Mission and Vision

The National Osteoporosis Foundation (NOF) is the leading health organization dedicated to preventing osteoporosis and broken bones, promoting strong bones for life and reducing human suffering through programs of public and clinician awareness, education, advocacy and research.

Established in 1984, NOF is the nation’s only organization solely dedicated to osteoporosis and bone health. Our goal is to educate the public and health professionals on ways to prevent, diagnose and treat osteoporosis.

We understand it takes doctors, caregivers, family members and other health professionals working together as a team to effectively manage this disease. While we have made significant strides in the fight against osteoporosis, our team must continue to grow to tackle the remaining challenges and curb the increased incidence of osteoporosis among our aging population.

With the support of our partners and donors, we will continue advocating for medical research to better diagnose and treat osteoporosis; educating and training healthcare providers to ensure the best patient care and support for those who fracture; and raising public awareness to help people of all ages build healthy bones that will last a lifetime.
Letter from the President

This past year has been one of change and progress for the National Osteoporosis Foundation. We launched a new awareness initiative for National Osteoporosis Month in May that encourages the public to *Break Free from Osteoporosis* by getting to know their risk factors for the disease and taking steps to prevent it. With the help of our Bone Health Ambassadors and five national chefs who partnered with NOF to create bone healthy recipes, we generated more media coverage than ever and made people aware of the fact that while there is no cure for osteoporosis, it is avoidable for many of those at risk.

We also broke new technological ground by making NOF’s updated *Clinician’s Guide to the Prevention and Treatment of Osteoporosis* available as an app, allowing healthcare professionals to access the resource directly from their iPhones and iPads. The updated version of the *Clinician’s Guide* includes new guidance on vertebral fracture assessment and the use of biochemical markers, as well as updated information on calcium, vitamin D and medications, making it a go-to resource to inform clinical decision making for those managing the diagnosis and treatment of men and women at high risk for fractures.

Over the course of the year, we also focused our efforts on the importance of fracture prevention and announced plans for our first comprehensive Fracture Prevention Initiative. The number of fractures caused by osteoporosis per year exceeds the incidence of heart attack, stroke and breast cancer combined, yet the majority of those who fracture are never tested or treated for osteoporosis.

To close this care gap, health systems abroad and select health care providers in the U.S. have created programs to identify patients after a fracture and ensure their care is appropriately managed through a Fracture Liaison Service (FLS). FLS programs are the key to reducing the two million bone breaks caused by osteoporosis every year and I’m proud to say NOF and its partners are working on initiatives to spark the widespread implementation of effective post-fracture prevention and care coordination programs, which are so critically needed in the U.S. today.

We realize reaching our goals is only possible with the continued support of our members, sponsors and partners and we are grateful for all you do to help further our mission. On behalf of NOF, I would like to thank the NOF Board of Trustees, staff, members, partners, donors and volunteers whose support for the organization have made this past year’s progress possible.

Sincerely,

Robert R. Recker, M.D
President
Letter from the Executive Director and CEO

As I look back on the accomplishments made over the past year, I can honestly say 2013 was a significant year for the National Osteoporosis Foundation. By continuing our commitment to making osteoporosis a disease that’s easier for the public to understand and take action against, we have focused our programmatic and educational efforts on the importance of fracture prevention.

Osteoporosis is responsible for two million broken bones every year in the U.S., yet the majority of patients get their broken bone fixed without realizing they have osteoporosis or low bone mass. In fact, only 23 percent of women age 67 and older are tested or treated for osteoporosis after breaking a bone. And we know that if left untreated, patients who break a bone are twice as likely to break another.

The current lack of commitment to fracture prevention is a major failing of the U.S. healthcare system, leading to increased costs, morbidity and mortality. That’s why this year we’ve worked with our partner organization, the National Bone Health Alliance, to launch a new initiative that aims to reduce this nearly 80 percent post-fracture care gap. Our comprehensive Fracture Prevention Initiative will provide training tools and resources to help healthcare professionals implement programs to prevent repeat fractures and improve their patients’ bone health.

We also remain committed to educating the public on the simple steps they can take to prevent broken bones and the pain and suffering that comes with osteoporosis. For National Osteoporosis Month in May, we launched Break Free from Osteoporosis, a new awareness initiative encouraging the public to get to know their risk factors for osteoporosis and take action to protect against broken bones.

With fracture prevention at the core of everything we do, our public awareness initiatives and programs to educate and train healthcare professionals will help ensure bone health is a priority of all Americans and that osteoporosis has a place in our national healthcare agenda.

