CONGENITAL HEART DEFECTS—
THE COUNTRY’S #1 BIRTH DEFECT
Almost one out of every 100 babies is born with a congenital heart defect, an inborn problem with the heart’s structure. Many heart defects are life-threatening and require surgical intervention in childhood. Thanks to medical progress, today more than 90% of children receive successful heart defect treatment and live to adulthood. There are now more than 2 million adults and children in the United States living with repaired and unrepaired congenital heart defects, and for the first time in history there are more adults than children living with congenital heart disease. The number of adults is growing rapidly as patients born with previously fatal conditions reach adulthood.

ADULT CONGENITAL HEART DISEASE—
A NEW AND NEGLECTED CHRONIC DISEASE
Even the best congenital heart repairs are not a cure for congenital heart disease. All survivors of childhood heart repair risk developing new problems as they age. Many will need re-operations and/or transplant, and death and disability rates rise dramatically by age 30. Since most adult cardiologists are untrained in their anatomy and unique needs, expert guidelines state that at least half of all survivors should receive lifelong monitoring from specially-trained adult congenital heart specialists. In repairing heart defects, doctors have created a chronic disease: adult congenital heart disease. Patients often perceive themselves as “fixed,” and most are not aware of their risks of new challenges as they age. Research reports that up to 50% of families stop seeking cardiac care for their children by age 13, and fewer than 10% of adults currently receive recommended special care.

THE ADULT CONGENITAL HEART ASSOCIATION—
THE FUTURE OF CONGENITAL HEART DISEASE
A major triumph of 20th century medicine was keeping “blue babies” alive. But now we face a new challenge—to ensure that every baby born with congenital heart disease continues to thrive throughout their lifespan, not just to age 18. At ACHA, we believe that change starts with educating patients and families to take charge of their own needs. ACHA was founded in 1998 by two congenital heart patients and their families. Today, we carry on this legacy and continue to grow as the only nonprofit organization that offers support to adults with congenital heart disease.
Message from Leadership

As the Adult Congenital Heart Association’s leaders, it gives us great pride to announce the publication of our 2012 Annual Report. This report outlines the full array of the year’s exceptional accomplishments, and offers comprehensive information on ACHA’s funding and fiscal well-being. We hope that as you read it, you share our pride in the many ways that ACHA helped congenital heart patients thrive throughout 2012.

This year brought two major national milestones for the congenital heart community. In the fall, the Centers for Disease Control and Prevention funded three pilot data collection projects to investigate the health of adolescents and adults living with congenital heart disease. Since 2005, ACHA supporters throughout the country have called, written, and visited their lawmakers to educate them about the lifelong impact of congenital heart disease and the urgent need for more research and resources. The $2 million in Congenital Heart Futures Act funding that made these projects possible was the direct result of this community effort.

The second major national milestone was the American Board of Internal Medicine’s approval of a new medical subspecialty in adult congenital heart disease. ACHA first endorsed the creation of such a certification system in 2001, as a response to the challenges we saw our members face finding doctors capable of caring for their uniquely complex hearts. In 2005 we began assisting the American College of Cardiology to get this new subspecialty created and approved. The heartbreaking and powerful testimony submitted by our members helped make this new certification a reality despite the strong national trend towards cost-cutting and away from subspecialty care.

In 2012, ACHA also saw a major organizational milestone, in that for the first time our membership surpassed 10,000. More than 900 of these members watched an educational webinar and more than 600 received direct, personal assistance from our ACHA member services staff and trained Heart to Heart Ambassadors. Each of these activities, and every activity outlined in this report, was made possible thanks to the tireless efforts of the ACHA staff and volunteers, and the generosity of supporters like you.

Thank you for your support,

Amy Verstappen, President & CEO
Peggy Powers, Board Chair

Sitting (left to right): Public Policy Manager Amy Basken, Communications Manager Terri Schaefer, Member Services Manager Paula Miller and Finance Manager Marie-France Cyr.
Standing (left to right): Education and Outreach Manager Ruth Phillippi, Research Manager Ann Gianola, President and Chief Executive Officer Amy Verstappen, Chief Operating Officer Tim Clair, Events and Development Coordinator Jennifer Hotsko, Development Manager Jessica Phelan, Data Management Assistant Bridget McDougall and Administrative Assistant Christine Sullivan. Photo courtesy of Caryn M. Golden.
AdvoCapcy
Activities

ACHA is the only organization dedicated to advocating on behalf of those with congenital heart defects across the lifespan. As a key player in the successful future of those living with CHD, ACHA partners with lawmakers and federal agencies in efforts to improve and prolong the lives of those with CHD.

