actively inviting visitors to volunteer, advocate, donate, and participate in local and national events Other updates include enhanced search capabilities, a database of recipes that meets Association guidelines, and a revamped discussion forum Form 990 III 4b For the general consumer, diabetes org provides a host of interactive tools such as MyHealthAdvisor, which calculates a persons risk for type 2 diabetes, heart disease and stroke MyFoodAdvisor, designed to help people make healthy food choices Planet D, an interactive site for children and teens with type 1 diabetes as well as Ask the Pharmacist, the Diabetes Risk Test, and our very popular message boards Offering news and information that cover the full spectrum of living well with diabetes from newly diagnosed to ongoing diabetes management diabetes org is the place to go to learn about staying healthy and thriving Form 990 III 4b For health care professionals and scientists, diabetes org provides the latest resources in diabetes care and research DiabetesPro, at www professional diabetes org, with the most advanced professional education website in any branch of medicine, gives 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 diabetes meetings and continuing education opportunities, news, clinical practice recommendations, professional membership, journals and books, research grants, recognition programs and professional section interest groups Form 990 III 4b In 2009, the American Diabetes Association began offering Point of Care CME, which allows medical professionals to earn continuing medical education credits when they conduct medical information searches on ADAs DiabetesPro website Traditionally, medical professionals were required to attend credited meetings or take specially structured online courses in order to earn the credits they need to maintain their license to practice This new program allows professionals to earn credits for their real-world, point of care information searches in ADAs peer-reviewed journals, Diabetes and Diabetes Care Form 990 III 4b Also launched in November 2009 as part of the Associations Stop Diabetes SM movement, www stopdiabetes com is a companion site to diabetes org and functions as the online hub of the movement The site reflects our call to SHARE, ACT, LEARN and GIVE through the stories and voices of those affected by diabetes and offers various avenues for people to get involved in our fight to stop diabetes In November and December 2009, stopdiabetes com welcomed more than 27,700 new visitors and collected almost 4,000 email addresses and more than 800 personal stories from those affected by diabetes

Identifier	Return Reference	Explanation
Form 990 III	4b	PublicationsThe American Diabetes Association is the leading authority in creating and publishing the w orlds most respected consumer magazine, books, and professional journals about diabetes ConsumersThe Associations consumer publications achieve a broad reach through both a monthly healthy living magazine and a full range of consumer books The aw ard w inning Diabetes Forecast magazine provides the best information on diabetes research, treatment and practical tips for day to day coping In 2009, each monthly issue of Diabetes Forecast had an audited circulation of more than 507000 w ith a pass along readership of close to five million