With our new prevalence data showing osteoporosis and low bone mass currently affect more than 54 million Americans, we know changing the course of this disease won’t be easy. Our goals are ambitious and we won’t be able to reach them without dedicated partners and supporters like you. Your participation and contributions have never been more critical to our success.

We are grateful and thank you for everything you do to support the National Osteoporosis Foundation. I’m confident that together we can make a difference in the fight against osteoporosis by preventing broken bones and ending the pain and suffering the disease causes for millions of Americans.

Sincerely,

Amy Porter
Executive Director and CEO
Every 20 seconds, someone in America breaks a bone due to osteoporosis, but only about 20 percent of those who break bones are tested or treated for osteoporosis. At NOF, we’re committed to closing this care gap by raising awareness for osteoporosis and encouraging people to get to know their risk factors for the disease and take action to protect their bones starting at an early age.

Through our online support community with more than 15,000 participating members, our quarterly e-newsletter and various support groups across the country, we’re connecting with more people than ever before and spreading the word that there are steps you can take to prevent, slow or stop the progress of osteoporosis.
SETTING THE RECORD STRAIGHT ON CALCIUM

After releasing new data at the end of 2012 showing that calcium supplementation causes no increased risk of cardiovascular disease, we worked aggressively with the media and our partners to set the record straight on the benefits of calcium throughout 2013. By tracking emerging studies and issuing rapid response statements clarifying the benefits of calcium and the risks associated with over consumption, NOF generated nearly 100 million media impressions with coverage in leading print and online outlets, including the New York Times, Washington Post, Huffington Post, AARP.com, MSN Healthy Living, ThirdAge and more.

We also secured a partnership with the Council for Responsible Nutrition (CRN) and worked with the American Heart Association (AHA) to share the calcium news with their constituents. In partnership with CRN, we hosted two webinars to share the latest recommendations and research on calcium and vitamin D with physicians, nurse practitioners, nurses and pharmacists. The webinars attracted hundreds of participants and provided them with valuable information to answer their patients’ questions on the role of calcium and vitamin D in overall bone health. As a result of our outreach to AHA, NOF’s 2012 calcium data was featured in two articles that ran in Science News during National Heart Health Month in February.

BREAK FREE FROM OSTEOPOROSIS

In May for National Osteoporosis Month, NOF launched Break Free from Osteoporosis, a new national awareness initiative encouraging the public to get to know their risk factors for osteoporosis and take action to protect against it. As part of the campaign, we partnered with five of America’s top chefs and asked them to create a new recipe or adapt an existing recipe to meet our bone healthy criteria. The chefs unveiled their creations to kick off the campaign and we encouraged the public to try the recipes or their own take on them as part of a commitment to eating right and exercising for bone health.
NOF’s Bone Health Ambassador, Barbara Hannah Grufferman, also played a significant role in raising awareness for the importance of bone health during National Osteoporosis Month. Her weekly series of videos posted on AARP.com and regular Huffington Post columns reached millions of adults age 50 and older with diet and exercise tips to help them stay healthy, active and strong as they age. Barbara’s videos and blog posts also regularly featured advice on the best food and exercises for bone health.

A RECORD SETTING YEAR

As a result of these initiatives and an effort to change the conversation on osteoporosis through ongoing media outreach, 2013 was a record-setting year for NOF’s media reach. Throughout the year, top national media outlets and women’s magazines, including FOX News, Good Housekeeping, Men’s Journal, MORE Magazine, New York Times, The Today Show, USA Today, Wall Street Journal and more covered osteoporosis and echoed our call to action for men and women of all ages to build strong bones. In total, more than 4,500 articles ran in 2013 mentioning the National Osteoporosis Foundation, resulting in more than 650 million media impressions.

NOF.org, our most valuable channel for communicating directly with osteoporosis patients, caregivers and the public, also attracted record-setting traffic with monthly visitors to the site increasing from 60,000 per month in the beginning of the year to nearly 100,000 per month by year’s end.

Our online support community hosted by Inspire to offer patients and caregivers a place to turn for peer-to-peer support nearly doubled in size, growing from nearly 8,500 active members at the end of 2012 to 15,000 active members by the end of 2013. Thanks to the support of our volunteer moderators who actively engage in conversations with community members to make sure their questions and concerns are addressed, we have more active community members now than ever before and we’re thrilled to see the number growing everyday.
At NOF, our goal is to ensure osteoporosis patients and those who fracture have the best care and support available by educating and training health professionals on ways to prevent, diagnose and treat the disease.

