Executive Director’s Message

Each year, NAMI leaders and members strive to help people whose lives are touched by mental illness. The men, women and children affected by mental illness are the heart of NAMI. In 2010, we grew our ability to support individuals and families across the country while influencing the national and local discussions around mental illness. NAMI remains the strongest voice for the millions of Americans living with mental illness—and that message is heard loud and clear.

NAMI’s core mission over the past 32 years remains unchanged. Raising awareness, providing education and advocating for improved access to effective treatments are goals central to our mission. The strong roots we have grown throughout our history have ensured a solid foundation for our future.

2010 proved itself as another tough year for the country economically. NAMI continued in 2010 to fight hard on Capitol Hill to block budget plans that would cut essential services. States struggled with their budgets while grappling with the loss in previous fiscal years of over $2 billion in cuts to mental health services.

Mental illness affects the lives of more than 100 million Americans each year. We know that the consequences of untreated mental illness for the person, their family and society are staggering. Sadly, this country’s mental health system is not a system at all. What we have in this country is a loosely connected array of services—services that are difficult to access and decreasing in availability because of budget cuts. Higher numbers of service men and women returning from war combined with many families handling the stress due to a stagnant economy create an enormous need for mental health services. Our current mental health system is not equipped to provide the proper services and support the American people desperately need and deserve.

With the enhanced Medicaid stimulus monies expiring on June 30, 2011, states in 2010 proposed deep cuts to Medicaid, which funds more public mental health services than any other source. We had not seen times as dangerous as these before. NAMI was needed more than ever. In the face of these challenges, NAMI advocates in many communities across America united with allies to push back and shape the budget debates.

NAMI’s work on Capitol Hill continued to show results. The mental health insurance parity law was implemented—even in the face of opposition from the health insurance industry. While many government agencies saw their budgets cut, NAMI’s staunch advocacy on the importance of research helped to ensure that funding for the National Institute of Health was not.

After years of efforts, the Affordable Care Act was officially signed into law on March 23, 2010. With its passage, mental illness will no longer be a condition that insurers can use to deny coverage. The many who have been discriminated against in the past by health insurers can now stand on equal ground and receive the coverage they rightfully deserve.

Providing education and support continue to be the pillars on which NAMI stands. This past year, NAMI expanded the availability of many of its programs. Crisis Intervention Teams (CIT) are now implemented in more than 1,500 communities. NAMI expanded the scope of CIT to better address the needs of youth and veterans. We also extended this reach into minority and foreign populations. The translation of NAMI’s In Our Voice program into Spanish, as well as offering our NAMI Connection peer groups in Spanish, made NAMI services accessible to many new individuals and families affected by mental illness. Our NAMI Connection groups became available in 47 states.

A four-year study funded by the National Institute of Mental Health, under the leadership of Dr. Lisa Dixon, showed support for our Family-to-Family program as an evidence-based practice. The findings of this study bring hard evidence to what we at NAMI already know: Family-to-Family works. In 2010, Family-to-Family was offered in 49 states.

2010 also saw the introduction of the innovative NAMI Hearts & Minds program to promote the well-being of “mind and body.” Research shows that addressing both is vital to achieve optimal health, and methods of treatment should adapt accordingly. The program aims to continue to close
the 25-year gap in life expectancy between people living with mental illness and other Americans.

This past year, NAMI expanded significantly into the social media sphere. At the beginning of the year, NAMI launched its social media initiative on Facebook and Twitter, enabling us to construct bridges into virtual communities and reach millions of individuals in search of support and information. To create a place specifically for transition-age youth and young adults living with mental illness, NAMI introduced StrengthofUs.org. With more than 2,000 active registered users, this social networking site continues to serve as a digital haven for youth and allows them to connect, share their stories and “find help, find hope.”

In 2010, 74 communities across America participated in NAMIWalks, where thousands of supporters in communities across the country walked for mental illness. Millions of dollars were raised to support the work of NAMI State Organizations and NAMI Affiliates. We know that no widespread disease remains as under-recognized, misunderstood and untreated as mental illness. NAMIWalks continued to make a difference, community by community, by sending the message that mental illness is an illness like any other, and reminding our communities that treatment works and that recovery is possible.

As we move into 2011, we at NAMI understand that while progress has been made, we will continue to face many challenges. Less than one in five people who need effective treatment for mental illness get that treatment when they need it. NAMI will continue to work to block cuts to essential services, while decreasing the impact of the stigma that stops many persons living with mental illness from getting the treatment that they need. We will continue to offer free education courses and support opportunities in communities across America. Our efforts will not waiver in the face of hard times. Just as we have for 32 years, NAMI will continue to stand strong and meet challenges head-on.

Sincerely,

Michael J. Fitzpatrick, M.S.W.
NAMI Executive Director

I am NAMI

Jackie Shannon
NAMI President 1998-2001

My family’s story with NAMI began as it has with so many other families: a child diagnosed with mental illness. It was 1987 and like other families we searched for answers, searched for resources, trying to understand our new situation.

We found NAMI and found hundreds of other families also dealing with the trauma of something little of us understood. Our whole family got involved with trying to make things better for people living with mental illness.

Locally, my husband and I helped to start our local NAMI Affiliate and I became involved on the state level. NAMI Texas, then TEXAMI, was a volunteer organization operating out of one room of donated space within the office of the Texas Society of Psychiatric Physicians.

