AN OLD BUSINESS AXIOM STATES THAT YOU CAN’T MANAGE WHAT YOU CAN’T MEASURE.

That said, Dr. W. Edwards Deming, whose management ideas have greatly influenced modern management practice once told us that, one, you can’t measure everything of importance to management, and two, you must still manage those important things.

In today’s management systems, typically annual reports are the yearly public forum where organizations share captured performance metrics that they believe are important to their stakeholders. In these pages you’ll read that more than 25,000 copies of SAA’s flagship news magazine, Spondylitis Plus, with its unique content developed for those affected by spondylitis, were produced. More than 25,000 educational materials were provided to healthcare workers and individuals with AS and associated conditions. Over 1,000 individuals attended Spondylitis Educational Support Group meetings throughout the country to share information and support. SAA’s radio and TV public service announcements were aired more than 8,000 times in 50 states to advance awareness and accelerate earlier diagnosis. And with your support, researchers have advanced our understanding of the genetic basis of spondylitis by uncovering additional genes that suggest increased susceptibility to spondylitis. Each of those metrics represents our best effort to advance our mission based on your input.

BUT WHAT ABOUT THE SEEMINGLY IMMEASURABLE THINGS?

To illustrate this point: Many years ago, the incoming CEO of the Cleveland Symphony, Tom Morris, set out to make that already world class orchestra even greater by achieving, in his words, artistic excellence. He could have measured ticket sales, repeat visits or member upgrades. Instead, he sought to delight the audience, and he set out to measure that delight by counting the number of standing ovations received. This CEO, by striving to delight the audience, consistently and continually, had found a “surrogate marker” for artistic excellence; “delight” measured by the number of standing ovations.

In this year’s annual report, we’re sharing with you, our supporters, some of the “standing ovations” that we have received from you during the course of the past year.

These expressions of “delight” were gladly received because ultimately our success can only be measured by your rate of satisfaction. In 2011, we promise to continually strive to increase your rate of satisfaction while working toward our ultimate objective, which clearly will be measurable; a world free of AS and related diseases.

Laurie M. Savage
I joined SAA’s Board because I wanted to join in its passion and creativity for making life better for people with AS.” -- Leslie K., Santa Monica, CA
<table>
<thead>
<tr>
<th>Board Chair:</th>
<th>Allan Metzger, MD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert A. Colbert, MD, PhD</td>
<td>Los Angeles, CA</td>
</tr>
<tr>
<td>Cincinnati, OH</td>
<td></td>
</tr>
<tr>
<td>Bruce M. Clark, PT</td>
<td>David Neustadt, MD</td>
</tr>
<tr>
<td>Vancouver, British Columbia,</td>
<td>Louisville, KY</td>
</tr>
<tr>
<td>Canada</td>
<td></td>
</tr>
<tr>
<td>Daniel Clegg, MD</td>
<td>James Rosenbaum, MD</td>
</tr>
<tr>
<td>Salt Lake City, UT</td>
<td>Portland, OR</td>
</tr>
<tr>
<td>Atul Deodhar, MD</td>
<td>Millicent Stone, MB MRCP (UK) MSc</td>
</tr>
<tr>
<td>Portland, OR</td>
<td>Bath, United Kingdom</td>
</tr>
<tr>
<td>Nortin Hadler, MD</td>
<td></td>
</tr>
<tr>
<td>Chapel Hill, NC</td>
<td>Joel Taurog, MD</td>
</tr>
<tr>
<td>Robert Harris, MD</td>
<td>Ruben Burgos-Vargas, MD</td>
</tr>
<tr>
<td>Whittier, CA</td>
<td>Mexico City, Mexico</td>
</tr>
<tr>
<td>Robert D. Inman, MD,</td>
<td>Robert W. Warren, MD, PhD, MPH</td>
</tr>
<tr>
<td>Toronto, Ontario, Canada</td>
<td>Houston, TX</td>
</tr>
<tr>
<td>Muhammad Asim Khan, M.D.</td>
<td>Michael H. Weisman, MD</td>
</tr>
<tr>
<td>Cleveland, OH</td>
<td>Los Angeles, CA</td>
</tr>
<tr>
<td>Walter Maksymowycz, MD</td>
<td></td>
</tr>
<tr>
<td>Edmonton, Alberta, Canada</td>
<td></td>
</tr>
</tbody>
</table>

“SAA’s medical board assists with issues that require medical or scientific review. I’m proud of the work we’re doing such as establishing a prize for an outstanding presentation by a young investigator and creating a dedicated website to allow medical professionals dealing with spondylitis an opportunity to exchange ideas and seek advice from peers.” -- Jim Rosenbaum, MD, Portland, OR
SAA AND PARTNERS ADVANCE GENETIC RESEARCH IN ANKYLOSING SPONDYLITIS

In 2010, the Triple “A” Spondylitis Consortium (i.e. TASC or Australo-Anglo-American Spondylitis Consortium) discovered two new genes that are implicated in ankylosing spondylitis (AS). In addition, the international research team identified two areas along stretches of DNA that play an important role in regulating gene activity associated with the condition.