In December, we were awarded Accreditation with Commendation by the Accreditation Council for Continuing Medical Education (ACCME) for six years as a provider of Continuing Medical Education, elevating our efforts to serve as a trusted source of education and training for healthcare professionals. Through our educational initiatives, NOF provides the latest osteoporosis research and clinical information to help healthcare professionals advance their practices and ultimately improve patient care. In addition, the information provided through our annual Interdisciplinary Symposium on Osteoporosis, as well as our print and online resources, journals, e-newsletters and webinars, helps ensure that the team of health professionals involved with diagnosing and treating osteoporosis patients and those at high risk for fracture have the information they need to make informed clinical decisions.
INTERDISCIPLINARY SYMPOSIUM ON OSTEOPOROSIS (ISO13):
PATIENT CENTERED CARE—DEVELOPING SUCCESSFUL BONE HEALTH TEAMS

Renamed the Interdisciplinary Symposium on Osteoporosis to reflect the team of healthcare professionals it takes working together to effectively diagnosis and treat osteoporosis, ISO13 was held in Chicago from April 18-21 and was one of NOF’s most successful meetings to date.

The meeting featured more than 30 leading osteoporosis researchers and clinicians as speakers, showcased a number of exhibitors, and attracted more than 400 attendees, representing the different specialties that make up an effective osteoporosis team.

As the premier scientific meeting dedicated entirely to the treatment and study of osteoporosis, the ISO13 plenary and breakout sessions, pre-conference workshops, nursing and exercise and rehabilitation symposium, networking events and exhibit hall gave attendees a wide range of opportunities to start making connections and building their bone health teams. Attendees were able to make new contacts from different specialties, while also growing their osteoporosis knowledge base and discovering best practices to take home to their patients.

NOF also hosted Healthy Bones, Build Them for Life: A Free Consumer Forum as the kickoff event for ISO13. The event was held at the Union League Club of Chicago and attracted nearly 100 Chicago residents. NOF’s Bone Health Ambassador, Barbara Hannah Grufferman moderated the interactive panel discussion with leading osteoporosis experts, including Murray Favus, M.D., Professor of Medicine and Director of the Bone Program at the University of Chicago Medicine; Karen Kemmis, DPT, Physical Therapist and Exercise Physiologist at SUNY Upstate Medical University in Albany, NY and P. Mona Khanna, M.D., MPH, FACP, FACPM, FACOEM, Medical Contributor, Fox Chicago News. The experts answered audience questions and shared advice on topics ranging from the best foods to eat for healthy bones to the risks and benefits of different osteoporosis medications.

PROFESSIONAL PUBLICATIONS

In 2013, NOF released an updated version of its Clinician’s Guide to Prevention and Treatment of Osteoporosis, which includes updated guidance on vertebral fracture assessment and the use of biochemical markers of bone turnover, as well as updated information on calcium, vitamin D and medications. Long known as the go-to resource to inform clinical decision making for health professionals who manage the diagnosis and treatment of those with osteoporosis and at high risk for fractures, NOF is proud to now offer the Clinician’s Guide as an app. Thanks to the app, health professionals have access to the latest clinical decision making information directly from their iPhones and iPads.

In 2013, NOF also continued distributing its BoneSource® Alert professional e-newsletter and produced two new issues of Osteoporosis: Clinical Updates, its online publication offering information on timely topics relevant to clinical practice for continuing education credit. The BoneSource® Alert e-newsletter is distributed every other month to NOF’s professional members as a tool to keep them up-to-date on clinical issues related to bone health and osteoporosis. The e-newsletter includes medical news items; information on upcoming events and available resources; and links to articles from NOF’s scientific journal, Osteoporosis International.

Interest in and subscriptions to NOF’s scientific journal, Osteoporosis International, a joint initiative between NOF and the International Osteoporosis Foundation also continued growing. The international, multidisciplinary journal provides a forum for communications and idea exchange on the diagnosis, prevention, treatment and management of osteoporosis and other metabolic bone disease.
RESEARCH

NOF supports research to examine the latest clinical controversies and provide accurate and reliable information to health professionals and the public. NOF released new prevalence data estimating that 10.2 million adults have osteoporosis and another 43.4 million have low bone mass; more than one-half of the total U.S. adult population is currently affected.

The study is one of the first to look at the burden of osteoporosis using NOF’s criteria for diagnosing osteoporosis based on bone mineral density at the hip or spine, offering a baseline number of those with osteoporosis and low bone mass against which we can measure our progress going forward.

The study found that osteoporosis and low bone mass are very common conditions and while most of the individuals with or at-risk for osteoporosis are Caucasian women, a substantial number of men and women from other racial and ethnic groups also suffer from osteoporosis and low bone mass.

