In 2010, the Radiological Society of North America (RSNA®) upheld the highest standards of radiology and related sciences through education and research with bold initiatives and comprehensive resources for its community.
CHAMPIONING PERSONALIZED MEDICINE

At the 2010 RSNA annual meeting, RSNA president Hedvig Hricak, M.D., Ph.D., Dr. (h.c.), asserted that in order to deliver truly personalized medicine to patients, the radiologic specialties must engage in preemptive medicine based on genetic and molecular diagnostics and interventions, particularly to meet the global challenge of cancer.

“With the emergence of molecular medicine and the surge of ‘omic’ biomarkers, we are seeing a paradigm shift from ‘one size fits all’ medicine to predictive, prognostic, ‘omically’ driven personalized medicine,” said Dr. Hricak.

The radiologic specialties must evolve as the science of medicine evolves, said Dr. Hricak. “This takes courage, vision, imagination, drive and love for change,” she said. “These attributes have always characterized our profession, and I hope that this annual meeting, dedicated to the pursuit of excellence, will help our imagination soar to even greater heights.”

QUANTITATIVELY ASSESSING DISEASE

Ongoing groundwork by RSNA’s biomarkers working groups including the Quantitative Imaging and Biomarkers Alliance (QIBA) established a library of best-practices protocols for acquiring medical images. These protocols will assist clinicians in research and practice—helping to provide concrete measurements of severity and response to treatment in disorders including cancer, asthma, COPD and epilepsy. “Standards for fluorodeoxyglucose PET (FDG-PET) will probably be the most quickly applicable to clinical practice,” said RSNA Science Advisor Daniel C. Sullivan, M.D. “FDG-PET is already widely used in monitoring cancer response, and is reimbursed by CMS for many indications.”

At the Quantitative Imaging Reading Room exhibit at RSNA 2010—debuted in 2009 as “Toward Quantitative Imaging: The Reading Room of the Future”—developers showcased commercially available, easy-to-use algorithms and software tools that can extract quantitative data from images.

RSNA’s Structured Reporting Committee also produced more than 100 best-practice structured reporting templates, ready for use by equipment and software developers to produce integration profiles that enable information to flow easily into an electronic health record. Standardized templates will make it easier to retrieve information from radiology reports, helping to reduce costs, minimize redundant examinations and pull data for clinical trials.

The National Institute of Biomedical Imaging and Bioengineering (NIBIB) awarded a $4.7 million contract to RSNA to design and launch an Internet-based network for patient-controlled image sharing as part of the Integrating the Healthcare Enterprise (IHE®) initiative and to further refine RadLex®, the standardized lexicon developed by RSNA for radiology reports.
BOLSTERING EDUCATION AND RESEARCH

In order to continue providing tens of thousands of education credits for its members and other medical professionals, RSNA sought and earned reaccreditation from the Accreditation Council for Continuing Medical Education (ACCME) in 2010. Not only did RSNA comply with all 22 ACCME criteria; it received accreditation with commendation “for demonstrating that yours is a learning organization and a change agent for the physicians you serve,” read a statement issued by ACCME. “You have demonstrated an engagement with your environment in support of physician learning and change that is part of a system for quality improvement.”

In addition to the thousands of continuing medical education (CME) credits available at RSNA 2010—up to 92.75 for each physician—RSNA provided 81,668 CME certificates through *RadioGraphics* and online education including self-assessment modules (SAMs). More than 120 institutions registered to use the online RSNA/APDR Resident Learning Portfolio, helping residents and program coordinators document growth and progress as physicians.

Ever more sophisticated upgrades to myRSNA®, the personalized online portal for RSNA members, enabled radiologists to instantly access information—and even claim CME credit in the process. The incorporation of point of care (PoC) CME narrows searches to only vetted, peer-reviewed content, which users can read and, with a click, report on their discoveries to claim credit.

RSNA continued to offer programs for researchers pursuing federal funding, such as Writing a Competitive Grant Proposal, Advanced Course in Grant Writing and the NIH Grantsmanship Workshop. Programs including the RSNA Clinical Trials Methodology Workshop and Introduction to Academic Radiology helped members develop essential skills for developing protocols and pursuing careers in research and academia.