**NATIONAL CONGENITAL HEART LOBBY DAY**

More than 75 advocates gathered in Washington, DC, on March 1 for this incredible opportunity to talk to their lawmakers about congenital heart disease (CHD). Hosted by the Adult Congenital Heart Association (ACHA) and Mended Little Hearts (MLH), this annual event brought together patients, family members, medical professionals, and supporters from across the country to connect with more than 100 legislative offices.

This year’s message rang loud and strong. We took time to celebrate the tremendous success we have seen from our past efforts and used that energy to continue to motivate our Members of Congress to do more! At Lobby Day 2012, we asked our lawmakers to:

- Provide funding to the Centers for Disease Control and Prevention (CDC) to support data collection to better understand CHD prevalence and assess the public health impact of CHD.
- Support the National Heart, Lung, and Blood Institute’s efforts to expand research targeted to the diverse lifelong needs of individuals living with CHD.
- Join the Congenital Heart Caucus.

**LIFELONG SURVEILLANCE OF CONGENITAL HEART DISEASE INITIATIVE**

ACHA has been working closely with strategic partners to help define the surveillance needs and strategies for the adult congenital heart population. Surveillance allows us to collect data to make informed decisions about CHD needs and services, to help develop and evaluate treatment strategies, and to inform patients about available services and clinical research studies. The 2012 federal budget appropriated $2 million to the CDC for CHD surveillance, as outlined in the Congenital Heart Futures Act. We are thrilled to report that this money was used to provide three grants supporting pilot projects to develop adolescent and adult surveillance strategies. In addition, the CDC hosted an expert meeting where federal agencies, researchers, medical professionals and patient advocates, including ACHA, gathered to provide recommendations for public health research priorities related to CHD.

**CONGRESSIONAL CONGENITAL HEART CAUCUS**

February 2012 saw the formation of the Congressional Congenital Heart Caucus, initiated by ACHA advocacy efforts. This caucus is an informal group of members of Congress dedicated to issues related to congenital heart defects serving to educate other members and their constituents on this subject. We are grateful to Congressman Gus Bilirakis, who serves as the founding chairperson of this caucus.
SOCIAL SECURITY DISABILITY AND COMPASSIONATE ALLOWANCE PROGRAM

ACHA has advocated tirelessly for affordable care for adults with CHD. Compassionate Allowances (CAL) are a way of quickly identifying diseases and other medical conditions, allowing Social Security to target the most obviously disabled individuals. In December 2012, the CAL program commemorated the milestone of reaching 200 CAL conditions. ACHA was thrilled to participate, representing the seven different congenital heart diagnoses added to this list in 2012.

CONGENITAL HEART PUBLIC HEALTH CONSORTIUM

ACHA is privileged to continue to work collaboratively with leading professional organizations and federal agencies to address CHD in the context of public health to improve awareness, education, and advocacy for the CHD community and the general public. We are pleased to have representation on the steering committee, executive committee and several subcommittees, including chairperson of the public policy committee.

CONGENITAL HEART WALK

In its fourth year, the Congenital Heart Walk continued to bring together thousands of children, adults, and families to unite to fight CHD. More than 8,000 walkers raised more than $1 million in 23 locations across the United States from Boston to Los Angeles and Rio Grande Valley to Columbus.

The Congenital Heart Walk is an ongoing national effort between ACHA and The Children’s Heart Foundation to raise awareness of the nation’s #1 birth defect, and to support, honor, and remember the millions affected by CHD. To join in our efforts, visit www.congenitalheartwalk.org and unite to fight CHD today!

Photo courtesy of Kim Pace Photography.

Thank you for your advocacy for people with congenital heart defects, and for making educational opportunities possible. It gives me hope.
My name is Cara
What hurts the most and what brings us the most fear in life—like my CHD—also makes us the strongest and makes us want to fight and move on.

It is what drives us to push forward and defeat our demons that turn our scars into insight.
Heart to Heart Activities

The ACHA Heart to Heart (H2H) Program provides education and support to patients and families in a variety of ways. For instance, all new patient and family members receive a membership welcome kit that includes a personal health passport and travel directory. In addition, each new member receives an e-mail from the Member Services Manager welcoming them to ACHA and encouraging them to become involved.