The findings, a critical milestone in the understanding of AS, were published in the January issue of Nature Genetics, a journal that emphasizes research on the genetic basis for common and complex diseases. “This helps us better understand what is driving this disease and gives us direction for new treatments and diagnostic tests,” said John D. Reveille, MD, the study’s principal investigator and professor and director of the Division of Rheumatology and Clinical Immunogenetics at The University of Texas Medical School at Houston and a Member of SAA’s Board of Directors.

Reveille and Matthew A. Brown, M.D., professor of immunogenetics at Australia’s University of Queensland, led the research conducted by the TASC Genetic Study.

The Spondylitis Association of America has been a long time collaborator in this study, first acting as the clinical coordinating center for the effort and then leading the nationwide recruiting efforts to provide the patient population to participate in the research project.

Based on results from a genome-wide association scan, the team identified genes ANTXR2 and IL1R2 as well as two gene deserts, segments of DNA between genes, on chromosomes 2 and 21 that are associated with ankylosing spondylitis. Importantly, the study also confirmed the TASC Study’s previously reported associations of genes IL23R and ERAP1, (formerly known as ARTS1) that were published in 2007. These two genes have been extensively confirmed by groups in Spain, Canada, England and Asia, and have been shown to be critical in influencing the immune system and setting the background for AS susceptibility.

ASSESMENT OF AS AND SPINAL SPONDYLO-ARTHRITIS FOR ELEVATED MARKERS OF BONE FORMATION AND THE RELATIONSHIP OF THE MARKERS TO VITAMIN D AND PARATHYROID HORMONE

The proposed cross-sectional study will examine the stored sera on a group of AS patients in the PSOAS cohort for markers of bone formation and inhibition. Vitamin D levels, parathyroid hormone levels and markers of bone turnover will also be assessed to examine their relationship to these bone markers. Assessment of disease activity using clinical and laboratory measures and radiological studies done on these patients will be correlated with the bone markers and hormonal levels to establish a positive relationship with radiological damage and bone anabolic activity and negative correlation between low Vitamin D levels and inflammatory disease activity.

“I just read the press release from the University of Texas at Houston that SAA mailed to me. Congratulations are in order to the researchers Drs. Reveille and Brown. Your continued research is bringing us closer to an early diagnosis, prevention and cure for AS, sooner than we could have ever imagined.” -- Craig G., Morristown, NJ

SAA would like to thank The Higgins Family Charitable Foundation for making this study possible
EDUCATION, SUPPORT, AWARENESS & ADVOCACY

spondylitis.org

“I want to thank you and your organization for being a source of information for me. Your website was our life-line.” -- Gay K.

SAA’s website continues to be the best comprehensive source of information on the Internet to learn about ankylosing spondylitis, psoriatic arthritis, enteropathic spondylitis, reactive arthritis, and undifferentiated spondylitis.

SWIFT (teens.spondylitis.org)

“This site has helped me so much. I don’t feel so alone now ‘cause none of my friends have this problem and they don’t know what it’s like to be in pain like I am. But knowing I’m not the only one really helps so thanks!” -- Heidi M.

Spondylitis Web Info for Teens (SWIFT) is the first website of its kind for teens living with spondylitis. We’ve added new content to SWIFT including podcasts and information to help make the transition to college easier.

EDUCATIONAL SEMINARS

“Good mix of introductory and advanced content. I liked the talk on exercise. I was inspired to start a regular program”. -- Anonymous Feedback from the Boston, MA Educational Seminar

“This seminar has come at a time when I am facing the decision of taking biologics. I have been very apprehensive, and it’s nice to have the risks and benefits laid out in such detail.” -- Anonymous Feedback from the Houston, TX Educational Seminar

SAA traveled across the country to host 7 free educational seminars in Houston, Kansas City, Philadelphia, San Diego, Phoenix, New York City, and Boston. Hundreds of attendees heard presentations focused specifically on the medical management of spondylitis complemented with additional presentations on physical and occupational therapies.

