The Association for Training on Trauma and Attachment in Children (ATTACCh) is a nonprofit, national and international coalition of professionals and families dedicated to helping fellow professionals, parents, caregivers, and families address childhood trauma and attachment and the critical impact it has on the mental health and development of children. We accomplish this through training, memberships, supportive services, resources, and an annual conference.
Dear Supporters and Friends,

The year 2020 has notably been one of the worst years on record for the wellbeing of children. The COVID-19 pandemic magnified the social, emotional, psychological, educational, and financial struggles of children and families everywhere. It compromised the wellbeing of youth already struggling with trauma, attachment disorders and mental health concerns.

The global pandemic changed us as an organization too. Stay-at-home orders across the nation and the world propelled us to find ways to continue educating, preparing, and teaching others to heal children, parents, and families. It also reminded us to engage ourselves in self-care strategies, and to urge others to do the same, to alleviate some of the stressors we were all feeling as we navigated through the isolation and change.

This catastrophic public health emergency resulted in ATTACH rapidly scaling up our digital efforts – not only in how we remotely worked together as a staff, but also in how we engaged in training and educating our participants, members and supporters who provide care or treatment to heal the wounds of the nation’s children.

We utilized digital and mobile platforms to inform, educate and deliver high-quality trainings, workshops and even our annual conference became virtual reaching a national and international audience of clinicians, occupational therapists, parents and caregivers.

This year also deepened our nation’s focus on systemic inequalities within societies making our work for vulnerable children needed more than ever. We know that racism, discrimination, and inequity begin in childhood, and ATTACH became more committed to promoting social justice, diversity, equity and inclusion in all populations and communities we serve.

As we continue adapting to new realities in these difficult times, we thank you for your compassion, generosity, and determination as we continue teaching the world to heal.

Sincerely,

Mary M. McGowan
Executive Director
ATTACh EQUIPS ALL COMMUNITIES TO CREATE HEALTHY ATTACHMENT AND SUPPORT HEALING TRAUMA.

OUR VISION

ATTACh envisions a world where all have the capacity for secure human connection.

OUR VALUES

FOREVER CURIOUS
We always seek to grow, learn, evolve, and deliver what works.

HOPEFUL
Our work is undergirded by the belief that no one is beyond help and connection.

STRONGER TOGETHER
We believe in the power of bringing people – clinicians, therapists, professionals, educators, caregivers, and parents – together to learn, grow, and connect.

INCLUSIVE
We’re on this journey together and offer compassion to each other.

EXCELLENCE
We bring our best, most ethical selves to everything we do.
An adoptive parent and retired Special Educator, Wendy Watson serves as Treasurer on the ATTACCh Board of Directors. With a background in education and in law, Wendy brings a diverse perspective to the Board. “It’s an active Board,” Wendy says of her colleagues, “and I like knowing that we’re doing something important for so many kids and adults.”

Wendy supports ATTACCh because there aren't many other organizations doing what we do. Trauma is so much bigger than abuse – generational, trauma, parent separation, and much more, she says. The more we can do to promote teaching and training, and the more we can help people to understand trauma, the better it will be for people experiencing trauma to get what they need.

“The world needs ATTACCh now more than ever,” Wendy insists. “This year has been especially traumatic, especially for our teens. We all know that mental health has deteriorated over the last year.”

For Wendy, “Teaching the World to Heal” means getting information to as many people as we can. So many people in the world experience trauma in different ways. Wendy wants to see ATTACCh reach more people from more backgrounds and places around the world. “I want to focus on expansion,” she says. “ATTACCh is still very U.S. focused, but we’re trying to reach people around the globe.”
It started the healing process in our family

Tom Jones spent most of his career as an agronomist, not a therapist or childhood trauma specialist. He lives on the family farm in North Dakota. When Tom and his wife adopted two teenagers from Columbia, all of their lives changed dramatically, and he learned quickly about the role of developmental trauma and attachment in a child’s development. “The kids went from a town of 7 million to a town of 600,” Tom recalls. “We didn’t know any Spanish and they didn’t know any English.”