The data includes a state-by-state breakdown showing that states with increasingly high populations of retirement age adults as well as those with growing Hispanic populations have the highest prevalence of osteoporosis. California, Florida, Texas and New York currently have and are projected to have the highest number of individuals with osteoporosis or low bone mass, while Washington, DC, Wyoming, Alaska and North Dakota have the lowest number of individuals with osteoporosis or low bone mass.
2013 PROGRAM HIGHLIGHTS

PARTNERSHIPS

NOF partners with like-minded health organizations to extend its reach and elevate osteoporosis and bone health to issues of national concern. The best example of this collaboration is the National Bone Health Alliance (NBHA), a public-private partnership NOF and the American Society of Bone and Mineral Research (ASBMR) formed in 2011. With 56 organizational participants at the end of 2013, NBHA brings together the expertise and resources of its participating members to collectively promote bone health and prevent disease; improve diagnosis and treatment of bone disease; and enhance bone research surveillance and evaluation.
NBHA 20/20 VISION: REDUCING FRACTURE 20 PERCENT BY THE YEAR 2020

With NOF continuing to serve as a founding partner, NBHA is making strides toward reaching its 20/20 Vision of reducing the rate of fracture 20 percent by the year 2020. One of the organization’s primary initiatives is working to foster widespread implementation of the fracture liaison service (FLS) model of care. FLS is a tested and effective way to improve patient outcomes and decrease healthcare costs. FLS programs are widely viewed as the key to reducing the two million bone breaks caused by osteoporosis every year.

To spark widespread implementation of the FLS model of care, NBHA launched Fracture Prevention CENTRAL, an online portal offering tools, resources and case studies to help interested sites across the nation implement the fracture liaison service model of care. The online resource offers materials NBHA has compiled from a number of successful domestic and international post-fracture care programs and highlights the work of leading FLS programs, including the American Orthopaedic Association’s Own the Bone program, Kaiser Permanente and Geisinger Health System. The resource launched in mid-March and by the end of 2013, Fracture Prevention CENTRAL had attracted nearly 2,000 subscribers who registered on the site to access the free resources and materials it offers.

NBHA also hosted a six-part webinar series featuring the nation’s top FLS experts presenting on topics to guide interested sites through the steps to make the business case to support launching a secondary fracture prevention program and begin implementing an FLS program of their own. The webinar series, offered as live presentations and later for on demand viewing, attracted more than 2,000 participants.

In December, the NBHA formed a Bone Health Collaborative with the National Osteoporosis Foundation and CECity.com, Inc. (CECity), and announced plans to launch a cloud-based Fracture Liaison Service Demonstration Study (FLS Demonstration) to provide participating hospitals with the FLS model of care and CECity’s cloud-based MedConcert® platform, to assess the hospitals’ adoption and implementation of a fracture liaison service across their communities.

Funded by Merck, the FLS Demonstration Study is designed to demonstrate the ability to scale FLS programs for implementation in the community setting, while measuring the impact on patient care. The study includes targeting the nearly 80 percent care gap of older Americans who suffer bone breaks, but are not tested or treated for osteoporosis.

The study will begin in early 2014 and run for approximately 12 months within the three initial sites selected to participate. The Bone Health Collaborative partners expect to publish results of the study by mid-2015.

2MILLION2MANY

To bring widespread attention to the two million broken bones caused by osteoporosis in the U.S. every year, NBHA launched the 2Million2Many national awareness campaign in 2012 and continued campaign efforts throughout 2013. The campaign aims to elevate osteoporosis to an issue of national concern and issues a clear and simple call to action for healthcare professionals and consumers alike: if it’s 50+ fracture, request a test. The visual centerpiece of the campaign, “Cast Mountain,” is a 12-ft. tall and 12-ft. wide installation built of casts to represent the 5,500 bone breaks that occur in the U.S. in just one day due to osteoporosis.
The exhibit was on display in March for the 15,000 participants who attended the American Academy of Orthopaedic Surgeons (AAOS) annual meeting in Chicago and again in October for the 12,000 consumers who gathered to participate in AARP’s Life@50+ Expo in Atlanta. Cast Mountain generated a buzz at both events and gave NBHA staff the opportunity to talk with orthopedic surgeons and consumers alike about the importance of making the connection that broken bones in adults age 50+ are a sign of osteoporosis. Through one-on-one conversations, the meeting attendees were encouraged to spread the word that anyone 50 or older who breaks a bone needs to be tested for osteoporosis.
PHILANTHROPY

We Need You. Since 1984, NOF has relied on the support of individuals, organizations, foundations and corporations to sustain and enhance our efforts to prevent osteoporosis and build strong bones for life. Together we’ve been a successful team in the fight against osteoporosis, but we all have a role to play in tackling the remaining challenges and working to reduce the two million bone breaks caused by osteoporosis every year.