WEBINARS

“I thought Dr. Reveille was outstanding. I am very thankful for the webinar and having him pass so much information onto us from his lifetime research. It was also very interesting to learn how he treats his AS patients. It is wonderful to have a top notch researcher in the field as well as a clinician. Thank you very much.” -- Anonymous Feedback from our webinar titled “The Latest in Spondylitis Research”

“The SAA is an impressively run organization and this added venue of communication adds to the respect I have for the work you do.” -- Robert S., Westport, CT

SAA continued offering web-based educational seminars to the spondylitis community. During this fiscal year, SAA hosted two online seminars; the first one focused on medications used to treat ankylosing spondylitis and its related diseases, while the second webinar covered the latest in spondylitis research.

PODCASTS

“Although I knew there were SAA podcasts for download, I got way behind in my listening and only recently realized how many there are accumulated in the archives. SAA does a great job of handling the guest speakers and fielding good questions of interest to us all. I am also pleased with the types of topics covered. I just wanted to say, keep up the good work and thank you for making these resources available.” -- Mark D., Message Board member

SAA continued to maintain an extensive audio library of interviews with expert physicians and other allied health professionals on topics of interest to the spondylitis community.
Thank you for your printed materials and website. I use them quite often! With SAA’s information, we are at least able to have some insight into my husband’s changing symptoms. Thank you from a spouse who was totally at a loss for information until we found SAA.” -- Karen T., Twin Falls, ID

“I support your great work in educating both patients and physicians - a particular passion of mine!” -- Laura S., Seattle, WA

• Spondylitis Plus – Over 25,000 copies of our advertising-free quarterly news magazine were distributed to members in over 40 countries with information on the latest in spondylitis research and treatments, tips for daily living and personal stories from people within our spondylitis community.

• Brochures – SAA publishes 7 different brochures and has distributed over 25,000 brochures by mail, at health fairs and at seminars around the country and events including exhibits at the American College of Rheumatology Annual Scientific Meeting and the American Academy of Family Physicians Annual Conference.

• Straight Talk on Spondylitis – This ground-breaking internationally recognized book is written specifically for spondylitis patients and continues to be one of SAA’s top-selling educational resources.

• Back in Action Exercise DVD – SAA’s exercise DVD, Back in Action, is a popular go-to exercise program which includes demonstrations of a full range of flexibility, stretching, and strengthening exercises for the spondylitis patient.

SAA’s National Educational Support Group Network is an important part of the spondylitis community as it provides support and education about the practical challenges of managing spondylitis. Throughout the year, these groups have had over 1000 members of the spondylitis community attend meetings across the country to share their experiences to help each other achieve optimum health.

PEER MENTOR PROGRAM

“This has been an excellent opportunity for me and I believe for my mentee as well. We seem well matched, and communicate well. Thank you so much for this opportunity. I appreciate being in touch with someone who is traveling the same road. We are helping each other!” -- Peer Mentor, Anonymous Feedback

“The peer mentor program is a great idea! I wish I had the opportunity to have a mentor when I was first diagnosed with AS.” -- Marvin V., Austin, TX

SAA’s peer mentor program provides an opportunity for one-on-one support within the spondylitis community. People newly diagnosed with spondylitis are matched with a peer who has years of experience managing their spondylitis and can provide additional support to the newly diagnosed members of our spondylitis community.

SOCIAL NETWORKING SITES

“I want to thank you for having this Facebook page and your website with all of the info. Until yesterday, as odd as it sounds, I felt like I was the only person out there with AS. It is comforting to see I can get info and also read things that people have experienced that seem so similar and what they did to help those situations. Thank you!” -- Amanda U., Facebook friend
SAA continues to expand its reach in the community through the use of the social networking sites facebook, MySpace, and twitter.

TOLL-FREE INFORMATION LINE

“Thank you very much for the very helpful information you sent me. I didn’t know about the availability of the medication assistance programs. Now I’m aware of resources to solve my problem. I feel more confident!”
-- Elena T., Naperville, IL

SAA’s toll-free information line is answered by a friendly, knowledgeable staff person who will answer your questions and provide you with information about spondylitis, support programs, SAA events and additional resources.