The teens, biological siblings, also struggled with the effects of childhood attachment issues. Tom’s “self-care” during those challenging years was to study and learn about attachment. The more he educated himself on attachment, the more he saw the need for trauma- and attachment-focused training for professionals. His family struggled to find therapists who could help with the teens’ developmental trauma and attachment issues. At one point, he was even told by two therapists, “You know more than we do about this.” Through his extensive research, Tom found ATTACh.

300+ ATTENDEES

<table>
<thead>
<tr>
<th>Mental Health Professionals</th>
<th>Other Professionals</th>
<th>Parents</th>
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<tbody>
<tr>
<td>37%</td>
<td>14%</td>
<td>17%</td>
</tr>
<tr>
<td>Occupational Therapists</td>
<td>Students and Educators</td>
<td>Parent/Professionals</td>
</tr>
<tr>
<td>16%</td>
<td>5%</td>
<td>11%</td>
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</tbody>
</table>

EFFECTIVENESS OF TRAININGS

- 74.2% feel better equipped to meet the needs of the child(ren) in which they serve or provide care.
- 80.6% are more knowledgeable and have more tools to assist children with trauma.
- 77.4% feel educated and have more resources to assist children with attachment issues.
- 81% would recommend this conference to their peers.
- 45% of attendees participated in their first ATTACH conference.
- 97% plan to attend future ATTACH conferences.

“I attended my first ATTACH Conference in Minneapolis,” Tom says. “It started the healing process in our family.”
My heart has always been with kids who have had rough beginnings

Gail Curran is an educational and therapeutic placement consultant, an expert resource for families looking for out-of-home placement for their child when all other community resources have been exhausted. “My wheelhouse is working in residential treatment,” Gail explains. “I noticed so many struggling kids coming in; sometimes our facility was their 9th or 10th placement.”

Out-of-home placements, while at times necessary, can be devastating for a child with attachment issues or developmental trauma, Gail says. She works hard to match the program that best meets the needs - educational, emotional, and mental health - of a struggling child.

She was initially drawn to ATTACCh because it’s inclusive of the families that are raising children with developmental trauma. “[These parents] are doing this wonderful thing,” Gail explains. “But they are often not prepared. They want to help children out of the goodness of their hearts. But sometimes giving a child love isn’t enough – the effects of developmental trauma impact the brain.”

But it doesn’t have to be the end of the world. Many children do come out of it and survive. And ATTACCh can play an important role in healing.

Why does Gail support ATTACCh? Simply, because there are so many children who are suffering. She enjoys the camaraderie on the Board of Directors and is energized by the passion and compassion of the Board members.

Gail’s vision for the future of ATTACCh is bold: That we’ll continue to reach more families, and that we will heal the world of trauma.
Professional Trainings

- Attachment & Trauma-Focused Therapy - Mental Health (ATFT-MH) – FEB, MAY, JUNE 2021
- Attachment & Trauma-Focused Therapy - Professionals (ATFT-PRO) – AUG 2021
- Hope For Healing Training – MAY, AUG 2021
- Occupational Therapy Attachment/Trauma Certification – JAN, MAY 2021
- Social Media and its Impact on Children – JUNE 2021

Social Justice and Mental Health Training Workshop Series
A collaboration between ATTACH and the Hogg Foundation for Mental Health at The University of Texas at Austin

- The Language of Anti-Racism – JULY 2021
- Racism, Trauma, and its Impact on Children – MARCH 2021
- Building A Healthy Identity in Children and Youth – JUNE 2021

Specialty Trainings School Bus Drivers

- Pennsylvania School Bus Association: Bus Driver Training – FEB 2021
- Pennsylvania School Bus Association: Helping Drivers Support Youth – JULY 2021
### Ethnicity

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<tbody>
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<td>9.0%</td>
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<tr>
<td>American Indian/Native Alaskan</td>
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<tr>
<td>Asian</td>
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<tr>
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<tr>
<td>Middle Eastern, Native Hawaiian/Pacific Islander, Indonesian &amp; Northern European, French &amp; Lithuanian</td>
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<tr>
<td>Prefer Not to Answer</td>
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### Gender Identity