Form 990 III 4b Meal Planning and cooking titles continue to be the most popular books sold to consumers The Associations 2009 releases included Real Life Guide to Diabetes, and The Ultimate Diabetes Meal Planner both winners of the 2010 Nautilus Book Awards What Do I Eat Now A Step-by Step Guide to Eating Right with Type 2 Diabetes, and The Diabetes Seafood Cookbook a 2010 Gourmand Award Winner Form 990 III 4b Health Care ProfessionalsIn 2009, the Association released Life with Diabetes, 4th ed used by Recognized Education Program clients to meet the National Standards for Diabetes Self-Management education, and Transitions in Care, a guide to transition type 1 children to adulthood Professional Journals are another method of outreach for the Association to health care providers The Association continued its premier diabetes journals that disseminate important scientific and clinical information about the prevention and treatment of diabetes In total, the professional journals reached more than 54000 health care professionals including researchers, physicians and diabetes educators Form 990 III 4b Professional EducationThe primary goal of the American Diabetes Associations 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 In 2009, the American Diabetes Association reached more than 35,000 health care professionals with its live, print and electronic education activities The Association conducts several Continuing Education programs for health care professionals as well as educational opportunities without continuing education credit To make resources available to the most professionals, these programs are provided throughout the year through live conferences, webcasts, online interactive programs and in print Form 990 III 4b In addition, the American Diabetes Association coordinates Professional Section Interest Groups to provide a forum for the exchange of information in specific areas of diabetes research and care The Interest Groups have more than 13000 members To further support health care providers, the Association completed the annual update to its Clinical Practice Guidelines, providing a resource for effective diabetes care to millions of patients each year Form 990 III 4b Education Recognition ProgramDesigned to ensure and promote quality education for people with diabetes, the American Diabetes Associations Education Recognition Program ERP began in 1986 with 35 recognized diabetes education programs In 2009, the ERP had more than 2000 recognized programs at more than 3400 sites nationwide The ERP assesses whether applicants meet the National Standards for Diabetes Self-Management Education DSME The Standards are designed to be flexible enough to be applicable in any health care setting, from physicians offices and HMOs to community centers and hospitals Recognition by the American Diabetes Association ensures reimbursement to health care professionals for delivering diabetes education in the accredited program Form 990 III 4b Diabetes Physician Recognition ProgramTo prevent the devastating complications of diabetes, the National Committee for Quality Assurance NCQA encourages the provision of comprehensive, quality health care to people with diabetes To support this goal, the Diabetes Physician Recognition Program, cosponsored by the American Diabetes Association, assesses physicians on their performance on measures of care for adult measures and measures of care for pediatric measures Nearly 7000 physicians are recognized nationwide Form 990 III 4c ADVOCACY AND PUBLIC AWARENESSAwareness, Education SupportThe Associations efforts to reach those who have diabetes but dont know it via public awareness campaigns such as American Diabetes Association Alert Day are paying off Only 24 of diabetes is undiagnosed, down from 30 in 2005 and from 50 ten years ago However, the total prevalence of diabetes in the United States from 2005 to 2007 increased 13 5 The most recent study, with 2007 data, estimates the total annual economic cost of diabetes to be 174 billion Medical expenditures totaled 116 billion -- 27 billion for diabetes care, 58 billion for chronic diabetes-related complications, and 31 billion for excess general medical costs

Identifier	Return Reference	Explanation
Form 990 III	4c	As diabetes has reached epidemic proportions, the time is now to reach out to all Americans and make sure everyone understands that diabetes is not just a condition, but a disease with deadly consequences

Form 990 III 4c Stop Diabetes SMStop Diabetes, which launched in conjunction with American Diabetes Month in November 2009, is the movement to end the devastating toll that diabetes takes on the lives of millions of individuals and families across our nation Stop Diabetes is the largest coordinated public awareness efforts ever launched by the American Diabetes Association to raise awareness and rally support for our cause It aims to inspire and mobilize the general public, volunteers, donors, corporations, and the scientific and medical communities to rally around our cause and our call to share, act, learn and give Form 990 III 4c The main goals of our Stop Diabetes movement are to EDUCATE the general public about the devastating physical, emotional and financial toll diabetes wreaks every hour, every day, every year on tens of millions of American children and adults IGNITE a sense of urgency about diabetes and its deadly consequences INSPIRE individuals, families, communities, corporations and health care providers to get involved and join the movement to change the future of diabetes Stop Diabetes provides millions with the opportunity to get involved and help raise awareness, promote healthy living, and raise money to fund educational outreach, advocacy efforts and critical research that will ultimately stop diabetes once and for all Form 990 III 4c November 2009 Launch activities included a national media campaign, a media tour, the CBS Super Screen in Times Square in New York City, and social media outreach The American Diabetes Association integrates a public awareness message into virtually every program and fund-raising activity Each of the 42 9 million pieces of direct mail that the Association sent out in 2009 contained a call to action message to take the diabetes risk test, see a health care professional or learn more about preventing diabetes and its complications All of our special event activities reach out to participants with the same calls to action, and we incorporate this program message into our community-based outreach events In addition, we have activities that are specifically focused on increasing the publics awareness of diabetes and its effects Form 990 III 4c American Diabetes Association Alert DayAmerican Diabetes Association Alert Day is a one-day wake-up call to inform the American public about the seriousness of diabetes, particularly when diabetes is left undiagnosed or untreated Observed on the fourth Tuesday of every March, Diabetes Alert Day encourages Americans through various media channels and community based outreach efforts to take the Diabetes Risk Test in person, at diabetes org or by calling 1-800-DIABETES Through these efforts, we realize record volumes of calls to the Center for Information and Community Support and visits to diabetes org and stopdiabetes com as the public responds to our call to action Form 990 III 4c For the 21st American Diabetes Association Alert Day on March 24, 2009, the Association developed a web-based widget version of the Diabetes Risk Test which was shared and installed nearly 17000 times and viewed more than 1 6 million times Form 990 III 4c American Diabetes MonthObserved each November, American Diabetes Month incorporates local and national activities that focus on people with diabetes and all those affected by diabetes to raise awareness about the disease as well as its potentially life-threatening diabetes-related complications such as heart disease, stroke, kidney disease, blindness and amputation During American Diabetes Month 2009, the Association seized numerous opportunities to introduce the Stop Diabetes movement and invite people across the country to join our fight against diabetes Form 990 III 4c The November 2 press release appeared in more than 11000 Spanish digital newspapers The English version collected more than 71 million online impressions Essence, Parents Magazine, and Prevention magazine featured stories Two separate matte releases camera-ready articles about Stop Diabetes collected 951 placements R Paul Robertson, MD, President, Medicine Science, appeared via satellite on the Dr Nancy Show on MSNBC 9 7 million online impressions, 200000 viewers Richard M Bergenstal, MD, President-Elect, Medicine Science, and Association volunteer Virginia Peragallo Dittko, RN, BC ADM, MA, CDE, appeared on the TODAY Show segment about diabetes 2 7 million online impressions, 5 56 million viewers