ADVOCACY

“The Spondylitis Association’s call to action last week undoubtedly reminded Congress that this issue affects the patient community as well as physicians.” -- Sharad Lakhanpal, MD, Chair, Government Affairs Committee, American College of Rheumatology

SAA is an active member of the National Institutes of Health’s NIAMS Coalition and assumes responsibility for advocacy efforts on behalf of those affected by spondyloarthritis. Laurie Savage, SAA’s Executive Director, serves on the Coalition’s steering committee. SAA is also a member of the National Health Council, an advocacy organization that brings together diverse stakeholders within the health community to work for health care that meets the personal needs and goals of people with chronic diseases and disabilities.
In 2010, the Spondylitis Association launched the website that houses the SAA Screening Tool for Ankylosing Spondylitis. This seemingly simple, 10 question survey is actually the culmination of a five year research project, led by Dr. Michael Weisman, Cedars-Sinai Medical Center, to develop and validate a questionnaire that would identify those individuals who express common symptoms associated with AS.

The online test is quick, completely confidential and provides, in real time, a score and collateral materials that a person can print out and take to a physician in order to seek a definitive diagnosis. The questionnaire will help to identify new cases, greatly improve early diagnosis, encourage care-seeking among patients who learn they may have symptoms of AS, provide useful information to patients and physicians, and will help raise awareness about AS.

My Name is Tyler Walker and I have Ankylosing Spondylitis

To promote the launch of www.BackPainTest.org SAA produced and distributed a series of Public Service Announcements. The 15, 30 and 60 second spots have been widely distributed to 400 television stations and 1,000 radio stations as well as extensive online distribution through multiple avenues. They are currently airing on radio and television stations across the country.

SAA’s PSAs feature 22 year old Tyler Walker whose AS symptoms began when he was nine years old. Tyler was one of the lucky ones who didn’t wait 7 to 10 years for a diagnosis. His mother, Sherri, had been experiencing AS symptoms for years, although she had not been diagnosed. Her own mother received a diagnosis of AS and RA right at the same time that Sherri began to notice symptoms in Tyler. At that point, Sherri realized there was a hereditary component at work and fought tirelessly with her son’s physicians until a proper diagnosis was confirmed. Only after her son was receiving appropriate treatment did she obtain her own diagnosis.

At the end of the PSA, Tyler invites people who are experiencing persistent low back pain to visit www.BackPainTest.org to fill out a brief survey that will assess their symptoms and recommend next steps.
ANKYLOSING SPONDYLITIS: A PRIMER FOR FIRST RESPONDERS

SAA sponsored the first ever instructional video for first responders, including paramedics, in the care and handling of individuals with AS in an emergency setting. This video, along with its Continuing Education accreditation by CECBEMS (Continuing Education Coordinating Board for Emergency Medical Services), was distributed to fire stations and emergency personnel nationwide by members of the spondylitis community.

“I distributed the EMS Training DVDs you sent to me. I met with the Port Orange EMS Chief and he thanked me several times for informing him about AS. He will oversee the training with the DVDs at each of 5 stations. I can’t thank you enough for developing this EMS training DVD!” -- Nancy C., Port Orange, FL

“I wanted to thank you for creating “A Primer for First Responders”. Just a visit to the Assistant Director Putnam County EMS has resulted in Tennessee providing training statewide. I received a message from a Tennessee State EMS representative that all DVD’s have been distributed statewide to services as well as schools. Also, in Putnam and surrounding counties it has been added to the First Responder curriculum, and I am told that nearly 100% of the services have had the in-service.” -- Sue F., Baxter, TN
RAISING THE FUNDS TO LEAD THE FIGHT

Advancing medical research and improving the lives of SpA patients everywhere means responsibly raising the funds needed to support scientific study and provide educational and emotional support to the community. This is a substantial commitment. SAA depends upon the generous contributions from individuals, foundations and corporations to meet its annual operating budget and to fund research as well as special programs and services.

MEMBERSHIPS AND INDIVIDUAL GIVING

“SAA membership has been the most informative resource for me. Thanks to all of you.” -- Anonymous, Kansas City, MO

“Thanks again for all the hard work. It is not easy to raise funds in this economic environment - I know all too well.”
-- Sean S., Carson, CA

“Working in the nonprofit sector myself, I know how hard-earned those four-star Charity Navigator ratings are to come by so you should all take great pride in that!”
-- Sylvie M., Santa Monica, CA

Gifts from individuals, whether membership dues or straight donations, are the cornerstone of SAA’s financial support. This year, individuals’ gifts to SAA accounted for 64% of our overall revenue.