**HEART TO HEART AMBASSADORS** (1)

ACHA expanded both the number of Ambassadors and the Ambassadors’ reach and impact. Ten new Ambassadors were trained in 2012, bringing the total to 41. Along with ACHA member services staff, Ambassadors offered more than 600 ACHA patient and family members personalized information and support.

**LIFELONG CARE CAMPAIGN**

In partnership with MjH, ACHA has launched this campaign to share a carefully-crafted message on the lifelong journey of CHD by specially trained H2H Ambassadors. Nine Ambassadors were trained to be speakers in the Lifelong Learning Speaking Program. First demonstrated at the MjH National Leadership Conference in May 2012, the initial launch was held in Richmond, VA, with the MjH Central Virginia chapter. There are at least 10 more sessions across the United States scheduled for 2013. ACHA continues to distribute two brochures on the need for lifelong special care in CHD, targeting parents and adult patients.

**OUTREACH**

ACHA staff members participated and exhibited at a number of conferences and venues throughout 2012, ranging from a conference for pediatric and congenital cardiologists in Orlando, FL, to an international symposium on ACHD in Toronto, Canada and a CHD awareness quilt show in Cherry Hill, NJ. ACHA also connected with our members through storytelling opportunities on social media. We surveyed our patient/family members to identify what educational topics, modes of learning, and kinds of interaction are most valued or desired.

This year, ACHA also began work with a communications firm on public relations and other methods to further spread the word about our organization and the important issues we address.

**PROVIDER ACTION FOR TREATING CONGENITAL HEARTS (PATCH)** (2)

In partnership with the American College of Cardiology (ACC), PATCH aims to engage and educate community and general cardiologists by increasing awareness of the ACC/American Heart Association care guidelines, increasing general cardiologists’ awareness of when referral to an ACHD provider is needed, plus increasing collaboration between ACHD and non-ACHD healthcare providers in order to promote and provide high-quality ACHD care to patients around the country. To learn more about PATCH, please visit www.patchheartprogram.org.

**ACHA DISCUSSION FORUM**

A benefit of ACHA membership is the ability to participate in the online Discussion Forum. More than 7,800 members have access to this forum as a means to discuss issues with other members in the ACHA community and to provide and receive support in a moderated and safe environment. There are more than 900 topics and 90,000 posts.

**ONLINE AND PRINTED MATERIALS**

ACHA provides its members with resources for specific congenital heart defects as well as associated medical conditions and common psychosocial issues. Literature on topics such as pulmonary hypertension, quality of life and CHD, and transposition of the great arteries was added to our growing educational library. These educational pieces, as well as the lifelong care brochures, ACHA general brochure, fact sheet, and other materials, can be downloaded from the ACHA website. Other printed materials that were new in 2012 included:

**YOUR DONATION IN ACTION CARD** (3)

This piece is used to share the impact of ACHA donor support. One side features an infographic explaining how different donation amounts support ACHA’s mission and on the other side, the card showcases a photograph and CHD story of one of our members.

**INVEST IN YOUR CHILD’S FUTURE CARD** (4)

This postcard is used at Congenital Heart Walks and other gatherings of parents of children with CHD. Its intent is to promote ACHA membership, as well as remind parents of the lifelong nature of CHD—they cannot wait until age 18 to begin thinking about and planning their child’s future as an adult with CHD.

**AMBASSADOR MATERIALS** (5)

Two new Ambassador-specific printed materials were developed and distributed in 2012: a postcard directed to patient/family members that describes ACHA H2H program offerings (including the Ambassadors) and a one-page flyer about the H2H Ambassador Program directed to medical professional members.

**WEBSITE**

The ACHA website, www.achaheart.org, serves as the main online portal for information, and there were more than 96,000 visits to the website in 2012. This included more than 52,000 unique visitors, accounting for nearly 295,000 pageviews.
ACHA BLOG

The ACHA Blog continues to be one of the most popular parts of the ACHA website; in 2012 we published 140 posts from more than 15 bloggers, which were viewed approximately 45,000 times. ACHA bloggers post on a variety of topics relevant to the CHD community, and included posts such as “An Open Letter to ACHD Cardiologists,” “This CHD Patient Will Marry You for Your Health Insurance,” and “The Art of Coping.”