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<tr>
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### How People Learn About Our Trainings

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<th>Method</th>
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<tr>
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<tr>
<td>Newsletter/Social Media</td>
<td>8.0%</td>
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<tr>
<td>Other: Website, Online Search, Therapist, Member – Partner Agency, Board Member Adoption or Foster Care Agency, ATTACh Training, OT Supervisor</td>
<td>30%</td>
</tr>
</tbody>
</table>

### FY20-21 ATTACH Trainings Attendees by Region (%)

- 13.4% – Pacific
- 8% – Rocky Mountains
- 12% – Southwest
- .6% – Noncontiguous
- 12% – Northeast
- 16% – Southeast
- 35% – Midwest
- 3% – International (not on map)
I have an increasing number of referrals with a history of trauma and/or attachment disorders and look forward to applying this knowledge to my work with that population.

I plan to use the information I’ve learned both in my practice as a child advocate and in my classroom as a high school human studies teacher.

At our service center, we work alongside mental health providers. We have a large number of referrals for children who have co-morbidities that often include mental health illness related to past trauma. I look forward to gaining more insight into attachment and trauma to provide a safe occupational therapy space for clients.

I anticipate having a new lens of which to observe all of my clients. With this perspective, I will be better equipped to understand a much more holistic view of the families and clients I work with. This will specifically impact my conversations, clinical suggestions for home programming, and direct treatment strategies used. Our clinic has families calling and requesting a therapist using trauma informed care, I would like to take the lead for those clients. I will also take the information I learn to my coworkers to start clinical conversations and lead to better trauma informed care for our clinic. After this training I also hope to complete the next level course to further expand my trauma certification.

I direct the educational program of a Native American culture-based drug and alcohol treatment facility in Riverside County, CA. The knowledge that I receive through this program will assist our clients in learning to feel at peace within themselves, with their communities, and with life.
We educate, train and provide support to professionals, parents/caregivers and others who provide care and/or treatment to:

- Adopted adolescents/youth/teens and their families
- Adopted children who have been abused, neglected, and or traumatized.
- Ages 12 to senior adult, for trauma, Anxiety, depression, relationships/marriage, OCD, PTSD.
- Ages 3-lifespan with Developmental Disabilities
- At risk youth
- Attachment between child and family member/parents
- Autism, ADHD, ADD, PTSD, Trauma disorders, anxiety, depression, sensory processing disorder.
- Birth to 21 in foster care and Adults with IDD/ASD
- Children (primarily victims and majority Native American) and their families in northwest New Mexico
- Children in foster care/residential foster care age 5-18
- Children with severe emotional disturbances, many with significant trauma histories
- Children, adolescents and some adults with developmental delays, sensory processing difficulties, ASD, ADHD, attachment
- Children, Adolescents, Bio-families, Foster parents, Treatment Foster Parents
- Children, teenagers, young adults and adults with mainly sensory difficulties, ADHD, ADD, anxiety and other neurological difficulties.
- Clients ages 5 to adult (all ages--children, adolescents, and adults) with range of mental health and behavioral concerns including but not limited to anxiety, depression, trauma (abuse, neglect, domestic violence), grief, attachment, foster care
- Currently serve 0-21 in a sensory integration clinic, but have experience and comfortability with adults
- Guardianship, Foster, and adoptive parents and youth.
- Families and children that struggle with disruptive aggressive behaviors. Most with learning challenges, giftedness or are labeled twice exceptional. Due to neurodiversity are misunderstood and have small to large ruptures in the attachment.
- K- 12 school-based, K-5 students with Developmental Disabilities, Autism, Social Emotional Difficulties, trauma
- Kids and Adults with autism and/or IDD
- LGBTQ+ folx, Transgender youth ages 13-25
- Outpatient pediatrics birth-20 with a variety of neurodevelopmental, cognitive, motor, mental, and feeding disorders.
- Pediatric ages 2-21. Various diagnosis of developmental delays including Autism, Downs Syndrome, Sensory Processing Disorder, Fetal Alcohol Syndrome, ADHD, Mitochondrial Disease, chromosomal disorders, seizure disorders, Cerebral Palsy, and more. Currently have children on my caseload in foster care with history of trauma.
- Pediatric community based early intervention working with children and caregivers in foster care and early intervention through our local regional center. Access to school-based children in the community via a donation run clinic.
- Pediatric outpatient services: Autism, Developmental Trauma, Sensory Processing Disorder, ADHD, Trisomy 21, and other Developmental Delays
- Pediatrics, Clinical Settings, Acute Care
- Post adoptive families. Working both individually, as a family system & in groups.
- Primarily adopted children who have experienced neglect, abuse, and developmental trauma.
- Private practice, primarily with ASD, ages 2-24
- Psychiatric residential treatment for ages 10-18
- School Based, Home Health and Rehabilitation
- School-aged children in a public school system & pediatric outpatient clinic
- SI/ASD in outpatient setting
- Youth, Transitional Age Youth, families and young mothers in a community mental health program.
Long-Term Healing Comes From Collaboration