Thousands of opportunities for learning
FULFILLING THE NEEDS OF THE COMMUNITY

RSNA membership grew in 2010 to an all-time high of 46,210 members in 125 countries. This includes a record 9,994 members in Europe, Asia, South America, Australia and Africa, demonstrating RSNA’s increasingly global presence. To extend the benefits of the RSNA community to professionals in need across the world, RSNA announced plans to offer a discounted membership option to radiologists in developing nations.

With an impact factor of 6.341, Radiology remained the top journal in the field, keeping readers abreast of the latest scientific developments and discoveries. Radiology articles were cited 46,643 times, the most of any radiology journal, according to ISI Web of Knowledge Journal Citation Reports®.

The Radiology Legacy Collection, a searchable electronic archive of Radiology issues dating back to 1923, went live in spring 2010. The Collection, available free to RSNA members, provides invaluable insight into the evolution of the specialty.

Radiology continued to expand its online dimensions for enhanced learning and discussion, including monthly “Hear What We Think” podcasts, articles published 6 weeks ahead of print and exclusive online-only material. The journal also announced plans to offer CME opportunities for review articles beginning in January 2011.

Radiology’s education journal RadioGraphics was cited 6,723 times and had an impact factor of 2.747. It was named the top preferred journal by more than 70 percent of respondents in a 2010 readership survey. RadioGraphics Online added to the learning experience with articles published ahead of print, online CME tests, full-text and subspecialty searches, interactive image datasets and RSS feeds. Through the journal alone, RSNA awarded 65,011 CME certificates to RadioGraphics readers. William W. Olmsted, M.D., who has served as RadioGraphics editor for more than 20 years, announced he would retire from editorship in December 2011. RSNA began the search for a new editor in 2010.

Of Dr. Olmsted’s tenure, RSNA Board Chairman George S. Bisset III, M.D., said, “He has taken full advantage of the electronic revolution in medical publishing, not only adding an online edition in 1999, but also publishing articles online ahead of print publication; creating online, as well as print, CME exercises; developing an online manuscript submission and peer review program; and many other innovations.”

Celebrating its 20th year, RSNA News unveiled a clean new design, along with monthly highlights on the history of the newsmagazine and the organization. RSNA News covered topics relevant to members’ daily practice, with feature articles addressing issues such as a national medical isotope shortage, radiologists’ lifesaving efforts in earthquake-ravaged Haiti, new developments in imaging biomarkers and radiologists’ experiences with the 2010 Winter Olympics in Vancouver. C. Leon Partain, M.D., Ph.D., took over contributing editorship from longtime R&E Foundation volunteer Robert E. Campbell, M.D., and David M. Hovsepian, M.D., succeeded Bruce L. McClennan, M.D., as editor.
RSNA continued to keep members in the know with electronic communications, including a monthly E-Reminder and RSNA Weekly in addition to audience-specific communications such as RIF Buzz for residents and fellows, myRSNA Tips and Tools and QIBA Quarterly. In 2009, RSNA launched an electronic communication to link members with the Daily Bulletin, the official newspaper of the RSNA annual meeting.

RSNA’s social media community blossomed in 2010 from static updates to a rich, vibrant forum. Facebook fans climbed from 2,180 in December 2009 to 6,150 as of December 2010, while Twitter followers reached 2,462. RSNA used social media outlets to share journal articles, grant information, membership benefits and much more. The excitement culminated at the annual meeting, as hundreds of attendees, staff, exhibitors and the press “Tweeted” news and new fans introduced themselves on the Facebook page. National news sites adopted the #RSNA and #RSNA10 hashtags, using them to spread buzz before, during and after RSNA 2010.

EMPOWERING PATIENTS

RadiologyInfo.org, the RSNA/American College of Radiology (ACR) public information site, got a facelift in 2010, unveiling a fresh look and improved maneuverability. Eight new procedures were added, including scintimammography, intracranial vascular treatments, lumbar puncture, chest interventions and discography, and more are in development. Eleven new “Your Radiologist Explains” videos were added as well, and pediatric content—marked with teddy bear icons—was added throughout the site.