Identifier	Return Reference	Explanation
Form 990 III	4c	The Associations social media campaign recruited 300 new followers on Twitter, 312 Stop Diabetes Twibbon supporters, and hundreds of mentions of the StopDiabetes hashtag Stop Diabetes was mentioned on more than 60 blogs The widgets were installed 247 times and viewed 6462 times On Facebook, 3905 new fans were gained, adding to the 1403 interactions with the Associations 12 wall posts throughout November The Stop Diabetes videos were viewed on YouTube more than 1600 times The World Diabetes Day press release collected 71 web clips

Form 990 III 4c American Diabetes Association EXPO The American Diabetes Association EXPO is the nations premier diabetes education and awareness initiative, bringing together leading brands and concerned audiences to promote awareness, review the latest products and services available, and change the future of diabetes Attendees come to this free event in search of answers from how to handle a recent diagnosis to finding better diabetes management solutions In 2009, 16 American Diabetes Association EXPOS around the country reached more than 85400 people Form 990 III 4c Reaching High-risk Populations Certain populations including African Americans, Latinos, Native Americans and Asian American Pacific Islanders are disproportionally affected by diabetes For example, African Americans are 1 6 times more likely to have diabetes than non Latino whites, and that in some Native American communities, one in two adults has diabetes To help curb this inequity, the American Diabetes Association has put targeted community based programs in place and works closely with civic, social, faith based and health care representatives within these communities We also frequently partner with other community and health organizations, such as the National Diabetes Education Program NDEP, and host an annual Disparities Conference that focuses on type 2 diabetes and obesity in high risk populations Form 990 III 4c African American Initiatives Live EMPOWERED Approximately 3 7 million or 14 7 of all African Americans aged 20 years or older have diabetes Live EMPOWERED aims to increase awareness of the rates of diabetes among African Americans The initiative deepens the impact of diabetes education delivered to this audience about the seriousness of diabetes and its complications by teaching the importance of making healthy lifestyle choices and educating those with or at risk for developing diabetes about prevention and management Community and faith based educational programs and workshops, such as I Decide to Stop Diabetes Day at Church and Project POWER are important components of Live EMPOWERED Form 990 III 4c Through fun and informative workshops conducted by trained Association staff and volunteers, community members can learn more about diabetes as well as the importance of making healthy food choices and being physically active on a regular basis Live EMPOWERED ended the second year of the I Decide to Stop Diabetes Day at Church campaign, reaching more than 400000 people in one month in more than 600 churches With both education modules and awareness campaigns, Live EMPOWERED reached more than one million people in 26 markets in 2009 Form 990 III 4c Latino Initiatives Por Tu Familia Diabetes is an urgent health problem in the Latino community The rates of diabetes are almost double those of non Latino whites Through Por tu familia, or for your family, the American Diabetes Association provides high impact education to the Latino community in English and Spanish about the seriousness of diabetes and the importance of regular exercise and healthy eating Given the diversity within the Latino community, Por Tu Familia employs a multifaceted approach, adaptable to a variety of community settings Form 990 III 4c Outreach activities include various educational and culturally appropriate workshops including Health and Flavor in the Latino Kitchen Salud y sabor en la cocina latina, a nutrition workshop, With All My Heart De todo corazon, a cardiovascular health workshop and Everybody Dance for Your Health Todos a bailar para su salud , a physical activity workshop, as well as Feria de salud por tu familia, a street health fair that brings together thousands of community members interested in learning more about diabetes and diabetes management In 2009, Por tu familia reached more than 378500 people through its various outreach activities Form 990 III 4c Native American Initiatives Awakening the Spirit At a rate of nearly 17 , American Indians and Alaska Natives have the highest age-adjusted prevalence of diabetes among all U S racial and ethnic groups The American Diabetes Association provides educational outreach programs to help these communities combat the growth of this deadly disease Awakening the Spirit is the Associations way to carry a message of hope to Native people that type 2 diabetes is preventable and treatable Awakening the Spirit encourages Native Americans to combat diabetes by making healthy food choices and becoming more physically active Nationally and locally, Native American communities connect through Awakening the Spirit to encourage Congress to continue funding diabetes education programs in tribal communities