Board member Nicole Fuglsang encourages ATTACH to continually widen the net. “Who are we not reaching?” she asks our Board and staff. “Who doesn’t know about the level of resources that are available? How can we broaden our ability to serve?”

Nicole supports ATTACH because of our unique focus on training and education for all layers of people - parents, mental health professionals, occupational therapists, and more - through different tracks at our conference, and targeted workshops and trainings.

“A-T-T-A-C-H is special because parents and professionals are valued and honored in the same way,” says Nicole. “We don’t value one over the other.”

A licensed masters level therapist, Nicole is CEO of Calo residential treatment programs for teens and preteens. Calo has been an ATTACH partner since its founding in 2007. She enjoys the “shared purpose and passion” among Board members, and the opportunities to connect, interact and share fresh perspectives.

Nicole believes that “Teaching the World to Heal” requires collaboration. “Long-term healing comes from collaboration between professionals, parents and educators together. Treating the root cause requires the whole system coming together,” Nicole says. “ATTACH brings together the parents and the professionals, connecting families with the supports they need.”
2020-21 ATTACCh FAMILY ADVOCACY

- **122** Active Parent Members
- **82%** Are New ATTACCh Parent Members
- **16** Monthly Parent Support Group Meetings
- **112** Monthly Support Group Meeting Attendees (Cumulative)
- **55%** Participate in Members Only, Private Parent Facebook Group
- **235** One-On-One Parent Support/Group Inquiries/Referrals/Resource Requests (Calls/Texts/Email) – avg. pp consultation 1-3 hrs.
The Majority of Web Visitors Are New to ATTACh Web and International Visitors

<table>
<thead>
<tr>
<th>Country</th>
<th>Users</th>
<th>New Users</th>
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<tbody>
<tr>
<td>United Kingdom</td>
<td>24,893</td>
<td>24,561</td>
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<td>United States</td>
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<td>Canada</td>
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<td>856</td>
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<td>Australia</td>
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<tr>
<td>Indonesia</td>
<td>368</td>
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<td>Hong Kong</td>
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<td>United Arab Emirates</td>
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<tr>
<td>Ireland</td>
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Top Pages Visitors Searched

1. attach.org/
2. /conference/
3. n/a
4. /attach-resources/
5. /attach-annual-conference-2021/
6. /attach-resources/registered-clinicians/
7. /training/
8. /membership/
9. /for-parents/
10. /attach-resources/professional-guides/
ATTACCh Board member Sue Badeau believes wholeheartedly that there is Hope for Healing. “Trauma and attachment disruptions can damage relationships and create mental health challenges,” Sue says. “But there is hope, and the possibility of restoration.”

Healing is possible, but it is not random. ATTACCh is desperately needed, Sue insists, because of our clear focus on teaching the world to heal.