Through the hard work of many, many volunteers and with a legislative champion, we achieved the almost unthinkable: successfully legislating parity for serious mental illness within all health insurance for public employees! It was the first parity legislation achieved in the United States.

In 1997, TEXAMI followed up that success through working hard for legislation that extended the parity for mental illnesses in health insurance in the private sector, which affected businesses with 50 or more employees.

After 25 years, NAMI Texas and NAMI have continued to grow. We are no longer that small organization operating out of one room, but have matured into a vibrant, busy national organization. The future is very bright and I am pleased to be one of those many volunteers helping to shape the organization.

At last year’s NAMI Annual Convention Jackie Shannon was presented with the Outstanding NAMI Member Award, the highest honor that NAMI gives to a member of our family.
January
NAMI launches its social media initiative via Facebook and Twitter, expanding its impact by reaching new, virtual communities of tens of thousands of individuals in search of support and information.

February
NAMI’s Hearts & Minds education program is launched to promote sound “mind and body” health practices among individuals who live with serious mental illness.

At a special briefing for Congressional staff, former Connecticut Lieutenant Governor and NAMI board member Kevin Sullivan testified on the need for federal action to address the growing mental health crisis in states.

March
Vietnam-era combat pilot and NAMI board member Clarence Jordan testified at a U.S. Senate hearing calling for better outreach and coordination of mental health care by the Department of Veterans Affairs (VA).

NAMI celebrated the third anniversary of the NAMI Connection Recovery Support Group, a free support group for adults living with mental illness. NAMI offered nearly 500 NAMI Connection support groups in 47 states.

NAMI launched StrengthofUs.org, an online community where young adults living with mental health concerns can network, share information and find support unique to their situations.

The Affordable Care Act is signed by U.S. President Barack Obama on March 23. It is anticipated that federal health care reform will help ensure that the needs of Americans living with serious mental illness are addressed. Starting in 2014, substance abuse or mental illness can no longer be used by insurers to deny coverage as a “pre-existing condition.”

April
The BringChange2Mind campaign, created by Academy Award-winner Glenn Close, is welcomed as a supporting partner of NAMIWalks. BringChange2Mind teams participated in select NAMIWalks to support the common mission of battling the stigma often associated with mental illness.

An Army platoon in Iraq ran five kilometers (5K) in full body armor on April 17 to raise awareness about posttraumatic stress disorder (PTSD) and the need to end stigma surrounding mental illness. In 2010, 83 NAMIWalks were held in 45 states with more than 140,000 participants.

May
PBS stations nationwide aired When Medicine Got It Wrong, a documentary about NAMI’s grassroots origins and founding as a national organization, to coincide with Mother’s Day.

NAMI called on Congress for greater scientific research, mental health grants to offset massive state budget cuts and an end to a backlog in the processing of Social Security disability claims. NAMI’s staunch advocacy on research helped preserve funding for the National Institute of Mental Health (NIMH) at a time when many other federal programs were cut.

Ken Duckworth, M.D., medical director of NAMI, was honored with the Patient Advocacy Award of the American Psychiatric Association (APA). The Patient Advocacy Award recognizes a public figure respected for personal accomplishments and beliefs, who has promoted the improvement of services for people coping with mental disorders and substance abuse.

NAMI honors 22 doctors as “Exemplary Psychiatrists” at the American Psychiatric Association annual conference. This was the 20th consecutive year that NAMI has presented the awards.

June
The NAMI Consumer Council honored Paolo del Vecchio with its annual Gloria Huntley Award, which recognizes an individual or organization that has made significant strides in reducing the use of restraints and seclusion in
the treatment of mental illness. Del Vecchio is associate director for Consumer Affairs at the Center for Mental Health Services (CMHS) of the Substance Abuse and Mental Health Services Administration (SAMHSA) in the U.S. Department of Health and Human Services.

NAMI played an instrumental role in achieving the passage of the Frank Melville Supportive Housing Investment Act. It will significantly enhance and streamline federal funding for supportive housing for people living with serious mental illnesses and other disabilities.

Preliminary results for a four-year study conducted by NIMH, and headed by Lisa Dixon, M.D., revealed that Family-to-Family produces significant results for individuals engaged in the program. Family-to-Family is NAMI’s signature education program for caregivers and families of individuals living with mental illness. Over 200,000 people have graduated from the program since its introduction.

July
NAMI hosted its annual convention in Washington, D.C. Featured was NIMH’s Raise Study, which continues to explore the effectiveness of early and aggressive treatment in reducing the symptoms of schizophrenia. Former Representative Patrick Kennedy appeared to affirm the importance of providing adequate mental health care to veterans.

NAMI continued to call national attention to minority mental health by promoting Bebe Moore Campbell National Minority Mental Health Awareness Month.

NAMI publicly confronted BP oil company for ignoring Louisiana’s appeals for help in funding mental health care in communities affected by the BP oil spill. The NAMI letter came after Louisiana’s Department of Health and Hospitals advised the U.S. Department of Health and Human Services that the state had written twice to BP asking for $10 million for mental health services without receiving any reply. As a result, BP issued large payments to affected gulf coast states to assist with providing mental health services to people affected by the spill.

It all started in seventh grade. I began to hear voices. At first I thought it was just someone calling out my name, but as time went on the voices grew stronger, louder and increasingly self-destructive. Eventually the voices wore me down and convinced me to kill myself.

I was placed in a psychiatric hospital for two weeks. Initially, I was diagnosed with schizophrenia because of the auditory hallucinations. I did okay for about one year. However, in the spring of my freshman year, I was also diagnosed with a panic disorder.

My medication at the time ignited a severe manic episode and I lost control. I was hospitalized again. I laid in bed staring at the ceiling, barely eating and speaking to anyone for days except for the occasional one-word verbal utterance to my father confirming I was still alive.

I was finally diagnosed with bipolar disorder. Even with the proper diagnosis, the struggle had just begun. I eventually dropped out of high school and was home-schooled. Every semester I would try to go back but could not handle it.

Around this time, I started looking at films differently. I realized that the only true escape I felt from what seemed like perpetual misery and instability was when I was watching a movie. With time, film became more than a window of escape.

This “artistic therapy,” along with a therapist who believed in combining traditional and nontraditional treatments, began to help me regain control of my life. I was able to graduate from high school in four years, and walk with my graduating class. Three-and-a-half years later, I graduated with honors from Montana State University with a B.A. in film.

I found NAMI and realized the tremendous influence and potential that NAMI had. I joined as a member and soon became a member of the young adult advisory group that helped create StrengthofUS.org. Reaching out to teens living with mental illness is vital in achieving a positive recovery.
August
NAMI raised added concerns to a study released by The Urban Institute that showed more than one-half of babies in poverty are being raised by mothers living with depression. At least 70 percent of low-income mothers go without treatment, according to the study, with only 30 percent even speaking to a mental health professional over the course of a year.

NAMI expanded its efforts in providing technical assistance, education and promotion of Crisis Intervention Teams (CIT) to over 1,500 initiatives in 45 states. A national model, CIT is a community program designed to improve the outcome of encounters between law enforcement and people living with mental illness. In 2010, NAMI began to expand this effort to better meet the needs of youth and veterans.

September
NAMI’s Peer-to-Peer program, a free, 10-week educational course for people living with mental illness, is launched with a new Spanish translation of the course, making it available to more individuals in diverse communities.

NAMI launches a new online ADHD resource center to support children and adults. The newly redesigned website offers updated tools for parenting, school, work and relationships.

The NAMI Corporate Advisory Group was officially formed. The Advisory Group will work to craft strategies and identify opportunities to help NAMI broaden the representation of corporate America as donors and supporters.

October
The Sharing Hope program continued to grow in 2010. The Sharing Hope toolkit was been distributed to over 65 NAMI State Organizations or Affiliates around the country. The Multicultural Action Center worked closely with five grant sites who made connections and established relations with African American faith communities. Ninety-seven percent of people who responded to post-program evaluations agreed that the program increased their understanding of mental illness.

Seven NAMI leaders and colleagues received leadership honors at the 2010 SAMSHA Voice Awards. The Voice Awards honor individual/peer leaders who have played vital roles in raising awareness and understanding of mental health and other behavioral health issues.

NAMI promotes the 21st annual Mental Illness Awareness Week (MIAW). In an effort to raise awareness prior to the 2010 elections, NAMI encouraged discussion on various issues of mental illness in the media, including mental illness and jails, children’s mental illness, stigma, housing costs and budget cuts, to make sure candidates were addressing the facts.

November
Recognizing the unique needs of the Asian American/Pacific Islander (AAPI) community, NAMI’s Multicultural Action Center hosted an AAPI Mental Health Listening Session on Nov. 4-5, 2010, in Los Angeles to discuss current issues in AAPI mental health and propose recommendations for action. An official report was published in 2011.

U.S. Army Maj. Gen. David Blackledge spoke in an online radio interview with NAMI about the revolution that is occurring in how the military looks at posttraumatic stress disorder. As part of a treatment “revolution,” the Army has recognized a need to be “proactive” in helping troops in combat and “especially upon return.” The new approach focuses on “comprehensive soldier fitness” and “resiliency.”

December
NAMI released its triannual issue of Beginnings, focusing on military families and including articles from military personnel and families. This was Beginnings most popular issue to date.

NAMI published an updated and expanded version of A Family Guide: What Families Need to Know about Adolescent Depression. The new version includes information on self-injury, getting an accurate diagnosis, recent research studies and much more.

NAMI concludes the Puzzle Pieces public service announcement initiative, which included web, print, television, online and radio formats. It measured over 500 million audience impressions and raised awareness for NAMI as a destination of help and support for people affected by mental illness.
My name is Sharon Denise Wise, but my family called me Angel. I was diagnosed with a mental illness at a very young age. I began running away from home when I was 9 years old. I didn’t know what I was running to, but I knew what I was running from. My home was filled with abuse and violence, and I never felt loved. I would eat scraps off the tables of outdoor restaurants and sleep in abandoned buildings and cars. I would rather sleep under a bridge with drug addicts and trash than go home.

At 18 years old, I was a teen mother of two living on the streets and, by then, I had been hospitalized for depression, anxiety and three suicide attempts. I also had become a drug addict—doing drugs while I was pregnant with my daughter until my water broke. I still didn’t want to go to the hospital because I didn’t want to stop getting high. Both of my children ended up in foster care.

After 15 hospitalizations, incarcerations and stays at other institutions, I was relocated by force to the Washington, D.C., area. I found myself homeless and battered again. I ended up at a shelter for battered women. It was there I had a rebirth. I got clean from drugs and alcohol and settled into a mental health center that offered a glimpse of hope. Art saved my life and my vibrant colored self-portraits illustrate my traumatic experiences and journey. Today, I am a member of NAMI D.C. and a WRAP coordinator facilitator, and have been a speaker and performer at past NAMI Annual Conventions.
2010: Major Donors

Anonymous
Alexandria Real Estate Equities Inc
Association of Silicon Valley Brokers
Attias Family Foundation
Audio-Technica U.S., Inc.
Austin Community Foundation
Betty and Davis Fitzgerald Foundation
Blue October & Fans Furstenfeld
Bluewater Constructors, Inc.
Body of Christ Church
BP Fabric of America Fund
Bryant Bank - Huntsville
California Community Foundation
Catholic Healthcare Partners
Charles Spear Charitable Trust
Church of the Savior United Church of Christ
Cobb County Community Service Board
Cogentrix Energy, LLC
College of Psychiatric & Neurological Pharmacists
Concordant Rater Systems
Cooney and Conway
CRC-Evans Pipeline International
Cupertino Electric Inc
Delivery Agent, Inc.
DJ Findley Family Foundation
Elinor Beidler Siklossy Foundation
EOS Foundation Trust
Essel Foundation, Inc.
Estate of Celeste S. Rathe
Estate of Eric S. James
Estate Of Gretchen Lucchesi
Estate of Jule D. Ensign
Estate of Lillian G. Herman
Estate of Robert A. Atherton
Estate of Ronald Gabriel
Estate of Rosella L. Weiss
Ethel & James Flinn Foundation
F&B Mfg. Co.
First Congregational Church of Bellevue
Francis Beidler Foundation
Frankie Family Foundation Inc.
Freeport-McMoRan Copper & Gold Foundation
Fresenius USA, Inc.
Genoa Healthcare Clearwater, FL
George W. Cohe Jr. Foundation
Gertrude B. Nielsen Charitable Trust
Gordon Family Charitable Foundation
Greendale Lynn Family Foundation
Healing Pathways Medical Clinic, Inc.
Hewlett-Packard Foundation
Hilborne Family Charitable Foundation
Hillcrest Family Foundation
Horizon Foundation
Howard Hughes Medical Institute
Howard Medical Research Institute
Huggins Family Foundation
Huntington Medical Research Institutes
Ikei H. and Sarah C. Eggerton Charitable Foundation
Ikei H. and Sarah C. Eggerton Medical Research Foundation
John H. Ercklik Foundation
John H. Ercklik Medical Research Foundation
John P. and Joann Linde Charitable Foundation
Karen C. Adkins
Kathryn E. and Robert S. Miller Family Foundation
Kemper Medical Research Foundation
Kensco Hospitality, Inc
L&R Anixter Foundation
Larry & Nancy O'Reilly Family Foundation
LRS Consulting Group
Levin Family Foundation
Lincoln Community Foundation, Inc
Loring, Wolcott & Coolidge Office
LSP Cottage Grove, LP
LSP Whitewater
Lumen Land
Madison & Mulhalland, Inc
Magellan Pipeline Company, LP
Manny and Ruth Cohen Foundation Inc
Margaret O. Joy Endowed Fund at the Lincoln Community Foundation
Mark Krueger & Associates, Inc.
Mary Frances Accessories Inc.
MB Religious Offering Fund
McLarty Companies
Merrill Lynch
Michael T. Riordan Family Foundation
National Assoc. of Activity Therapy and Rehabilitation Prog
Oscar & Anna Bentley Charitable Foundation Inc.
Oshkosh Area Community Foundation
Paywell Foundation
Passageway Residence of Dade County, Inc.
PESI LLC and CMI Education Institute, Inc.
Power Plant Management Services, LLC
Psychiatric Access for Central Delaware, PA
Quiktrip Corporation
Rabaut Family Foundation
Region Ten Community Services Board
Robert M. and Thelma Y. Brown Foundation
Sagayln Family Fund
Seidman Family Foundation
Selkirk Cogen Partners, LP
Shepherd Foundation Inc.
Sidney Stern Memorial Trust
St. Joseph Church
Stanley Family Foundation
Startch Family Foundation, Inc.
Starlight Foundation, Inc.
Student Occupational Therapy Association
Sylvia’s Revocable Trust
Tanglewood Wealth Management, Inc.
The Berry Family Foundation
The Community Foundation of Greater Greensboro, Inc.
The Creman Foundation, Inc.
The Fine Foundation
The Glickenshaus Foundation
The Harold R. Goldmann Charitable Trust
The Joseph H. and Maxine F. Pearlman Foundation
The Krawitz Family Trust
The Matthew R Stone Trust
The Milton and Tamara Maltz Family Foundation
The Nacchio Foundation
The New York Community Trust
The Rayne Foundation
The Ram Foundation
The Seco Family Fund
The Susan Stein Shiva Foundation
The Syril and Leon Gelernt Foundation
Tides Foundation
Tomeo Family Charitable Fund
TGPO Capital, L.P.
Trustmark National Bank
Tunnel Consulting, Inc.
United Biosource Corporation
Unity Temple Unitarian Universalist Congregation
Urology San Antonio PA
Virginia Mae Garner Family Trust
Wallace F. Pate Fellow Man Foundation
Walter R. McDonald & Associates, Inc.
Walter S. Johnson Foundation
Washington Medical Health
Wellspring Trust
Wiley Reilly LLP
World Heritage Foundation-Prechter Family Fund
Zig Zag Multimedia
1998 Pledge Class, Upson Upson Chapter of Sigma Chi Fraternity
Susan Abbott
Henry Acosta
Peggy Adams
Karen C. Adkins
Peter and Zoe Adler
Sheri Alber Munoz
David and Maryann Albonesi
Joan Alexander
Edward Alexander
Elizabeth Allen
Heidi Allen
Kenneth D. Alpert
David Asdoss
Randy and Maria Altamayer
Sheenie Ambardar
Shela Amudr
Deborah Amey
E. M. Anderson
Katherine Anderson
Katherine Andrews
David Apaloff and Neil Minow
Harvey and Elizabeth Applebaum
Chalee Armstrong
Winslow and Nancy Arnold
Daniel and Diana Attias
Faye C. Austin
Mark and Sally Austin
Enrique and Jennifer Heseketh Aviles
Robert and Margaret Ayres
Ellen Babbitt
LeaGenis Bailey
James and Veronica Baker
George and Harriet Baldwin
Sandra Banis
Gregory Bantrup
Carol Barash
Russ and Maxine Barnett
Leanna Barron
Julien Basch
Shari Basom
Wayne Bass
David Bassett
Dennis Baylor
Andrew and Nancy Beck
Curt F. Beck
Judy Beckrich
Elmor Beidler Siklossy
Charlene Bell
Robert and Arleen Belyea
Art Jarvis and Claire Benaud
Barbara Benda
Albert and Pamela Bendich
Dean and Gail Bennett
Jeffrey I. Bennett
Jim and Terry Benson
Robert S. Benson
Faith Benton
Howard Berk
Richard Berne
Joel and Carol Bernstein
Dr. Frank Berry and Mrs. Elizabeth Berry
Gretchen A. Bertolet
Scott and Gail Betz
Holly A. Blakso
Harold and Jananne Bloom
Susan Blough
Donald and Janet Boardman
Frances A. Bombardiere
John and Elizabeth Bomer
John Boudet
Charles and Virginia Bowden
William and Mary Bowden
Sharon E. Bowyer
James Boyd
Stephanie Bozic
William and Gail Bradley
William and Briga Brakefield
Steven and Heidi Brandemuehl
Dr. Stephen K. Brannan and Ms. Kelli J. Brannan
Dr. Al Bravoswell
Thomas Brenner
John and Peg Brestin
Virginia Brezinski
Terry Bridges
Wendell and Charlotte Brooks
Harold Brown
Jodie Brown
Laurie V. Brown
Glenn and Margaret Brown
Jeff and Pam Brown
Royce and Laura Brownfield
Elsa Brule
James and Sylvia Bryan
William and Katharine Buckham
William N. Buffett
Linda J. Buonauro
Pamela Burden
Allan and Mary Burdick
A. Franklin Burgess and Diana Martin
William and Edna Burgess
Fenton and Margaret Burke
Edward and Patricia Burke
Dr. Joyce C. Burland and Mr. Sascha Burland
Chris and Lois Burton
Josh and Jeanine Burwick
Franklin and Margaret Bushey
William and June Busing
Edward and Shirley Butterworth
Lauree Calder
Jeremiah and Karen Callaghan
Richard and Kathleen Campbell
Jose M. Canive
Sara L. Carling
Bryce Carmine
Kenneth and Mary Carmona
Marlynn W. Carpenter
Tara Carr
James and Maureen Carroll
Linda K. Pontious
Dr. Taylor Porter
Linda Porzign
Dr. Robert M. Post and Mrs. Susan W. Post
Dr. William Z. Potter and Mrs. Mary Jo Potter
Gerald and Judith Potthoff
Stephen Polzin
Dr. Jerold Powers and Mrs. Karen A. Powers
Jim and Ann Pramann
Tina Pruitt
William E. Gray, III and Carolyn Gray Pugh
Howard and Nancy Punch
Kenneth and Roma Purdy
Albert L. Quaal
Mr. Chad Quist and Dr. Heidi L. Quist
Thomas and Sheila Rabaut
Joan G. Rafei
Harvey and Carol Raff
Carrol Rafferty
Penne Raffetto
Thomas Rafter
Clarice Raffiel
Kara Raiguel
John and Mary Raitt
Robert and Ikmur Ralston
Marilyn Raney
Radhika Rao, MD, FAPA
Maryann M. Rowlaz
Jeaninne Reed
Dirk Reberger
Charles Reilly
Sheridon and Edith Rein
Michael and Jane Reinhardt
Jessica Reisman
Ronald and Mary Ann Renz
Dell Rhodes
Joe and Marilyn Ricci
Deirdre Richards
Basil Richardson
Jerry and Cheryl Richardson
Patricia Rimmer
Lynda Ringelstein
Dr. John W. Ritter and Mrs. Helen D. Ritter
David and Ann Roberts
Shirley J. Roberts
Dr. John B. Robertson and Mrs. Dana D. Teagarden
Greg and Elizabeth Robillard
John Robinson and Dorinne Steele
Suzanne Robinson
Tobias and Elaine Robinson
Diana Robles
Elizabeth Roche
Christopher Rodebaugh
David and Susan Rolewick
C. Carlyle Rood
James and Miranda Ross
Arline B. Rothenberg
Debbie Roumel
Gilian R. Roush
Debbie Roumell
Arline B. Rothenberg
James A. Runke
Rhonda Russ
James and Priscilla Russell
Delaney Ruston
Joel Saal and Nancy Bovee
Arnold and Louise Sagalyn
Reuben and Beulah Saideman
Janice L. Sakofsky
Fred and Mitsue Salador
Maan Sauloum
Lydia Sanchez
Drs. Surya and Jaya Sankaran
Roger and Victoria Sant
John and Margaret Sarkela
Annie V. Saylor
George Schaefer and Molly McShane
John Schannach
Peter Schilkraut
Linda Beth Schilling
James Schlesinger
Gregory and Ronda Schmidt
Norman and Deed Schneake
S.L. and Eleanor Schorr
Elizabeth Schuch
Robert Schuils
Craig Schury
Susan Schwab
Gary and Angel Schwatz
Perry and Phyllis Schwartz
Samuel Schwartz
Dr. Suzanne E. Vogel-Scibilia and Mr. James P. Scibilia
Edward and Barbara Scolnick
Michelle Scott
Sheelah K. Scott

Aileen C. Ceaman
John C. Seed
Richard A. Segal
Stephen and Patricia Segal
Jared Selengut
Mary and Helen Selgas
Michelle R. Seltzer
Wayne and Dee Shank
Jacqueline L. Shannon
Kathleen E. Shannon
Gerry A. Shear
Stephen and Eloise Shepherd
Yoshinobu and Kathleen Shiota
Jeanne Shirk
Dr. Andrew A. Shiva and Mrs. Anne Shiva
H. Bruce and Jackie Shreves
James J. Shupe
Richard C. Siefert
Catherine M. Siegel
Daniel and Ruth Siegel
Eileen Silber
David Silberman and Claire Engers
Uli Silberstein and Jackie Fradkin
Roni Silva
Jeanne Silvers
David N. Simmons
Brian J. Simnick
Brent Simich
Victoria Sims
Emily Sites
Robert Sklar and Fay Anderson
Sean Stiepner and Mona Yu
John Small
Susan Smith
Jeremy Smith and Julie Atkinson
Ronald and Christine Smith
David and Elizabeth Smith
David Smith
Elizabeth C. Smith
Peter and Julia Smith
Randall Solomon
Dr. Stephen M. Soltys and Mrs. Mary Karen Soltys
John and Margaret Sottosanti
Jeffrey Sourek
Shelby J. Spencer
Susan R. Spencer
Carolyn Spiro
Dr. Howard Spiro and Mrs. Marian W. Spiro
Michael and Melanie Staloch
Gary L. Stark
Patricia Stark
Peggy B. Stedman
John and Valerie Stelling
Pam Stephenson
Jonathan and Sydney Stern
Patricia E. Stewart
Ron Stewart
Mary C. Stiefel
Andrea B. Stone
Frank and Margaret Stotz
Jeff and Kelly Straub
Peggy Straw
Oliver Strunock
Eleanor Studier
Edward and Constance Sullivan
Kevin B. Sullivan and Carolyn Thornbery
Myron and Janet Susin
Joy A. Sutton
Stephen and Loretta Swan
Patricia M. Swan
Elizabeth Swann
Catherine Syrett
Patricia Tager
Gordon and Elaine Tagge
Nicholas Tannor
Jessie A. Tait
Jane Tanner
John and Martha Tanner
Thomas and Andrea Tatlock
Darcy Taylor
Faye Taylor
Harold E. Taylor
Jill B. Taylor
Ronald L. Taylor
Jonathan and Kimberly Teunis
Ranjit Thaker
Alberta Thien
Trudelle H. Thomas
Dennis and Ann Thron
Kelley Thynne
Eugene Tillman and Bonnie Thomson
Moriah Tinkham
Brian and Aleatha Tippett
Anita Tobin
John Tomarchio
Simon P. Torkin
James and Gail Toppis
Robert W. Touchberry
Julie Travis

Aileen J. Trollering
David and Jean Trubey
M. Mark Trulillo
William Tullis
Donald and Judy Turnbaugh
Sara M. Turner
Donald and Susan Ullman
Jane R. Uphoff
Henry and Martha Upjohn
Mary C. Urlichio
Dr. Paul M. Vaaler and Mrs. Katherine F. Vaaler
Edna Valentine
John R. Van Buskirk
George Van Dyke
Al and Barbara Van Eekeren
Anita Varghese
Terry Vaughan
Thomas A. Venturilla
Jesse Viner
Steven Vogeling
Karl Von Freiinger and Patricia Warburg Cliff
Dr. Matthew G. Wagner and Mrs. Bernadette M. Wagner
Steve Wales and Kim Limer
Cynthia Walk
Gloria M. Walker
Greg Walker
Mallory and Diana Walker
Steve and Teresa Walker
Charles and Jan Wally
Dennert and Suzanne Ware
Gary and Bonnie Warner
Kevin and Sara Warner
Douglas and Susan Warsett
Steven and Ronna Warshawer
Clyde Watson
Robert and Mary Watt
Darrell and Mary Weakland
Michael Weaver
Dar Webb
Robert and Suzanne Weber
Bruce Weidenburner
Michael S. Weiner
Ralph and Anne Weintich
Steven Weisenstein
Andrew H. Weiss
Bill Weiss
Bonnie Wellich
Marguerite L. West
Lindsay A. Weston
Seleldon and Susan Whittaker Jr.
Neil Whitbeck
Virginia J. Whitcombe
Carolyn White
Beverly White
Frances White
Shelley White
Steven and Catherine White
Raymond Whitehead
Carole Whyte
Joel and Diane Wier
Emily Wilcox
William and Linda Wilczek
Stephen Wild
Patricia Wilde
Michael and Sharon Williams
Wesley A. Williamson
Dr. Martin S. Willick and Mrs. Nancy Willick
Lorna H. Wissink
Tina Winters
John and Jean Wolf
E. Judson Wolfe
Charles and Nancy Wolfnam
William and Leigh Wolfsthal
Louise M. Womolle
Rene L. Woodward
Eric and Dawn Wright
Amy Wurtz
Michael and Wanda Yap
Fred and Pamela Yapunich
Barbara Yoses
Nancy Younce
Lee F. Young
Susan Young
James and Katherine Zartman
Judith Zaylor
Scott and Susan Zeiders
Jeff Zeidman
Ronald and Diane Zeigler
Karl and Joan Zeissler
Reginald and Elaine Zelnik
Mary Zimmer
Frank and Ann Zingheim
Marian Zoeller
Eleanor L. Zuckerman
Adam and Ari Zurofsky

Denotes multiple Leadership Alliance members who wish for their gifts to remain anonymous.
INDEPENDENT AUDITORS’ REPORT

To the Board of Directors of
NAMI and Affiliate

We have audited the accompanying consolidated statements of financial position of NAMI and Affiliate (collectively “the Organization”) as of December 31, 2010 and 2009, and the related consolidated statements of activities, functional expenses and cash flows for the years then ended. These consolidated financial statements are the responsibility of the Organization’s management. Our responsibility is to express an opinion on these consolidated financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the consolidated financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of NAMI and Affiliate at December 31, 2010 and 2009, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The supplemental information included at pages 21-22 is presented for purposes of additional analysis of the basic consolidated financial statements and is not a required part of the basic consolidated financial statements. Such information for the years ended December 31, 2010 and 2009 has been subjected to the auditing procedures applied in the audit of the basic consolidated financial statements, and in our opinion, is fairly stated in all material respects in relation to the basic consolidated financial statements taken as a whole.

Vienna, Virginia
March 7, 2011
## Consolidated Statements of Financial Position
December 31, 2010 and 2009

### Assets

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$2,085,871</td>
<td>$1,620,516</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>1,104,011</td>
<td>2,732,338</td>
</tr>
<tr>
<td>Inventory</td>
<td>92,260</td>
<td>103,643</td>
</tr>
<tr>
<td>Investments</td>
<td>5,466,706</td>
<td>5,551,053</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>253,454</td>
<td>246,111</td>
</tr>
<tr>
<td>Property and equipment, net</td>
<td>855,744</td>
<td>985,264</td>
</tr>
<tr>
<td>Deposits</td>
<td>46,900</td>
<td>46,900</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>$9,904,946</strong></td>
<td><strong>$11,285,825</strong></td>
</tr>
</tbody>
</table>

### Liabilities and Net Assets

### Liabilities

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$972,176</td>
<td>$1,147,690</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>256,381</td>
<td>83,075</td>
</tr>
<tr>
<td>Deferred rent and lease incentive</td>
<td>776,615</td>
<td>768,781</td>
</tr>
<tr>
<td>Deposits</td>
<td>-</td>
<td>14,786</td>
</tr>
<tr>
<td>Charitable gift annuities</td>
<td>261,071</td>
<td>255,050</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td><strong>2,266,243</strong></td>
<td><strong>2,269,382</strong></td>
</tr>
</tbody>
</table>

### Net Assets

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>4,440,434</td>
<td>4,326,687</td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>2,658,106</td>
<td>4,153,843</td>
</tr>
<tr>
<td>Permanently restricted</td>
<td>540,163</td>
<td>535,913</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td><strong>7,638,703</strong></td>
<td><strong>9,016,443</strong></td>
</tr>
</tbody>
</table>

**Total liabilities and net assets**

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>$9,904,946</strong></td>
<td><strong>$11,285,825</strong></td>
</tr>
</tbody>
</table>

*See accompanying notes.*
NAMI and Affiliate

Consolidated Statement of Activities
For the Year Ended December 31, 2010

<table>
<thead>
<tr>
<th>Revenue and Support</th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>$ 2,972,228</td>
<td>$ 3,753,672</td>
<td>$ 4,250</td>
<td>$ 6,730,150</td>
</tr>
<tr>
<td>Walks</td>
<td>716,030</td>
<td>-</td>
<td>-</td>
<td>716,030</td>
</tr>
<tr>
<td>Registrations</td>
<td>306,488</td>
<td>-</td>
<td>-</td>
<td>306,488</td>
</tr>
<tr>
<td>Investment income</td>
<td>315,681</td>
<td>-</td>
<td>-</td>
<td>315,681</td>
</tr>
<tr>
<td>Contracts</td>
<td>867,022</td>
<td>-</td>
<td>-</td>
<td>867,022</td>
</tr>
<tr>
<td>Dues</td>
<td>329,103</td>
<td>-</td>
<td>-</td>
<td>329,103</td>
</tr>
<tr>
<td>Sales</td>
<td>227,243</td>
<td>-</td>
<td>-</td>
<td>227,243</td>
</tr>
<tr>
<td>Other revenue</td>
<td>44,006</td>
<td>-</td>
<td>-</td>
<td>44,006</td>
</tr>
<tr>
<td>Net assets released from restrictions:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction of program restrictions</td>
<td>2,989,409</td>
<td>(2,989,409)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Satisfaction of time restrictions</td>
<td>2,260,000</td>
<td>(2,260,000)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total revenue and support</td>
<td>11,027,210</td>
<td>(1,495,737)</td>
<td>4,250</td>
<td>9,535,723</td>
</tr>
</tbody>
</table>

**Expenses**

Program services:

- Program and membership support | 4,873,701 | - | - | 4,873,701 |
- Education services         | 1,845,101 | - | - | 1,845,101 |
- Advocacy                 | 1,691,204 | - | - | 1,691,204 |

Total program services | 8,410,006 | - | - | 8,410,006 |

Supporting services:

- Administration            | 1,227,404 | - | - | 1,227,404 |
- Development              | 1,276,053 | - | - | 1,276,053 |

Total supporting services | 2,503,457 | - | - | 2,503,457 |

Total expenses | 10,913,463 | - | - | 10,913,463 |

**Change in Net Assets**

| Change in Net Assets | 113,747 | (1,495,737) | 4,250 | (1,377,740) |

**Net Assets, beginning of year**

| Net Assets, end of year | $ 4,440,434 | $ 2,658,106 | $ 540,163 | $ 7,638,703 |

See accompanying notes.
# NAMI and Affiliate

Consolidated Statements of Cash Flows  
For the Years Ended December 31, 2010 and 2009

## Cash Flows from Operating Activities

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in net assets</td>
<td>$(1,377,740)</td>
<td>$ (101,280)</td>
</tr>
<tr>
<td>Adjustments to reconcile change in net assets to net cash provided by (used in) operating activities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net realized loss on sales of investments</td>
<td>6,819</td>
<td>1,061,964</td>
</tr>
<tr>
<td>Unrealized gain on investments</td>
<td>(197,929)</td>
<td>(1,331,747)</td>
</tr>
<tr>
<td>Donated investments</td>
<td>(35,622)</td>
<td>(25,712)</td>
</tr>
<tr>
<td>Contributions restricted for long-term purposes</td>
<td>(4,250)</td>
<td>(3,000)</td>
</tr>
<tr>
<td>Change in value of charitable gift annuities</td>
<td>35,162</td>
<td>60,157</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>190,357</td>
<td>223,318</td>
</tr>
</tbody>
</table>

| Change in operating assets and liabilities: | | |
| (Increase) decrease in: | | |
| Accounts receivable | 1,628,327 | (1,500,898) |
| Inventory | 11,383 | (7,553) |
| Prepaid expenses | (7,343) | 94,124 |
| Deposits | - | (46,900) |
| Increase (decrease) in: | | |
| Accounts payable and accrued expenses | (175,514) | 178,822 |
| Deferred revenue | 173,306 | (8,732) |
| Deferred rent and lease incentive | 7,834 | (86,110) |
| Deposits | (14,786) | - |

Net cash provided by (used in) operating activities | 240,004 | (1,493,547) |

## Cash Flows from Investing Activities

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proceeds from sales of investments</td>
<td>2,384,878</td>
<td>5,293,075</td>
</tr>
<tr>
<td>Purchases of investments</td>
<td>(2,073,799)</td>
<td>(4,202,954)</td>
</tr>
<tr>
<td>Purchases of property and equipment</td>
<td>(60,837)</td>
<td>(183,515)</td>
</tr>
</tbody>
</table>

Net cash provided by investing activities | 250,242 | 906,606 |

## Cash Flows from Financing Activities

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments on charitable gift annuity obligations</td>
<td>(29,141)</td>
<td>(29,141)</td>
</tr>
<tr>
<td>Contributions restricted for long-term purposes</td>
<td>4,250</td>
<td>3,000</td>
</tr>
</tbody>
</table>

Net cash used in financing activities | (24,891) | (26,141) |

## Net Increase (Decrease) in Cash and Cash Equivalents

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>465,355</td>
<td>(613,082)</td>
<td></td>
</tr>
</tbody>
</table>

Cash and Cash Equivalents, beginning of year | 1,620,516 | 2,233,598 |

Cash and Cash Equivalents, end of year | $ 2,085,871 | $ 1,620,516 |

See accompanying notes.
What Is NAMI?
NAMI, the National Alliance on Mental Illness, is the nation’s largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. Founded in 1979, NAMI provides support, education and empowerment for more than 500,000 members and supporters. NAMI raises public awareness, builds community and steadfastly advocates for access to treatment, services, supports and medical research.