RadiologyInfo.org received more than 16,645,664 page views in 2010, including 222,463 views from the mobile site. It received the Medical Standard of Excellence Award from the 14th Annual WebAward Competition conducted by the Web Marketing Association, as well as the 2010 Aesculapius Award of Excellence from the Health Improvement Institute and the 2010 Web Health Awards merit certificate.

In addition to its efforts within the Alliance for Radiation Safety in Pediatric Imaging and the Image Gently campaign to reduce radiation dose to children, RSNA again joined forces with the American College of Radiology (ACR), American Association of Physicists in Medicine (AAPM) and American Society of Radiologic Technologists (ASRT) to launch Image Wisely, a movement to address radiation safety issues in adults. The website ImageWisely.org officially went live at RSNA 2010, where 850 individuals took the “Image Wisely” pledge. As of December 2010, more than 1,200 professionals pledged to promote the safe use of necessary imaging.
RSNA continued its outreach to the public through its “60-Second Checkup” audio programs, with 24 programs aired on radio stations throughout the U.S. in 2010.

At the 2010 annual meeting, RSNA hosted 15 news conferences, including an expert panel on safety in medical imaging, which featured a discussion of the Image Wisely campaign launched at RSNA 2010. “Rising concerns about the radiation dose associated with medical imaging have prompted vigorous responses at many levels, but perhaps the most important response has been expanded educational activities focused on radiation dose monitoring and control,” said James A. Brink, professor and chairman of the Department of Diagnostic Radiology at Yale University School of Medicine in New Haven, Conn., and co-chairman of the RSNA/ACR Adult Radiation Protection Task Force.

Throughout the year, press releases publicizing studies from Radiology were distributed to the medical news media. Through its media relations activities, RSNA saw more than 10,662 placements in broadcast, print, radio and online media, reaching an audience of more than 6.2 billion.

RSNA collaborated with the American Association of Physicists in Medicine (AAPM) to expand its library of popular online Physics Modules, designed to educate radiologists and radiology residents about important concepts in physics as identified in the AAPM Physics Curriculum.

At RSNA 2010, the Bolstering Oncoradiologic and Oncoradiotherapeutic Skills for Tomorrow (BOOST) program delivered courses designed to encourage interdisciplinary collaboration in radiology and radiation oncology.

The Associated Sciences Consortium continued to sponsor refresher courses providing continuing education credits for physicians, radiologic technologists and radiologist assistants at the RSNA annual meeting. ASRT @ RSNA 2010, presented in collaboration with the American Society of Radiologic Technologists, offered continuing education credit and explored topics including cardiac imaging, forensic imaging and lateral violence and bullying in the workplace.

RadiologyInfo.org also launched a mobile site and a Facebook page, as well as RSS feeds and e-mail or SMS subscriptions to notify users of new additions to the site. To increase illustrations on the site, its Outstanding Image Contest encouraged residents, fellows and radiologic technologists to submit their images. RadiologyInfo.org has been designated the patient-directed side of the Image Wisely initiative. The Safety section of the website now houses a series of Q&A slideshows to provide patients information about the benefits and risks of medical radiation, CT scans and X-rays.

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PROMOTING MEANINGFUL USE OF INFORMATION TECHNOLOGY

Anticipating the impending changes to radiology practice spurred by meaningful use initiatives, RSNA provided radiologists with informatics-based performance solutions to help them perform more efficiently.

Through its work within the Integrating the Healthcare Enterprise® initiative, RSNA worked to promote more seamless adoption of a universal electronic health record by delivering devices and software that are compliant with cross-enterprise data sharing standards. It launched a Patient Care Device User Handbook and a new Product Registry for vendors to publish their integration statements.

At the 11th annual IHE Connectathon, hosted by RSNA and the Healthcare Information and Management Systems Society (HIMSS) in January in Chicago, 498 engineers representing 104 vendors—30 more than in 2009—spent four days testing profiles for compliance with IHE information sharing standards. The Connectathon offered a glimpse of new device profiles, progress in partnerships and the promise of achieving a universal electronic health record (EHR) in the coming years. More than 3,500 successful tests were performed and verified.