Identifier	Return Reference	Explanation
Form 990 III	4c	For example, the program was instrumental in advocating for the reauthorization of the Special Diabetes Program for Indians SDPI

Form 990 III 4c In 2009, the Native American Initiatives reached more than 11500 people In addition, the Association presented its first Voices for Change Award, which recognized Special Diabetes Programs for Indians SDPI recipients for their effective diabetes prevention and treatment services in the American Indian and Alaska Native communities The Awakening the Spirit team selected diabetes programs for their innovation, advocacy, and outcomes in the delivery of culturally-based community driven diabetes treatment and prevention strategies Form 990 III 4c Asian American, Native Hawaiian and other Pacific Islander AANHPI Workgroup This workgroup was formed to support the development of educational and outreach strategies that will reach the varied ethnic groups that make up the AANHPI populations A goal of this initiative is to develop strategies to prevent or delay the onset of diabetes in AANHPI populations as well as improve the health outcomes of AANHPI living with diabetes Initiatives developed will incorporate culturally and linguistically appropriate education, community support, and advocacy efforts Form 990 III 4c Youth and Diabetes Family LinkChildren affected by diabetes and their families have unique needs In 2009, the Association launched Family Link to enhance and expand the core components of its family and youth with diabetes outreach strategy, while merging them under one umbrella initiative An expansion of the Family Resource Network, Family Link is the Associations commitment to connecting families to expert guidance, peer support, and tools that help care for a child with diabetes from initial diagnosis to adulthood and beyond Our objective is to create lifelong support relationships that help the child with diabetes succeed and engage both children and families in the vital work of the American Diabetes Association We connect with families affected by diabetes via various Family Link program components, including Form 990 III 4c Family Link Parent MentorsEveryday Wisdom Kit Family Link Web Community Planet D Web CommunityFamily Link E-newsSafe at SchoolAmerican Diabetes Association Diabetes CampClassroom LessonsIn 2009, nearly 115 Family Link volunteers provided information and emotional support to newly diagnosed families In addition, a new Everyday Wisdom kit was launched in May 2009 with more than 8000 kits distributed through December 2009 This represents 20 more kits distributed per month than in 2008 Form 990 III 4c American Diabetes Association Diabetes CampKids with diabetes often feel like they are the only ones living with the disease but not at the Associations Diabetes Camps Here, they have a great time making new friends, participating in traditional camp activities, building confidence in managing their diabetes and they do not feel different or alone Parents are able to send their children to camp with the confidence that trained staff, who often have diabetes themselves, put medical safety as a top priority In 2009, the Association made it possible for 7500 children and teens with diabetes to share in the summer camp experience through one of the 56 weeks of camp the Association offered in 45 locations in 27 states or at one of the camps offered by other organizations that met the Associations high standards of care Form 990 III 4c The Association awarded 362360 in camp scholarships for children to attend the American Diabetes Associations Diabetes Camps and 77000 for children to attend a diabetes camp where the Association does not offer one Form 990 III 4c Diabetes in the Workplace Winning at WorkDiabetes accounts for 15 million days of absence from work, 120 million work days with reduced performance, six million reduced productivity days for those not in the workplace, and an additional 107 million work days lost due to unemployment disability attributed to diabetes People with diagnosed diabetes, on average, have medical expenditures that are approximately 2 3 times higher than those without diabetes One of every 10 health care dollars is spent on diabetes As previously noted, diabetes costs the U S 174 billion each year