FACEBOOK PAGE

ACHA’s Facebook page, updated regularly, offers a spot for quick updates and interactivity for people who “like” ACHA. Facebook membership increased steadily through the year, from 1,905 people in January to 2,793 by year’s end—an increase of 46%. Visit the ACHA Facebook page at www.facebook.com/AdultCongenitalHeartAssociation.

E-MAIL COMMUNICATIONS

Our e-newsletter, ACHA Update, is regularly sent once a month to all ACHA members who have provided an e-mail address. It includes a leadership letter from the ACHA President and CEO, plus news updates. In addition, ACHA members receive other announcements via e-mail, such as webinar reminders. Members who have requested it also receive targeted advocacy e-mail updates.

TRAVEL DIRECTORY

In collaboration with the International Society of Adult Congenital Heart Disease (ISACHD), ACHA continued to offer a print listing of CHD services to include 100+ national and international sites capable of providing emergency ACHD care to CHD patients. In 2012, the redesigned 6th annual edition of the directory was made available to our membership and distributed at outreach events including Congenital Heart Walks.

ACHD PROGRAM DIRECTORY

Also in collaboration with ISACHD, ACHA continued to offer an online listing of more than 110 ACHD clinics in the United States and Canada; the directory continues to be the only resource of its kind available in the United States. The directory is the most frequently visited online ACHA resource. The programs in our directory with updated data have been operating for an average of 12 years and 90 clinics host weekly or monthly patient programs. In addition, the clinics span across North America, from Honolulu, Hawaii, to St. John’s, Newfoundland, Canada—over 7,000 miles apart!

ACHA WEBINAR PROGRAM

The ACHA webinar series continues to educate CHD patients and families by presenting webinars on various interesting and timely topics. More than 900 individuals attended 16 different webinars in 2012. National experts spoke on topics such as Eisenmenger syndrome, anxiety and depression, aging with congenitally corrected transposition of the great arteries, and Social Security Disability and the Compassionate Allowances Program. Online views of archived webinars in 2012 totaled 2,941. Webinar flyers are also available for medical professionals. By scanning the QR code on the flyers, their patients can register for the webinar from their smartphone.

My Ambassador gave me information that you can only get from someone who went through what ACHD patients go through. The Ambassador program gives you insight into what you can expect with a future surgery, or gives you encouragement during recovery.
My name is Larry
I was born with CHD, I had surgeries for it—
but I do not let CHD rule my life.
Research Activities

Currently there is a severe shortage of research on demographics and long-term outcomes in congenital heart disease. ACHA promotes ACHD research by co-sponsoring research initiatives and advocating for the development of a national ACHD registry.

REACH PROJECT
Awarded by the National Institutes of Health in 2010, the Research Empowerment in Adult Congenital Heart (REACH) Disease study* allowed ACHA to collaborate with the Alliance for Adult Research in Congenital Cardiology (AARCC) to create the IT, data-sharing, education, and oversight tools necessary for a patient-driven, national adult congenital heart disease research network using a CHD-specific data tool called CONGENERATE. A national REACH resource center was established at ACHA that provides a toolkit to assist in making CONGENERATE available as a free download to all interested ACHD programs.

CONGENERATE HEALTH IT INITIATIVE
CONGENERATE (CONGENital Evaluation, Reporting, And Tracking Endeavor) is an ACHD-specific tool for data-sharing, ACHD program management, and quality improvement, plus an electronic health record (EHR) customized for CHD patients and their healthcare providers. The goals of this tool are to help ACHD doctors track the information most important to keep their special patients healthy, make possible electronic access to records wherever and whenever needed, and to make it easier for ACHD researchers in different hospitals to pool information. As part of the REACH project, in the first data pull of 2,161 patients, the population sampled was predominantly female, Caucasian/non-Hispanic and nearly two-thirds of patients had moderate or severe congenital heart disease. This is the first study to report the application of a tailored clinical research information system for ACHD.

HEART-ACHD STUDY
The Health Education and Access Research Trial in Adult Congenital Heart Disease (HEART-ACHD) study,** in collaboration with AARCC, surveyed more than 900 new patients at 11 U.S. ACHD centers on gaps in cardiac care, knowledge of their condition, and interest in participating in research. Results show that ACHD patients often have lapses in cardiology care but they were able to improve gaps in knowledge about their heart disease with a simple educational intervention. Subjects also showed a greater understanding of the process of medical research and expressed interest in future research participation. These results, presented at both ACC and AHA Scientific Sessions, plus included in two manuscripts submitted for publication, provide a framework for developing strategies to decrease lapses and barriers in care in the adult congenital population.