LEADERSHIP CIRCLE

SAA is dependent upon gifts from individuals and family foundations. While all gifts to SAA, no matter the size, are greatly appreciated, the generosity of Leadership Circle members -- those who give $1,000 or more annually – plays an essential role in sustaining the organization today and in the future.

“I have been an avid supporter of SAA, with its great research teams, since the early years of the organization and will continue to support them into the future!”
-- Laura S., Seattle, WA
QUEST LEGACY SOCIETY

“My legacy gift to SAA is my way of saying THANK YOU- in the words of SAA’s mission statement – for being a leader in the quest to cure ankylosing spondylitis - and thank you for empowering those affected to live life to the fullest.” -- Means D., Atlanta, GA

The Quest Legacy Society was established to recognize the generosity of those individuals who have kindly remembered SAA in their estate plans. Members of the Quest Legacy Society help ensure that SAA will continue to fund research and provide educational resources and services to empower future generations. Information about the Quest Legacy Society can be found on SAA’s website at www.spondylitis.org/quest.

MONTHLY GIVING IS S.M.A.R.T.

“The SMART program allows me to give more over the course of a year than I might be able to at one time. By spreading out my donations, I can support SAA effortlessly!” -- Robin K., North Hollywood, CA

For more than 25 years, SAA has been a dependable, reliable source of information, education and support for the spondylitis community. By joining the Spondylitis Monthly Automatic Rewards Team (S.M.A.R.T.) SAA members ensure a dependable, reliable source of funding that enables us to move forward with opportunities as they arise.

FOUNDATIONS

“We are making our contribution in recognition of the positive impact that the Spondylitis Association of America has on making our world a better place to live.”
-- Blank Charitable Foundation, Inc., Coral Gables, FL

The Spondylitis Association is able to make a positive difference in the lives of those affected by spondylitis through the generosity of our foundation funders who support SAA’s general operating budget as well as special programs and services.

CORPORATIONS

“SAA delivers where other organizations only promise.”
-- Ken M., Corporate Partner

The Corporate Partnership Program provides a way for SAA’s pharmaceutical partners to positively impact the spondylitis community by contributing to the organization’s general operating budget. SAA also receives additional corporate sponsorship support for special programs and services.
SAA demonstrated its commitment to responsibly generating the revenue needed to operate efficiently and to provide the program services upon which our constituents depend. In fiscal year 2010, SAA allocated 4% of its revenue to fundraising and 12% to management and general operating overhead. Both of these indices exceed industry standards and stand as testament to SAA’s pledge to make every gift count.

All accounts of the Spondylitis Association of America are maintained in accordance with Generally Accepted Accounting Principles (GAAP) for not-for-profit organizations as established by the Financial Accounting Standards Board. Copies of audited financial statements are available upon request.
### Statement of Financial Position

**Year Ended June 30, 2010**

<table>
<thead>
<tr>
<th>Assets</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>509,454</td>
<td>594,431</td>
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<tr>
<td>Investments, at market value</td>
<td>1,188,131</td>
<td>1,381,975</td>
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<tr>
<td>Government contract receivable</td>
<td>-</td>
<td>6,435</td>
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<tr>
<td>Grants receivable</td>
<td>220,450</td>
<td>125,000</td>
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<td>Prepaid expenses</td>
<td>15,100</td>
<td>12,290</td>
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<tr>
<td>Property, at cost</td>
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</tr>
<tr>
<td>Furniture and equipment</td>
<td>105,397</td>
<td>103,414</td>
</tr>
<tr>
<td>Less: Accumulated depreciation</td>
<td>(83,800)</td>
<td>(85,160)</td>
</tr>
<tr>
<td>Total:</td>
<td>21,597</td>
<td>18,254</td>
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<tr>
<td>Deposits</td>
<td>5,441</td>
<td>2,546</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>1,960,173</strong></td>
<td><strong>2,140,931</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities and Net Assets</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable</td>
<td>8,243</td>
<td>6,702</td>
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<tr>
<td>Accrued vacation</td>
<td>24,425</td>
<td>19,169</td>
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<tr>
<td>Commitments (note 8)</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>32,668</strong></td>
<td><strong>25,871</strong></td>
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<table>
<thead>
<tr>
<th>Net assets:</th>
<th>2010</th>
<th>2009</th>
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<tr>
<td>Unrestricted net assets</td>
<td>1,382,548</td>
<td>1,482,963</td>
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<tr>
<td>Board designated fund</td>
<td>79,195</td>
<td>77,935</td>
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<tr>
<td>Temporarily restricted net assets</td>
<td>465,762</td>
<td>554,162</td>
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<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>1,927,505</strong></td>
<td><strong>2,115,060</strong></td>
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</table>