Identifier	Return Reference	Explanation
Form 990 III	4c	Our Winning at Work program aims to raise awareness and teach about diabetes prevention and management by providing organizations with resources its employees need to live healthier lives Components include the Winning at Work Awareness Kit posters, risk tests, take one cards, the Winning at Work Guide with easy to implement workplace activities, and the Winning at Work website

Form 990 III 4c AdvocacyAdvocacy plays an integral role in the American Diabetes Associations work to fulfill its mission We fight for people with diabetes in Washington, DC, in state capitols and in our courts Diabetes Advocates around the country work to increase federal and state funding to prevent, treat and cure diabetes improve access to adequate and affordable health care and eliminate discrimination against people with diabetes at school, work and elsewhere in their lives Form 990 III 4c In 2009, the Associations advocacy work resulted in a significant number of victories Victories in our fight against employment discrimination based on diabetes included a jury verdict in the District of Columbia finding the FBI had discriminated when it rejected Jeff Kapche from the job of Special Agent because he uses multiple injection therapy to manage his diabetes the State Department settling a case to allow a person with diabetes to work in the Foreign Service and the Coast Guard reversing course to allow a person with diabetes to be a ship captain Form 990 III 4c With the support of our Diabetes Advocates, the Americans with Disabilities Act Amendments Act, one of the most important pieces of diabetes legislation of the past decade, was passed in 2008, overturning a series of Supreme Court decisions that had made it increasingly difficult for people with diabetes and other serious medical conditions to be protected from discrimination because it defined disability too narrowly Since the law went into effect on January 1, 2009, the Association has become a national leader in the training of attorneys, health care professionals, and people with disabilities about their rights under the new law while successfully working to ensure that the new regulations fully recognize that people with diabetes are protected from discrimination Form 990 III 4c Through our Safe at School Campaign more than 100 parent workshops took place in 2009 alone, and we expanded our resources to include legal advocacy materials for postsecondary students A new law in New Jersey ensures that capable students can self manage their diabetes while at school and that school staff can be trained to administer glucagon when a child is experiencing severe hypoglycemia, while in North Carolina a previously passed diabetes school care law was strengthened to include reporting requirements and to fully encompass charter schools An Executive Order on stem cell research achieved our long sought goal of lifting restrictions on federal funding for embryonic stem cell research Favorable regulations are now in place and new stem cell lines are being utilized by researchers Form 990 III 4c The American Recovery and Reinvestment Act stimulus bill resulted in an additional 10 billion in funding being awarded to the National Institutes of Health, 1 billion for prevention and wellness at the Department of Health and Human Services, 19 billion for health information technology, and 87 billion to states to make up for Medicaid shortfalls The State Childrens Health Insurance Program SCHIP was reauthorized and expanded, providing health insurance to seven million children of families who otherwise could not afford coverage The Association fought tirelessly to ensure that federal health care reform legislation addressed the needs of people with, and at risk for, diabetes including ending the discrimination faced by people with diabetes in the insurance market and the inclusion of wellness and prevention provisions within health reform Form 990 III 4c In 2009, 13 state bills were passed that improve nutrition and physical education Menu labeling laws were passed in eight more jurisdictions and, as a result of the progress at the state and local level, an agreement was reached on federal menu labeling legislation that ultimately became a part of the larger health reform package Diabetes is a disease with deadly consequences, learn more at www diabetes org and www stopdiabetes com Form 990 IV 12 The financial results of the legal entity of the American Diabetes Association are reported and audited through consolidated financial statements which also contain the results of three subsidiary organizations The financial results are consolidated to be in compliance with generally accepted accounting principles, and the legal entity of the American Diabetes Association comprises 99 of the consolidated results In addition, the audit opinion references supplemental consolidating schedules which separately report the revenues and expenses of the legal entity of the American Diabetes Association