* The project described was supported by Award Number 1RC4HL104831 from the National Heart, Lung, and Blood Institute. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Heart, Lung, and Blood Institute or the National Institutes of Health.

** The project described was supported by Award Number R03HL096135 from the National Heart, Lung, and Blood Institute. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Heart, Lung, and Blood Institute or the National Institutes of Health.
2,161 patients participated in the first data pull of the REACH project, one goal of which is to help ACHD doctors track the information most important to keep their special patients healthy.

900 patients took part in the HEART-ACHD study, the results of which provide a framework for developing strategies to decrease lapses and barriers in care in the adult congenital population.

More than 250 providers participated in a study to analyze ACHD professionals’ awareness of patient satisfaction and attitudes toward patient expectations.

CLINICIANS’ PERSPECTIVES ON PATIENT-SATISFACTION IN ADULT CONGENITAL HEART DISEASE CLINICS

In collaboration with researchers at Harvard University and McGill University Health Center, this study aimed to analyze ACHD professionals’ awareness of patient satisfaction and attitudes toward patient expectation. Additionally, we intended to determine if ACHD professionals receive and utilize training or a structured interventional program to manage patient expectations and improve satisfaction. Preliminary results from more than 250 providers were presented at scientific sessions in both the United States and Canada and a manuscript detailing our findings was submitted for publication.

ACHD SUBSPECIALTY APPROVED

In December 2012, the American Board of Medical Specialties announced the creation of a new medical subspecialty in adult congenital heart disease! ACHA is proud of this important step, which responds to the need for more cardiologists capable of caring for adult congenital heart health challenges. After more than ten years of planning, this new training pathway will require ACHD specialists to first complete either pediatric or adult cardiology training, and then receive two additional years of ACHD training. This groundbreaking new medical subspecialty will ensure there are enough physicians with appropriate training for the more than 2 million Americans now living with CHD.

I almost dropped over when I heard your message that perfect repairs could become not-so-perfect. Never had a clue, even when my non-ACHD cardiologist told me last spring that he saw a ‘thickened heart wall’ in my echo. I hope to find an ACHD team sometime soon. However, please know, you may have saved, if not prolonged, my life, and I will never forget your message.
My name is Tracy
Living with CHD creates a sense of empowerment to face adversity, humbles you to be thankful for the littlest of things, and builds strength from weakness.
## 2012 By the Numbers

**FISCAL YEAR ENDED DECEMBER 31, 2012 (IN USD)**

### PUBLIC SUPPORT & OTHER REVENUE

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>$887,461</td>
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<tr>
<td>Grants</td>
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<td>Programs &amp; Events [conference, publications]</td>
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<td>Other (merchandise, interest)</td>
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<td><strong>Subtotal Revenue</strong></td>
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<td>Prior Year Revenue Reserved For This Year</td>
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<td>Revenue Restricted For Next Year</td>
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<tr>
<td><strong>Total Public Support and Other Revenue (Net)</strong></td>
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<td>$1,093,127</td>
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### EXPENSES

<table>
<thead>
<tr>
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<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td>Education/Outreach</td>
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<tr>
<td><strong>Total Expenses</strong></td>
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<td>$1,093,127</td>
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### EXPENSES, STRATIFIED

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<tr>
<th></th>
<th>2012</th>
<th>2011</th>
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<tr>
<td>Congenital Heart Walks</td>
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<tr>
<td>Patient/Family Services</td>
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<td>Advocacy Activities</td>
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<td>Medical Professional Services</td>
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<tr>
<td><strong>Total Expenses</strong></td>
<td>$1,280,111</td>
<td>$1,093,127</td>
</tr>
</tbody>
</table>

1. Includes our Sixth Annual Conference in 2011.
2. In 2011, we planned a smaller Lobby Day to target specific Members of Congress.

The Adult Congenital Heart Association (ACHA) is a nonprofit organization exempt from income tax under Section 501(c)(3) of the U.S. Internal Revenue Code. ACHA has been classified as an organization that is not a private foundation and has been designated as a publicly supported organization. ACHA will be pleased to provide a copy of its audited financial statement upon request. Visit www.achaheart.org for ACHA’s Form 990.