<table>
<thead>
<tr>
<th>Total Liabilities and Net Assets</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1,960,173</strong></td>
<td>2,140,931</td>
<td></td>
</tr>
</tbody>
</table>
### Year Ended June 30, 2010

#### Changes in Unrestricted Net Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporate and foundation grants</td>
<td>291,559</td>
<td>297,260</td>
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<tr>
<td>Government contract</td>
<td>-</td>
<td>77,221</td>
</tr>
<tr>
<td>Contributions</td>
<td>469,081</td>
<td>428,278</td>
</tr>
<tr>
<td>Interest income</td>
<td>26,615</td>
<td>68,576</td>
</tr>
<tr>
<td>Program revenue</td>
<td>25,462</td>
<td>26,145</td>
</tr>
<tr>
<td>Realized and unrealized gain/loss on investment</td>
<td>1,604</td>
<td>(11,654)</td>
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<tr>
<td><strong>Total unrestricted revenue</strong></td>
<td>814,321</td>
<td>885,826</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>491,542</td>
<td>332,200</td>
</tr>
<tr>
<td><strong>Total unrestricted revenue and other support</strong></td>
<td>1,305,863</td>
<td>1,218,026</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
<td>524,511</td>
<td>532,041</td>
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<tr>
<td>Employee benefits</td>
<td>43,815</td>
<td>43,519</td>
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<tr>
<td>Payroll taxes</td>
<td>42,008</td>
<td>43,947</td>
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<tr>
<td>Office and administration</td>
<td>86,848</td>
<td>76,523</td>
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<tr>
<td>Medical research consulting</td>
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<td>50,000</td>
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<tr>
<td>Consulting</td>
<td>-</td>
<td>3,600</td>
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<tr>
<td>Medical Research</td>
<td>-</td>
<td>89,041</td>
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<tr>
<td>Physician Education</td>
<td>51,643</td>
<td>54,760</td>
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<tr>
<td>Patient Education</td>
<td>50,884</td>
<td>14,526</td>
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<tr>
<td>Legal and accounting</td>
<td>52,225</td>
<td>50,772</td>
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<tr>
<td>Rent</td>
<td>40,506</td>
<td>45,252</td>
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<tr>
<td>Medical conferences presented</td>
<td>233,337</td>
<td>120,864</td>
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<tr>
<td>Travel</td>
<td>38,020</td>
<td>22,785</td>
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<td>Postage</td>
<td>50,751</td>
<td>51,866</td>
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<tr>
<td>Printing</td>
<td>46,984</td>
<td>51,241</td>
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<td>Outreach</td>
<td>21,925</td>
<td>17,000</td>
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<td>Medical Response training</td>
<td>-</td>
<td>108,071</td>
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<tr>
<td>Depreciation</td>
<td>9,061</td>
<td>9,344</td>
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<tr>
<td><strong>Total expenses</strong></td>
<td>1,405,018</td>
<td>1,385,152</td>
</tr>
<tr>
<td>Decrease in unrestricted net assets</td>
<td>(99,155)</td>
<td>(167,126)</td>
</tr>
<tr>
<td>Changes in temporarily restricted net assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Corporate and foundation grants</td>
<td>403,142</td>
<td>289,108</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>(491,542)</td>
<td>(332,200)</td>
</tr>
<tr>
<td>Increase in temporarily restricted net assets</td>
<td>(88,400)</td>
<td>(43,092)</td>
</tr>
<tr>
<td><strong>Total increase in net assets</strong></td>
<td>(187,555)</td>
<td>(210,218)</td>
</tr>
<tr>
<td>Net assets, beginning of year</td>
<td>2,115,060</td>
<td>2,325,278</td>
</tr>
<tr>
<td>Net assets, end of year</td>
<td>1,927,505</td>
<td>2,115,060</td>
</tr>
</tbody>
</table>
2010 CORPORATE PARTNERSHIP PROGRAM

A SPECIAL “THANK YOU” TO OUR CORPORATE PARTNERS

Centocor Ortho Biotech Inc. also sponsored a “Needs Assessment Survey of the Spondylitis Patient Population” and Donor and Volunteer Appreciation Dinners across the country.