We thank our generous donors listed below, whose gifts have made a significant difference in the fight against osteoporosis. We realize reaching our goals of preventing osteoporosis and broken bones is only possible if we all work together and are grateful for all you do to support NOF.
THE PAUL G. ROGERS CIRCLE OF CHAMPIONS

Recognizing individuals and families who, like NOF’s founding chairman, the Honorable Paul G. Rogers, are advocates for a healthy America, the giving circle recognizes those who share Mr. Rogers’ tradition of action and advocacy to promote bone health and osteoporosis prevention through annual gifts totaling $5,000 or more. Gifts may be designated to specific program areas of donor interest or given to support NOF’s mission and the Honorable Paul G. Rogers’ vision of preventing osteoporosis and broken bones and promoting strong bones for life.

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NOF honors those who have directed their support to help others build, maintain and protect their bone health by including NOF in their estate plans.

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NOF thanks all of our contributors for their generous gifts over the past year. You have helped sustain and enhance our core programs and moved us closer to our goal of helping all Americans achieve healthy bones for life. With your support, we are working to change the legacy of osteoporosis, so it is no longer viewed as a disease passed down from generation to generation and to make aging the time of greatest strength for all Americans.

HEALTHY BONES FOR LIFE ANNUAL CONTRIBUTION SOCIETY

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Mr. Paul D. Dykstra
Ms. Anne Fitzpatrick
Ms. Mary Freiburger
Sally Fullman, Ph.D.
Vincent J. Gagliardi
Ms. Susan L. Gaum
Mr. and Mrs. Robert Ginaven
Ms. Patricia S. Gjerdé
Ms. Susan Goldschmidt
Dr. and Mrs. Peter L. Greenberg
Ms. Nancy D. Griffin
Mr. and Ms. David C. Haber
Ms. Elaine M. Haller
Martha N. Hill PhD, RN, FAAN
Ms. Joyce V. Hiller
Mrs. Janet L. Hixson
Mr. and Mrs. Joel Hochberg
Mr. Edmund H. Hornstein
Mrs. Ann Julsrud
Mrs. Janice G. Kaliski
Lt. O. J. Karnes USN (Ret)
Benjamin A. King
Mr. Bill A. Lange
Ms. Dolores Layton
Mrs. Paula B. Lemons
Ms. Barbara A. Lentz
Ms. Jennie Lee London
Ms. Betsy C. Mack
Mr. and Mrs. Bernard Marin
Gerald and Ruthann Martin
Margaret and John Martin
Mrs. John McDougall

Reverend Patrick McGurk
Mrs. Ann M. McKee
Ms. M. C. McSweeney
Mr. and Mrs. Bruce Murphree
Ms. Alvah S. Parker
Mr. and Mrs. Donald J. Peterson
Ms. Kathryn J. Philipp
Ms. Sharon Privratsky
Ms. Susan Rabenhorst
Ms. Diane Ricker
Ms. May A. Robinson
Ms. M. Elizabeth Rogers
Mrs. Gail G. Ruddiman
Mr. Charles H. Schottenstein
Mr. Iain M. Scott
Nancy A. Skidmore
Ms. Kathryn M. Skover-Visk
Mrs. Ruth M. Steegmann
Bessie M. Sullivan, M.D.
Mrs. Dolores L. Sura
Ms. Judy A. Taylor
Ms. Diana M. Thomas
Ms. Gloria Trumpower
Mr. Theodore W. Vogel, Jr.
Mrs. Carolyn J. Wagner
Connie M. Weaver, Ph.D.*
Mr. and Mrs. James S. White
*NOF Trustee

CORPORATIONS/FOUNDATIONS/ORGANIZATIONS

$100,000 and above
Amgen, USA
Eli Lilly and Company
Merck
Roche Diagnostics Corporation

$25,000 - $99,999
Bayer Healthcare
CIRCA
Council for Responsible Nutrition
Czarnowski Display Service, Inc.
DePuy Synthes
Greater Houston Community Foundation
Medtronic, Inc

Mission Pharmacal
Novartis Pharmaceuticals Corporation
Pfizer Inc.
Warner Chilcott

$5,000 - $24,999
American Academy of Orthopaedic Surgeons
The American Society for Bone and Mineral Research
Anonymous
CoBank
Consumer Healthcare Products Association
Dairy Research Institute
Fidelity Charitable Gift Fund
Health Monitor Network
Hologic Inc.
Immunodiagnostic Systems Limited
JMA Foundation
Juvent Regenerative Technologies Corporation
Lane Labs USA Inc.
Merck Partnership for Giving
Mindways Software Inc.
Natural Products Association
Pharmavite
Sectra
Dorothy D. Smith Charitable Foundation
Springer-Verlag London Ltd.
Sunsweet Growers, Inc.