The IHE Image Sharing Demonstration at RSNA 2010 allowed attendees to see from a patient’s perspective how images and radiology reports can be seamlessly transmitted across health care systems—and how patients can take control of the process.

myRSNA® became an even more robust workspace for users to store, access and share files, research and bookmark articles and participate in real-time discussions. In addition to PoC CME, major enhancements included the ability to open and play files of all kinds, from anywhere, with no additional software.

The RSNA Medical Imaging Resource Center (MIRC®), a set of free software tools, underwent additional enhancements to make it easier for clinicians to conduct clinical trials and create teaching files.
HOSTING THE WORLD’S PREMIER FORUM FOR SCIENCE AND EDUCATION

RSNA’s 96th Scientific Assembly and Annual Meeting convened under the theme “Personalized Medicine: In Pursuit of Excellence.” Attendance reached more than 58,000, with record-high international attendance of 35 percent.

Of the 11,552 abstracts submitted for presentation at RSNA 2010, 2,448 were accepted for formal and informal scientific presentations and 1,915 for education exhibits. The offerings enabled attendees to earn up to 92.75 AMA PRA Category 1 Credits™.


President Bill Clinton delivered a special address on global health initiatives. Annual Oration in Radiation Oncology lecturer Zvi Fuks, M.D., of Memorial Sloan-Kettering Cancer Center, discussed the evolution of intensity-modulated radiotherapy to single-dose radiotherapy.

John Mendelsohn, M.D., who leads the University of Texas M.D. Anderson Cancer Center, gave a lecture on personalized cancer care. New Horizons lecturer Sanjiv Sam Gambhir, M.D., Ph.D., head of Nuclear Medicine and director of Molecular Imaging at Stanford University and one of 35 members of the National Cancer Institute (NCI) Board of Scientific Advisors, explored strategies for earlier cancer detection.

Numbers at the technical exhibition remained among the highest in history, featuring 678 exhibitors and spanning 452,750 square feet of exhibit space in three halls at McCormick Place convention center. Along with ranking 32nd among the 100 shows that “set the gold standard for the trade show industry” by Trade Show Executive magazine, RSNA also received the magazine’s “Highest Economic Impact” award for its $123 million impact on Chicago’s local economy in 2009.

RSNA continued its commitment to hosting one of the greenest and cleanest meetings in the industry with a number of environmentally friendly initiatives, including conserving energy and water, recycling materials, reducing waste and making greener purchasing decisions—such as buying recycled products and printing materials with soy-based ink.

Record-high international attendance
REACHING OUT ACROSS THE GLOBE

RSNA collaborated with the European Society of Radiology (ESR) to present the Oncologic Imaging Symposium at RSNA 2010, where attendees reviewed the principles of oncologic imaging and value-added reporting. A collaborative symposium will also be held at the 2011 European Congress of Radiology (ECR) in Vienna. Continuing RSNA’s series of featured international scientific sessions, “China Presents” and “Latin America Presents” demonstrated new innovations and discoveries from those regions.

The RSNA booth traveled to Shanghai for the International Congress of Radiology (ICR) and Jinan City, China, for the meeting of the Chinese Society of Radiology. RSNA booth representatives also provided assistance and information at the European Congress of Radiology in Vienna.

The RSNA International Visiting Professor Program, administered by the RSNA Committee on International Relations and Education (CIRE), sent North American-based radiology professors to the Philippines, Thailand, Brazil and Mexico.

CIRE continued to sponsor Introduction to Research for International Young Academics, a seminar at the RSNA annual meeting designed to encourage young radiologists from countries outside North America to pursue academic radiology careers. The Derek Harwood-Nash International Fellowships, which allows international faculty members to study at North American institutions, were awarded to radiologists from Nigeria and Iraq.

Through the RSNA/ACR sponsored International Observership Program, radiologists from Iraq were selected to study at a U.S. host institution, as well as attend the RSNA annual meeting and a course at the ACR education center in Reston, Va.

The R&E Research Seed Grant, Education Scholar Grant and RSNA/AUR/APDR/SCARD Education Research Development Grant were available to international researchers and educators.
LEADING THE CHARGE

RSNA honored several individuals for their contributions to radiologic science and education.