Abbott also supported a Spondylitis Educational Seminar in Portland, Oregon and four issues of SAA’s news magazine, Spondylitis Plus.

Amgen and Pfizer also supported three Spondylitis Educational Seminars held in Phoenix, AZ, Boston, MA and New York, NY.

The Spondylitis Association of America is solely responsible for the content of all educational program services and special projects funded through corporate support.

SAA would like to recognize and thank the following foundations for their generosity and support.

Anonymous
Blank Charitable Foundation, Inc
Ellen and Marshall Cole Philanthropic Fund
Kautz Family Foundation
Koven Foundation
The Cecile and Fred Bartman Foundation

The Fairfax Foundation
The Higgins Family Charitable Foundation
The Jean and E. Floyd Kvamme Foundation
The Murdy Foundation
Thistle and Rose Foundation
Young Foundation
THANK YOU TO DONORS/LEADERSHIP CIRCLE

LEADERSHIP CIRCLE MEMBERS

THANK YOU FOR YOUR GENEROUS SUPPORT

Over sixty-four percent of the Spondylitis Association's (SAA) revenue in fiscal year 2010 came from individuals and family foundations. Thirty percent of this revenue from individuals and family foundations was from Leadership Circle members – those who give $1,000 or more annually.

While every gift is important in helping SAA continue to advance research, increase awareness of spondylitis, and provide information and support to patients and their families, we’d like to take this opportunity to thank the members of the Leadership Circle. Their generosity demonstrates the strength of their commitment to the mission of SAA and underscores the important role that Leadership Circle members play in helping to sustain the organization today and in the future.

GIFTS RECEIVED BETWEEN JULY 1, 2009 AND JUNE 30, 2010

$50,000 AND ABOVE
The Jean & E. Floyd Kvamme Foundation

$10,000 - $25,000
The Cecile & Fred Bartman Foundation
Elizabeth & Daniel Davis
The Higgins Family Charitable Foundation
Kautz Family Foundation
Herb & Barbara Shear
Diane Williams

$5,000 - $9,999
Anonymous
Stephen & Grace Becker
Blank Charitable Foundation, Inc.
Scott & Sabrina Ellis
Leslie Kautz
Deidra & Niki Krutop
The Murdy Foundation
Laurie M. Savage
Molly Moores and Rachel Shifrin

$2,000 - $4,999
Hamza Amor
Don & Judy Bunin
Jason Ganetsky
Laura Hamilton
Dr. Robert & Barbara Hasty
Charlotte & Jeff Howard
Wallace Hwang
Margo & Stanley Itskowitch
Brian MacKenzie
Brian Mason
Michael Pianin
Timothy and Suzanne Quinn
Nancy Regan

John Reveille, MD
William Robertson in honor of Nils Moe
Thistle & Rose Foundation
Barry & Christine Tobias
Barbara Van Alstine

$1,000 - $1,999
Keith & Celia Arnaud
Ron & Jean Baker
Brian Berman
Bradley & Maria Bockhorst
Venkateshwar Bommakanti
Jane & Harry Bruckel
Web Carr
Raymond A. & Mary Jean Cassidy
Charitable Fund (distributed by the Community Foundation Alliance)
Hu Chao
Toni Cole & Michael Patterson
Marian Cummins
Chris Deininger
Nero Deliwala
The Fairfax Foundation
Judy Fiskin
Bill Giser and Margaret Locke
Susan & Alexander Goldberg
David Hallegua, MD
Elmer & Arlene Hansen
Steve & Ann Herendeen
Todd & Kathleen Herzog
Kenneth Honer
Jeff Horn
Ann Howat
Stephanie Klauber
Jonathan Lathrop
The majority of support we receive comes from the goodwill of individual donors like you who give generous yearly gifts to SAA throughout their lives. Several years ago, we established the Quest Legacy Society to recognize and honor those supporters who have left a gift to SAA in their estate plans.

We would like to take this opportunity to acknowledge those individuals who have kindly remembered SAA in their estate plans. Members of the Quest Legacy Society play a principal role in ensuring that SAA can continue to fund medical research, provide educational program services and advocate on behalf of the spondylitis community. But just as important, members of the Quest Legacy Society help to make certain that future generations affected by spondylitis are not alone -- without the resources needed to better manage the disease.