$1,000 - $4,999
The American Gift Fund
America’s Charities
Brownstein Hyatt Farber Schreck
Ann and Frank Cahouet Foundation
Cedars Medical Clinic PA
CME Group
Georgetown Curves
Greystone Foundation
Hogan Lovells US LLP
Jewish Communal Fund
The James S. Kemper Foundation
James H. and Helen S. Knippen Charitable Foundation
Marodyne Medical LLC
Medi USA
New England Journal of Medicine
Optasia Medical, Inc.
Whiteford, Taylor & Preston, LLP

Under $1,000
Alliance for Aging Research
American Giving Charitable Fund
American Orthopaedic Association
Arizona Community Foundation
The Ayco Charitable Foundation
Florence and Ben Barrack Foundation, Inc.
Boston Medtech Advisors Inc
California Hispanic Osteoporosis Foundation
Paul & Pearl Caslow Foundation
Clayton Junior Woman’s Club
Cornerstone Advisors Asset Management
Foundation for Osteoporosis Research and Education
GE Foundation Matching Gifts Program
Gerontological Society of America
IBM Employee Services Center/Retiree Charitable Campaign
IMN Solutions
International Society for Clinical Densitometry
JustGive
The Kandell Fund
Marian Medical Center
Members Give Powered By JustGive
Network For Good
Employees Charity Organization of Northrop Grumman
The Osteoporosis Medical Center
OWL - Older Women’s League
Renaissance Charitable Foundation, Inc.
Silicon Valley Community Foundation
The Charles Henry Smith, Sr. Foundation
Texas Health Research & Education Institute
United Way of San Joaquin County
United States Bone and Joint Initiative
Samuel Weinstein Family Foundation
NOF’S SIXTH ANNUAL GENERATIONS OF STRENGTH LUNCHEON

NOF’s sixth annual fundraising luncheon was held on Monday, September 30, celebrating Generations of Strength and honoring Dr. Ethel Siris and Ms. Gail Sheehy for their roles as champions for bone health. Juju Chang served as Mistress of Ceremonies and also recognized Sharon Marantz Walsh for her past roles as Chairwoman of the Generations of Strength Luncheon and National Honorary Committee.

THE ETHEL LEFRAK AWARD, a permanent award established by the late Mrs. LeFrak and the LeFrak Family to honor an individual who brings national or international attention to osteoporosis through strength and leadership in improving the diagnosis, treatment or prevention of the disease was presented to:

Ethel S. Siris, M.D., Madeline C. Stabile Professor of Clinical Medicine, Columbia University Director, Toni Stabile Osteoporosis Center, Columbia University Medical Center, New York Presbyterian Hospital and NOF Trustee

THE GENERATION AWARD, recognizing an individual who brings national prominence to the importance of preventing osteoporosis and protecting generations of strength through a lifetime of bone health was presented to:

Gail Sheehy, Bestselling Author and Journalist and NOF Trustee and Bone Health Ambassador

SPECIAL THANKS OUR 2013 LUNCHEON SPONSORS:

PATRON
Pfizer, Inc.

PARTNERS
Charlie and Judy* Black
CIRCA

SUSTAINER
Amgen
CONTRIBUTORS
Brian Cornrich, Principal, Cresa
Judith Engel, SQS
Sally Fullman, Ph.D.
Barbara Hannah Grufferman and Howard Grufferman
Karl Insogna, M.D.* and Marybeth Gilette, M.D
David L. Kim*
Denise LeFrak Calicchio
Mrs. Barbara Levin*
Debby Martino
The Honorable Daniel A. and Martha F. Mica
Margaret M. Pezzolo
The Honorable John Edward and Amy* Porter
Maria Ragucci
Carol Saline
Gail Sheehy*
Toni Silber-Delerive
Ethel S. Siris, M.D.*
Heidi Skolnik MS, CDN, FACSM *
Vivian Woods Flowers
*NOF Trustee
CORPORATE ADVISORY ROUNDTABLE

The NOF Corporate Advisory Roundtable is a high-level working group with a strategic and programmatic focus on promoting bone health and identifying the factors impacting patient access to osteoporosis information and medical care. Members of CAR work with NOF to identify gaps in patient access to information on osteoporosis prevention, detection and treatment and opportunities to better train and educate health professionals to advance the level of care available for osteoporosis patients. Together NOF and its CAR members develop programmatic initiatives to advance the bone health field.