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2009

Open to Public Inspection

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 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

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
American Diabetes Association Research Foundation Inc 1701 N Beauregard St Alexandria, VA 22311 54-1734511	The objective of the Foundation is to secure major gifts and grants to fund diabetes- related resear	VA	501 c 3	7	N/A
Shaping Americas Health Association for Weight Mgmt & Obesity Prevention 1701 N Beauregard St Alexandria, VA 22311 20-2993719	To prevent and treat excess weight and obesity, and to facilitate a better scientific understanding o	VA	501 c 3	7	N/A
American Diabetes Association Property Title Holding Corporation 1701 N Beauregard St Alexandria, VA 22311 54-1948004	To hold title to property utilized by the American Diabetes Association and to perform related servi	VA	501 c 2	N/A	N/A

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) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	**No**		**Yes**	**No**

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

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

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

		Yes	No
1 During the tax year, did the orgranization 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 **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d	Yes	
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n Sharing of paid employees	1n	Yes	
o Reimbursement paid to other organization for expenses	1o		No
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	American Diabetes Association Research Foundation Inc	b	30,131,155
(2)	Shaping America's Health Assoc for Weight Mgmt and Obesity Prevention	b, d,	3,115,025
(3)	American Diabetes Association Research Foundation Inc	k, m,	1,136,961
(4)	American Diabetes Association Property Title Holding Corporation	r	1,622,383
(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) Are all partners section 501(c)(3) organizations? Yes	(d) No	(e) Share of end-of-year assets	(f) Disproprtionate allocations? Yes	(f) No	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes	(h) No

• If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ ☑

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed)

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization American Diabetes Association	**Employer identification number** 13 1623888
	Number, street, and room or suite no If a P O box, see instructions 1701 N Beauregard Street	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions Alexandria , VA 22311	

Check type of return to be filed (File a separate application for each return):

☑ Form 990 ☐ Form 990-PF ☐ Form 1041-A ☐ Form 6069
☐ Form 990-BL ☐ Form 990-T (sec 401(a) or 408(a) trust) ☐ Form 4720 ☐ Form 8870
☐ Form 990-EZ ☐ Form 990-T (trust other than above) ☐ Form 5227

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of ▶ Deborah L. Johnson

Telephone No ▶ (703) 549-1500 FAX No ▶ (703) 549-2856

• If the organization does not have an office or place of business in the United States, check this box ▶ ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ If this is for the whole group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until November 15, 20 10.

5 For calendar year 2009, or other tax year beginning ______, 20__, and ending ______, 20__

6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension Additional time is needed for final review and signature.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	$
c	**Balance Due.** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete, and that I am authorized to prepare this form

Signature ▶ Deborah Johnson Title ▶ Chief Financial Officer Date ▶ 7/2/2010

Form **8868** (Rev April 2009)
Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ► ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ► ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (*e-file*). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

Type or print	Name of Exempt Organization	**Employer identification number**
File by the due date for filing your return See instructions	Number, street, and room or suite no If a P O box, see instructions	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	

Check type of return to be filed (file a separate application for each return)

☐ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- The books are in the care of ► ....

Telephone No ► (.........) .... FAX No ► (.........) ....

- If the organization does not have an office or place of business in the United States, check this box ► ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)________ If this is for the whole group, check this box ► ☐ If it is for part of the group, check this box ► ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until .... , 20.... , to file the exempt organization return for the organization named above The extension is for the organization's return for
► ☐ calendar year 20...... or
► ☐ tax year beginning .... , 20...... , and ending .... , 20....

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	$
c	**Balance Due.** Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions