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In the face of rapidly advancing science and resulting clinical practice changes, we are constantly challenged to adapt. Our health delivery systems must balance competing priorities. Demand for healthcare services continues to rise, as does the need to better allocate limited resources and to increase quality and value. This backdrop supports growing concerns about vulnerabilities of the current United States blood system, the sustainability of blood markets and the resources and will to bring new cellular therapies (CT) forward. Yet our fundamental mission remains firm: providing the most effective and safest care for donors and patients.

In setting our strategic direction, AABB has committed to leading the industry and spurring innovation by developing quality standards, advancing research agendas and advocating to improve donor and patient care. These aims capitalize on our strengths as a professional medical association and a standard setting and accrediting body.

FY 2015 delivered a host of AABB mission-based advocacy activities. We provided comments to the Centers for Medicare & Medicaid Services on the proposed 2016 Hospital Outpatient Prospective Payment System and a statement to the Department of Health and Human Services’ Advisory Committee on Blood and Tissue Safety and Availability on Babesia microti testing, among other efforts.

AABB’s Center for Cellular Therapies (CCT) is a strong voice in cellular and regenerative medicine. The Association engaged with federal agencies and other interested organizations to promote a policy and regulatory agenda that fosters progress of novel therapies and avoids overly burdensome regulation of existing products. AABB has increased the adoption of CT standards through an innovative digital platform — our standards portal. The Association continues to play an important role in global efforts to harmonize standards for hematopoietic stem cell transplantation and emerging cellular therapies.

Patient and donor safety are at the heart of our transfusion medicine work. In FY 2015, AABB held an extremely well-received symposium on the implementation of pathogen-reduced blood components. The Association also analyzed data collected for the 2013 AABB Blood Survey, which provides a baseline of member collection and utilization activities to measure and report changes over time and to capture emerging trends.

FY 2015 saw a great deal of activity around PBM, as well. AABB issued a white paper on building a better patient blood management program by identifying tools, solving problems and promoting patient safety, and released the full suite of PBM learning modules. A special issue of “Transfusion” featured the evolving paradigm of patient blood management. At the 2014 AABB Annual Meeting in Philadelphia, our preconvention PBM workshop, “Better Care and Patient Outcomes,” was highly attended and well received.

On the global front, AABB and the Brazilian Association of Hematology, Hemotherapy and Cellular Therapy (ABHH) jointly accredited five organizations in FY 2015. Southern Africa continued to be a significant focus for AABB, providing training, technical consulting and accreditation-readiness support. AABB was once again invited to present at the Education Course for Leadership of Blood Services, sponsored by the Chinese Society of Blood Transfusion and the Shanghai Blood Center, addressing the importance of standards revision and how voluntary standards can influence and support regulatory change.

The National Blood Foundation (NBF) plays a critical role in fostering research to better patient safety and advance the science of transfusion medicine, CT and PBM. Charitable contributions from leading industry companies and funds from NBF special events support the Foundation’s mission. In FY 2015 alone, these resources helped to fund five early career researchers and their efforts to improve therapies related to hemophilia, coagulation, transfusion and mesenchymal stem cells.

The AABB HUB, a new member-only benefit, debuted in FY 2015. This e-platform allows members to hold conversations, ask questions and share their knowledge and experience with colleagues around the world. Members can join several online discussion groups, which tackle current topics ranging from recently reported research findings to regulatory changes and best practices.

Our professional volunteers “are AABB.” They are responsible for much of our success as the preeminent knowledge-based organization. Their time and expertise deliver critical work products completed through our committees, and their contributions are essential to developing standards, assessing institutions, educating other members and mentoring young professionals. We are profoundly grateful for their acumen and volunteerism.

Through our focus on the patients and donors, commitment to transparency, integrity and excellence, and encouragement of innovation and collaboration, AABB is dedicated to serving our members and mission in a quickly changing landscape. The achievements documented in this report exhibit our commitment to the care and safety of patients and donors.

Sincerely,

Donna M. Regan, MT(ASCP)SBB
President

Miriam A. Markowitz
Chief Executive Officer

Donna M. Regan, MT(ASCP)SBB
President

Miriam A. Markowitz
Chief Executive Officer
AABB’S MISSION, VISION AND CORE VALUES

Mission
AABB advances the practice and standards of transfusion medicine and cellular therapies to optimize patient and donor care and safety.

Vision
AABB will be the preeminent knowledge-based organization focused on improving health through advancing the science and practice of transfusion medicine and cellular therapies.

Core Values
AABB will fulfill its mission and vision through adherence to our core values:

- the pursuit of excellence
- focus on the patient and donor
- integrity
- transparency
- consensus building
- innovation

FACTS & FIGURES

ACCREDITATION STATISTICS

- AABB has approximately 800 active volunteer assessors
- AABB assessors come from 17 countries
- AABB-accredited facilities are located in 35 countries
STATISTICS FOR FISCAL YEAR 2015

AABB Individual Members

- 75% Health Care Professionals
- 18% Physicians
- 4% Emeritus Members
- 2% Residents
- 1% e-Members

AABB Institutional Members

- 59% Transfusion Services
- 14% Blood Centers
- 11% Hospital Blood Banks
- 11% Special Facilities
- 5% Affiliates/Corporate Affiliates

FACTS & FIGURES

AABB’s staff and assessors travelled to 35 countries (outside of the United States) for professional purposes in FY 2015, including:

- Angola
- Hong Kong
- Qatar
- Argentina
- Hungary
- Rwanda
- Belgium
- India
- Saudi Arabia
- Brazil
- Israel
- Singapore
- Canada
- Italy
- South Africa
- China
- Japan
- Spain
- Colombia
- Kuwait
- Swaziland
- Cyprus
- Lesotho
- Taiwan
- Dominican Republic
- Malaysia
- Tanzania
- Egypt
- Malawi
- United Arab Emirates
- Germany
- Mozambique
- Zimbabwe
- Greece
- Poland

FACTS & FIGURES

TRANSFUSION STATISTICS

- 416,671 articles were downloaded in 2015
- 12 CME activities were offered, including topics such as prophylactic platelets in hematologic malignancies and autologous CD8+ T cells
- More than half of submitted original research articles were from non-U.S. authors
- There were three special issues in TRANSFUSION: The evolving paradigm of patient blood management (October 2014); Immunohematology and Blood Group Genomics (June 2015); and Hemolysis Supplement Strategies to Address Hemolytic Complications of Immune Globulin Infusions (July 2015)
During FY 2015, AABB made great strides to further enhance our mission, especially with regard to key strategic initiatives — cellular therapies (CT); patient blood management (PBM); blood banking and transfusion medicine; international focus; and community and health impact. These initiatives were designed to ensure members ongoing access to education and support services that help them provide optimal quality care to patients and donors. Our standards strive to support evidence-based medicine, best practices and safety advancements.

AABB Center for Cellular Therapies

As the CT field expands, so does AABB’s commitment to supporting the community of CT professionals and therapies. As patients are offered a growing array of new treatments in various clinical settings — both within the U.S. and abroad — it is important to establish best practices in providing safe and high-quality care. The AABB Center for Cellular Therapies (CCT) has been devoted to the development of programs, standards, accreditation, services and tools that are critical to donor and patient care, product safety and successful outcomes.

REGULATORY AND ADVOCACY

AABB continues to advocate for clear regulatory pathways that promote rapid translation of novel CT and regenerative medicine research to clinical therapies that provide life-saving cures for chronic and terminal diseases, in an ethical manner that does not stifle innovation. The Association has actively engaged with federal agencies, such as the U.S. Food and Drug Administration (FDA) and other interested organizations to promote a policy and regulatory agenda that fosters rapid progress in the novel therapies field, while avoiding overly burdensome regulation of existing cellular products. In FY 2015, AABB collected input from our members and submitted comments on FDA draft guidance related to minimal manipulation of human cells, tissues, and cellular- and tissue-based products (HCT/Ps); and HCT/Ps from adipose tissue.

AABB has also advocated for improved Medicare reimbursement for cellular therapies. In FY 2015, AABB raised concerns with the Centers for Medicare and Medicaid Services (CMS) regarding the inadequacy of Medicare payments for hematopoietic stem cell transplants (HSCTs). In addition, the Association commented on a Medicare National Coverage Determination for HSCTs for sickle cell disease and other conditions, urging expanded coverage for this life-saving treatment.

STANDARDS & ACCREDITATION

Cellular Therapy Standards Portal

AABB’s Standards Portal debuted in April 2015 with the Standards for Cellular Therapy Services, 7th edition, and represents the result of years of planning and content development. The Portal is a digital gateway to not only the standards but curated content, reference materials and other information. The Portal is a valuable resource to support conformance to AABB standards.

Participation in Committees on ISBT 128 Product Nomenclature for CT and Regenerative Medicine

AABB has been a vital partner working with the International Council for Commonality in Blood Banking Automation (ICCBBA) to develop and implement ISBT 128 — the global information standard for the identification, labeling and information transfer of medical products of human origin (MPHO) across international borders and disparate health care systems. Featuring a unique, highly flexible and comprehensive coding method for every collected product, ISBT 128 provides international consistency to support the transfer, transfusion and transplantation of MPHO, including those used for CT and regenerative medicine.

HARMONIZATION OF STANDARDS

Collaborating with other Hematopoietic Stem Cell Transplantation and Emerging Cellular Therapies Standards-Setting Organizations

AABB has continuously advocated for domestic and international adoption of novel CT standards as a means of protecting patient health and ensuring optimal outcomes. The Association has partnered with international and other stakeholder organizations to promote harmonized standards for CT and regenerative medicine. AABB has also participated in CT conferences and symposia, such as the International Society for Blood Transfusion (ISBT), the ASBMT–CIBMTR (American Society for Blood and Marrow Transplantation–Center for International Blood and Marrow Transplant Research) Tandem Meetings, and the Alliance for Regenerative Medicine.
EDUCATIONAL OFFERINGS

Annual International Cord Blood Symposium
The AABB CCT presented the 13th annual International Cord Blood Symposium (ICBS), which brought together umbilical cord blood-related fields of HSC transplantation, banking and cord blood-related regenerative medicine in one interactive three-day conference. AABB worked to ensure the highest level of continuing medical education. The exceptional scientific program included topics ranging from regulatory and cost considerations of cord blood products to appropriate utilization of cord blood transplantation and the selection of optimal donors and products. Industry representatives presented several success stories as examples of new cell therapies used for nontraditional indications.

Webinars
AABB expanded its professional development offerings with 16 CT eLearning programs offered throughout the year. Topics ranged from the basic — reducing microbial contamination — to the cutting-edge — the use of platelet-rich plasma in regenerative medicine.

FACTS & FIGURES

Cellular Therapy Section Members by Credentials*

- PhD 13%
- MD 22%
- None provided 19%
- Other 51%

Total Cellular Therapy Members 408

* Members may hold MD and PhD

Cellular Therapy Section Members by Location

- International 18%
- Domestic 82%

Total Cellular Therapy Members 408
AABB has contributed to advancing PBM. In FY 2015, new partnerships, programs, educational materials and standards have made it easier than ever for members to implement PBM strategies and provide high-quality, evidence-based care to patients who might need a transfusion. AABB’s commitment to PBM has grown even stronger, as evidenced by the PBM component of AABB’s 2013 blood survey. This section included questions about PBM interventions, measures of intervention success, informed consent, type and screen before procedures, and transfusion thresholds. The resulting report reflects PBM-related changes in transfusion medicine.

**PBM EDUCATION AND LEARNING MODULES**

**Meetings**

In FY 2015, AABB offered its most highly attended PBM workshop to date. Held the Friday before the AABB Annual Meeting in Philadelphia, this one-day workshop attracted nearly 300 attendees. A few months later, AABB cosponsored the TransFuse interdisciplinary PBM conference in Arizona with the Mayo Clinic.

**Learning Modules**

In FY 2015, AABB also completed the full suite of PBM Learning Modules. As part of AABB’s expanding efforts to promote evidence-based PBM practices, four new Learning Modules were released to members and others for purchase. Appropriate for classroom or individual study, these modules educate clinicians about all aspects of PBM. The four modules released in FY 2015 addressed methods for optimizing transfusions and managing preoperative anemia, PBM in the critical care setting, and informed consent.

**PBM CERTIFICATION**

AABB published the first edition of Standards for a Patient Blood Management Program in FY 2015. These standards define a PBM program that encompasses all aspects of patient evaluation and clinical management around the transfusion decision-making process, including the application of appropriate indications, minimization of blood loss and optimization of patient red cell mass. This comprehensive resource focuses on maintaining and enhancing the quality of care for patients who may require transfusion.
In FY 2015, AABB and its members helped to bring risk-based decision to the forefront of discussions about the future of transfusion medicine. AABB has strengthened and expanded our historic mission to safeguard the blood supply. The development of transfusion medicine guidelines and standards, infectious diseases education materials and recommendations, and donor safety questionnaires and reports demonstrate our continued commitment.

EDUCATION


ADVOCACY AND REGULATORY

AABB continues to serve as the leading voice in advocating improved regulation of blood-related products and services. In FY 2015, AABB successfully opposed proposed severe cuts in Medicare outpatient payments for blood products. Recognizing the fragility of the U.S. blood sector in today’s economic environment, AABB also advocated for a federally supported independent analysis and report containing recommendations to ensure ongoing patient access to a safe and available blood supply. The Association submitted comments, issued joint statements with like-minded organizations, and met with FDA on several pressing issues, including bacterial contamination of blood products, donation deferrals for men who have sex with men and laboratory developed tests.

Regulatory activities included provision of analyses of crucial FDA publications for the membership, including the May 2015 final rule for blood and blood components, and presentations at advisory committee meetings, where the future of Babesia microti testing and possible revisions to the list of Creutzfeldt-Jakob disease countries of risk were discussed.

In addition, reaching out to leaders at the National Heart, Lung, and Blood Institute (NHLBI), AABB advocated for enhanced federal support for vital transfusion medicine research. The Association participated in the NHLBI’s State of the Science in Transfusion Medicine symposium, which was intended to develop transfusion medicine priorities as part of NHLBI’s strategic visioning process to shape the Institute’s scientific priorities and guide its funding.

DONOR SAFETY

AABB collaborated with the International Society of Blood Transfusion (ISBT) and the International Haemovigilance Network (IHN) to release a revised classification system with updated definitions for complications related to blood donation. The revision aligns definitions with those from AABB’s Donor Hemovigilance Program, allowing incorporation into the Donor Hemovigilance Analysis and Reporting Tool, or DonorHART, software. The simplified definitions can be applied consistently by many countries and allow better comparisons.

GUIDELINES AND STANDARDS

In FY 2015, AABB published an evidence-based clinical practice guideline with recommendations for the appropriate use of prophylactic platelet transfusions for several common clinical settings. The guideline, published in the “Annals of Internal Medicine,” recommended prophylactic transfusion of platelets to reduce the risk of spontaneous bleeding in adults with therapy-associated low platelet production and addressed five other common clinical situations.

INFECTIOUS DISEASE

Although the blood supply is safer than it has ever been, the emergence and spread of new infectious diseases poses an ever-present threat to blood safety. AABB responded to the growing Ebola virus crisis in western Africa and concerns about transmission abroad by staging a “Hot Topics” session at the annual meeting in Philadelphia to provide up-to-date information to members. AABB also collaborated with numerous organizations to help coordinate efforts to ensure the availability of convalescent plasma in the U.S. when and if needed.
In FY 2015, AABB continued to expand its global activities through technical assistance and accreditation programs. The Association strives to provide relevant resources and services in CT, blood banking and transfusion medicine. Collaborations with international transfusion medicine and CT societies and organizations have resulted in joint accreditation programs, technical training and assistance, and educational opportunities. Through these activities, AABB provides value to international professionals, institutions and government agencies.

**BRAZIL**

AABB and the Brazilian Association of Hematology, Hemotherapy and Cellular Therapy (ABHH) celebrated another year of jointly accrediting blood banks and transfusion medicine services in the country. Five organizations were accredited in FY 2015, and we conducted assessor trainings as well. Teams of assessors from both organizations assess facilities using the ABHH Standards for Blood Banks and Transfusion. Also in FY 2015, ABHH and BrasilCord signed a contract to accredit cord blood banks in Brazil’s national cord blood program.

**AFRICA**

Southern Africa continued to be an area of significant focus for the Association, which provided active support in FY 2015. This work — funded by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) and managed by the Association’s Global Services Division — involved training, developing clinical guidelines and country-specific standards, and reaching out to ministries of health. AABB’s technical assistance work in Africa focused on implementing quality management systems using project management methodology and international standards developed through the Africa Society for Blood Transfusion (AfSBT). AABB engaged PEPFAR-supported work in Angola, Lesotho, Malawi, Mozambique, Rwanda, Swaziland and Tanzania.

AABB’s consulting efforts in Africa have yielded measurable improvements in donor recruitment and screening and blood collection, testing, storage, and distribution systems, as well as in the general practice of transfusion medicine. National transfusion services in several countries began formal planning for and working to achieve step-wise AfSBT accreditation. AABB received $1,350,000 of funding for providing these services.

**ASIA**

AABB was once again invited to sponsor, participate in and present at the Education Course for Leadership of Blood Services (ECBLS), sponsored by the Chinese Society of Blood Transfusion and the Shanghai Blood Center. AABB’s CEO presented on the importance of standards revision and how voluntary standards can influence/support regulatory change. In December 2015, AABB issued a press release welcoming the launch of an Asia-Pacific public-private network tasked with ensuring the safety and suitability of the blood supply. The launch followed a meeting of leaders from the Asia-Pacific Economic Cooperation, or APEC, forum. AABB will serve as Secretariat of the Partnership Training Network, and AABB CEO Miriam A. Markowitz is co-chair of the APEC Life Sciences Innovation Forum Blood Supply Chain Partnership Training Network.
ABB has been a leading voice in advocating for government and public health policies, and working with a broad range of stakeholder organizations, to support the highest possible care for blood and stem cell donors and patients requiring transfusion or CT. Through engagement with regulatory agencies, professional organizations, and other bodies across the globe, AABB supports the harmonization of international regulatory requirements.

ADVOCA CY AND REGULATORY

AABB promotes federal regulatory and health care policies to improve donor and patient care in the U.S. without hindering innovation or blood and CT product availability. In FY 2015, AABB met with the FDA about a range of issues, including bacterial contamination of blood products, new recommendations for HIV risk reduction related to deferrals for men who have sex with men, and laboratory developed tests. The Association has collaborated with like-minded organizations to issue joint statements to regulatory agencies and federal committees on changes to RHD genotyping for pregnant women (and other females of childbearing potential) with a serologic weak D phenotype.

AABB has supported the harmonization of international transfusion medicine terminology by working with regulatory and professional organizations across the globe. In particular, AABB has collaborated on standardization of blood donor adverse event definitions with the International Society of Blood Transfusion (ISBT) 128 Haemovigilance Working Party to help improve donor safety worldwide.

HEMOVIGILANCE

AABB has invested in information systems technology for our patient safety organization to enable improved data access; additional data collection, analysis and benchmark reporting; and easier notification and communication. In order to provide these features, as well as to provide meaningful analyses beyond benchmarking, the decision was made to move the AABB Center for Patient Safety (CPS) to a tiered membership fee structure starting in 2016. The CPS collects and analyzes data on adverse reactions and incidents related to blood transfusion. By becoming a member, a hospital receives confidential quarterly benchmarking reports that allow it to compare key patient safety markers: incidents related to the transfusion process, adverse transfusion reactions, and component waste. The AABB Donor Hemovigilance Program was also converted to a tiered membership fee structure in FY 2015. Participation includes access to the Donor Hemovigilance Analysis and Reporting Tool (DonorHART™). The tiered fee structure aligns with the number of a facility’s blood collection procedures. The Association also analyzed data from the 2013 AABB Blood Survey to provide a baseline of member collection and utilization activities to compare to future activities and capture emerging trends.

AABB provided support for the FDA Rapid Donor Data Collection for Response to Bioterrorism, Emerging, and Pandemic Agents Threatening Blood Safety, or RapidDoS project. Of the three survey reports covered under the project reports of, two surveys of recent donors were completed in FY2015 to determine their exposure to risk factors associated with (1) Middle East respiratory syndrome coronavirus (MERS CoV) and (2) Babesia spp. risks.
As part of its mission to improve health, AABB supports research through its National Blood Foundation (NBF) program. Established in 1983, the NBF has thrived for more than three decades of awarding more than $8 million to approximately 200 early career scientists.

The NBF received a record number of applications in 2015, for research areas in transfusion medicine, cellular therapies, patient blood management and infectious disease. There was a 29 percent increase in international applications received compared with 2014. The NBF awarded five research grants of $75,000 each to early career investigators researching mesenchymal stem cells, hemophilia treatment, warfarin reversal, stem cell therapy revascularization and allergic transfusion reactions. Funds are raised annually from corporations, blood centers, foundations and individuals.

In FY 2015, the NBF introduced a new grant program, the Strategic Research and Education Grants Program, using modest funding to utilize industry expert knowledge to advance AABB’s mission and strategic priorities. Also aligned with NBF’s mission, this new program supports industry innovation that improves patient safety.

Realizing the importance of recognizing investigators who leverage their NBF early career grant funding into prominent careers in transfusion medicine and cellular therapies, the NBF Hall of Fame was reinstated. Three new members were inducted into this reestablished program.

The NBF also embarked on a new strategic planning process in FY 2015 with the goal of revisiting its mission to ensure long-term sustainable growth and engagement and to identify new opportunities and enhance current programs and services.

Charitable contributions from leading industry organizations totaled nearly $1.2 million in FY 2015. In addition, NBF special events raised more than $330,000 in revenue to support the Foundation’s mission.

For more information on the NBF, individuals are invited to visit www.aabb.org/nbf or contact a representative at nbf@aabb.org or +1.301.215.6552.
AABB BOARD OF DIRECTORS
2014 – 2015

AT-LARGE DIRECTORS

Position 1
Donald Berglund, MHA, FACHE
Innovative Blood Resources
St. Paul, MN

Position 2
Susan Roseff, MD
Virginia Commonwealth University
Medical Center
Richmond, VA

Position 3
Beth Shaz, MD
New York Blood Center
New York, NY

Position 4
Susan Johnson, MSTM, MT(ASCP)SBB
BloodCenter of Wisconsin Inc.
Milwaukee, WI

Position 5
Dan Waxman, MD
Indiana Blood Center
Indianapolis, IN

Position 6
Jeannie Callum, MD, FRCPC, CTBS
Sunnybrook Health Sciences Centre
Toronto Ontario
Canada

Position 7
Mary Beth Bassett, BS, MT(ASCP)
Blood Systems, Inc.
Scottsdale, AZ

Position 8
Mary O’Neill, MD
American Red Cross Blood Services
Dedham, MA

Position 9
Nora Hirschler, MD
Blood Centers of the Pacific
San Francisco, CA

Position 10
Steven Frank, MD
The Johns Hopkins University School of Medicine
Baltimore, MD

TRANSFUSION MEDICINE SECTION REPRESENTATIVE
(DIRECTOR)

Steven Sloan, MD, PhD
Boston Children’s Hospital
Boston, MA

CELLULAR THERAPIES SECTION REPRESENTATIVE
(DIRECTOR)

David Stromeck, MD
National Institutes of Health
Bethesda, MD

APPOINTED DIRECTOR

Mary Laughlin, MD
Cleveland Cord Blood Center
Cleveland, OH

Jonathan Waters, MD
Magee Women’s Hospital of UPMC
Pittsburgh, PA

EX-OFFICIO DIRECTOR

Miriam A. Markowitz
CEO – AABB
Bethesda, MD
Health care, specifically in the U.S., is undergoing historic change. To uphold the Association’s rich legacy and ensure its relevance for years to come, the AABB Board of Directors focused on mapping AABB’s strategic direction throughout FY 2015 — recognizing that AABB must remain agile and anticipate both the opportunities and challenges facing its membership.

The AABB Board of Directors developed goals for FY 2016 that align with the association’s mission and pursuit of its vision.

**BLOOD BANKING AND TRANSFUSION MEDICINE**
AABB will serve as the premier association for BB&TM professionals to foster innovation through providing standards, accreditation, educational programming and advocacy to advance safety and quality outcomes for all donors and patients.

**CENTER FOR CELLULAR THERAPIES**
AABB will serve as the premier association for cellular therapy professionals providing a diverse professional network, educational programs and information to advance the adoption of standards and quality outcomes for donors and patients undergoing cellular and regenerative medicine therapies.

**COMMUNITY & PUBLIC HEALTH**
AABB will advance improvements in donor and patient care and safety through regulatory and policy advocacy, research support and engagement in strategic collaborations.

**INTERNATIONAL FOCUS**
AABB will serve the international community to provide innovative patient blood management, transfusion medicine and cellular therapies resources and services that offer standards, accreditation, educational and advocacy programs that foster quality and safe outcomes for donors and patients worldwide.

**PATIENT BLOOD MANAGEMENT (PBM)**
AABB will provide PBM professionals dedicated services and resources that include standards, education, and advocacy to enable the full adoption and evolution of evidence-based patient blood management practices.

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**FACTS & FIGURES**

**AABB PUBLICATION STATISTICS:**
- 16 new or “coming soon” titles were added to AABB’s offerings
- AABB books are read in at least 91 countries around the world
## FY 2015 Financial Highlights

**American Association of Blood Banks**

**Statements of Financial Position**

**September 30, 2015 and 2014**

### ASSETS

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<th>2015</th>
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<tr>
<td><strong>CURRENT ASSETS</strong></td>
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<tr>
<td>Cash and Cash Equivalents</td>
<td>$280,504</td>
<td>$721,585</td>
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<tr>
<td>Accounts Receivable (Less Allowance of $102,353 and $74,239 in 2015 and 2014, Respectively)</td>
<td>820,846</td>
<td>1,076,519</td>
</tr>
<tr>
<td>Contributions Receivable</td>
<td>285,830</td>
<td>194,251</td>
</tr>
<tr>
<td>National Blood Exchange Accounts Receivable (Less Allowance of $0 and $761 in 2015 and 2014, Respectively)</td>
<td>2,538,044</td>
<td>2,681,463</td>
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<tr>
<td>Inventory (Less Reserve of $50,000 and $0 in 2015 and 2014, Respectively)</td>
<td>663,088</td>
<td>534,424</td>
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<tr>
<td>Investments, Current Portion</td>
<td>-</td>
<td>512,619</td>
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<tr>
<td>Prepaid Expenses</td>
<td>638,990</td>
<td>561,729</td>
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<tr>
<td><strong>Total Current Assets</strong></td>
<td>$5,227,302</td>
<td>$6,282,590</td>
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<tr>
<td><strong>INVESTMENTS, NET OF CURRENT PORTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Furniture and Equipment</td>
<td>2,325,816</td>
<td>2,325,529</td>
</tr>
<tr>
<td>Leasehold Improvements</td>
<td>598,619</td>
<td>598,619</td>
</tr>
<tr>
<td>Software</td>
<td>5,694,219</td>
<td>5,110,190</td>
</tr>
<tr>
<td><strong>Less: Accumulated Depreciation and Amortization</strong></td>
<td>(7,008,528)</td>
<td>(6,400,530)</td>
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<tr>
<td><strong>Total Property and Equipment</strong></td>
<td>$1,610,126</td>
<td>$1,633,808</td>
</tr>
<tr>
<td><strong>OTHER ASSETS</strong></td>
<td></td>
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<tr>
<td>Security Deposit</td>
<td>47,921</td>
<td>47,921</td>
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<tr>
<td>Accrued Interest</td>
<td>-</td>
<td>2,104</td>
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<tr>
<td><strong>Total Other Assets</strong></td>
<td>47,921</td>
<td>50,025</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td>$15,883,584</td>
<td>$19,283,583</td>
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### LIABILITIES AND NET ASSETS

<table>
<thead>
<tr>
<th>Description</th>
<th>2015</th>
<th>2014</th>
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<tbody>
<tr>
<td><strong>CURRENT LIABILITIES</strong></td>
<td></td>
<td></td>
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<tr>
<td>Accounts Payable and Accrued Expenses</td>
<td>$1,636,069</td>
<td>$2,373,923</td>
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<tr>
<td>National Blood Exchange Accounts Payable</td>
<td>2,861,951</td>
<td>2,825,058</td>
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<tr>
<td>Unearned Revenue</td>
<td>5,541,608</td>
<td>5,678,415</td>
</tr>
<tr>
<td>Capital Lease, Current Portion</td>
<td>33,276</td>
<td>31,187</td>
</tr>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td>10,072,904</td>
<td>10,908,383</td>
</tr>
<tr>
<td><strong>OTHER LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Lease, Net of Current Portion</td>
<td>4,592</td>
<td>35,222</td>
</tr>
<tr>
<td>Deferred Rent</td>
<td>110,906</td>
<td>159,903</td>
</tr>
<tr>
<td>Deferred Lease Incentive</td>
<td>76,774</td>
<td>113,624</td>
</tr>
<tr>
<td><strong>Total Other Liabilities</strong></td>
<td>192,272</td>
<td>308,749</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td>10,265,176</td>
<td>11,217,332</td>
</tr>
<tr>
<td><strong>NET ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted</td>
<td>5,120,158</td>
<td>7,596,111</td>
</tr>
<tr>
<td>Temporarily Restricted</td>
<td>498,250</td>
<td>470,140</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td>5,618,408</td>
<td>8,066,251</td>
</tr>
<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td>$15,883,584</td>
<td>$19,283,583</td>
</tr>
</tbody>
</table>

*See accompanying Notes to Financial Statements.*
### FY 2015 Financial Highlights

#### AMERICAN ASSOCIATION OF BLOOD BANKS

**STATEMENTS OF ACTIVITIES**

**YEARS ENDED SEPTEMBER 30, 2015 and 2014**

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Unrestricted</td>
<td>Temporarily</td>
<td>Total</td>
</tr>
<tr>
<td><strong>REVENUES</strong></td>
<td>$3,299,610</td>
<td>$ -</td>
<td>$3,299,610</td>
</tr>
<tr>
<td>Dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions and Sponsorships</td>
<td>22,399</td>
<td>694,643</td>
<td>717,042</td>
</tr>
<tr>
<td>Conferences</td>
<td>4,770,785</td>
<td>-</td>
<td>4,770,785</td>
</tr>
<tr>
<td>Publication Sales</td>
<td>2,300,290</td>
<td>-</td>
<td>2,300,290</td>
</tr>
<tr>
<td>Communications</td>
<td>407,614</td>
<td>-</td>
<td>407,614</td>
</tr>
<tr>
<td>National Blood Exchange</td>
<td>737,211</td>
<td>-</td>
<td>737,211</td>
</tr>
<tr>
<td>Accreditation</td>
<td>4,380,345</td>
<td>-</td>
<td>4,380,345</td>
</tr>
<tr>
<td>Education</td>
<td>527,232</td>
<td>-</td>
<td>527,232</td>
</tr>
<tr>
<td>Consulting</td>
<td>498,434</td>
<td>-</td>
<td>498,434</td>
</tr>
<tr>
<td>Other</td>
<td>204,592</td>
<td>-</td>
<td>204,592</td>
</tr>
<tr>
<td>Investment (Loss) Income, Net</td>
<td>(341,680)</td>
<td>-</td>
<td>(341,680)</td>
</tr>
<tr>
<td>Net Assets Released from Restrictions:</td>
<td>666,533</td>
<td>(666,533)</td>
<td>-</td>
</tr>
<tr>
<td>Satisfaction of Program Restrictions</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>18,859,024</td>
<td>28,110</td>
<td>18,887,134</td>
</tr>
</tbody>
</table>

#### EXPENSES

**Program Services:**

- Conferences: $3,152,503
- Publication Sales: $957,047
- Membership: $1,446,474
- Communications: $1,056,632
- Standards: $1,406,840
- National Blood Exchange: $307,455
- Education: $713,959
- Accreditation: $3,203,618
- Consulting Services: $926,529
- Grants and Contracts: $2,064,654

**Total Program Services:** $15,235,711

**Supporting Services:**

- General and Administrative: $5,826,419
- Fundraising: $265,338
- Interest Expense: $7,509

**Total Expenses:** $21,334,377

#### CHANGE IN NET ASSETS

- (2,475,953) to (2,447,843), (1,806,254) to (1,853,362), (1,991,616) to (1,991,616)

#### Net Assets - Beginning of Year

- $7,596,111
- $470,140
- $10,057,867

#### Net Assets - End of Year

- $5,120,158
- $498,250
- $8,066,251

See accompanying Notes to Financial Statements.
FISCAL YEAR 2015 ANNUAL REPORT

AMERICAN ASSOCIATION OF BLOOD BANKS

STATEMENTS OF CASH FLOWS
YEARS ENDED SEPTEMBER 30, 2015 and 2014

See accompanying Notes to Financial Statements.

<table>
<thead>
<tr>
<th>FY 2015 FINANCIAL HIGHLIGHTS</th>
</tr>
</thead>
</table>

CASH FLOWS FROM OPERATING ACTIVITIES

<table>
<thead>
<tr>
<th>Part Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in Net Assets</td>
<td>$(2,447,843)</td>
<td>$(1,991,616)</td>
</tr>
<tr>
<td>Adjustments to Reconcile Change in Net Assets to Net Cash (Used in) Provided by Operating Activities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation and Amortization</td>
<td>607,998</td>
<td>529,853</td>
</tr>
<tr>
<td>Realized (Gain) Loss on Sale of Investments</td>
<td>21,313</td>
<td>(28,455)</td>
</tr>
<tr>
<td>Unrealized Loss on Investments</td>
<td>898,544</td>
<td>635,640</td>
</tr>
<tr>
<td>Unamortized Discount</td>
<td></td>
<td>(1,193)</td>
</tr>
<tr>
<td>Changes in Assets and Liabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts Receivable</td>
<td>255,673</td>
<td>(206,084)</td>
</tr>
<tr>
<td>Contributions and Sponsorships Receivable</td>
<td>(91,579)</td>
<td>11,970</td>
</tr>
<tr>
<td>National Blood Exchange Accounts Receivable</td>
<td>143,419</td>
<td>27,987</td>
</tr>
<tr>
<td>Inventory</td>
<td>(128,664)</td>
<td>9,328</td>
</tr>
<tr>
<td>Prepaid Expenses</td>
<td>(77,261)</td>
<td>1,204,651</td>
</tr>
<tr>
<td>Accrued Interest</td>
<td>2,104</td>
<td>17,833</td>
</tr>
<tr>
<td>Accounts Payable and Accrued Expenses</td>
<td>(737,854)</td>
<td>254,584</td>
</tr>
<tr>
<td>National Blood Exchange Accounts Payable</td>
<td>36,893</td>
<td>310,515</td>
</tr>
<tr>
<td>Deferred Rent</td>
<td>(48,997)</td>
<td>(32,616)</td>
</tr>
<tr>
<td>Deferred Lease Incentive</td>
<td>(36,850)</td>
<td>(20,818)</td>
</tr>
<tr>
<td>Unearned Revenue</td>
<td>(136,807)</td>
<td>(168,620)</td>
</tr>
<tr>
<td>Net Cash (Used in) Provided by Operating Activities</td>
<td>(1,739,911)</td>
<td>552,959</td>
</tr>
</tbody>
</table>

CASH FLOWS FROM INVESTING ACTIVITIES

<table>
<thead>
<tr>
<th>Part Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purchases of Investments</td>
<td>(3,118,450)</td>
<td>(1,123,548)</td>
</tr>
<tr>
<td>Sales of Investments</td>
<td>5,030,137</td>
<td>1,725,875</td>
</tr>
<tr>
<td>Purchases of Fixed Assets</td>
<td>(584,316)</td>
<td>(612,848)</td>
</tr>
<tr>
<td>Net Cash Provided by (Used in) Investing Activities</td>
<td>1,327,371</td>
<td>(10,521)</td>
</tr>
</tbody>
</table>

CASH FLOWS FROM FINANCING ACTIVITIES

<table>
<thead>
<tr>
<th>Part Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Principal Payments on Capital Lease Obligations</td>
<td>(28,541)</td>
<td>(31,735)</td>
</tr>
<tr>
<td>Net Cash Used in Financing Activities</td>
<td>(28,541)</td>
<td>(31,735)</td>
</tr>
</tbody>
</table>

NET (DECREASE) INCREASE IN CASH AND CASH EQUIVALENTS

<table>
<thead>
<tr>
<th>Part Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Decrease) Increase in Cash and Cash Equivalents</td>
<td>(441,081)</td>
<td>510,703</td>
</tr>
<tr>
<td>Cash and Cash Equivalents - Beginning of Year</td>
<td>721,585</td>
<td>210,882</td>
</tr>
</tbody>
</table>

CASH AND CASH EQUIVALENTS - END OF YEAR

<table>
<thead>
<tr>
<th>Part Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 280,504</td>
<td>$ 721,585</td>
</tr>
</tbody>
</table>

SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION

<table>
<thead>
<tr>
<th>Part Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Paid during the Year for Interest</td>
<td>$ 7,509</td>
<td>$ 3,310</td>
</tr>
<tr>
<td>Equipment Acquired through Capital Lease</td>
<td>$</td>
<td>$ 120,449</td>
</tr>
</tbody>
</table>