Sue has been aware of ATTACCh since our formation, engaging with our programming at every step of her family life and career - from being a foster parent, operating a group home, working with the Child Traumatic Stress Network, and developing her own consulting and training around trauma - and she has attended and spoken at nearly every ATTACCh Conference.

What makes ATTACCh unique, Sue says, is our holistic approach. Some organizations are mostly clinically focused. Others are mostly family focused. Some are schools or treatment facilities. ATTACCh is a bridge between ALL audiences.

Sue enjoys serving on the ATTACCh Board of Directors because the group operates like a think tank, always asking, “what’s possible?” She likes being part of the incubator for new efforts.

Her vision for ATTACCh’s future includes continuing to deliver broader educational opportunities in fields that connect with families and children. “Whether you are the bus driver, the Occupational Therapist, the clinician, speech therapist, after school care provider, etc.” Sue says, “anyone that touches the life of a child will have the knowledge and skills they need to promote healing.”
2020-21 ATTACH SOCIAL MEDIA HIGHLIGHTS

Results

Facebook Page Reach

30,017 ↑ 5.5%

Instagram Reach

177 ↑ 100%
Trauma doesn’t respect boundaries, ethnicities, anything

ATTACH Board Chair Norm Thibault has been a Licensed Marriage and Family Therapist, working in residential treatment centers and private practice in Utah, since 1996. During this time, Norm found himself working with an inordinate number of adopted children. In 2000, a frustrated adoptive parent challenged Norm: “What experience do you have with attachment,” he asked, “What training do you have working with adopted children?” Norm’s answer? “None.” The exhausted father told Norm that he was unable to find an adoption-competent clinician anywhere, and that not nearly enough was being done for adopted children with developmental trauma and attachment disorders.

When Norm set out to learn more, he found that 30-40% of adolescents in treatment facilities are adopted, tend to stay longer in treatment, and are more likely to relapse. His research led him to ATTACH, and eventually to his decision to open Three Points Center, a residential treatment facility “created just for helping adopted youth – and their families,” in 2014. That frustrated father is now a member of Three Points Center’s Board of Directors.

Norm was initially drawn to ATTACH because of the bountiful clinical information. “I know enough to know how little I know,” he says. After his first ATTACH Conference, which he spent circulating among people who could answer every question he had, Norm decided that he wanted to do everything he could to support the organization through which he had learned so much. He feels honored to serve on the ATTACH Board of Directors with such wonderful, passionate people. “I learn so much from them,” he says, “I feel like I’m going to college for free!”

To Norm, the ATTACH tagline Teaching the World to Heal means trauma is pervasive. “Trauma doesn’t respect boundaries, ethnicities, anything. Our goal at ATTACH is to teach clinicians not just in North America, but around the world, to work with children and families who have been traumatized by wars, refugee crises, ethnic cleansing, etc.” And we’re better prepared for this than ever before because, as an organization, we have learned so much in the past year about utilizing virtual platforms to expand our reach.
Position Statement and Resolution Against Racism, Racial Discrimination and Their Adverse Impacts on Mental Health

RACISM: The systematic subjugation of members of targeted racial groups, who hold less socio-political power and/or are racialized as non-White, as means to uphold White supremacy. Racism differs from prejudice, hatred, or discrimination because it requires one racial group to have systematic power and superiority over other groups in society. Often, racism is supported and maintained, both implicitly and explicitly, by institutional structures and policies, cultural norms and values, and individual behaviors.

The Association for Training on Trauma and Attachment in Children (ATTAC)h recognizes that systemic and historic racism and racial discrimination create profound wounds that often adversely affect mental health by diminishing the individual's self-image, confidence, and optimal mental functioning. At the same time, people who have lived with and experienced racism often develop significant resilience and strengths worthy of being acknowledged and further nurtured.