Our sincere thanks to the following members of the Quest Legacy Society:

Stephen and Grace Becker
Jennifer Layden
Cecelia Bunch
Brian MacKenzie
Means Davis, Jr.
Christopher Oleksy
Richard and Deanna Day
Nancy Regan

Harvey Derscheid
Laurie M. Savage
Alan Fraser
Katherine Sprouse
David Fulle
Darren Wolpert
Robert and Barbara Hasty
Gregg Umek

In fiscal year 2010, planned gifts were received from The Estate of Raymond and Mary Jean Cassidy (given through the Community Foundation Alliance).

In the event of an error or omission, please contact Diann Peterson, Director of Membership & Communications, at 800-777-8189, ext. 226 or at diann.peterson@spondylitis.org.
$500-$999

- Alan W. Anderson
- Vasser Bailey
- Robert & Christine Baldoni
- John Baron
- Jennelle Barton
- Gerald & Estelle Becker
- Michael Borghi
- James Bowe
- William Buehler
- Paula Bustamante
- Joanne Chamberlin
- Michael P. Cohen
- Aldene & Kenneth Croswell
- John P, Davin
- Deb Delfavaux
- Raymond & Mimi Diller
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- Jane & Dane Farnworth
- Richard Feingold
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- Andrew & Lauren Forbes
- Alan J. Fraser
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- Robert & Rhonda Gendron
- Craig Gimbel, DDS
- Robert & Rhonda Gendron
- David Fulle
- Lynn & David Frohnmayer
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- Sam Paul
- Donald Payne
- Diann Peterson
- Ivo Ray Peterson
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- Provost, Sr.
- Laura Ramirez
- Jay Ross
- Cathy Rutter
- Mary Shanley
- Karin Shogren, PhD
- Lanny Shulman
- Lee & Gal Silver
- David & Irene Smith
- Michael R. Sternberg, MD
- Patti Stewart
- Roger Tachuk
- Marcos I. Tumbakers
- Robert & Donna Teresi
- The Koven Foundation

Jayne & Kelly Tien
Stephen Utkus
Mary Vieth
Dirk Visser
Robert W. Warren, MD PhD
Tom & Barbie West
Maria Wilcox
Tom Wilkinson
Darren B. Wolpert
Young Foundation

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- Timothy P. Anderson, PhD
- Amin Anwar
- Jake Aronov
- Coleen Aspinwall
- Betty & George Baffa
- John Barnes, MD
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- Michael Barton
- Kenneth F. Bayer
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- CFC of North Central Texas
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- Richard Cunningham
- Patricia Cutter
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- Nancy Davis
- Tracey Dellaripa
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- Dave Emerson
- David R. Faulkner
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- Richard & Diane Albert
- Ralph & Vicki Allan
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- Lance C. Anderson
- Anitra & Jim Anderson
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Krisha Khari
Michael J. Kikta, MD
Robin Kindrick

"Thanks for all the work you do. I believe you are making a difference and helping to make it possible for sufferers to be more active in their own treatment and coping with AS."
-- Anonymous Feedback, San Diego Seminar
Kudos to SAA staff for all the work you do in keeping us informed. It is appreciated.” -- Anonymous Feedback, San Diego Seminar
“Thank you for your program, dedication, information. SAA provides countless ways to better my life and assist me in helping others with their Spondylitis issues.” -- Anonymous Feedback, The Latest in Spondylitis Research Webinar Participant

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Henrietta Cragon
Elizabeth Craig
Jack Crawford
William H. Cuddy
Kermit Cuff, Jr
Lauretta Cufri
"You really know how to make volunteers feel appreciated. I'm often surprised at the escalating demands, complete lack of thanks, and peevishness (when you lose interest in volunteering) that so many groups inflict on their volunteers. It's very disappointing. But SAA is very different. I've never seen a group that is so appreciative of its volunteers. That's so wonderful!" -- Cindy S. Boise, ID
"I want to thank you and SAA for how helpful you have been to me. When I finally got the right diagnosis way back in 1986 I had no idea what my future would be like - in fact, I never met anyone with AS until I went to the seminar in NYC. SAA reassured me that I was not alone and helped me understand and cope and manage my disease." -- Robert W., Wyckoff, NJ
I have been so thankful for my membership to Spondylitis Association of America since I became acutely ill with my first flare. I have had to readjust my whole life to fit this illness." -- Deedra N., Denmark

Ingvild Tomasson
Tim & Jennifer Tompkins
Coreen Tossona
Jack Touseull
Virginia Townsend
Peggy Townson
Joan Tozer
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