Gillian B. Lieberman, M.D., and Kitt Shaffer, M.D., Ph.D., were named 2010 Outstanding Educators. Charles A. Mistretta, Ph.D., was named the 2010 Outstanding Researcher.

Honorary membership was awarded to Claude Manelfe, M.D., of Auch, France; Iain W. McCall, M.D., DMRD, FRCR, of Shrewsbury, United Kingdom; and Kazuro Sugimura, M.D., Ph.D., of Kobe, Japan. Dr. Hricak also presented a Special Presidential Award to Hans G. Ringertz, M.D., Ph.D., of Linköping, Sweden.

RSNA’s highest honor, the Gold Medal, was presented to William R. Brody, M.D., Ph.D.; David H. Hussey, M.D., and Elias A. Zerhouni, M.D.

As Dr. Hricak concluded her term as RSNA president, she called upon the medical community to embrace the impending changes in the healthcare system and the rapid advancement of fields such as molecular imaging, integrated diagnostics, biology-driven interventional radiology and theranostics—delivering targeted therapy monitored with targeted imaging. She urged radiologists to equip themselves with the knowledge to deliver truly personalized care.

“Personalized medicine is delivering the right care to the right patient at the right time, with measurable improvements in outcome and potentially great reductions in costs,” said Dr. Hricak. Its essence lies in the use of biomarkers—which must be validated, quantitative and reproducible, she said.

Burton P. Drayer, M.D., assumed RSNA presidency in 2011. Dr. Drayer, who is the Dr. Charles M. and Marilyn Newman Professor and Chair of the Department of Radiology at The Mount Sinai School of Medicine and Executive Vice-President for Risk at The Mount Sinai Medical Center in New York City, is committed to RSNA’s role in supporting education, research, information technology and patient safety.

“My goals for 2011 are to enhance collaborations among radiology and non-radiology societies, as well as to extend the utilization and recognition of RSNA’s extensive technology platform,” Dr. Drayer said. “I hope to accelerate our critically important research agenda by fostering the growth and quality of our journals, annual meeting program and Research & Education Foundation grant support, and I am committed to expanding the role that RSNA plays in advancing radiation safety.”

Joining the RSNA Board at the end of 2010 was MR imaging expert Richard L. Ehman, M.D. Dr. Ehman will serve as the liaison-designate for science under N. Reed Dunnick, M.D., until Dr. Dunnick becomes RSNA Board Chairman in 2012. “For me, RSNA represents radiology in full force,” Dr. Ehman said. “By truly reflecting the breadth and depth of radiology, RSNA has an essential role in helping to define the future of medical imaging.” Dr. Ehman is a professor of radiology at the Mayo Clinic in Rochester, Minn., and is a clinician-investigator in Mayo’s Center for Advanced Imaging Research. He also holds joint appointments in physiology and biomedical engineering.

The knowledge to deliver truly personalized care
FUNDING THE BRIGHTEST IDEAS

The RSNA Research & Education (R&E) Foundation received 194 grant applications in 2010, marking a 60 percent increase over 2009 and the highest number in the Foundation’s history—clearly demonstrating the critical demand for grant funding in academic institutions.

Celebrating more than a quarter century of funding radiology’s future, the Foundation awarded 70 grants in 2010, totaling more than $2.2 million. Grants were awarded to individuals at 37 institutions, including international recipients in China and Nigeria.

The Foundation added new ways for its donors to leave a legacy to the specialty, including Charitable Gift Annuities as a planned giving option. A redesign of RSNA.org/Foundation gave users better maneuverability and more insight into how their donations are supporting research and education.

Grant funding is made possible by the support of thousands of individuals, private practices and corporations that share in the R&E Foundation’s mission to improve patient care.

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Canon
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COOK MEDICAL
COVIDENT
FUJIFILM
Hitachi
PHILIPS
SIEMENS
TOYOTA
TOSHIBA
VARIAN Medical Systems
VITAL Images
The R&E Foundation provides critical funding to young investigators, made possible by thousands of individuals, private practices and corporations that share its mission to improve patient care.
In 2010, Dr. Hricak hailed the radiologic specialties’ historic versatility and willingness to embrace change. “The hallmarks of our profession have been innovation and collaboration,” she said. “We must continue on that path, remembering that we are integrally involved in patient care.”