MEMBERS OF NOF’S 2013 CORPORATE ADVISORY ROUNDTABLE INCLUDE:

Amgen
Bayer Healthcare – Consumer Care
Council for Responsible Nutrition
Data Centrum Communications, Inc./Health Monitor Network
Eli Lilly and Company
FoodCare, Inc.
Hologic
INSPIRE
Lane Labs USA, Inc.
Medtronic
Mission Pharmacal
Novartis Pharmaceuticals
Optasia Medical, Inc.
Orthovita, Inc. (Stryker)
Pfizer
Pharmavite
Regenerative Technologies Corporation (Juvent)
Roche Diagnostics
Warner Chilcott
NOF 2013 BOARD OF TRUSTEES

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INTERIM CHAIRMAN & PRESIDENT
Robert R. Recker, M.D., M.A.C.P, F.A.C.E
Creighton University

VICE PRESIDENT
Robert F. Gagel, M.D.
M.D. Anderson Cancer Center

SECRETARY
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Sanofi-Aventis

TREASURER
L. Scott Scharer
Ladera Management Company

EXECUTIVE DIRECTOR AND CEO
Amy Porter

CLINICAL DIRECTOR
Andrea Singer, M.D.
Georgetown University Hospital

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William L. Ashton
Harrison Consulting Group, LLC

Franmarie Kennedy
Health, Biomedical, Science and Society Initiative
The Aspen Institute
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School of Medicine

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The Honorable Shelley Berkley
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Kaiser Permanente Downey Medical Center

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Judith P. Hulka, APR
Public Relations & Marketing Consultant

Karl Insogna, M.D.
Yale Core Center for Musculoskeletal Disorders

David L. Kim
The IAMBIC Group

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Creighton University

C. Berdon Lawrence
L3 Partners, LLC

Meryl LeBoff, MD
Brigham and Women’s Hospital

Barbara Levin
National Health Advocate

E. Michael Lewiecki, M.D., FACP, FACE
University of New Mexico School of Medicine

Robert Lindsay, M.D., PhD
Helen Hayes Hospital

Kenneth G. Saag, M.D.
University of Alabama at Birmingham

Gail Sheehy
Author and Journalist

Ethel S. Siris, M.D.
Columbia University Medical School

Heidi Skolnik, MS, CDN, FACSM
Nutrition Conditioning, Inc.

Connie M. Weaver, Ph.D.
Purdue University
# 2013 Financials

## National Osteoporosis Foundation

### Statement of Financial Position

**December 31, 2013**  
*(With Summarized Financial Information as of December 31, 2012)*

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$1,091,870</td>
<td>$1,024,564</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>39,384</td>
<td>61,542</td>
</tr>
<tr>
<td>Grants, contributions and contracts receivable</td>
<td>658,408</td>
<td>405,315</td>
</tr>
<tr>
<td>Investments</td>
<td>2,349,787</td>
<td>3,652,106</td>
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<tr>
<td>Prepaid expenses</td>
<td>123,250</td>
<td>139,851</td>
</tr>
<tr>
<td>Inventory</td>
<td>130,668</td>
<td>124,652</td>
</tr>
<tr>
<td>Property and equipment, net</td>
<td>83,683</td>
<td>236,219</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$4,477,050</td>
<td>$5,644,249</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Liabilities and Net Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$191,188</td>
<td>$597,156</td>
</tr>
<tr>
<td>Line of credit</td>
<td>475,000</td>
<td>850,000</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>216,245</td>
<td>22,196</td>
</tr>
<tr>
<td>Deferred rent</td>
<td>47,226</td>
<td>59,509</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td>929,659</td>
<td>1,528,861</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted</td>
<td>2,664,054</td>
<td>3,317,108</td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>703,325</td>
<td>618,268</td>
</tr>
<tr>
<td>Permanently restricted</td>
<td>180,012</td>
<td>180,012</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td>3,547,391</td>
<td>4,115,388</td>
</tr>
</tbody>
</table>

**Total Liabilities and Net Assets**

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$4,477,050</td>
<td>$5,644,249</td>
</tr>
</tbody>
</table>
# NATIONAL OSTEOPOROSIS FOUNDATION

## STATEMENT OF ACTIVITIES

For the Year Ended December 31, 2013

(With Summarized Financial Information for the Year Ended December 31, 2012)