Racism’s adverse impacts reach broadly, including both those experiencing racism and those living with privilege. The full impact of racism leaves all parties unprepared for a society that is becoming increasingly multicultural and global. Racism and racial discrimination are two of several factors leading to mental health care disparities. Some studies show that exposure to racism is associated with poorer mental health, including depression and anxiety. ATTAC believes that all forms of racism and racial discrimination affect mental health and wellbeing and negatively impact children, families, and the nation as a whole.

Therefore, the Association for Training on Trauma and Attachment in Children (ATTAC)h:

- Works with our board, staff, and constituents not only to eliminate racism in its most overt forms, but also to actively become an anti-racist organization.
- Supports current and future actions to eliminate racism and racial discrimination by reviewing and changing this in our materials, training, board, and staff to be representative of multiculturalism, diversity, and efforts of greater inclusion.
- Encourages mental health professionals and others to be mindful of the existence and impact of racism and racial discrimination in the lives of clients/patients and their families, in clinical encounters, and in the development of mental health services.
- Supports member and public education on impacts of racism and racial discrimination, advocacy for equitable mental health services for all clients/patients, and further research into the impacts of racism and racial discrimination as an important public health and mental health issue.
- Encourages mental health professionals and others to acknowledge, recognize and explore the value of culturally traditional approaches to healing and well-being and to incorporate support for these approaches into their practices.
- Recognizes the detrimental effects that racism has on the mental health of people of color and supports policies and laws which would reduce further harm.
- Recognizes the resilience and strengths exhibited by individuals and communities of color and across all racial and cultural groups and supports policies and practices which acknowledge, nurture and support the full expression of these strengths.
BOARD OF DIRECTORS

OFFICERS

Norman E. Thibault, PhD, LMFT
President – Clinical
Three Points Center
La Verkin, UT

Sue Badeau
Vice President
Parent/Independent Trainer
Philadelphia, PA

Wendy Watson, JD
Treasurer
The Arc Greater Twin Cities
St. Paul, MN

Araceli Salcedo, MA, NCC, LPC-S
Secretary
Cenpatico/Envolve Health Texas
El Paso, TX

MEMBERS

Maude Le Roux, BA
A Total Approach, Director
Multidisciplinary Team Approach
Glen Mills, PA

Tom Jones
Parent Advocate
Wyndmere, ND

Gail Curran, MS, MBA, CEP
Independent Educational Consultant
Optimal Edu Options, LLC
Peoria, Arizona

Nicole Fuglsang, MA, LPC, NCC
Co-Founder, CEO
Calo Programs

ATTACh STAFF

Mary M. McGowan
Executive Director
Minneapolis, MN

Atasha Kelley-Harris, M.Ed., LCPAA, CFLE
National Director of Family Advocacy
Richmond, TX

Traci D. Patterson
Director, Marketing & Communications
Missouri City, TX

Amy Murnan
Director of Development
Minneapolis, MN

Stacey Notch
Office Manager
Minneapolis, MN
GRANTS, SPONSORSHIPS AND FINANCIAL HIGHLIGHTS
FOR THE PERIOD ENDED JULY 31, 2021

The day the world STOOD STILL and the COVID-19 pandemic took over, it shifted how we visualized and conducted our business of teaching, educating, and supporting people around the world to heal the effects of trauma, attachment, developmental and mental health concerns affecting children. We knew, despite a public health emergency, the needs of these vulnerable children did not stop and neither did ATTACh. We experienced a year of unbelievable growth, change, challenge, and creativity. Because of you, we were able to continue helping those who provide care and treatment to children, as well as their parents, caregivers and families. We appreciate the generosity of you, our funders, sponsors, donors, training/workshop/webinar/conference attendees, members and member organizations who chose to support ATTACh.

<table>
<thead>
<tr>
<th>GRANTS</th>
<th>CONFERENCE SPONSORSHIPS</th>
<th>FINANCIALS (UNAUDITED)</th>
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<td>Chaddock</td>
<td>Conference Profit: $116K</td>
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<td>Bentson Foundation</td>
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<td>Kathleen White Center</td>
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<td>Medica Foundation</td>
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</table>
Association for Training on Trauma and Attachment in Children
www.attach.org