Supported by the work of exceptionally dedicated volunteers, RSNA will continue to exemplify the specialty’s vision.
### STATEMENT OF FINANCIAL POSITION

**Year Ending June 30, 2010**

#### Assets

<table>
<thead>
<tr>
<th>Asset</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and Short-Term Investments</td>
<td>$8,847,886</td>
</tr>
<tr>
<td>Receivables and Other Current Assets</td>
<td>5,053,233</td>
</tr>
<tr>
<td>Long-Term Investments</td>
<td>74,758,669</td>
</tr>
<tr>
<td>Property, Furniture and Equipment</td>
<td>21,441,855</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$110,101,643</strong></td>
</tr>
</tbody>
</table>

#### Liabilities and Fund Balance

<table>
<thead>
<tr>
<th>Liability</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts Payable and Short-Term Debt</td>
<td>$4,201,176</td>
</tr>
<tr>
<td>Deferred Revenue</td>
<td>12,521,447</td>
</tr>
<tr>
<td>Long-Term Debt and Other Long-Term Liabilities</td>
<td>6,786,800</td>
</tr>
<tr>
<td><strong>Net Assets</strong></td>
<td><strong>86,592,220</strong></td>
</tr>
</tbody>
</table>

#### Unrestricted:

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undesignated</td>
<td>39,628,848</td>
</tr>
<tr>
<td>Designated–Research and Education Foundation</td>
<td>28,112,912</td>
</tr>
</tbody>
</table>

#### Restricted:

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporarily Restricted</td>
<td>645,484</td>
</tr>
<tr>
<td>Permanently Restricted</td>
<td>18,204,976</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>86,592,220</strong></td>
</tr>
</tbody>
</table>

| Total Liabilities and Net Assets               | **$110,101,643**|

### STATEMENT OF ACTIVITIES

**Year Ending June 30, 2010**

#### Revenues

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership Services</td>
<td>$5,168,068</td>
</tr>
<tr>
<td>Publications and Educational Materials</td>
<td>12,107,369</td>
</tr>
<tr>
<td>Annual Scientific Assembly</td>
<td>21,786,882</td>
</tr>
<tr>
<td>Investment Earnings</td>
<td>6,024,540</td>
</tr>
<tr>
<td>Contributions</td>
<td>2,553,773</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td><strong>$47,640,632</strong></td>
</tr>
</tbody>
</table>

#### Expenses

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership Services</td>
<td>$4,509,691</td>
</tr>
<tr>
<td>Publications and Educational Materials</td>
<td>16,386,861</td>
</tr>
<tr>
<td>Annual Scientific Assembly</td>
<td>13,951,379</td>
</tr>
<tr>
<td>Research and Education Foundation</td>
<td>3,144,620</td>
</tr>
<tr>
<td>Depreciation</td>
<td>946,340</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$38,938,891</strong></td>
</tr>
</tbody>
</table>

#### Excess of operating revenue over operating expenses

<table>
<thead>
<tr>
<th>Excess of operating revenue over operating expenses</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$8,701,741</td>
</tr>
</tbody>
</table>

#### Net Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excess of operating revenue over operating expenses</td>
<td>$8,701,741</td>
</tr>
<tr>
<td>Non-operating income</td>
<td>1,319,300</td>
</tr>
<tr>
<td>Increase in net assets before unrealized gain (loss) on investments</td>
<td>10,021,401</td>
</tr>
<tr>
<td>Unrealized gain (loss) on valuation of investments and interest rate swap</td>
<td>2,732,623</td>
</tr>
<tr>
<td><strong>Increase in Net Assets</strong></td>
<td><strong>$12,753,663</strong></td>
</tr>
</tbody>
</table>

| Net Assets at Beginning of Year                 | **$73,838,557** |
| Net Assets at End of Year                       | **$86,592,220** |
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RSNA leaders work to advance radiology by delivering education, fostering cutting edge developments and research, advancing the frontiers of radiology informatics, and preparing the specialty for an increasingly quantitative future.