### MEMBERSHIP REPORT AS OF DECEMBER 31, 2012

- **Patient/Family Members**: 12,000
- **Professional/Trainee Members**: 9,000

<table>
<thead>
<tr>
<th>Year</th>
<th>Patient/Family</th>
<th>Professional/Trainee</th>
<th>Total</th>
<th>Growth</th>
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<td>2007</td>
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<td>2,850</td>
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<td>6,203</td>
<td>6,329</td>
<td>12,532</td>
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<tr>
<td>2011</td>
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<td>16,188</td>
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<td>2012</td>
<td>9,222</td>
<td>9,913</td>
<td>19,135</td>
<td>2,947</td>
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</table>

**2012 Membership Growth: 2,947**
PUBLIC SUPPORT & OTHER REVENUE

- CONTRIBUTIONS 55%
- GRANTS 39%
- CONTRACT 5%
- DUES 1%
- PROGRAMS & EVENTS <1%
- OTHER <1%

EXPENSES

- TOTAL PROGRAMMING 76%
- TOTAL FUNDRAISING 12%
- TOTAL MANAGEMENT 12%

PROGRAM EXPENSES

- CONGENITAL HEART WALKS 29%
- PATIENT/FAMILY SERVICES 15%
- OUTREACH ACTIVITIES 14%
- MEETINGS/EDUCATIONAL EVENTS 11%
- AMBASSADORS PROGRAM 11%
- RESEARCH 10%
- ADVOCACY ACTIVITIES 5%
- MEDICAL PROFESSIONAL SERVICES 5%

2-YEAR COMPARISON, 2011-2012:
PUBLIC SUPPORT AND OTHER REVENUE

<table>
<thead>
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<th>2011</th>
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<td>Dues</td>
<td>$0</td>
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</tr>
<tr>
<td>Programs &amp; Events</td>
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<td>$0</td>
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</table>

2-YEAR COMPARISON, 2011-2012:
EXPENSES

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<th></th>
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<td>$0</td>
</tr>
<tr>
<td>Advocacy</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Administration</td>
<td>$0</td>
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</tr>
</tbody>
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Membership & Support

2012 MEDICAL PROFESSIONAL MEMBERS

JANUARY 1, 2012—DECEMBER 31, 2012

ACHA Medical Professional Members not only support the vital work ACHA does to improve health for adults with CHD, but also demonstrate that as medical professionals, they have a vital stake in ACHA’s mission. The list below includes all paid professional members of ACHA for 2012.

Anonymous
Lubabatu Abdurrahman, MD
Elizabeth Adams, DO
Mohamed K. A.-Alhabib, MD
Luis E. Alday, MD
Steven W. Allen, MD
Nasser M. Ammassi, MD
Jillian Angiulo
Gerald Angoff, MD
Naser M. Ammash, MD
Ronny and Judy Altman
Mr. and Mrs. James Postle

PAYMENT INFORMATION: American Express Foundation—Platinum ($100,000+)
Allevato Architects Inc—Gold ($50,000–$99,000)
A&M Pool Service—Bronze ($1,000–$9,999)
Anonymous (3)—Bronze ($1,000–$9,999)

ORGANIZATIONS AND BUSINESSES, SUPPORTERS

Battleship’s Circle ($500,000+)
Actelion Pharmaceuticals US, Inc.
Gold ($50,000–$99,000)
Edwards Lifesciences Corporation
Medtronic Foundation
Edwards Lifesciences Corporation
Philanthropy
FAHA

ORGANIZATIONS AND BUSINESSES, SUPPORTERS

FUNDATIONS
Banfield Heart Foundation
Sue and Jim Bernecke
Dr. Bower Company
Community Foundation of Northern California
Los Angeles Regional Heart Foundation

BATTLESHIP’S CIRCLE ($500,000+)
Actelion Pharmaceuticals US, Inc.
Gold ($50,000–$99,000)
Edwards Lifesciences Corporation
Medtronic Foundation
Edwards Lifesciences Corporation
Philanthropy
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OR
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2012–2013

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- **George Warren***, Denver, CO

Please note: A primary goal of the ACHA Board is to provide leadership by those directly affected by congenital heart disease.

*indicates an ACHD patient
**indicates a CHD family member/spouse

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  - Children’s Hospital Boston/Brigham and Women’s Hospital
- **MAB Vice Chair**: Curt J. Daniels, MD, FACC
  - Nationwide Children’s Hospital/The Ohio State University

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www.achaheart.org

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