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVENUE AND SUPPORT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants and contributions</td>
<td>$ 1,146,293</td>
<td>$ 395,293</td>
<td>$ -</td>
<td>$ 1,541,586</td>
<td>$ 2,058,808</td>
</tr>
<tr>
<td>Contract revenue</td>
<td>246,683</td>
<td></td>
<td></td>
<td>246,683</td>
<td>-</td>
</tr>
<tr>
<td>Investment income</td>
<td>401,765</td>
<td>3,313</td>
<td>-</td>
<td>405,098</td>
<td>466,512</td>
</tr>
<tr>
<td>Membership dues</td>
<td>180,545</td>
<td>105,158</td>
<td>-</td>
<td>285,703</td>
<td>461,330</td>
</tr>
<tr>
<td>Royalties and consulting income</td>
<td>327,256</td>
<td></td>
<td>-</td>
<td>327,256</td>
<td>374,347</td>
</tr>
<tr>
<td>International Symposium on Osteoporosis</td>
<td>573,419</td>
<td></td>
<td>-</td>
<td>573,419</td>
<td>327,344</td>
</tr>
<tr>
<td>Legacies and bequests</td>
<td>167,709</td>
<td>74,000</td>
<td>-</td>
<td>241,709</td>
<td>277,766</td>
</tr>
<tr>
<td>Annual dinner and other special events</td>
<td>60,813</td>
<td></td>
<td>-</td>
<td>60,813</td>
<td>129,553</td>
</tr>
<tr>
<td>Publications sales</td>
<td>29,840</td>
<td></td>
<td>-</td>
<td>29,840</td>
<td>50,740</td>
</tr>
<tr>
<td>Donated services and materials</td>
<td>20,517</td>
<td></td>
<td>-</td>
<td>20,517</td>
<td>33,243</td>
</tr>
<tr>
<td>Miscellaneous income</td>
<td>14,655</td>
<td></td>
<td>-</td>
<td>14,655</td>
<td>54,733</td>
</tr>
<tr>
<td>Net assets released from restrictions: Satisfaction of program restrictions</td>
<td>492,707</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>TOTAL REVENUE AND SUPPORT</strong></td>
<td>3,661,222</td>
<td>85,057</td>
<td>-</td>
<td>3,746,279</td>
<td>4,234,376</td>
</tr>
</tbody>
</table>

## EXPENSES AND LOSSES

Program Services:

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Bone Health Alliance</td>
<td>916,871</td>
<td></td>
<td>-</td>
<td>916,871</td>
<td>1,189,373</td>
</tr>
<tr>
<td>Professional education</td>
<td>867,200</td>
<td></td>
<td>-</td>
<td>867,200</td>
<td>998,740</td>
</tr>
<tr>
<td>Patient education</td>
<td>388,719</td>
<td></td>
<td>-</td>
<td>388,719</td>
<td>567,585</td>
</tr>
<tr>
<td>Communications</td>
<td>249,260</td>
<td></td>
<td>-</td>
<td>249,260</td>
<td>241,512</td>
</tr>
<tr>
<td>Membership</td>
<td>83,194</td>
<td></td>
<td>-</td>
<td>83,194</td>
<td>121,478</td>
</tr>
<tr>
<td>Research</td>
<td>41,665</td>
<td></td>
<td>-</td>
<td>41,665</td>
<td>11,670</td>
</tr>
<tr>
<td>Public policy</td>
<td>15,068</td>
<td></td>
<td>-</td>
<td>15,068</td>
<td>99,651</td>
</tr>
<tr>
<td><strong>Total Program Services</strong></td>
<td>2,561,977</td>
<td></td>
<td>-</td>
<td>2,561,977</td>
<td>3,230,017</td>
</tr>
</tbody>
</table>

Supporting Services:

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fundraising</td>
<td>1,126,414</td>
<td></td>
<td>-</td>
<td>1,126,414</td>
<td>1,065,878</td>
</tr>
<tr>
<td>Management and general</td>
<td>625,885</td>
<td></td>
<td>-</td>
<td>625,885</td>
<td>485,808</td>
</tr>
<tr>
<td><strong>Total Supporting Services</strong></td>
<td>1,752,299</td>
<td></td>
<td>-</td>
<td>1,752,299</td>
<td>1,551,686</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>4,314,276</td>
<td></td>
<td>-</td>
<td>4,314,276</td>
<td>4,781,703</td>
</tr>
</tbody>
</table>

Loss on returned contributions

|                                |              |                        |                        |            | 80,850     |
| **TOTAL EXPENSES AND LOSSES**  | 4,314,276    |                        | -                      | 4,314,276  | 4,862,553  |

## CHANGE IN NET ASSETS

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>(653,054)</td>
<td>85,057</td>
<td></td>
<td>-</td>
<td>(567,997)</td>
<td>(628,177)</td>
</tr>
</tbody>
</table>

## NET ASSETS, BEGINNING OF YEAR

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
</table>

## NET ASSETS, END OF YEAR

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 2,664,054</td>
<td>$ 703,325</td>
<td>$ 180,012</td>
<td>$ 3,547,391</td>
<td>$ 4,115,388</td>
<td></td>
</tr>
</tbody>
</table>